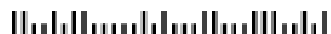


Prospective Business Solutions
LLC 26 W Dry Creek Circle, Suite
600 Littleton, CO 80120

Academy of Urban Learning
2417 West 29th Avenue
Denver, CO 80211



Prospective Business Solutions LLC
26 W Dry Creek Circle, Suite 600
Littleton, CO 80120
720-217-6601

November 20, 2021

CONFIDENTIAL

Academy of Urban Learning
2417 West 29th Avenue
Denver, CO 80211

Dear :

We have prepared the following returns from information provided by you without verification or audit.

Return of Organization Exempt From Income Tax (Form 990)

We suggest that you examine these returns carefully to fully acquaint yourself with all items contained therein to ensure that there are no omissions or misstatements. Attached are instructions for signing and filing each return. Please follow those instructions carefully.

Enclosed is any material you furnished for use in preparing the returns. If the returns are examined, requests may be made for supporting documentation. Therefore, we recommend that you retain all pertinent records for at least seven years.

In order that we may properly advise you of tax considerations, please keep us informed of any significant changes in your financial affairs or of any correspondence received from taxing authorities.

If you have any questions, or if we can be of assistance in any way, please call.

Sincerely,

Prospective Business Solutions LLC

Filing Instructions

Academy of Urban Learning

Exempt Organization Tax Return

Taxable Year Ended June 30, 2021

Date Due: May 16, 2022

Remittance: None is required. Your Form 990 for the tax year ended 6/30/21 shows no balance due.

Signature: You are using a Personal Identification Number (PIN) for signing your return electronically. Form 8879-EO, IRS *e-file* Signature Authorization for an Exempt Organization should be signed and dated by an authorized officer of the organization and returned to:

Prospective Business Solutions LLC
26 W Dry Creek Circle, Suite 600
Littleton, CO 80120

Important: Your return will not be filed with the IRS until the signed Form 8879-EO has been received by this office.

Other: Your return is being filed electronically with the IRS and is not required to be mailed. If you Mail a paper copy of your return to the IRS it will delay the processing of your return.

Academy of Urban Learning
2417 West 29th Avenue
Denver, CO 80211

Department of the Treasury
Internal Revenue Service
Center Ogden, UT 84201-0027



AUL 11/20/2021 12:52 PM

Return of Organization Exempt From Income Tax **990** 2020 OMB No. 1545-0047

Form Internal Revenue Service ► Go to www.irs.gov/Form990 for instructions and the latest information. ~~07/01/20~~ ~~06/30/21~~ **A**, and ending **For the 2020** calendar year, or tax year beginning **Inspection**
Department of the Treasury
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. **Open to Public**

B C D Employer identification number

Check if applicable: Address change

Name of organization Doing business as

Name change

Academy of Urban Learning

74-3043068

Initial return

Final return/ terminated

City or town, state or province, country, and ZIP or foreign postal code

2,471,399

Amended return

Number and street (or P.O. box if mail is not delivered to street address) Room/suite **2417 West 29th Avenue**

Denver CO 80211

G \$

F Name and address of principal officer:
E Telephone number

Gross receipts

303-282-0900

X

Application pending

Marisa Mora Avenue 80211
 2417 West 29th Denver CO H(a) H(b)

Is this a group return for subordinates? Yes No Yes No

Are all subordinates included? If "No,"
 attach a list. See instructions

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

J Website: www.auldenver.org H(c) Group exemption number

K Form of organization: X 2005 CO Corporation Trust Association Other L Year of formation: M State of legal domicile:

Part I Summary

Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets.

1 Briefly describe the organization's mission or most significant activities:

Provide educational services to at-risk high school students. 99 17

5 Total number of individuals employed in calendar year 2020 (Part V, line 2a) 7a

3 Number of voting members of the governing body (Part VI, line 1a) Total unrelated business revenue from Part VIII, column (C), line 12

3 Total number of volunteers (estimate if necessary) 6

4 Number of independent voting members of the governing body (Part VI, line 1b) 7a 130 0

4 b Net unrelated business taxable income from Form 990-T, Part I, line 11 (A), lines 1-3 7b Prior Year Current Year

Benefits paid to or for members (Part IX, column (A), line 4)	14	1,810,475
Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	15	270,392
Professional fundraising fees (Part IX, column (A), line 11e)	16a	1,104,066
		1,251,243

8 Contributions and grants (Part VIII, line 1h) 1,798,223 2,126,918 298

Program service revenue (Part VIII, line 2g)	9	3,353	3,975
Investment income (Part VIII, column (A), lines 3, 4, and 7d)	10	45,301	2,471,399 0
Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	11	2,080,867	1,421,010 0
Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	12	1,291,828	
Grants and similar amounts paid (Part IX, column (A), line 13)	13	518,647	

0 598,886

Total fundraising expenses (Part IX, column (D), line 25) ▶

Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)

b
17

18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	Total liabilities (Part X, line 26)

19	Revenue less expenses. Subtract line 18 from line 12	Net assets or fund balances. Subtract line 21 from line 20

20	Total assets (Part X, line 16)	End of Year

21		

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

Paid Preparer

Signature of officer Date **Marisa Mora Chair**
 Type or print name and title
 Print/Type preparer's name if
 Preparer's signature Date Check PTIN
Uli Keeley CPA 11/20/21 P02288680

Prospective Business Solutions LLC

83-3569520 Firm's name Firm's EIN

Use Only

**26 W Dry Creek Circle, Suite 600
Littleton, CO 80120 720-217-6601**

self-employed

Firm's address Phone no. **X**

May the IRS discuss this return with the preparer shown above? See instructions

Yes No DAA Form

990 (2020)

For Paperwork Reduction Act Notice, see the separate instructions.

AUL 11/20/2021 12:52 PM

Academy of Urban Learning 74-3043068

Form 990 (2020) **Page 2 Part III Statement of Program Service Accomplishments**

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

1 Briefly describe the organization's mission:

Provide educational services for at-risk high school students

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

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

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

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

X
Yes No

1,038,924

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?

X
Yes No

4a (Code:) (Expenses \$ including grants of\$) (Revenue \$) Provide a rigorous and relevant high school diploma for youth who need extensive wraparound services to succeed academically and make the transition to careers, future educational opportunities and economic self sufficiency.

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

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

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

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

4e Total program service expenses ► 1,038,924

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
2
Is the organization required to complete *Schedule B, Schedule of Contributors* (see instructions)?

2
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*

6
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*

3
4
Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*

7
8
Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*

4
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
6
Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*

8
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

10

Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? *If "Yes,"*

complete Schedule D, Part V

.....

11a

b

Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line

16? *If "Yes," complete Schedule D, Part VII*

.....

10

11

If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.

a

Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes,"*

complete Schedule D, Part VI

.....

11b

c

Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line

16? *If "Yes," complete Schedule D, Part VIII*

.....

Did the organization report an amount for other liabilities in Part X, line 25?

If "Yes," complete Schedule D, Part X

11c

d

Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*

.....

11e

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

12a

Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*

.....
.....

12a

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

13

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes,"

complete Schedule E

.....

13

14a

Did the organization maintain an office, employees, or agents outside of
the United States?

.....

14a

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

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

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

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

18

Did the organization report more than \$15,000 total of fundraising event **18**

gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes,"* **19**

complete Schedule G, Part II

.....

X
X

X

X

X

X

X

X

X

X

X

X

X

X
X

X

X

X

X
X

X

X

X

X

X

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? **19**

X
X

If "Yes," complete Schedule G, Part III

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

20a

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

20b

21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or

X

domestic government on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II* **21**

Academy of Urban Learning 74-3043068

Form 990 (2020) **Page 4 Part IV Checklist of Required Schedules (continued)**

	Yes	No
22		
Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
22		
23		
Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
23		
24a		
Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
24a		
b		
Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	<input type="checkbox"/>	<input type="checkbox"/>
24b		
c		
Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	<input type="checkbox"/>	<input type="checkbox"/>
24c		
d		
Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	<input type="checkbox"/>	<input type="checkbox"/>
24d		
25a		
Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
25a		
b		
Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
25b		
26		
Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
26		
27		
Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
27		
28		
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		
A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

		28a
b	A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>	
		28b
c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If</i>	
	<i>"Yes," complete Schedule L, Part IV</i>	28c
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b 36
	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37 38
	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	38

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

2
1a

applicable **1a**

Yes No

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

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

1b	0
----	---

c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? **1c**

Academy of Urban Learning 74-3043068

Form 990 (2020) Page **5** **Part V Statements Regarding Other IRS Filings and Tax Compliance** (continued)

Yes No

2a
Enter the number of employees reported on Form W-3, Transmittal of **2a**
Wage and Tax Statements, filed for the calendar year ending with or **17**
within the year covered by this return **X**

b
If at least one is reported on line 2a, did the organization file all required federal employment tax returns?

2b

Note: If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file* (see instructions)

X

3a
Did the organization have unrelated business gross income of \$1,000 or more during the year?

3a

b
If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation on Schedule O*

3b

4a
At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, **X**
a financial account in a foreign country (such as a bank account, securities account, or other financial account)?

4a

If "Yes," enter the name of the foreign country ▶

b
See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). **X X**

5a
Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?

5a

b
Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?

5b

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
organization solicit any contributions that were not tax deductible as charitable contributions?

X

6a

b
If "Yes," did the organization include with every solicitation an express statement that such contributions or
gifts were not tax deductible?

6b

7 Organizations that may receive deductible contributions under section 170(c).

a
Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods
and services provided to the payor?

7a

b

7b

	If "Yes," did the organization notify the donor of the value of the goods or services provided?	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? ..	7g
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? ..	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?	8
9	Sponsoring organizations maintaining donor advised funds.	
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b
10	Section 501(c)(7) organizations. Enter:	
a	Initiation fees and capital contributions included on Part VIII, line 12	10a
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b
11	Section 501(c)(12) organizations. Enter:	
a	Gross income from members or shareholders	11a
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	
a 13a	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.	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b
c 13c		

Enter the amount of reserves on hand

X

14a

14a Did the organization receive any payments for indoor tanning services during the tax year?

b 14b

If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or X excess parachute payment(s) during the year?

15 If

"Yes," see instructions and file Form 4720, Schedule N.

X

16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Form 990 (2020) Schedule O.

16

DAA
AUL 11/20/2021 12:52 PM

Academy of Urban Learning 74-3043068

Form 990 (2020) Page 6 Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

X

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

Section A. Governing Body and Management

independent

9

1a

Enter the number of voting members of the governing body at the end of the tax year

1a

If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.

1b

2

Did any officer, director, trustee, or key employee have a family relationship or a business relationship with

Yes No X

9

b

Enter the number of voting members included on line 1a, above, who are any other officer, director, trustee, or key employee?

2

3

Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?

~~XXX~~
~~X~~

3

4

Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?

4

5

Did the organization become aware during the year of a significant diversion of the organization's assets?

5

6

Did the organization have members or stockholders?

6

7a

Did the organization have members, stockholders, or other persons who had the power to elect or appoint

one or more members of the governing body?

7a

b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?

7b

8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X X

a The governing body?

8a

b Each committee with authority to act on behalf of the governing body?

8b

9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O 9 X

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

Yes No

10a Did the organization have local chapters, branches, or affiliates?

10a

b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?

10b

11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a

b Describe in Schedule O the process, if any, used by the organization to review this Form 990.

12a Did the organization have a written conflict of interest policy? If "No," go to line 13 Did the organization have a written document retention and destruction policy? 14

12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?

12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 14 Did the process for determining compensation of the following persons include a review and approval by 15 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official

12c Did the organization have a written whistleblower policy?

a

..... 13

If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

15a
Other officers or key employees of the organization

..... **b**

15b
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).

Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement

16a
with a taxable entity during the year?

16b
XX
X

X
X X

16a

Section C. Disclosure

None

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

17
18
Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

X X
Own website Another's website Upon request Other (explain on Schedule O)

19
Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
State the name, address, and telephone number of the person who possesses the organization's books and records ▶

20
AUL 2417 W 29th Avenue

Denver CO 80211 303-282-0900

DAA Form **990** (2020)

Employees, and Independent Contractors

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

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

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

List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

List all of the organization's **current** key employees, if any. See 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, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See instructions for the order in which to list the persons above.

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

(A)	(B)	(C)	(D)	(E)	(F)	Name and title Position	Average hours (do not check more than one per week box, unless person is both an officer and a director/trustee)	Reportable compensation (W-2/1099-MISC) from the organization and related organizations	Estimated amount of other compensation from related organizations (W-2/1099-MISC)
(1)						Jennifer Jackson officer and a director/trustee	40.00	X	X
								X	X
								X	X

School Director
0.00 115,500 0 0
(2) **Jean Sara Banks** 2.00

Board Member
0.00 0 0 0
(3) **Bohanna Abby n** 2.00

Secretary
0.00 0 0 0
(4) **Bryan Thomas** 2.00

Vice Chair

0.00 0 0 0

(5)

~~Cameron~~ 2.00

Burke

Treasurer

0.00 X X 0 0 0

(6)

David 2.00

Guillen

Board Member

0.00 X 0 0 0

(7)

Tatiana 2.00

Jafari

Board Member

0.00 X 0 0 0

(8)

Tomei 2.00

Kuehl

Board Member

0.00 X 0 0 0

(9)

Marisa 2.00

Mora

Chair

0.00 X X 0 0 0

(10)

Elie 2.00

Zwiebel

Board Member (11)

0.00 X 0 0 0

Form 990 (2020)

DAA
AUL 11/20/2021 12:52 PM

Academy of Urban Learning 74-3043068

Form 990 (2020) Page 8 Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

Name and title (list any hours for related organization dotted lines below)	Average hours per week box, unless person is both an officer and a	Position (do not check more than one director/trustee)	Reportable compensation		(A) (B) (D) (E) (F) Estimated amount of other	
			Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from the organization MISC (W-2/1099- organization s)	from the organization	and related organization s

.....

1b Subtotal **115,500** 115,500
 ▶ c Total from continuation
 sheets to Part VII, Section A ▶ d Total
 (add lines 1b and 1c)

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

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

Section B. Independent Contractors

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

(B) Description of services

(A)

Name and business address (C)

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

0

Academy of Urban Learning 74-3043068

Form 990 (2020) Page 9 Part VIII Statement of Revenue

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

	(A) (B) (C) (D)	
Total revenue	Related or exempt function revenue	Unrelated Revenue excluded business revenue from tax under sections 512-514

f g 1a b c d e	Related Federated campaigns Membership dues Fundraising events Total. Add lines 1a-1f	included above .. Noncash organizations contributions Government grants included in lines (contributions) All other 1a-1f contributions, gifts, grants, and similar amounts not 1a 1b 1c 1d 1e h	1f 1g 299,481 340,208 40,727 \$
---	---	--	---

..... d
 e
 f
 Per Pupil Revenue
2a
 Mill Levy Override
b
 Mill Levy Override -
 Pathways
c
Total. Add lines 2a-2f **2,126,918**
 ▶ **g**

611710	442,246	442,246
611710	304,000	304,000

Business Code
611710 1,380,000

	298 298	
▶		
▶		
▶		
(ii) Personal		
▶		
(ii) Other		
▶		
▶		
Business Code		
611710 3,975 3,975		
▶		
▶	3,975	

3 Investment income (including dividends, interest, and other similar amounts)
4 Income from investment of tax-exempt bond proceeds
5 Royalties
 (i) Real

6a b Gross rents Less: rental expenses
c

d Net rental income or (loss)

7a Gross amount from sales of assets other than inventory **7a** (i) Securities

Less: cost or other basis and sales **7b 7c** exps. Gain or (loss)

b c

Gross income from fundraising events **8a**

d Net gain or (loss)

(not including \$ **b** Less: direct

of contributions reported on line 1c). See Part IV, line 18 **9a 9b c 10a**

Less: direct expenses **b** Net income or (loss) from gaming activities **8a 8b c**

Gross sales of inventory, less returns and allowances **9a**

Net income or (loss) from fundraising events **b** Less: cost of goods sold **10a 10b** Gross income from gaming activities. See Part IV, line 19

c

Miscellaneous

11a b

c

d

e

12

Net income or (loss) from sales of inventory

All other revenue **Total. Add** lines 11a-11d **2,471,399 2,131,191 0**
Total revenue. See instructions **0**

Academy of Urban Learning 74-3043068

Form 990 (2020) Page **10** **Part IX Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX

Do not include amounts reported on lines 6b,

(A) (B) (C) (D)

7b, 8b, 9b, and 10b of Part VIII.

Total expenses Program service Management and expenses general expenses Fundraising expenses

1	4	5	10	11
2	6		a	b
3			c	d
	7			

and domestic governments. See Part IV, line 21

Grants and other assistance to domestic individuals. See Part IV, line 22

Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16

Benefits paid to or for members

Compensation of current officers, directors, trustees, and key employees

Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)

Other salaries and wages

Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)

Other employee benefits

Payroll taxes

Fees for services (nonemployees):

Management Legal

Accounting

Lobbying

1,138,371	831
148,390	116
117,798	81
16,451	
52,786	
23,175	
1,489	
17,555	
146,303	

6,867	9,997
	1,038,924
5,106	
22,593	
154,812	
62,963	
60,378	
31,956	
12,903	
2,019,896	

e

f

g

12

13

14

15

16

17

18

19

20

21

22

23

24

Occupancy

Travel

Payments of travel or entertainment expenses for any federal, state, or local public officials

Conferences, conventions, and meetings

Interest

Payments to affiliates

Depreciation, depletion, and amortization

Insurance

Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)

District Services

Supplies

Non Capital Equipment

Other Prof Svc Expenses

All other expenses

a

b

c

d

e

25

26

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.)

Advertising and promotion

Office expenses

Information technology

Royalties

Total functional expenses. Add lines 1 through 24e . . .

Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► if following SOP 98-2 (ASC 958-720)

0

AUL 11/20/2021 12:52 PM

DAA Form 990 (2020)

Academy of Urban Learning 74-3043068

Form 990 (2020) Page 11 Part X Balance Sheet

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

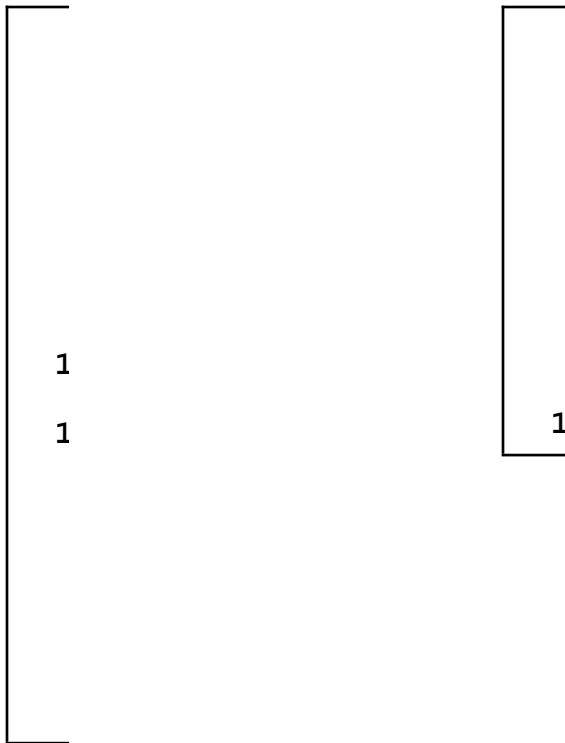
(A) (B)

Beginning of year End of year

	4958(c)(3)(B)	7		
	Notes and loans receivable, net			
	.....	8		
	Inventories for sale or use			
	.....	9		
	Prepaid expenses and deferred charges			
			
	756,897	1,154,507		
..	1			
.	2			
.	3			
A	1	58,113	67,172	4
	Cash—non-interest-bearing			
	.....	2		
	Savings and temporary cash investments			
	.....	5		
	.....	3		
	Pledges and grants receivable, net			
	.....	6		
	.....	4		
	Accounts receivable, net			
	.....	7		
	.....	5		
	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons			
	.....	6		
	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section			

	8,2
	279,8
	1,104,0
	2,5

E



10a b

Land, buildings, and equipment:

cost or other basis. Complete Part accumulated depreciation
 VI of Schedule D Less: **54,649**
45,343 9,306

10a 10b

entity or family member of any of these persons **23**

Secured mortgages and notes payable to unrelated third parties **24**

Unsecured notes and loans payable to unrelated third parties **25**

Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D **26**

Total liabilities. Add lines 17 through 25 **26**

Organizations that follow FASB ASC 958, check here ▶ and complete lines 27, 28, 32, and 33.

27 Net assets without donor restrictions **28**

DAA
11 Investments—publicly traded securities **12**
 Investments—other securities. See Part IV, line 11 **13**
 Investments—program-related. See Part IV, line 11 **14**
11 Intangible assets **15**
 Other assets. See Part IV, line 11 **16**

Total assets. Add lines 1 through 15 (must equal line 33) **17**

Accounts payable and accrued expenses **18**

Grants payable **19**

Deferred revenue **20**

Tax-exempt bond liabilities **21**

Escrow or custodial account liability. Complete Part IV of Schedule D **22**

Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled

..... **X**
Organizations that do not follow FASB ASC
958, check here ▶ and complete lines 29
through 33.

29	Capital stock or trust principal, or current funds		
	..... 30		
	Paid-in or capital surplus, or land, building, or		
	equipment fund	31	
	Retained earnings, endowment, accumulated		
	income, or other funds	32	1,532,172 1,532,877
	Total net assets or fund balances		
	..... 33		
	Total liabilities and net assets/fund balances		

	606,218	304,326
	1,837,203 705	304,326
Net assets with donor restrictions		<u>1,837,203</u> Form 990 (2020)

AUL 11/20/2021 12:52 PM

Academy of Urban Learning 74-3043068

Form 990 (2020) Page **12** **Part XI Reconciliation of Net Assets**

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

1	Total revenue (must equal Part VIII, column (A), line 12) 1	3	Revenue less expenses. Subtract line 2 from line 1
	..... 2 2		
	Total expenses (must equal Part IX, column (A), line 25)	3	
		
	2,471,399 2,019,896 451,503		<u>-147,177</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))		
			4
5	Net unrealized gains (losses) on investments		
			5
6	Donated services and use of facilities		
			6
7	Investment expenses		
			7
8 8	Prior period adjustments		
9	Other changes in net assets or fund balances (explain on Schedule O)		
		
9		10	
10	Net assets or fund balances at end of year. Combine lines 3 through 9		304,326
	(must equal Part X, line 32, column (B))		

Part XII Financial Statements and Reporting

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

	990:	Cash Accrual Other
1	Accounting method used to prepare the Form X	Yes No

Were the organization's financial statements compiled or reviewed by an

If the organization changed its method of accounting from a prior year or independent accountant?
 checked "Other," explain in

If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:

2a

If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:

Separate basis Consolidated basis Both consolidated and separate basis

X

b

Were the organization's financial statements audited by an independent accountant?

X

2b

X

Separate basis Consolidated basis Both consolidated and separate basis

c

If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

b

2c

If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.

If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the **3b** required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits

3a

As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?

X

X

3a

SCHEDULE A Public Charity Status and Public Support

OMB No. 1545-0047

(Form 990 or 990-EZ)

organization or a section 4947(a)(1) nonexempt charitable trust. ▶ **Attach to Form 990 or Form 990-EZ.** and the latest information.

2020

Department of the Treasury Internal Revenue Service
Complete if the organization is a section 501(c)(3)

▶ Go to www.irs.gov/Form990 for instructions **Open to Public Inspection**

Name of the organization
Employer identification number

74 - 3043068

Academy of Urban Learning

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

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

1 2 3 4

described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state:

5

..... An organization

6 7

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.)

A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.

A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ).)
An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.

A medical research organization operated in conjunction with a hospital

8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)

9 An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:

10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)

11

An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.

12

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes

of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**.

Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. a

Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**

Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**

c

Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**

d

Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**

e

Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations

..... g Provide the following information about the supported organization(s).

(i) Name of supported organization

(ii) EIN

--	--

(A)

(B)

(C)

(D)

(E)

Total

(vi) Amount of other support (see instructions)

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

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

Academy of Urban Learning 74-3043068

Schedule A (Form 990 or 990-EZ) 2020 Page 2 **Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)** (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) **Section A. Public Support**

(a) 2016 (b) 2017	(c) 2018	(d) 2019	(e) 2020

Calendar year (or fiscal year beginning in) (f) Total ▶

- 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")
- 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 shown on line 11, column (f)
- Public support.** Subtract line 5 from line 4

6 Section B. Total Support

Calendar year (or fiscal year beginning in) (f) Total ▶ (b) 2017 (c) 2018 (d) 2019 (e) 2020

- 7 (a) 2016 and income from similar sources
- 8
- 9 Net income from unrelated business activities, whether or not the business is regularly carried on
- 10 11 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) **Total support.** Add lines 7 through 10

Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties,

--

12 Gross receipts from related activities, etc. (see instructions)

12

13 **First 5 years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

14 Public support percentage for 2020 (line 6, column (f) divided by line 11, 14% column (f))

15 Public support percentage from 2019 Schedule A, Part II, line 14

16a 33 1/3% support test—2020. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support test—2019. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization

17a 10%-facts-and-circumstances test—2020. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

b 10%-facts-and-circumstances test—2019. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

DAA
AUL 11/20/2021 12:52 PM

Academy of Urban Learning 74-3043068

Schedule A (Form 990 or 990-EZ) 2020 Page 3 Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Table with columns for Calendar year (or fiscal year beginning in) (a) 2016, (b) 2017, (c) 2018, and (f) Total. The table is mostly empty.

- 1 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 to or expended on its behalf
5 The value of services or facilities 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 ... c

Add lines 7a and 7b

8

Public support. (Subtract line 7c from line 6.)

Section B. Total Support

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 securities loans, rents, royalties, and income from similar sources

b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 ... c Add lines 10a and 10b

11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on

12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)

13 Total support. (Add lines 9, 10c, 11, and 12.)

14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

Table with 3 empty columns and 1 row.

Section C. Computation of Public Support Percentage

15 Public support percentage for 2020 (line 8, column (f), divided by line 13, column (f)) 15 %

16 Public support percentage from 2019 Schedule A, Part III, line 15 16 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2020 (line 10c, column (f), divided by line 13, column (f)) 17%

18

18 Investment income percentage from 2019 Schedule A, Part III, line 17 %

19a 33 1/3% support tests—2020. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ... b 33 1/3% support tests—2019.

If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ... 20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ... Schedule A (Form 990 or 990-EZ) 2020

Organizations

Yes No

- 1
Are all of the organization's supported organizations listed by name in the organization's governing documents? *If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.* 1
- 2
Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? *If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).* 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.* 3a
- 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.* 3b
- 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.* 3c
- 4a
Was any supported organization not organized in the United States ("foreign supported organization")? *If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) 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.* 4b
- c
Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.* 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 amendment to the organizing document).* 5a
- b
Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document? 5b
- c
Substitutions only. Was the substitution the result of an event beyond the organization's control? 5c
- 6
Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in **Part VI**.* 6
- 7
Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).* 7
- 8
Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).* 8
- 9a

Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If "Yes," provide detail in Part VI.*

9a

b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in Part VI.*

9b

c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in Part VI.*

9c

10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If "Yes," answer line 10b below.*

10a

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

10b

Schedule A (Form 990 or 990-EZ) 2020

DAA
AUL 11/20/2021 12:52 PM

Academy of Urban Learning 74-3043068

Schedule A (Form 990 or 990-EZ) 2020 Page 5 **Part IV Supporting Organizations (continued)**

Yes No

11 Has the organization accepted a gift or contribution from any of the following persons?

a A person who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, the governing body of a supported organization?

11a

b A family member of a person described in line 11a above?

11b

c A 35% controlled entity of a person described in line 11a or 11b above? *If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.*

11c

Section B. Type I Supporting Organizations

Yes No

1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? *If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.*

1

2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? *If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.*

2

Section C. Type II Supporting Organizations

Yes No

1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? *If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).*

1

Section D. All Type III Supporting Organizations

Yes No

- 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? 1
- 2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? *If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).*
- 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.* 3

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).

- a The organization satisfied the Activities Test. Complete line 2 below.
- b The organization is the parent of each of its supported organizations. Complete line 3 below.
- c The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).
- 2 3 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.*
- Yes No**
- b Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.* 2a
- Activities Test. **Answer lines 2a and 2b below.**
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? *If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations,* 2b
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If "Yes" or "No," provide details in Part VI. b* 3a
- 3b

Academy of Urban Learning 74-3043068

Schedule A (Form 990 or 990-EZ) 2020 Page 6 **Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations**

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

Section A – Adjusted Net Income

(optional)

(A) Prior Year (B) Current Year

1	Net short-term capital gain	1
2	Recoveries of prior-year distributions	2
3	Other gross income (see instructions)	3
4	Add lines 1 through 3.	4
5	Depreciation and depletion	5
6		5

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

(optional)

(B) Current Year (A) Prior Year

1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):

a Average monthly value of securities

1a

b Average monthly cash balances

1b

c Fair market value of other non-exempt-use assets

1c

d **Total** (add lines 1a, 1b, and 1c)

1d

e **Discount** claimed for blockage or other factors
(explain in detail in **Part VI**):

2 Acquisition indebtedness applicable to non-exempt-use assets

2

3 Subtract line 2 from line 1d.

3

4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).

4

5 Net value of non-exempt-use assets (subtract line 4 from line 3)

5

6 Multiply line 5 by 0.035.

6

7 Recoveries of prior-year distributions

7

8 **Minimum Asset Amount** (add line 7 to line 6)

8

Section C – Distributable Amount

Current Year

1 Adjusted net income for prior year (from Section A, line 8, column A)

1

2 Enter 0.85 of line 1.

2

3 Minimum asset amount for prior year (from Section B, line 8, column A)

3

4 Enter greater of line 2 or line 3.

4

5 Income tax imposed in prior year

5

6 **Distributable Amount.** Subtract line 5 from line 4, unless subject to

7

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

Academy of Urban Learning 74-3043068

Schedule A (Form 990 or 990-EZ) 2020 Page 7 **Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations**
(continued)

Section D – Distributions Current Year

- 1 Amounts paid to supported organizations to accomplish exempt purposes
- 2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity
- 3 Administrative expenses paid to accomplish exempt purposes of supported organizations
- 4 Amounts paid to acquire exempt-use assets
- 5 Qualified set-aside amounts (prior IRS approval required—*provide details in Part VI*)
- 6 Other distributions (*describe in Part VI*). See instructions.
- 7 **Total annual distributions.** Add lines 1 through 6.
- 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

(i) Excess Distributions	(ii) Underdistributions Pre-2020

Section E – Distribution Allocations (see instructions)
Distributable

1
2
3
4
5
6
7
8

DAA
a b c d e f
g h i
j

a b c

Amount for 2020

a b c d e

Distributable amount for 2020 from Section C, line 6 Underdistributions, if any, for years prior to 2020 (reasonable cause required—*explain in Part VI*). See instructions.
Excess distributions carryover, if any, to 2020 From 2015
.....
From 2016
.....
From 2017
.....
From 2018
.....
From 2019
.....
Total of lines 3a through 3e
Applied to underdistributions of prior years
Applied to 2020 distributable amount
Carryover from 2015 not applied (see

(iii)

instructions) Remainder. Subtract lines 3g, 3h, and 3i from line 3f. Distributions for 2020 from Section D, line 7: \$ Applied to underdistributions of prior years Applied to 2020 distributable amount Remainder. Subtract lines 4a and 4b from line 4. Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions. Remaining underdistributions for 2020 Subtract lines 3h and 4b from line 1. For result greater than zero, *explain in Part VI. See instructions.*
Excess distributions carryover to 2021. Add lines 3j and 4c.
Breakdown of line 7:
Excess from 2016
Excess from 2017
Excess from 2018
Excess from 2019
Excess from 2020

Schedule of Contributors Schedule B (Form 990, 990-EZ, or 990-PF) **2020**

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service **information.**

Name of the organization

Employer identification number

► Go to www.irs.gov/Form990 for the latest

Academy of Urban Learning 74-3043068 Organization type (check one):

Filers of: Section:

3

Form 990 or 990-EZ 501(c)() (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF 501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000

or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the

General Rule applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year \$

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

990-EZ, or 990-PF.
Schedule B (Form 990, 990-EZ, or 990-PF) (2020)

For Paperwork Reduction Act Notice, see the instructions for Form 990,

Academy of Urban Learning
74-3043068

Name of organization **Employer identification number**
Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

Part I

(a) (b) (c) (d) **No. Name, address, and ZIP + 4 Total contributions Type of contribution**

1	WC & EJ Thornton Foundation Person X	PO Box 61000 Denver CO 80206-1004	20,000	\$ Noncash (Complete Part II for noncash contributions.)
Payroll				

(a) (b) (c) (d) **No. Name, address, and ZIP + 4 Type of contribution**

	Total contributions
	Noncash
	(Complete Part II for noncash contributions.)
	\$
	Person
	Payroll

(a) (b) (c) (d)

No.	Name, address, and ZIP + 4	Total contributions	Type of contribution	
			Noncash	(Complete Part II for noncash contributions.)
		\$		
			Person	
			Payroll	

(a) (b) (c) (d) No. Name, address, and ZIP + 4 Type of contribution

..... \$
.....
Person
Payroll

Total contributions

Noncash
(Complete Part II for noncash
contributions.)

(a) (b) (c) (d) No. Name, address, and ZIP + 4 Type of contribution

..... \$
.....
Person
Payroll

Total contributions

Noncash
(Complete Part II for noncash
contributions.)

(a) (b) (c) (d) No. Name, address, and ZIP + 4 Type of contribution

..... \$
.....
Person
Payroll

Total contributions

Noncash
(Complete Part II for noncash
contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2020)

DAA
AUL 11/20/2021 12:52 PM

Complete if the organization answered "Yes" on Form 990,

SCHEDULE D Supplemental Financial

Statements (Form 990) Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 2020

OMB No. 1545-0047

11c, 11d, 11e, 11f, 12a, or 12b.

Department of the Treasury Internal Revenue Service
Attach to Form 990.

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

Employer identification number

Name of the organization

Academy of Urban Learning 74-3043068 Part I Organizations Maintaining Donor
Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on
Form 990, Part IV, line 6.

(a) Donor advised funds (b) Funds and other accounts

1 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 advisors in writing that the assets held in donor advised
funds are the organization's property, subject to the organization's exclusive legal control? Yes

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used
only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose
conferring impermissible private benefit? Yes

Part II Conservation Easements. Complete if the organization answered
"Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).
Preservation of land for public use (for example, recreation or education) Protection of natural habitat

2

Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

a
Total number of conservation easements

d
Number of conservation easements included in (c) acquired after 7/25/06, and not on a

2a

b
Total acreage restricted by conservation easements

historic structure listed in the National Register

2d

2b

Held at the End of the Tax Year

c
Number of conservation easements on a certified historic structure included in (a)

2c

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year

Number of states where property subject to conservation easement is located

4

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year \$

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

Yes No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b
If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Assets included in Form 990, Part X

Revenue included on Form 990, Part VIII, line 1

\$ \$

(ii)

2

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1 \$ \$

b Assets included in Form 990, Part X \$ \$

For Paperwork Reduction Act Notice, see the Instructions for Form 990. DAA Schedule D (Form 990) 2020

AUL 11/20/2021 12:52 PM

Academy of Urban Learning
74-3043068

Schedule D (Form 990) 2020

Page **2**

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued) 3

Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):

- a** Public exhibition
- b** Scholarly research
- c** Preservation for future generations
- d** Loan or exchange program
- e** Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? **Yes No** **Part IV**

Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? **Yes No b** If "Yes," explain the arrangement in Part XIII and complete the following table: **Amount**

c Beginning balance		1c
d Additions during the year		1d
Distributions during the year		1e
f Ending balance		1f

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? **Yes No**

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

1a Beginning of year balance	(a) Current year	Grants or scholarships d
b Contributions		e Other expenditures for facilities and programs
c Net investment earnings, gains, and losses		(b) Prior year (c) Two years back (d) Three years back (e) Four years back

f Administrative expenses

g End of year balance

2

Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment ▶%
- b Permanent endowment ▶%
- c Term
endowment ▶

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a
Are there endowment funds not in the possession of the organization that **Yes No**
are held and administered for the organization by:

- (i) Unrelated organizations **3a(i)**
- (ii) Related organizations **3a(ii)**

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? **3b**

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (b) Cost or other basis (c) Accumulated (d) Book value		
	(investment)	(other)	depreciation
1a b Leasehold improvements			<u>9,306</u>
c Equipment			Other
d			
e Land	54,649	45,343	9,306
Buildings			

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

Academy of Urban Learning
74-3043068

Part VII Investments – Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value
(1) Financial derivatives	(c) Method of valuation: Cost or end-of-year market value
(2) Closely held equity interests	
(3) Other	
(A)	

- (B)
- (C)
- (D)
- (E)

.....
 (F)

 (G)

 (H)

Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ...

Part VIII Investments – Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

	(a) Description of investment	(5)	
		(6)	
(1)		(7)	
(2)		(8)	
(3)		(9)	
(4)			(b) Book value (c) Method of valuation: Cost or end-of-year market value

Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ...

**Part IX
 Other Assets.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

	(a) Description	(b) Book value
	Deferred Outflows Related to Pension	606,218
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		<u>606,218</u>

Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)

**Part X
 Other Liabilities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

	(a) Description of liability	(b) Book value
1.	(1) Federal income taxes	
		Deferred Inflow Related to Pensions 683,116
(2)		Net Pension Liability 597,338
(3)		Deferred Inflow Related to OPEB 132,024
(4)		Accrued Salaries and Benefits 89,299
(5)		Net OPEB Liability 30,395
(6)		
(7)		
(8)		
(9)		<u>1,532,172</u>

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

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

Schedule D (Form 990) 2020

Page **4**

Academy of Urban Learning
74-3043068

Part XI
Reconciliation of Revenue per Audited Financial Statements With Revenue **2,471,399**

1

2e
3

4c

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

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

a Net unrealized gains (losses) on investments **2a**

b Donated services and use of facilities **2b**

c Recoveries of prior year grants **2c**

d Other (Describe in Part XIII.) **2d**

e Add lines **2a** through **2d** **4** Amounts included on Form 990, Part VIII, line 12, but not on line 1:

..... **3** **2,471,399**

Subtract line **2e** from line **1**

a Investment expenses not included on Form 990, Part VIII, line 7b **4a**

b Other (Describe in Part XIII.) **4b**

c Add lines **4a** and **4b** **5**

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

2,471,399

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

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

1

2e
3

4c
5

1 Total expenses and losses per audited financial statements 2,019,896

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

a Donated services and use of facilities 2a

b Prior year adjustments 2b

c Other losses 2c

d Other (Describe in Part XIII.) 2d

e Add lines 2a through 2d 4
Amounts included on Form 990, Part IX, line 25, but not on line 1:

3 2,019,896

Subtract line 2e from line 1

a Investment expenses not included on Form 990, Part VIII, line 7b 4a

b Other (Describe in Part XIII.) 4b

c Add lines 4a and 4b line 18.) 5
2,019,896

Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I,

Part XIII Information.

Supplemental

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

Part XIII Supplemental Information *(continued)*

Dotted lines for supplemental information.

Schedule D (Form 990) 2020

DAA
AUL 11/20/2021 12:52 PM

SCHEDULE E Schools

**(Form 990 or 990-EZ) ▶ Complete if the organization answered “Yes”
on Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.**

OMB No. 1545-0047 **2020**

Part I

YES NO

1
Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?

1
2
Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?

2
3
Has the organization publicized its racially nondiscriminatory policy on its primary publicly accessible Internet homepage at all times during its taxable year in a manner reasonably expected to be noticed by visitors to the homepage, or through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain. If

4b
nondiscriminatory basis?
c
Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?

you need more space, use Part II
The policy is included in the School's handbook

4
Does the organization maintain the following?
a
Records indicating the racial composition of the student body, faculty, and administrative staff?

4c
d
Copies of all material used by the organization or on its behalf to solicit contributions?

4a
b
Records documenting that scholarships and other financial assistance are awarded on a racially

4d

If you answered "No" to any of the above, please explain. If you need more space, use Part II.

.....
.....
.....
.....

..... **5**
Does the organization discriminate by race in any way with respect to:

a

Admissions policies?

..... **5b**

c

Students' rights or privileges?

..... **5a**

b

Employment of faculty or administrative staff?

..... **5c**

d

Scholarships or other financial assistance?

..... **5d**

e

Educational policies?

..... **5e**

f

Use of facilities?

..... **5f**

g

Athletic programs?

..... **5g**

h

Other extracurricular activities?

.....

5h

If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.

.....
.....
.....

6a

b

Has the organization's right to such aid ever been revoked or suspended?

.....
.....
.....
6a
Does the organization receive any financial aid or assistance from a governmental agency?
.....

6b

If you answered "Yes" on either line 6a or line 6b, explain on Part II.

7

Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Part II

7

X

X

X

X

X

SCHEDULE O Supplemental Information to Form 990 or 990-EZ **2020**

OMB No. 1545-0047

(Form 990 or 990-EZ) Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Department of the Treasury Internal Revenue Service **▶ Attach to Form 990 or 990-EZ.** information.
▶ Go to www.irs.gov/Form990 for the latest **Open to Public Inspection**

Name of the organization Employer identification number **Academy of Urban Learning 74-3043068**

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990 ...

The 990 will be reviewed by the Organization's consultant and subcommittee prior to filing.

Form 990, Part VI, Line 15a - Compensation Process for Top Official

The Organization's board dictates and creates the annual employment contract for the Executive Director.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation ...

Financial Statements and other financial transparency documents are available on the Organization's website.

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) 2020 DAA