### ACADEMY FOR INTEGRATED ARTS BOARD of DIRECTORS MEETING AGENDA

May 25th, 2023 4:00pm

The meeting will be held in person.

### I. CALL TO ORDER.

### II. COMMUNITY FORUM

The board will hear comments from community members. These comments may relate to any item on the agenda or other issues which need to be brought to the attention of the Board. Individual comments are limited to five minutes. Time allotted for the community forum will be fifteen minutes.

### III. <u>DEI TRAINING</u>

• Dr. Auburn Ellis will lead us in our 3rd DEI training session.

#### IV. FINANCIAL REPORT

Budget Report - Cara Newell

### V. CONSENT AGENDA

- Approval of the minutes from the 4/27/2023 Board Meeting
- Approval of warrant list (check registry and purchasing card record)
- Approval of the financial report

### VI. ACTION ITEMS

- Approval of new hires:
  - School Counselor- Allison Birkett-Wagner
  - o Dean of Culture- Lamont Muhammad
  - o Classroom Teacher: Elijah Jost, Pranika Kumaran and Moriah Draper

#### VII. EXECUTIVE DIRECTOR'S REPORT

- Monthly Update-Tricia DeGraff
  - Discussion regarding AFIA's 2021 2022 Annual Report from AFIA's sponsor, Missouri Charter Public School Commission

### VIII. DISCUSSION ITEMS/COMMITTEE REPORT

- Education Committee met 5/18/23
- Finance Committee met 5/18/23
  - o Review 2021 Final 990 Return
- Governance Committee did not meet

### IX. NEW BUSINESS

### X. **EXECUTIVE SESSION**

Recommendation to enter into executive session for the purpose of conducting business related to personnel, real estate, and/or legal issues as specified in Section 610.021 of the Missouri Sunshine Law.

### XI. <u>ADJOURNMENT</u>

• Next Board Meeting (Zoom) June 22nd, 2023

# ACADEMY FOR INTEGRATED ARTS BOARD of DIRECTORS MEETING MINUTES

#### **MINUTES**

April 27, 2023 4:00 p.m.

7910 Troost Ave., Kansas City, Missouri

Present: Lynne Brown, Member

Peter Brown, Member Brad Epsten, President Andy Fromm, Member Cara Newell, Treasurer Jennifer Waddell, Member

Also Present: Tricia DeGraff, Executive Director

Dr. Auburn Ellis

### I. CALL TO ORDER AND ROLL CALL

Brad Epsten called the meeting to order at 4:02

### II. FINANCIAL REPORT

Budget report-Cara Newell (attachment)

### III. CONSENT AGENDA ITEMS

- Approval of the minutes from the March 30, 2023 board meeting
- Approval of the warrant list (check registry and purchasing card record)
- Approval of the financial report:

Motion: Lynne Brown Second: Cara Newell

Vote: 6-0

### IV. ACTION ITEMS

- Approval to hire new certified teacher Zoe Cerda;
- Approval to hire apprentice teachers (student teachers) Kaylene Vickers, Cheyenne McGary, Genesis Amaro, Isaia Wilcoxen and Alison Gilbert:

Motion: Education Committee

Second: Andy Fromm

Vote: 6-0

• Approval of 2023-2024 calendar:

Motion: Peter Brown Second: Andy Fromm

Vote 6-0

• Approval of new start and end times for the school day (9:10 AM - 4:10 PM):

Motion: Cara Newell Second: Peter Brown

Vote: 6-0

### V. EXECUTIVE DIRECTOR'S REPORT

• Monthly Update -Tricia DeGraff (attachment)

### VI. <u>DISCUSSION ITEMS/COMMITTEE REPORTS</u>

- Education Committee met on April 20<sup>th</sup> and discussed new hires (see Action Items) and Family Engagement Goals and the surveys from parents.
- Audit/Finance met on April 20<sup>th</sup> (attachment)
- Governance Committee did not meet. Board discussed what they are planning for Teacher Appreciation Week, May 8-12

### VII. NEW BUSINESS

None

### VIII. EXECUTIVE SESSION

No Executive Session

### IX. ADJOURNMENT

Motion to adjourn: Jennifer Waddell

Second: Lynne Brown

Vote: 6-0

Meeting adjourned at 5:42 p.m.

Next Board Meeting is on May 25, 2023 at 4:00 p.m. (in person)

Respectfully submitted,

Emily Brown Secretary

Brad Epsten

President

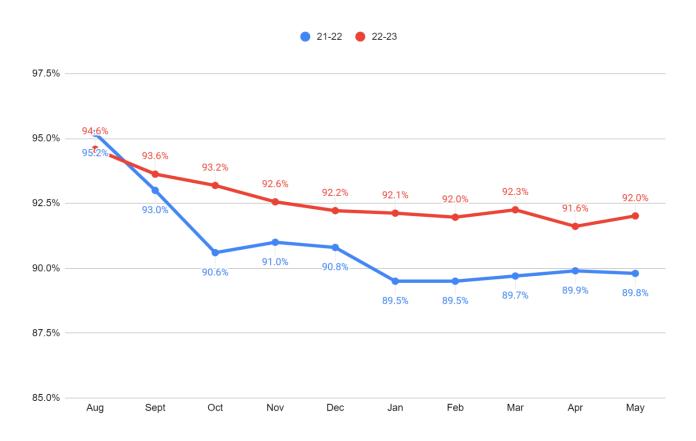


Academy for Integrated Arts

Executive Director's Report May 25, 2023

	Enrollment 2022-2023													
Grade	8/22	Sept	Oct	Dec	Jan	Feb	Mar	Apr	May	June				
PK	16	16	16	16	16	16	16	16	15					
TK	9	7	7	7	7	7	7	7	7					
K	34	35	36	37	37	35	34	34	34					
1st	41	42	42	41	42	41	40	40	40					
2nd	42	42	41	40	40	39	39	39	39					
3rd	39	40	40	39	39	39	39	39	39					
4th	41	40	37	35	36	38	38	38	38					
5th	35	35	33	32	31	31	31	31	31					
6th	21	21	20	20	20	20	20	20	20					
Total	278	278	272	267	268	266	264	264	263					

### Year to Date Attendance Percentage (through 5/15/2023)



# 90/90 Attendance Performance (As of 5/15/2023)

All Enrollments YTD (in				
90/90 Performance B	and	# of Students	% of Students	2021-2022 (as of 6/3/2022)
Less than 85%	No points	38	14.0%	20.9%
85% to 87.5%	0.25 points	18	6.6%	10.5%
87.5% to 90%	0.50 points	17	6.3%	12.8%
Greater than 90%	1 point	198	73.1%	55.8%
MSIP6 - LEA Attendance Rate:	78.10%	Total YTD 271	I	
MSIP6 - LEA points:	0			

### Staffing Updates

- Resignations
- Discussion regarding job postings
- New hires
  - School Counselor- Allison Birkett-Wagner
  - Dean of Culture- Lamont Muhamma
  - Classroom Teacher: Elijah Jost, Pranika Kumaran and Moriah Draper

### General Updates

The end of the school year includes many joyful events, including spring fling, kindergarten graduation, field day and a visit from Cirque du Soleil and many other fun events.



### **Teacher Appreciation**

"Thank you so much you all that did during Teacher Appreciation week. The food was delicious. We looked forward to it everyday. You really spoiled us."

Thank you for providing a special teacher appreciation week. Your generosity and thoughtfulness were very much appreciated. The energy and spirit of the recognition were apparent in happy faces.

# SchoolAppKC Application Breakdown

Date	Grade	Offered	Accepted	Declined	Waitlist	Open
5/22/23	PK	1	7	2	36	Yes
	TK	0	7	2	0	Yes
	K	10	14	44	0	Yes
	1	3	10	11	0	Yes
	2	5	5	9	0	Yes
	3	1	8	6	7	Yes
	4	3	8	9	5	Yes
	5	0	0	0	16	No
	6	0	0	0	12	No
		23	59	83	76	

# Enrollment for 23-24 School Year as of May 19, 2023

Grade Level	Current students*	New Students	Total	Goal**	Difference between goal and current total
PK	0	8	8	10	-2
TK	0	7	7		
K	21	14	35	50	-8
1	33	10	43	44	-1
2	39	5	44	44	0
3	37	8	45	40	5
4	36	8	44	40	4
5	35	0	35	34	1
6	26	0	26	20	6
Total	227	60	287	282	5

<sup>\*</sup>Does not include students who have indicated that they are moving to different schools

<sup>\*\*</sup>Must update charter based on capacity of our building

### **Upcoming Dates**

May 25: Last day of school and 6th Grade Send Off (1:30 - 3 PM)

June 20: Summer Celebration -- Ten Years of AFIA

At the June board meeting, we will discuss the Annual Report provided by our sponsor. It was sent to all board members on April 7, 2023 from Martha McGeehon (Martha.McGeehon@mcpsc.mo.gov). Tonya Richardson, Program Specialist from MPSC will join the meeting.

### ACADEMY FOR INTEGRATED ARTS FINANCE COMMITTEE MEETING Draft MINUTES

Thursday, April 20, 2023 8:30 a.m.

The meeting was held via Zoom. In attendance: Tricia DeGraff, Peter Brown, Johnny Dolan-Dominguez, Paul Greenwood, and Cara Newell.

- I. Call to order
- II. Agenda approved for this meeting (April 20, 2023)
- III. Minutes: There was no March meeting so no minutes to approve.
- IV. Financial Update and Review
  - Actual financial results vs. budget and forecast –
     There were no significant adjustments to prior month's forecast. Reviewed timing of ESSER funding on track submit necessary information to receive funding as forecasted.
  - Grant/donation activity Reviewed.
  - Bank Statement reconciliation Reviewed and in order.
  - Cash Disbursements Reviewed and in order.
  - Outstanding Invoices Reviewed and in order.
  - ADA WADA data reviewed and in order.

### V. Facilities

Tricia noted the need for more flexible meeting/office spaces. Agreed that it is too late to do any of that work over this summer. Tricia will gather more information so that over the next few months we can develop better idea of how current and future space configurations can best meet needs.

- VI. Approval of Expenditures >\$10,000 N/A
- VII. Budget 2024 Reviewed Preliminary Budget

AFIA will end SY23 in a stronger financial position than budgeted. This is primarily due to the budget being purposely conservative with respect to State Funding ("funding equity"). SY24 will see the final year of ESSER funding (\$610,000). This sets AFIA up to continue its strategy of investing in additional human resources to support our students (in the form of a team-teaching model) and our teachers. This first budget draft includes salary increases needed to remain competitive in retaining and attracting high-quality staff. It also includes 4 additional hires.

Over the next month, we will focus a bit more on non-salary ways to utilize our financial resources in SY24.

### ACADEMY FOR INTEGRATED ARTS FINANCE COMMITTEE MEETING Draft MINUTES

Thursday, April 20, 2023 8:30 a.m.

AFIA's financial strength should carry forward through SY25. During these next two years AFIA will need to address "post-ESSER funding' strategies. That is, school leadership and the Board must develop strategies needed to support the school's vision and mission as ESSER funding winds down.

VIII. Other Business – N/A

IX. Adjournment.

### **Academy for Integrated Arts** Enrollment Report – April 2023

Enrollment 2022-2023													
Grade	8/22	Sept	Oct	Dec	Jan	Feb	Mar	Apr	May	June			
PK	16	16	16	16	16	16	16	16					
TK	9	7:	7	7	7	7	7	7					
к	34	35	36	37	37	35	34	34					
ist	41	42	42	41	42	41	40	40					
2nd	42	42	41	40	40	39	39	39					
3rd	39	40	40	39	39	39	39	39					
4th	41	40	37	35	36	38	38	38					
5th	35	35	33	32	31	31	31	31					
6th	21	21	20	20	20	20	20	20					
Total	278	278	272	267	268	266	264	264					

# 22-23

Academy for Integrated Arts
7910 Troost Avenue, Kansas City MO 64131
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### Attendance/Membership Summary Report Start/End Date: 08/17/2022 - 04/28/2023 School(s): 1 Calendar(s): 1

Grade: PK, TK, K, 1, 2, 3, 4, 5, 6

School: Academy for Integrated Arts Calendar: 22-23 Academy for Integrated A

2 111	250	Student N	Membership	Absent	Present	11574	166	Unexcuse	d Absences	Percent In
	Grade	Count	Days	Days	Days	ADM	ADA	Days	Avg. Daily	Attendance
	PK	16	2231	153.12	2077.88	15.60	14.55	81.09	0.57	93.14%
	TK	8	1066	99.97	966.03	7.45	6.74	71.57	0.51	90.62%
	K	38	5022	538.59	4483.41	35.12	31.37	282.91	1.96	89.28%
	1	51	5840	351.43	5488.57	40.87	38.43	189.63	1.32	93.98%
	2	50	5744	537.92	5206.08	40.19	36.45	266.36	1.87	90.64%
	3	49	5624	571.19	5052.81	39.36	35.39	321.66	2.25	89.84%
	4	51	5340	431.56	4908.44	37.36	34.36	249.74	1.75	91.92%
	5	41	4613	366.02	4246.98	32.28	29.72	206.43	1.45	92.07%
	6	26	2890	157.42	2732.58	20.22	19.14	75.18	0.52	94.55%
Total	9	330	38370	3207.22	35162.78	268.45	246.15	1744.57	12.20	91.64%

### Academy for Integrated Arts Enrollment Report – April 2023

The information below was obtained from the Weighted Average Daily Attendance (WADA) Report available in the School Finance Section Reports on DESE's website. This data is accurate as of May 5, 2023.

District	Regular Term ADA	Summer Term ADA	Total ADA	FRL Count	Total ADA X 30.95 %	Weighted FRL Count	IEP Count	Total ADA X 13.11 %	Weighted IEP Count	LEP Count	Total ADA X 2.39 %	Weighted LEP Count	PK Regular Term ADA	PK Summer Term ADA	WADA
048- 927	232.0000		232.0000	231.05	71.8040	39.8115	20	30.4152		1	5.5448		9	0	280.8115

Please note that the student count number includes all students who attended AFIA at any time during the 22-23 school year. This number also includes students who ended the year at AFIA in May 2022, but did not return in August 2022. For state reporting purposes, these students must remain in our SIS after they are withdrawn and will appear in this report during the 22-23 school year.

ADM: Average Daily Membership

ADA: Average Daily Attendance

WADA: Weighted Average Daily Attendance

### **Dashboard**

### **Academy for Integrated Arts**

July 2022 through April 2023

### Key Performance Indicators

Days of Cash (At Year End)

Target > 45 days

Gross Margin
Margin
6%
Target > -5.0%

Fund Balance (At Year End)

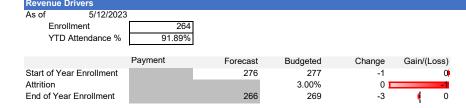
Target > 0,00

<None>

\$1.50m \$1.0m \$500k



Financial Snapshot	Year-	To-Date Financia	ls	At	nnual Forecast		
	Actual	Budget	Variance	Forecast	Budget	Variance	Remaining
Revenue							
Local Revenue	295,382	305,898	(10,516)	354,348	339,580	14,768	58,966
State Revenue	2,526,578	2,009,440	517,138	3,024,167	2,417,415	606,752	497,589
Federal Revenue	712,364	936,994	(224,630)	1,191,433	1,168,611	22,822	479,069
Private Grants and Donations	448,998	609,889	(160,891)	500,000	675,000	(175,000)	51,002
Earned Fees	32,769	5,642	27,126	32,769	6,771	25,998	-
Total Revenue	4,016,091	3,867,863	148,228	5,102,717	4,607,376	495,340	1,086,626
Expenses							
Salaries	2,065,736	2,145,272	79,536	2,442,643	2,574,326	<b>131,683</b>	376,907
Benefits and Taxes	574,998	630,189	55,191	702,114	756,227	54,113	127,116
Staff-Related Costs	68,913	41,705	(27,209)	82,309	50,046	(32,263)	13,395
Rent	175,000	166,667	(8,333)	200,000	200,000	(0)	25,000
Occupancy Service	333,799	232,550	(101,249)	380,502	279,060	(101,442)	46,703
Student Expense, Direct	241,969	306,256	64,286	358,672	367,507	8,835	116,702
Student Expense, Food	149,765	169,518	19,754	187,697	203,422	15,725	37,932
Office & Business Expense	171,369	153,365	(18,004)	223,364	184,038	(39,327)	51,996
Transportation	197,367	300,587	103,220	239,292	360,705	121,413	41,924
Total Ordinary Expenses	3,978,916	4,146,109	167,192	4,816,592	4,975,330	158,738	837,676
Net Operating Income	37,175	(278,246)	315,421	286,125	(367,954)	654,078	248,950
Extraordinary Expenses							
Depreciation and Amortization	-	-	-	-	-	-	-
Interest	-	-	-	-	-	-	-
Facility Improvements	-	-	' -	-	-	-	-
Total Extraordinary Expenses	-	-	-			-	-
Total Expenses	3,978,916	4,146,109	167,192	4,816,592	4,975,330	158,738	837,676
Net Income	37,175	(278,246)	315,421	286,125	(367,954)	654,078	248,950
Cash Flow Adjustments	(12,904)	-	(12,904)	0	-	0	12,904
Change in Cash	24,271	(278,246)	302,517	286,125	(367,954)	654,078	261,854



Attendance %			92%	90.0%	2.4%	}	0	
ADA								1
Regular Term ADA								
Pre-K		9.0	9.3	-	9.3	#DIV/0!		
K-12		232.0	230.5	-	230.5	#DIV/0!		
Subtotal Regular Ter	1	241.0	239.8	246.0	239.8			
Remedial ADA		-	-	-	-	#DIV/0!		
Summer ADA		-	-	4.98	(5.0)		-1	
Total ADA		241.0	239.8	251.0	234.8		_1	
Special Populations Weigh	nts							
Free and Reduced Lunch (	FRL	.)						
% of ADA		99.6%	99.6%	100.0%	-0.4%	(	0	
Count		231.05	229.57	230.45	(0.88)		0	Non-CEP = Last Wednesday in January
Weight		39.8	39.6	40.9	(1.3)	į.	0	,
Individualized Education Pl	lans	(IEP)						
% of ADA		,	10.0%	10%	0.00%	0.0	00%	
Count			23.05	32.02	-8.97	<b>2</b> 8.0	11%	December 1
Weight		-	-	0.8	(0.8)	<b>-1</b> 00.0	00%	
Limited English Proficiency	(LE	EP)			` ,	1		
% of ADA	•	•	0.0%	4%	-4%		-1	
Count			-	(0.79)	1 🗖		-1	Last Wednesday in September
Weight		-	-	`- ′	-	#DIV/0!		·
Total WADA		280.811	279.4	291.8	(12.4)	-4.2	25%	
Per Wada Payment	\$	10,492	\$ 10,492	\$ 8,300	\$ 2,192	<b>26</b> .4	1%	
State Aid Projection	\$	2,902,072	\$ 2,887,252	\$ 2,385,529	\$ 501,723	21.0	3%	
Prior Year Adjustment	\$	4,084	\$ 4,084	\$ -	\$ 4,084	#DIV/0!		
Net State Rev Projection	\$	2,906,156	\$ 2,891,336	\$ 2,385,529	\$ 505,807	21.2	20%	
Classroom Trust Fund	\$	98,670	\$ 98,670	\$ 112,777	\$ (14,107)	12.5		
Basic Formula	\$	2,807,486	2,792,666	\$ 2,272,752	\$ 519,914	<b>22</b> .8		

### **Income Statement**

### **Academy for Integrated Arts**

July 2022 through April 2023

	,	Year-To-Date			Annual		Previous F	orecast
Income Statement	Actual	Budget	Variance	Forecast	Budget	Variance	Prv TOTAL	Diff
Revenue								
Local Revenue	205 202	205 200	(10 516)	254 249	339,580	h 14.760	224 047	20.201
5113 · Proposition C (Sales Tax) Total Local Revenue	295,382 295,382	305,898 305,898	(10,516) (10,516)	354,348 354,348	339,580	14,768	334,047 334,047	20,301
State Revenue	200,002	000,000	(10,010)	001,010	000,000	14,700	001,011	20,001
5311 · Basic Formula	2,340,255	1,888,901	451,354	2,792,666	2,272,769	519,897	2,787,460	5,206
5312 · Transportation	104,064	19,922	84,142	124,890	23,906	100,984	124,890	0
5319 · Classroom Trust Fund	82,259	93,999	(11,740)	98,670	112,799	(14,129)	98,670	0
5333 · School Food Service	0	1,449	(1,449)	1,738	1,738	(0)	1,738	0
5397 · Other State Revenue Total State Revenue	2,526,578	5,169 2,009,440	(5,169) 517,138	6,203 3,024,167	6,203 2,417,415	(0) 606,752	6,203 3,018,961	5,206
Federal Revenue	2,020,010	2,000,440	317,100	0,024,107	2,417,410	000,132	3,010,301	3,200
5412 · Medicaid	45,262	47,121	(1,859)	56,545	56,545	j 0	56,545	0
5422 · ESSER III - ARP Elementary and	298,453	0	298,453	610,597	0	610,597	610,597	0
5424 · CARES ESSER	15,000	508,831	(493,831)	15,000	610,597	(595,597)	15,000	0
5441 · IDEA	0	46,061	(46,061)	65,292	65,292	0	65,292	0
5442 · ECSE 5445 · Food Service-lunch	113,997	915 104,462	(915) 9,535	1,098 125,354	1,098 125,354	(0)	1,098 125,354	0
5446 · Food Service-breakfast	73,343	65,905	7,438	79,086	79,086	0	79,086	Ö
5448 · Food Service-snacks	7,670	0	7,670	9,272	0	9,272	8,825	447
5449 · Food Service-ff&v	5,816	6,483	(668)	7,780	7,780	(0)	7,780	0
5451 · Title I	123,378	135,593	(12,215)	181,391	192,206	(10,815)	181,391	0
5461 · Title Iva	7,876	8,554	(679)	12,126	12,126	(0)	12,126	0
5465 · Title Ii	11,715	13,070 0	(1,355)	18,037 9,855	18,527 0	(490)	18,037	0
5497 · Charter School Start-up Revenue Total Federal Revenue	9,855 712,364	936,994	9,855 (224,630)	1,191,433	1,168,611	9,855	9,855 1,190,986	447
Private Grants and Donations	7 12,004	330,334	(224,000)	1,101,400	1,100,011	22,022	1,130,300	777
5192 · Donations	448,998	609,889	(160,891)	500,000	675,000	(175,000)	500,000	0
Total Private Grants and Donations	448,998	609,889	(160,891)	500,000	675,000	(175,000)	500,000	0
Earned Fees								
5181 · Bac	7,351	5,642	1,709	7,351	6,771	580	7,100	251
5198 · Miscellaneous Revenue Total Earned Fees	25,418 32,769	0 5,642	25,418 27,126	25,418 32,769	0 6,771	25,418 25,998	25,000 32,100	418 669
Total Revenue	4,016,091	3,867,863	148,228	5,102,717	4,607,376	495,340	5,076,094	26,623
Expenses	.,0.0,00.	0,007,000	. 10,220	0,102,111	.,007,070	1	0,0.0,00.	20,020
Salaries								
1111-6111 · ES Instruction Cert FT	958,853	1,182,521	223,668	1,137,981	1,419,025	281,044	1,149,736	11,755
1111-6131 · ES Instruction Supp Pay	124,593	108,333	(16,260)	124,832	130,000	5,168	124,417	-416
1111-6152 · ES Instruction Aides	425,209	286,250	(138,959)	510,669	343,500	(167,169)	515,002	4,333
1221-6111 · Special Education Cert FT 1221-6131 · Special Education Supp Pay	99,604 6,491	99,583 5,000	(21) (1,491)	119,521 6,557	119,500 6,000	(21) (557)	119,521 6,538	0 -19
1411-6121 · Stu Act Cert Subs	13,532	5,000	(13,532)	17,933	0,000	(17,933)	14,593	-3,341
1411-6161 · Student Activities NC PT	750	0	(750)	750	Ö	(750)	750	0
2113-6111 · Social Work Cert Ft	38,096	38,096	` 0′	45,715	45,715	(0)	45,715	0
2113-6131 · Social Work Supp Pay	5,150	2,500	(2,650)	5,150	3,000	(2,150)	5,150	0
2122-6111 · Counseling Cert Ft	16,619	0	(16,619)	22,319	0	(22,319)	20,445	-1,874
2134-6111 · Nursing Cert Ft	38,250	41,125	2,875	46,750	49,350	2,600	46,750	0
2134-6131 · Nursing Supp Pay 2321-6112 · Exec Admin Cert Ft Admin	1,017 121,333	0 121,333	(1,017) (0)	1,017 145,600	0 145,600	(1,017) (0)	1,017 145,600	0
2329-6131 · Other Exec Admin Supp Pay	3,000	2,500	(500)	3,000	3,000	(0)	3,000	0
2329-6151 · Other Exec Admin Nc Ft	37,500	66,667	29,167	45,000	80,000	35,000	45,000	0
2329-6161 · Other Exec Admin Nc Pt	7,049	0	(7,049)	7,649	0	(7,649)	6,618	-1,031
2411-6112 · Building Admin Cert Ft Admi	82,450	82,450	0	98,940	98,940	0	98,940	0
2411-6131 · Buidling Admin Supp Pay	3,000	2,500	(500)	3,000	3,000	0	3,000	0
2411-6412 · Building Admin Tech Supplie	0	307	307	0	369	369	0	0
2511-6131 · Business Office Supp Pay 2511-6151 · Business Office NC FT	3,000 66,300	2,500 66,300	(500)	3,000 79,560	3,000 79,560	0	3,000	0
2542-6131 · Facilities Supp Pay	00,300	2,500	2,500	79,500	3,000	3,000	79,560 0	0
2542-6151 · Facilities No Ft	2,802	16,001	13,199	2,802	19,201	16,399	2,802	0
3812-6161 · Afterschool Nc Pt	11,137	18,805	7,668	14,898	22,566	7,668	14,601	-297
Total Salaries	2,065,736	2,145,272	79,536	2,442,643	2,574,326	131,683	2,451,755	9,111
Benefits and Taxes	400.004	444.000			4=0.000			070
1111-6211 · ES Instruction Cert PRS	120,601	141,903	21,302	142,096	170,283	28,187	142,968	872
1111-6221 · ES Instruction NC PRS 1111-6231 · ES Instruction Soc Sec	39,512 90,805	34,350 97,781	(5,162) 6,976	49,767 107,224	41,220 117,337	(8,547) 10,112	51,150 108,293	1,383 1,069
1111-6232 · ES Instruction Medicare	21,237	22,868	1,631	25,077	27,442	2,365	25,327	250
1111-6241 · ES Instruction Emp Ins	157,906	162,857	4,951	190,352	195,428	5,077	190,816	465
1221-6211 · Special Education Cert PRS	11,950	11,950	0	14,340	14,340	0	14,340	0
1221-6231 · Special Education Soc Sec	6,050	6,484	434	7,289	7,781	492	7,290	1
1221-6232 · Special Education Medicare	1,415	1,517	102	1,705	1,820	115	1,705	0
1221-6241 · Special Education Emp Ins	3,450	8,246	4,796	3,450	9,895	6,445	3,450	0
1411-6231 · Student Activities Soc Sec 1411-6232 · Student Activities Medicare	885 207	0	(885)	1,167 273	0	(1,167)	1,072 251	-95 -22
2113-6211 · Social Work Cert PRS	207	4,572	(207) 4,572	273 914	5,486	(273) 4,572	1,371	-22 457
2113-6221 · Social Work No Prs	4,571	4,572	(4,571)	4,571	0,400	(4,571)	4,114	-457
2113-6231 · Social Work Soc Sec	2,681	2,517	(164)	3,154	3,020	(133)	3,154	0
2113-6232 · Social Work Medicare	627	589	(38)	738	706	(31)	738	0
2113-6241 · Social Work Emp Ins	0	4,123	4,123	0	4,948	4,948	0	0
2122-6211 · Counseling Cert Prs	1,994	0	(1,994)	2,678	0	(2,678)	2,453	-225
2122-6231 · Counseling Soc Sec	1,030	0	(1,030)	1,384	0	(1,384)	1,268	-116

0400 6000	Counceling Medicare	244	0	(244)	204	0		(224)	206	27
	· Counseling Medicare · Nursing Cert Prs	241 4,590	0 4,935	(241) 345	324 5,610	0 5,922		(324) 312	296 5,610	-27 0
	· Nursing Soc Sec	2,335	2,550	215	2,862	3,060		198	2,875	13
	· Nursing Medicare	546	596	50	669	716	İ	46	672	3
	· Nursing Emp Ins	4,600	4,123	(477)	5,750	4,948		(802)	5,750	Ö
	· Exec Admin Cert Prs	14,560	14,560	` o´	17,472	17,472		o´	17,472	0
	· Exec Admin Soc Sec	6,856	7,523	667	8,361	9,027	Ī	667	8,427	67
2321-6232	· Exec Admin Medicare	1,603	1,759	156	1,955	2,111		156	1,971	16
2321-6241	· Exec Admin Emp Ins	5,750	4,123	(1,627)	6,900	4,948	•	(1,952)	6,900	0
2321-6261	· Exec Admin Wc	13,157	24,183	11,026	29,020	29,020		(0)	29,020	0
2321-6271	· Exec Admin Unemp	0	1,913	1,913	0	2,296	)	2,296	2,296	2,296
	· Other Exec Admin Nc Prs	4,500	8,000	3,500	5,472	9,600	•	4,128	5,508	36
	· Other Exec Admin Soc Sec	2,764	4,288	1,524	3,266	5,146	ļ	1,880	3,221	-46
	· Other Exec Admin Medicare	646	1,003	357	764	1,203	į	440	753	-11
	Other Exec Admin Emp Ins	5,750	8,246	2,496	6,900	9,895	ļ	2,995	6,900	0
	· Building Admin Cert Prs	9,894	9,894	0	11,873	11,873		0	11,873	0
	Building Admin Soc Sec	5,123	5,267	144	6,146	6,320		175	6,162	17
	· Building Admin Medicare	1,198	1,232	34	1,437	1,478		41	1,441	4
	· Building Admin Emp Ins	5,750	4,123	(1,627)	6,900	4,948	•	(1,952)	6,900	0
	Business Office NC PRS	7,956	7,956	127	9,547	9,547		150	9,547	0
	Business Office Soc Sec	4,139	4,266	127	4,961	5,119		158	4,977	16
	Business Office Medicare	968 5,750	998 4,123	(1.627)	1,160 6,900	1,197 4,948	Ì	37 (1,952)	1,164 6,900	4 0
	Business Office Emp Ins     Facilities Nc Prs	333	1,920	(1,627) 1,587	333	2,304	Ţ	1,971	333	0
	· Facilities Soc Sec	174	1,147	973	174	1,377		1,203	174	0
	· Facilities Medicare	41	268	228	41	322	Ţ.	281	41	0
	· Afterschool Soc Sec	691	1,166	475	924	1,399		475	905	-18
	· Afterschool Medicare	162	273	111	216	327		111	212	-4
	its and Taxes	574,998	630,189	55,191	702,114	756,227	<u> </u>	54,113	708,058	5,945
Staff-Related		0,000	000,100	00, 10 1	. 02,	.00,22.	<del>-</del>	0.,0	. 00,000	0,0.0
	· Professional Developement	61,428	26,129	(35,298)	63,000	31,355	ı.	(31,645)	63,000	0
	· Professional Developement	1,394	8,333	6,939	10,000	10,000	7	0	10,000	Ō
	· Professional Developement	4,318	6,029	1,711	7,235	7,235		(0)	7,235	0
	· Recruitment	1,774	963	(811)	1,774	1,156		(618)	1,605	-169
2642-6411	· Recruitment Supplies	0	250	250	300	300		` o´	300	0
	Related Costs	68,913	41,705	(27,209)	82,309	50,046	<u> </u>	(32,263)	82,140	-169
Rent				` '			į	, , ,		
2542-6333	· Facilities Rent	175,000	166,667	(8,333)	200,000	200,000		(0)	200,000	0
Total Rent		175,000	166,667	(8,333)	200,000	200,000	i	(0)	200,000	0
Occupancy S										
	· Facilities Data Process	422	0	(422)	422	0	į	(422)	422	0
	· Facilities Prof Serv	410	848	438	1,017	1,017		0	1,017	0
	· Facilities Janitorial	82,134	50,642	(31,492)	106,629	60,770	•	(45,859)	106,629	0
	Facilities Rep & Mait	32,529	8,333	(24,196)	33,903	10,000	•	(23,903)	34,215	312
	· Facilities Water/sewer	5,710	5,583	(126)	6,700	6,700		(0)	6,700	0
	· Facilities Trash Remov	8,848	3,333	(5,515)	10,403	4,000	•	(6,403)	10,403	0
	· Facilities Tech Rental	11,969	8,675	(3,294)	14,425	10,410	•	(4,015)	15,159	734
	· Facilities Oth Prop Serv	43,966	34,720	(9,246)	44,366	41,664	•	(2,702)	43,773	-593
	· Facilities Prop Insur	50,264	41,667	(8,597)	50,264	50,000	į	(264)	50,264	0
	· Facilities Phone/internet	1,185	750	(435)	1,321	900		(421)	1,319	-2
	· Facilities Supplies	34,396	23,609	(10,787)	36,796	28,331	1	(8,465)	35,025	-1,771
	· Facilities Electricity	57,728	50,197	(7,531)	69,223	60,236	•	(8,987)	69,675	452
	· Facilities Gas	1,426	1,667 2,527	240	2,000 3,032	2,000 3,032		(0)	2,000	0
	Security Svcs Prof Servoncy Service	2,812 333,799	232,550	(286)	380,502	279,060		(0) (101,442)	3,032 379,634	-868
Student Expe		333,799	232,330	(101,249)	300,302	219,000	-	(101,442)	37 3,034	-000
	· ES Instruction Instruc Serv	0	52,332	52,332	0	62,799		62,799	0	0
	· ES Instruction Prof Serv	81,321	85,512	4,191	102,615	102,615		0	102,615	0
	· ES Instruction Supplies	32,385	20,584	(11,801)	40,000	24,701		(15,299)	40,000	Ō
	· ES Instruction Tech Supplies	32,877	27,163	(5,714)	32,877	32,595		(281)	32,472	-405
	· Textbooks	8,167	11,500	3,333	13,800	13,800		(0)	13,800	0
	· ES Instruction Tech Equipm	2,418	0	(2,418)	2,418	0	į.	(2,418)	2,418	0
1191-6411	· Summer Instruction Supplies	0	4,167	4,167	0	5,000	j	5,000	5,000	5,000
1221-6319	· Special Education Prof Serv	1,925	3,396	1,471	4,075	4,075		(0)	4,075	0
1221-6411	· Special Education Supplies	0	4,167	4,167	5,000	5,000	İ	(0)	5,000	0
1411-6319	· Student Activities Prof Serv	25,181	1,270	(23,911)	35,000	1,524	1	(33,476)	35,000	0
	· Student Activities Supplies	2,169	417	(1,752)	4,000	500	•	(3,500)	4,000	0
	· Stu Act Snack	563	0	(563)	1,000	0	•	(1,000)	1,000	0
	· Student Athletics Supplies	0	4,167	4,167	5,000	5,000		(0)	5,000	0
	· Tuition for Sped Pri - Prof Se	23,975	25,000	1,025	30,000	30,000		0	30,000	0
	· Social Work Prof Serv	0	445	445	534	534	į	0	534	0
	Other Prof/technical Service	0	123	123	147	147		0	147	0
	· Nursing Supplies	1,665	583	(1,082)	1,993	700	•	(1,293)	1,792	-201
	Psychological Testing Prof S	3,796	2,205	(1,590)	3,796	2,646	1	(1,149)	2,646	-1,149
	<ul> <li>Speech Pathology Prof Serv</li> <li>Ot Services Prof Serv</li> </ul>	22,535 2,447	27,245 10,473	4,710 8,026	32,694 12,568	32,694 12,568		0	32,694 12,568	0
	· Library Books	2,447	10,473	10,030	12,568	12,568		0	12,568	0
	· Other School Administration	0	833	833	1,000	1,000		(0)	1,000	0
	· Early Childhood Program	0	8,333	8,333	10,000	10,000		0	10,000	0
	· Afterschool Prof Serv	0	0,333	0,333	0,000	0		0	0,000	0
	· Afterschool Supplies	547	0	(547)	547	0		(547)	547	0
	· Parental Involvement Prof S	0	2,500	2,500	3,000	3,000		0	3,000	0
	· Parental Involvement Suppli	ő	3,811	3,811	4,573	4,573		0	4,573	Ö
	nt Expense, Direct	241,969	306,256	64,286	358,672	367,507	<u> </u>	8,835	361,917	3,245
i otai otaac					•		F	•	•	•
Student Expe				- 1						
Student Expe 2562-6411	ense, Food · Food Preparation Supplies	0	667	667	800	800	1	0	800	0
Student Expe 2562-6411 2562-6471	ense, Food · Food Preparation Supplies · Food Preparation Snack	0	8,352	8,352	0	10,022		10,022	0	0
Student Expe 2562-6411 2562-6471	ense, Food · Food Preparation Supplies							-		
Student Expe 2562-6411 2562-6471	ense, Food · Food Preparation Supplies · Food Preparation Snack	0	8,352	8,352	0	10,022		10,022	0	0

2563-6471 · Food Supplies	149,354	250	(149,104)	186,486	300		(186,186)	186,486	0
Total Student Expense, Food	149,765	169,518	19,754	187,697	203,422	1	15,725	187,697	0
Office & Business Expense									
2114-6319 · Student Support Services Pr	7,846	5,875	(1,971)	7,846	7,050	•	(796)	7,846	0
2114-6412 · Technology Supplies	0	3,321	3,321	3,985	3,985	ļ	0	3,985	0
2311-6315 · Board Audit	14,295	8,333	(5,962)	14,295	10,000	i i	(4,295)	12,795	-1,500
2311-6317 · Board Legal	7,196	7,167	(29)	8,600	8,600	ļ	(0)	8,600	0
2311-6319 · Board Prof Serv	0	59	59	70	70	į	(0)	70	0
2321-6316 · Exec Admin Data Process	974	8,230	7,256	9,876	9,876	į	(0)	9,876	0
2321-6319 · Exec Admin Prof Serv	17,216	10,943	(6,274)	17,916	13,131		(4,785)	17,948	32
2321-6343 · Exec Admin Travel	1,465	0	(1,465)	1,465	0	į.	(1,465)	1,465	0
2321-6352 · Exec Admin Liability Insuran	0	1,727	1,727	2,072	2,072	į	(0)	2,072	0
2321-6371 · Exec Admin Dues And Men	1,675	0	(1,675)	1,675	Ō	i i	(1,675)	1,675	0
2321-6411 · Exec Admin Supplies	19,620	4,331	(15,288)	21,620	5,198	į	(16,422)	18,000	-3,620
2322-6411 · Community Services Supplie	1,910	288	(1,622)	2,300	346	1	(1,954)	500	-1,800
2329-6319 · Other Exec Admin Prof Serv	2,452	5.418	2,965	6,501	6.501	]	(0)	6,501	0
2329-6411 · Other Exec Admin Supplies	118	3.750	3,632	4.500	4.500	į	0	4,500	0
2331-6319 · It Admin Prof Serv	32.765	32,207	(559)	39.221	38.648	į	(573)	38.648	-573
2331-6352 · IT Admin Liability Insurance	02,7.00	3,333	3,333	4,000	4,000	į	0.07	4,000	0
2411-6411 · Building Admin Supplies	0	424	424	508	508	į	(0)	508	0
2511-6319 · Business Office Prof Serv	8,213	5,850	(2,363)	9,808	7,020	į	(2,788)	9,816	8
2511-6334 · Business Office Equip Rent	105	0,000	(105)	105	0	]	(105)	105	0
2511-6411 · Business Office Supplies	5,519	2.110	(3,408)	7.000	2.532	j	(4,468)	7.000	0
2525-6319 · Financial Accounting Service	50,000	50.000	(0, 100)	60.000	60.000	]	(-1,-100)	60.000	0
Total Office & Business Expense	171,369	153,365	(18,004)	223,364	184,038		(39,327)	215,911	-7.453
Transportation	17 1,000	100,000	(10,004)	220,004	104,000	•	(00,021)	210,511	-7,400
2551-6341 · Transportation - Contracted,	186,260	296,093	109,834	228,000	355,312	i	127,312	228,000	0
2551-6342 · Transportation - Contracted,	2,292	250,055	(2,292)	2,292	0		(2,292)	979	-1,313
2553-6341 · Transportation - Contracted,	8,816	4.494	(4,322)	9.000	5.393	]	(3,607)	9.000	0
Total Transportation	197,367	300.587	103,220	239.292	360.705		121,413	237,979	-1,313
Total Expenses	3,978,916	4,146,109	167,192	4,816,592	4,975,330		158,738	4,825,091	8.499
let Income	37,175	(278,246)	315,421	286,125	(367,954)		654,078	251,003	35.122
Net income	37,173	(210,240)	313,421	200,123	(307,934)	į	034,070	231,003	33,122
Cash Flow Statement	Actual	Budget	Variance	Forecast	Budget	Variance		Prv TOTAL Dif	f
let Income	37,175	(278,246)	315,421	286,125	(367,954)		654,078	251,003	35,122
Cash Flow Adjustments									
Other Operating Activities									
1598 · Remove from operations	0	0	0	0	0		0	0	0
2156 · Group Health And Life Insurance F	(10,768)	0	(10,768)	0	0	ļ	0	0	0
2161 Other Deductions Payable, incl Ga	705	0	705	(0)	0	į	(0)	0	0
2162 · Tax Sheltered Annuity Payable	306	0	306	0	0	ļ	0	0	0
2163 · Other Insurance Payable	1,551	0	1,551	(0)	0	į	(0)	0	0
	(4,698)	0	(4,698)	0	0	ļ	O´	0	0
2164 · Mo Suta Payable			(40.004)	0	0		0	0	0
2164 · Mo Suta Payable Total Other Operating Activities	(12,904)	0	(12,904)						
	(12,904)	0	(12,904)	Ü		•			
Total Other Operating Activities	(12,904)	0	(12,904)	0	0	I	0	0	0
Total Other Operating Activities Facilities Project Adjustments 1599 · Add to facilities	, , ,	•	` ' '		0	<u> </u>	0	0	0
Total Other Operating Activities Facilities Project Adjustments 1599 · Add to facilities Total Facilities Project Adjustments	0	0	0	0			-		
Total Other Operating Activities Facilities Project Adjustments 1599 · Add to facilities	0	0	0	0	0		0	0	0

Mary College	Forecast Income Statement Jun Revenue	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	TOTAL	External Notes Comments	Previous Fo	Diff
Part	Local Revenue 5113 · Proposition C (Sales Ta																
Column	State Revenue																
Professionary	5319 · Classroom Trust Fund	8,254	8,257	8,258	7,017	9,323	8,259	8,222	8,225	8,222		8,205	8,205	98,670		98,670	0
Property	5397 · Other State Revenue	0	0	0	0	0	0	0	0	0	0	3,101	3,101	6,203		6,203	0
1	Federal Revenue																
Second   S	5422 · ESSER III - ARP Eleme	0	Ó	0	Ö	Ō	0	199,886	57,577	Ö		156,072	156,072	610,597	\$200k in ESSER II poeting in January	610,597	(0)
Mary   Mary	5441 · IDEA	0	0	0	0	0	0	0	0	0		32,646	32,646	65,292	personal content in posting in during y	65,292	0
Second Column							8,237				8,245						0
Mary   Mary	5449 · Food Service-ff&v	5,816	0	0	0	0	0	0	0	0	0	982	982	7,780		7,780	0
Part	5461 · Title Iva	0	0	2,066	0	0	3,270	0	1,840	0	700	2,125	2,125	12,126		12,126	(0)
Professor   Prof	5497 · Charter School Start-up	0	9,855	0	0	0	0	0	0	0	0	0	0	9,855		9,855	0
Description   100	Private Grants and Donations																
The part of the column   Col	Earned Fees	134,756	166,524					44,500					25,501				
Teacher   Major   Ma	5198 · Miscellaneous Revenue	17,909	4,760	159	189	154	298	740	277	239	694	0	0	25,418		25,000	418
Section	Total Revenue										1,016 418,777			32,769 5,102,717			
Statistication   1968   1968   1968   1969	Salaries	97 794	94 992	93 981	93 981	93 981	93,981	95 881	99 631	97 507	97 123	89 564	89 564	1,137.981		1,149 736	11,755
March   Marc	1111-6131 · ES Instruction Su	572	28,583	28,286	499	56,088	8,776	320	326	609	535	119	119	124,832		124,417	(416)
March   Marc	1221-6111 · Special Education 1221-6131 · Special Education	9,958 0	9,958 0	9,958 2,187	9,958 21	9,958 4,077	9,958 110	9,979 0	9,958 10	9,958 33	9,958 52	9,958 33	9,958 33	119,521 6,557		119,521 6,538	(0) (19)
	1411-6161 · Student Activities	0	Ó	Ö	0	0	750	0	0	0	0	0	0	750		750	0
	2113-6131 · Social Work Supp	0	2,100	1,000	0	2,000	0	0	0	50	0	0	0	5,150		5,150	0
Second Column	2134-6111 · Nursing Cert Ft	0	4,250	4,250	4,250	4,250	4,250	4,250	4,250	4,250	4,250	4,250	4,250	46,750		46,750	0
Company	2321-6112 · Exec Admin Cert 2329-6131 · Other Exec Admin	0	12,133 0	12,133	0	12,133	12,133 0	0	0	0	0	0	0	145,600		145,600 3,000	
Second Column	2329-6161 · Other Exec Admir	1,440	927	187	235	80	352	200	716	1,581	1,331	300	300	7,649		6,618	(1,031)
Section   Column	2411-6131 · Buidling Admin S	0	0	1,000	0	2,000	0	0	0	0	0	0	0	3,000		3,000	0
Part   Part	2511-6131 · Business Office S	0	0	1,000	Ö	2,000	0	0	0	0	0	0	0	3,000		3,000	0
Part   Part	2542-6131 · Facilities Supp Pa	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0
111-16-16   Elemento   1,726   1186	3812-6161 · Afterschool Nc Pt Total Salaries		281			878											
111-16-22   111-	1111-6211 · ES Instruction Ce																
111-15-16-15     1-1-15-16     1-1-15-16     1-1-15-16     1-1-15-16     1-1-15-16     1-1-15-16     1-1-15-16     1-1-15-16     1-1-15-16     1-1-15-16     1-1-15-16     1-1-15-16     1-15-16     1-15-16     1-1-15-16     1-15-16     1-15-16     1-1-15-16     1-15-16     1-1-15-16     1-1-15-16     1-1-15-16     1-1-15-16     1-1-15-16     1-1-15-16     1-1-15-16     1-1-15-16     1-1-15-	1111-6231 · ES Instruction So	7,832	10,071	10,197	8,408	12,015	8,955	8,451	8,471	8,126	8,278	8,222	8,197	107,224		108,293	1,069
121-16-121   Separate Execution   123   Sale   667   Sale   678   Sale   677   678	1111-6241 · ES Instruction En	11,422	11,422	11,422	19,942	16,223	23,515	16,223	16,223	15,758	15,758	16,223	16,223	190,352		190,816	465
1411-1-121   Souter April   1411-1-121   Souter April   1411-1-121	1221-6232 · Special Education	528 124	124	667 156	125	785 183	539 126	144	616 144	618 144	619	619	619 145	1,705		1,705	0
2115-211   South Van Care   0	1411-6231 · Student Activities	0	0	0	20	117	259	71	83	99	236	141	141	1,167		1,072	(95)
2113-2221 Social Work Sec.	2113-6211 · Social Work Cert	0	Ó	0	Ö	0	0	0	0	0	0	457	457	914		1,371	457
2222-6421   Consenting Cent   0	2113-6231 · Social Work Soc	236	366	298	236	360	236	236	236	239	236	236	236	3,154		3,154	(0)
221-2422   Consenting Medical   0	2113-6241 · Social Work Emp 2122-6211 · Counseling Cert I	0	0	0	0	0	0 26	0 430	0 444	0 528	0 567	0 342	0 342	0 2,678		0 2,453	(225)
2114-6223 - Numing Sec Sec. 0 3 30 264 243 256 261 250 250 250 250 250 250 250 250 250 250	2122-6232 · Counseling Media	0	Ó	0	Ö	Ō	3	52	54	64	68	41	41	324		296	(27)
2214-6211- Send-Ammir Certy Ind. 2214-6211- Send-Ammir Certy Ind.	2134-6231 · Nursing Soc Sec	0	310	264	243	256	261	250	250	250	250	264	264	2,862		2,875	13
2221-4231 - Eme Admin Model   688	2134-6241 · Nursing Emp Ins	0	0	0	1,150	575	575	575	575	575	575	575	575	5,750		5,750	0
2221-42271 Excellment   1.6   0   0   0   0   0   0   0   0   0	2321-6231 · Exec Admin Soc	686	686	686	686	686	686	686	686	686	686	752	752	8,361			
2229-6221 - Ohmer Euce Admir   450	2321-6261 · Exec Admin Wc	0	6,982	6,175	0	0	0	0	0	0	0	7,932	7,932	29,020		29,020	(0)
2239-6242 - Ohne Faxe Admin 71 64 67 53 80 55 53 60 73 60 59 90 744 753 (11) 2239-6341 - Ohne Faxe Admin 575 575 575 575 575 575 575 575 575 57	2329-6221 · Other Exec Admir	450	450	450	450	450	450	450	450	450	450	486	486	5,472		5,508	36
2411-4211 - Building Admin   989   98   989   989   989   989   989   989   989   989   989   989   98	2329-6232 · Other Exec Admir	71	64	67	53	80	55	53	60	73	69	59	59	764		753	(11)
2411-0241 - Building Admin E	2411-6211 · Building Admin C 2411-6231 · Building Admin S	989 492	989 492	989 554	989 494	989 618	989 494	989 494	989 494	989 494	989 494	989 511	989 511	11,873 6,146		11,873 6,162	0 17
2511-0231 - Business Offices   395   395   457   395   519   395   395   395   395   395   395   396   411   411   4,961   4,977   16   42   2511-0232   20   20   20   20   20   20   20	2411-6241 · Building Admin E	575	575	575	575	575	575	575	575	575	575	575	575	6,900		6,900	0
2511-6241 - Business Office   575	2511-6231 · Business Office S	395	395	457	395	519	395	395	395	395	395	411	411	4,961		4,977	16
2542-6231 - Facilities Roo Sec   51   76   42   3   2   0   0   0   0   0   0   0   0   0	2511-6241 · Business Office E	575	575	575	575	575	575	575	575	575	575	575	575	6,900		6,900	0
3812-6232 - After-school Mender  0	2542-6231 · Facilities Soc Sec 2542-6232 · Facilities Medicar	51 12	76 18	42 10	3 1	2	0	0	0	0	0	0	0	174 41		174 41	0
Sulf-Related Costs   1273-03   1,534   6,021   2,849   4,196   7,650   5,500   200   12,348   8,400   7,86   7,865   83,000   0   2213-8431-Professional Dev   0   130   0   0   168   1,096   0   0   0   0   4,303   4,303   1,000   1,459   1,1459   7,235   0   0   2213-8411-Professional Dev   0   0   0   0   0   0   0   0   0	3812-6232 · Afterschool Medic	0	4	21	16	13	16	17	21	22	32	27	27	216		212	(4)
2213-6431 - Professional Dev 0 130 0 168 1,096 0 0 0 0 4,303 4,303 10,000 10,000 0 7,224 231 - 441 - 14 - 14 - 14 - 14 - 14 - 14 -	Staff-Related Costs																
2842-6391 - Recruitments   0	2213-6343 · Professional Dev	0	130	0	0	168	1,096	0	0	0	0	4,303	4,303	10,000		10,000	0
Total Rent   25,000	2642-6391 · Recruitment 2642-6411 · Recruitment Sup	0	0	0	0	0	0	0	1,605 0	0	169 0	0 150	0 150	1,774 300		1,605 300	(169) 0
Total Rent 25,000 25,000 25,000 25,000 25,000 25,000 0 12,500 12,500 12,500 12,500 12,500 12,500 12,500 12,500 200,000 200,000 25,000 25,000 25,000 25,000 25,000 25,000 25,000 12,500 12,500 12,500 12,500 12,500 12,500 200,000 200,000 254,26316 - Facilities Particles Particles Fore 0 410 0 0 0 0 184 92 0 146 0 0 0 304 304 1,017 1,017 0 0 2542,6331 - Facilities Junitoria 1,845 1,899 11,475 10,295 10,295 8,976 7,252 9,516 10,295 10,295 12,248 12,248 12,248 106,529 10,8529 (0) 2542,6332 - Facilities Rept N 5,007 189 0 433 0 2,159 0 2,590 22,337 375 887 887 33,303 34,215 312 2542,6335 - Facilities Particles Partic	Total Staff-Related Costs Rent											6,698	6,698	82,309			
2542-6316 - Facilities Data Pr 0 0 0 0 184 92 0 146 0 0 0 422 422 0 1244 1254 1254 1254 1254 1255 1255 1424 1255 1255	Total Rent																
2542-6331 - Facilities Juniford   1,845   1,889   11,475   10,295   10,295   8,976   7,252   0,516   10,295   10,295   10,295   12,248   12,248   12,648   16,629   (0)   2542-6335 - Facilities Waterly   345   160   434   762   767   805   566   500   625   724   495   495   6,700   6,700   0   2242-6336 - Facilities Traish R   823   698   920   1,010   884	2542-6316 · Facilities Data Pri																
2542-6335 - Facilities Teach Rq 2,048 777 777 1,752 0 777 1,664 1,718 1,228 1,	2542-6331 · Facilities Janitoria	1,845	1,889	11,475	10,295	10,295	8,976	7,252	9,516	10,295	10,295	12,248	12,248	106,629		106,629	(0)
2642-6339 - Facilities Teich Rd 2,048 777 777 1,752 0 777 1,664 1,718 1,228 1,228 1,228 1,228 1,228 1,245 New Toehiba Contract monthly payment 15,159 734 2542-6351 - Facilities Prop ng 16,755 4,199 4,189 4,189 4,189 4,189 4,189 4,189 4,189 4,189 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	2542-6335 · Facilities Water/s 2542-6336 · Facilities Trash R	365 823	160 698	434 920	762 1,010	767 884	805 884	566 884	500 884	625 884	724 980	495 778	495 778	6,700 10,403		6,700 10,403	0 (0)
	2542-6339 · Facilities Oth Pro	1,563	23,456	7,424	1,365	868	2,301	493	4,278	1,425	793	200	1,228 200	44,366		ve 43,773	734 (593)

2542-6481 · Facilities Electrici 2542-6482 · Facilities Gas 2546-6319 · Security Svcs Pro	614 5,016 130 0	15,037 4,868 119 2,572	450 6,892 114 180	7,171 6,467 146 0	513 5,753 132 0	3,548 5,408 156 0	1,195 6,921 140 0	1,259 5,326 161 60	1,638 5,391 163 0	2,971 5,686 166 0	1,200 5,748 287 110	1,200 5,748 287 110	36,796 69,223 2,000 3,032		35,025 69,675 2,000 3,032	
Total Occupancy Service Student Expense, Direct	34,349	54,579	33,109	33,683	23,478	29,424	23,472	30,016	48,397	23,291	23,352	23,352	380,502		379,634	
1111-6311 · ES Instruction Ins	0	. 0	. 0	. 0	. 0	0	. 0	0	0	0	. 0	0	0		0	
1111-6319 · ES Instruction Pro	11,517 3,906	12,382 8.114	3,449 5,570	18,032 3 111	2,717 106	4,045 3.941	3,317 2,384	4,499 2.485	18,317 1,820	3,049 950	10,647 3,808	10,647 3,808	102,615 40,000		102,615 40,000	
1111-6411 · ES Instruction Su	12,093	8.878	810	2.358	277	541	2,304	1.052	4.263	405	3,000	3,000	32.877		32.472	
1111-6431 · Textbooks	0	1,276	0	0	6,265	0	0	483	143	0	2,816	2,816	13,800		13,800	
1111-6543 · ES Instruction Te	0	0	0	0	0	0	0	2,418	0	0	0	0	2,418	1	2,418	
1191-6411 · Summer Instructi	0	0	0	0	0	0	0	0	0	0	0	0	0		5,000	
1221-6319 · Special Education	0	0	0	1,490	0	0	0	0	0	435	1,075	1,075	4,075		4,075	
1221-6411 · Special Education	0	0	0	0	0	. 0	0	0	0	0	2,500	2,500	5,000		5,000	
1411-6319 · Student Activities	0	0	0	2,620 277	0 222	17,138 1.373	(2,132)	0 125	275 171	7,280	4,910 916	4,910 916	35,000 4.000		35,000 4,000	
1411-6411 · Student Activities 1411-6471 · Stu Act Snack	0	0	0	0	222	1,373	0	125	1/1	ö	219	219	1,000		1,000	
1421-6411 · Student Athletics	0	ő	0	0	0	0	0	ő	0	ő	2.500	2.500	5,000		5.000	
1933-6319 · Tuition for Sped F	0	0	1,400	3,675	3,500	3,325	0	0	8,925	3,150	3,013	3,013	30,000		30,000	
2113-6319 · Social Work Prof	0	0	0	0	0	0	0	0	0	0	267	267	534		534	
2132-6319 · Other Prof/techni	0	0	0	0	0	0	0	0	0	0	74	74	147		147	
2134-6411 · Nursing Supplies	0	0	0	653	0	410	111	254	0	238	164	164	1,993		1,792	
2142-6319 · Psychological Ter	0		0	0 2.568	0	1,981	0	0 3.510	0	1,814	5.080	5.080	3,796 32.694		2,646 32.694	
2152-6319 · Speech Patholog 2162-6319 · Ot Services Prof	0	5,148 0	0	2,568 675	3,055 439	4,063 270	0 439	3,510 489	0	4,192 135	5,080	5,080	32,694 12.568		32,694 12,568	
2222-6441 · Library Books	0	0	0	0/5	439	0	439	409	0	135	6.018	6.018	12,300		12,300	
2491-6411 · Other School Adn	0	0	0	0	0	0	0	0	0	0	500	500	1,000	I	1,000	
3511-6319 · Early Childhood F	ō	Ö	ō	ō	0	0	0	Ö	ō	ő	5,000	5,000	10,000	1	10,000	
3812-6319 · Afterschool Prof S	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	
3812-6411 · Afterschool Supp	0	0	0	547	0	0	0	0	0	0	0	0	547	I	547	
3912-6319 · Parental Involvem	0	0	0	0	0	0	0	0	0	0	1,500	1,500	3,000	I	3,000	
3912-6411 · Parental Involvem	27,515	35.797	11.228	36.004	16,580	37.649	6.318	15.316	33.914	21.647	2,286	2,286	4,573	-	4,573	_
Total Student Expense, Direct Student Expense, Food	27,515	35,797	11,228	36,004	16,580	37,649	6,318	15,316	33,914	21,647	58,351	58,351	358,672	1	361,917	
2562-6411 · Food Preparation	0	0	0	0	0	0	0	0	0	0	400	400	800	1	800	
2562-6471 Food Preparation	0	0	0	0	0	0	0	0	0	ő	0	0	"0	1	0	
2563-6391 · Food Delivery Co	ō	ő	0	0	0	0	410	0	0	0	0	0	410	1	410	
2563-6471 Food Supplies	0	0	12,521	20,621	21,231	17,504	6,029	38,080	14,951	18,417	18,566	18,566	186,486		186,486	
Total Student Expense, Food	0	0	12,521	20,621	21,231	17,504	6,440	38,080	14,951	18,417	18,966	18,966	187,697		187,697	
Office & Business Expense	_	_					_						١	1	1	
2114-6319 · Student Support : 2114-6412 · Technology Supp	0	0	7,846	0	0	0	0	0	0	0	1,000	1.003	7,846 3,985	1	7,846 3.985	
2114-6412 · Technology Suppl 2311-6315 · Board Audit	0	0	0	0	0	0 12 075	0	0 720	0	1.500	1,992	1,992	3,985 14.295	I	3,985 12 795	
2311-6315 · Board Audit 2311-6317 · Board Legal	429	1,170	3,432	195	631	819	0	720	82	438	702	702	8,600	I	8,600	
2311-6319 · Board Prof Serv	429	0	3,432	195	031	0 19	0	0	0	430	35	35	70	1	70	
2321-6316 · Exec Admin Data	270	0	0	270	0	135	135	165	0	0	4,451	4,451	9,876	1	9,876	
2321-6319 · Exec Admin Prof	1,874	1,061	902	1,070	1,223	1,027	2,494	4,496	2,752	318	350	350	17,916	I	17,948	
2321-6343 · Exec Admin Trav	0	0	0	0	0	1,446	0	0	19	0	0	0	1,465	I	1,465	
2321-6352 · Exec Admin Liabi	0	0	0	0	0	0	0	0	0	0	1,036	1,036	2,072	I	2,072	
2321-6371 · Exec Admin Due 2321-6411 · Exec Admin Supt	0 1,205	0 646	0 2.888	275 4.353	115 839	2.693	1.045	0 2.441	1,285 1.844	1.665	1.000	0 1,000	1,675 21,620	1	1,675 18.000	
2321-6411 · Exec Admin Supp 2322-6411 · Community Servi	1,205	646	2,888	4,353 75	839 250	2,693	1,045	2,441	1,844	1,665	1,000	1,000	21,620	1	18,000	
2329-6319 · Other Exec Admir	108	789	146	191	127	203	126	329	270	1,458	2,024	2,024	6,501	1	6,501	
2329-6411 · Other Exec Admir	118	0	0	0	0	0	0	0	0	0	2,191	2,191	4,500	I	4,500	
2331-6319 · It Admin Prof Ser	0	6,315	3,318	0	6,635	3,318	3,318	3,318	3,318	3,228	3,228	3,228	39,221	I	38,648	
2331-6352 · IT Admin Liability	Ö	0	0	0	0	0	0	0	0	0	2,000	2,000	4,000	1	4,000	
2411-6411 · Building Admin S	0	0	0	0	0	0	0	0	0	0	254	254	508	1	508	
2511-6319 · Business Office F	849	1,195	694	689	941	767	854	753	715	756	798	798	9,808	1	9,816	
2511-6334 · Business Office E 2511-6411 · Business Office S	0 105	0 1.139	0 834	0 728	105 172	0 360	0 799	0 475	0 367	0 539	0 741	0 741	105 7,000	I	105 7.000	
2511-6411 · Business Office S 2525-6319 · Financial Accoun	105 5,000	1,139 5,000	834 5,000	728 5,000	172 5,000	360 5,000	799 5,000	475 5,000	367 5,000	539 5,000	741 5,000	741 5,000	7,000 60,000	I	7,000 60.000	
Total Office & Business Expen	9,958	17,315	25,186	12,847	16,038	27,842	13,770	17,696	15.651	15,066	25,998	25,998	223,364	<del>                                     </del>	215.911	_
Transportation	0,000	,0.0	20,100	12,041	10,000	21,072	10,110	,000	10,001	10,000	20,000	20,000	220,004	1	210,011	
2551-6341 · Transportation - 0	0	15,026	0	0	47,775	1,256	65,706	1,008	52,499	2,990	20,870	20,870	228,000	1	228,000	
2551-6342 · Transportation - 0	0	282	0	0	0	697	0	0	0	1,313	0	0	2,292	1	979	
2553-6341 · Transportation - 0	0	2,538	0	348	2,078	876	0	520	868	1,588	92	92	9,000		9,000	
Total Transportation Total Expenses	334,066	17,846 432.841	397,491	348 382.838	49,853 480.171	2,829 392.197	65,706 388,217	1,528 371.309	53,367 439.805	5,891 359.981	20,962 419,077	20,962 418,599	239,292 4.816.592	-	237,979 4.825.091	
l otal Expenses	70.243	(48,210)	(123,360)	382,838 43.671	(186,186)	392,197	388,217 286,865	371,309	(135,147)	359,981 58,796	419,077 124,236	418,599 124,714	4,816,592 286,125		4,825,091	_
tet moonie		(40,210)	(120,000)							50,780	124,200				201,000	
Cash Flow Statement Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	TOTAL	External Notes	Prv TOTAL D	Diff
let Income Cash Flow Adjustments	70,243	(48,210)	(123,360)	43,671	(186,186)	38,579	286,865	31,925	(135,147)	58,796	124,236	124,714	286,125		251,003	_
Other Operating Activities														I	1	
1598 · Remove from operation	0	0	0	0	0	0	0	0	0	0	0	0	0	I	0	
2156 · Group Health And Life I	753	(3,462)	(11,862)	5,489	64	138	(3,546)	105	(2,360)	3,914	5,384	5,384	0	1	0	
2161 · Other Deductions Paya	1,110	(405)	0	0	0	0	0	0	0	0	(352)	(352)	(0)	1	(0)	
2162 · Tax Sheltered Annuity I	0	0	0	0	0	0	601	(205)	(14)	(76)	(153)	(153)	0	1	(0)	
2163 · Other Insurance Payabl	158	158	158	158	158	158	158	148	148	148	(775)	(775)	(0)	1	0	
2164 · Mo Suta Payable	(278)	(1,281)	468	(420)	(420)	(420)	(818)	435	(1,456)	(510)	2,349	2,349	0	-	0	_
Total Other Operating Activities Facilities Project Adjustments	1,743	(4,990)	(11,236)	5,227	(197)	(124)	(3,605)	484	(3,682)	3,476	6,452	6,452	0	I	0	
1599 · Add to facilities	0	0	0	0	0	0	0	0	o.	0	_	0		I	0	
Total Facilities Project Adjustm	0	0	0	0	0	0	0	0	0	0	0	0	0	<del>                                     </del>	0	_
Total Cash Flow Adjustments	1,743	(4,990)	(11,236)	5,227	(197)	(124)	(3,605)	484	(3,682)	3,476	6,452	6,452	0	i	0	_
Change in Monthly Cash	71,986	(53,200)	(134,596)	48,898	(186,383)	38,455	283,260	32,409	(138,829)	62,272	130,687	131,166	286,125	i	251,003	_
	Lut	A	P	0-4	Nev	D	la-	F-b			M	l.	T07**	1		
	Jul	Aug	Sep (424 FOR)	Oct 48,898	Nov (198 292)	Dec 38,455	Jan 283,260	Feb 32,409	Mar (120 920)	Apr 62,272	May 130,687	Jun 121 166	TOTAL 286,125	4		
ncome Statement Jun							203,200	3∠,409	(136,829)	02,212	130,087	131,706			1	
ncome Statement Jun Change in Monthly Cash (I 0 Forecast Cash ####	71,986 1,200,608	(53,200) 1,147,408	1,012,812	1,061,711	875,327	913,782	1,197,042	1,229,451	1,090,621	1,152,893	1,283,581	1,414,747	200,.20		1	

### **Balance Sheet**

### **Academy for Integrated Arts**

As of April 30, 2023

Balance Sheet	6/30/2022	4/30/2023	6/30/2023
Assets	Last Year	Current	Year End
Assets			
Current Assets			
Cash			
1113 · Operating - Security Bank	135,190	(11,745)	1,414,747
1115 · Money Mkt - Community First	300,049	300,074	0
1117 · Sweep Account-Security Bank	692,232	623,304	0
1118 · Pref Money Mkt - Morgan Stanley	0	240,110	0
1132 · Petty Cash	1,151	1,151	0
Total Cash	1,128,622	1,152,893	1,414,747
Intercompany Transfers			
1598 · Remove from operations	0	0	0
1599 · Add to facilities	0	0	0
Total Intercompany Transfers	0	0	0
Total Current Assets	1,128,622	1,152,893	1,414,747
Total Assets	1,128,622	1,152,893	1,414,747
Liabilities and Equity	Last Year	Current	Year End
Liabilities and Equity			
Current Liabilities			
Other Current Liabilities			
2156 · Group Health And Life Insurance P	7,770	(2,998)	7,770
2161 · Other Deductions Payable, incl Ga	(1,178)	(473)	(1,178)
2162 · Tax Sheltered Annuity Payable	0	306	0
2163 · Other Insurance Payable	997	2,548	997
2164 · Mo Suta Payable	(2,091)	(6,789)	(2,091)
Total Other Current Liabilities	5,498	(7,406)	5,498
Total Current Liabilities	5,498	(7,406)	5,498
Equity			
Unrestricted Net Assets			
3111 · Fund Balance	1,123,124	1,123,124	1,123,124
Total Unrestricted Net Assets	1,123,124	1,123,124	1,123,124
Net Income			
Net Income	0	37,175	286,125
Total Net Income	0	37,175	286,125
Total Equity	1,123,124	1,160,299	1,409,248
Total Liabilities and Equity	1,128,622	1,152,893	1,414,747

Academy for Integrated Arts

Check Reconciliation Report

05/12/2023 2:51 PM User ID: PGREENWOOD

Batch Description: 2023 04 Operating Account

Checking Account: 3

Security bank

Processing Month: 04/2023

<u>Check/Reference Number</u> <u>Description</u> <u>Date</u> <u>Amount</u>

Statement Balance 04/28/2023 310.01 Agrees to Bank

Outstanding Automatic Payments

<u>Check/Reference Number</u> <u>Description</u> <u>Date</u> <u>Amount</u>

76410049 CITY TREASURER 01/31/2023 1,720.82 Q1 payment made 76410062 CITY TREASURER 02/28/2023 1,735.24 on May 1.

 76410062
 CITY TREASURER
 02/28/2023
 1,735.24

 76410075
 CITY TREASURER
 03/31/2023
 1,702.84

 76410087
 CITY TREASURER
 04/28/2023
 1,755.66

 76410089
 MISSOURI DEPARTMENT OF REVENUE
 04/28/2023
 5,135.00

Total: 12,049.56

Statement BalanceOutstanding TotalBalance on BooksCash Account BalanceDifference310.01(12,049.56)(11,739.55)(11,744.87)5.32

Agrees to Balance Sheet Page: 1

Stmt

Cleared Automatic Payment Total: 73,341.89
Cleared Checks Total: 79,576.81
Cleared Direct Deposit Total: (180,279.22)

Cleared Void Total:

Cleared Cash Receipt Total: 63,625.09
Cleared Manual Journal Entries Total: 143,726.04

Cleared Sales Journal Total:

	Integrated Arts - Preliminary Disburs	•		
	ade by check or electronic funds trans	sfer		
Date	Vendor			Amount
	21St Century Therapy		\$	135.00
	AFIA Holding Inc.	week or reprisonly a days (a puranu i	\$	12,500.00
	American Dining Creation	anaw day off)	\$	2,269.90
4/7/2023	American Dining Creation	Week of March 13 4 days	\$	4,769.80
4/25/2023	American Dining Creation	Week of March 27 5 days	\$	5,812.60
4/28/2023	American Dining Creation	Week of April 3 5 days	\$	5,640.40
5/1/2023	Aviva Delancey	After School Cooking Club	\$	1,000.00
4/19/2023	Bamboo HR LLC		\$	489.41
5/2/2023	Blue Beetle Pest Management		\$	193.00
4/6/2023	Card Service Center	See details next page	\$	4,298.85
4/23/2023	Cintas		\$	641.75
4/21/2023	City Wide		\$	305.10
4/25/2023	City Wide	Day porter, custodian and janitorial	\$	10,295.00
4/25/2023	Colonial Life	•	\$	945.50
5/1/2023	Cornerstones Of Care	SPED outside placement	\$	3,150.00
4/14/2023	EdOps		\$	7,716.67
4/14/2023	Elizabeth Fry	After school Robotics Club	\$	1,000.00
5/1/2023	Gregory Pearl	After School Film Club	\$	1,000.00
	Insect Lore		\$	38.94
5/1/2023	Jenessa Daniels		\$	54.04
5/1/2023	Jessikha Williams	After School Urban Art Club	\$	1,000.00
	K12 Itc, Inc.	Internet services	\$	3,300.61
	Kansas City Power And Light		\$	5,686.22
	Kansas City Public Library		\$	332.00
	Kansas City Water Services		\$	724.00
	Kessinger Hunter & Co		\$	193.75
	Lara Darner Speech Therapy	February	\$	1,982.00
	Lara Darner Speech Therapy	March	\$	2,210.00
	Lathrop GPM		\$	437.63
	Marr And Company	Tax return preparation	\$	1,500.00
	Moving Matterskc	Arts Integration PD	\$	8,400.00
	Office Depot	Office, instruct and cleaning supplies.	\$	2,488.31
4/14/2023	·	3 11	\$	266.79
5/3/2023	<b></b>		\$	411.88
5/1/2023	Research To Practice, Inc	DELIAVIOIAI HEAILH SELVICES LED AHU	\$	1,814.40
	School Health	Marah	\$	237.84
4/7/2023	Scribbles Software		\$	12.50
	Sherwood Autism Center		\$	435.00
	Specialk Way Lawncare/Snow Remova	1	\$	600.00
	Spire Inc	•	\$	166.29
	Sprint Solutions, Inc.		\$	276.52
	STA Central Region		\$	1,312.63
	The Next Paige	Three after school club facilitators	\$	3,280.00
	Toshiba Financial Services	55 ditor conton admitatoro	\$	1,228.39
	Waste Management		\$	979.55
	Westhues Electric Inc		\$	181.00
	WHC KCT, LLC	Sped and other non-bus transport Feb	\$	2,318.00
5/1/2023	WHC KCT, LLC	Sped and other non-bus transport March	\$	2,260.00
0/1/2020	Continued next page	Total payments by check or EFT		106,291.27
	Continued flext page	Total payments by check of Li T	Ψ	130,231.21

Academy for	Integrated Arts - Preliminary I	Disbursements Report	
	-	·	
)avmonte m	ade with credit card		
Date	Vendor		Amount
	1000Bulbs	Light Bulbs	\$ 576.82
2/28/2023		Family Baby Baskets	\$ 239.84
2/28/2023		Family Baby Baskets	\$ 1,218.48
3/1/2023	Amazon	Classroom Door Material	\$ 188.99
3/2/2023	Amazon	Bathroom Door Material	\$ 113.00
2/24/2023	Cosentino	Staff Breakfast	\$ 308.00
2/26/2023	Google	Recruitment	\$ 150.00
3/1/2023		Recruitment	\$ 18.64
	Learningaz	Subscription	\$ 128.00
2/23/2023	Picklemans	Staff Working Lunch	\$ 83.5
2/23/2023	Picklemans	Staff working Lunch	\$ 30.25
2/25/2023	Picklemans	Staff Working Lunch	\$ 73.69
3/2/2023	Picklemans	Staff working Lunch	\$ 66.50
3/4/2023	Picklemans	Staff working Lunch	\$ 31.9
3/7/2023	Waldo	Staff Lunch	\$ 169.85
2/21/2023	Walmart	Staff Snacks	\$ 328.49
2/25/2023	Walmart	Staff Snacks	\$ 176.62
3/9/2023	Walmart	Staff Snacks	\$ 396.26
			\$ 4,298.85



### Accounts Payable Aging Summary

As of 4/30/2023

### **Academy for Integrated Art**

CLIENT: Academy for Integrated Art	REPOR	RT DATE: 5/12/2023	3:25:53 PM ET			
Payee	Current	1-30	31-60	61-90	>90	Total
American Dining Creation	\$10,693.40	\$0.00	\$0.00	\$0.00	\$0.00	\$10,693.40
Ameritas Life Insurance Corp.	\$0.00	\$4.80	\$0.00	\$0.00	\$0.00	\$4.80
Blue Beetle Pest Control	\$193.00	\$0.00	\$0.00	\$0.00	\$0.00	\$193.00
City Wide Facility Solutions	\$10,687.40	\$0.00	\$1.50	\$0.00	\$0.00	\$10,688.90
Colonial Life	\$945.50	\$0.00	\$0.00	\$0.00	\$0.00	\$945.50
Jenessa Daniels	\$46.87	\$0.00	\$0.00	\$0.00	\$0.00	\$46.87
Johnson County Community College (JCCC)	\$3,300.00	\$0.00	\$0.00	\$0.00	\$0.00	\$3,300.00
k12 ITC, Inc.	\$3,648.17	\$0.00	\$0.00	\$0.00	\$0.00	\$3,648.17
Kansas City Public Library	\$664.00	\$0.00	\$0.00	\$0.00	\$0.00	\$664.00
Lara Darner Speech Therapy	\$2,665.00	\$0.00	\$0.00	\$0.00	\$0.00	\$2,665.00
Lathrop & Gage, LLP	\$1,226.26	\$0.00	\$0.00	\$0.00	\$0.00	\$1,226.26
Lindsay Sills	\$796.91	\$0.00	\$0.00	\$0.00	\$0.00	\$796.91
Missouri Employers Mutual Insurance Co.	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Moving MattersKC LLC	\$2,400.00	\$0.00	\$0.00	\$0.00	\$0.00	\$2,400.00

Payee	Current	1-30	31-60	61-90	>90	Total
NCS Pearson	\$0.00	\$0.00	\$0.00	\$0.00	(\$49.58)	(\$49.58)
ODP Business Solutions LLC	\$507.98	\$0.00	\$0.00	\$0.00	\$0.00	\$507.98
Quill Corporation	\$69.99	\$0.00	\$0.00	\$0.00	\$0.00	\$69.99
Sherwood Autism Center	\$3,257.50	\$0.00	\$0.00	\$0.00	\$0.00	\$3,257.50
Shred-It	\$0.00	\$73.80	\$74.94	\$0.00	\$0.00	\$148.74
Studio 5400, LLC	\$525.00	\$0.00	\$0.00	\$0.00	\$0.00	\$525.00
Total:	\$41,626.98	\$78.60	\$76.44	\$0.00	-\$49.58	\$41,732.44

Donation detail through April 2023								
	SY22		SY23			SY23		
Donor	<u>Actual</u>	<u>Actual</u>	<u>Budget</u>	<u>Variance</u>	<u>Forecast</u>	<u>Budget</u>	<u>Variance</u>	<u>Notes</u>
Brickman Gross Family Foundation		\$5,000	0	5,000	5,000	0	5,000	
Brown Peter and Lynne	2,213	2,256	0	2,256	2,256		2,256	
Deffenbaugh	25,000		25,000	(25,000)	25,000	25,000	0	Received in May
Epsten, Brad & Jenny		\$318	0	318	318		318	
Gottlieb	25,000		25,000	(25,000)	25,000	25,000	0	Received in May
Hall		125,000	125,000	0	125,000	125,000	0	
Hand Naomi and Peter	2,500	2,500	2,500	0	2,500	2,500	0	
Kauffman	125,000		125,000	(125,000)		125,000	(125,000)	Received in SY22
Kauffman DEI Grant		150,000	0	150,000	150,000		150,000	
Kirkpatrick Herman	2,000		2,000	(2,000)	2,000	2,000	0	
Lathrop GPM	1,500	1,000	0	1,000	1,000		1,000	
Missouri DHSS (Covid testing)	44,291	15,709	0	15,709	15,709		15,709	
MO Arts Council	7,036	19,948	0	19,948	25,650		25,650	Per power point
Murien McBrien Kauffman Family Foundation matching	8,700	950	7,500	(6,550)	8,250	7,500	750	Received in May
Newell	2,500	2,500	2,500	0	2,500	2,500	0	
SSKC (Data Cohort)	19,510	9,756	0	9,756	9,756		9,756	
SSKC (Harvestors)		500	0	500	500		500	
SSKC (Talent Cohort)	19,510	20,000	0	20,000	10,000		10,000	
SSKC (Team Teaching)		\$84,000	\$167,000	(83,000)	\$84,000	\$167,000	(83,000)	Adjusted to Schedule D of final grant agreement
Wedlan David	3,000	4,500	3,000	1,500	4,500	3,000	1,500	
Wilke Wayne	5,000	5,000	5,000	0	5,000	5,000	0	
AFIA Supporting Foundation	75,000			0			0	
Bomba (Library Books)	8,000			0			0	
Bomba (Unrestricted)	20,000			0			0	
Sherman Family (Literacy Lab)	33,000			0			0	
Sherman Family (Staff Retention S	15,200			0			0	
SSKC (Early Learners)	26,400			0			0	
Other/Yet to be identified	766	61	185,500	(185,439)	6,879	185,500	(178,621)	
Total	<u>\$471,126</u>	<u>\$448,997</u>	<u>\$675,000</u>	<u>(\$226,003)</u>	<u>\$510,818</u>	<u>\$675,000</u>	<u>(\$164,183)</u>	Leave forecast at \$500k for now

### EXTENDED TO MAY 15, 2023

### **Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

Inspection

Department of the Treasury Internal Revenue Service

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

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

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

Open to Public

ΑF	or tne	2021 calendar year, or tax year beginning JUL I, 2021 and	enaing U	UN 30, 2022	
<b>B</b> c	heck if pplicable	C Name of organization		D Employer identifi	cation number
	Address change	S ACADEMY FOR INTEGRATED ARTS			
	Name change	Doing business as		**-***18	16
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone numbe	r
	Final return/	7910 TROOST AVE		816-444-	
	termin- ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	4,232,868.
	Amendo return			H(a) Is this a group re	eturn
	Applica tion			for subordinates	
	pending			H(b) Are all subordinates in	
ΙT	ax-exe	mpt status: $X = 501(c)(3)$ 501(c) ( ) (insert no.) 4947(a)(1) c	or 527	1 ` ′	list. See instructions
		e: ► WWW.AFIAKC.ORG		H(c) Group exemption	
		organization: X Corporation Trust Association Other ►	L Year		M State of legal domicile; MO
		Summary			
		Briefly describe the organization's mission or most significant activities: ACADI	EMY FO	R THE INTEG	RATED ARTS'
če		MISSION IS TO USE ARTS TO PREPARE STUDENT			
nan	-	Check this box if the organization discontinued its operations or dispos			
ver	l			3	8
Ĝ	l	Number of independent voting members of the governing body (Part VI, line 1b)			8
∞		Fotal number of individuals employed in calendar year 2021 (Part V, line 2a)			62
ţį		Fotal number of volunteers (estimate if necessary)			8
Activities & Governance		Fotal unrelated business revenue from Part VIII, column (C), line 12			0.
Ą		Net unrelated business taxable income from Form 990-T, Part I, line 11			0.
	<u> </u>	vet differenced business taxable income from 1 offit 990-1,1 at 1, life 11		Prior Year	Current Year
	8 (	Contributions and grants (Part VIII, line 1h)		3,502,786.	
ne	l			178,411.	215,345.
Revenue	l	Program service revenue (Part VIII, line 2g)  nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		74.	372.
Be				0.	0.
	l	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		3,681,271.	4,232,868.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		0.	0.
	l	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
	45 6	Benefits paid to or for members (Part IX, column (A), line 4)		2,105,692.	2,540,673.
ses	15 5	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	2,540,073.
Expenses	loar	Professional fundraising fees (Part IX, column (A), line 11e)  Total fundraising expenses (Part IX, column (D), line 25)		<u> </u>	0.
쫎	D			1,344,686.	1,696,006.
_	'' \	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		3,450,378.	
	l	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		230,893.	
	19 F	Revenue less expenses. Subtract line 18 from line 12		· · · · · · · · · · · · · · · · · · ·	,
ts o		Fold conds (Dod V. For 40)	Ве	ginning of Current Year 1,150,135.	End of Year 1,134,842.
Net Assets or Fund Balances	20	Total assets (Part X, line 16)			6,353.
let A	21	Total liabilities (Part X, line 26)		17,835. 1,132,300.	1,128,489.
	22 N art II	Net assets or fund balances. Subtract line 21 from line 20		1,132,300.	1,120,409.
		ties of perjury, I declare that I have examined this return, including accompanying schedules	and atatama	anta and to the heat of m	/ knowledge and holiaf it is
	-	ties of perjury, I declare that I have examined this return, including accompanying scriedules i, and complete. Declaration of preparer (other than officer) is based on all information of wh			/ Kilowieuge allu bellel, it is
uue,	Correct	, and complete. Declaration of preparer (other than officer) is based on an information of win	iicii preparei	lias ally kilowieuge.	
C:		Signature of officer		I Date	
Sign		CARA NEWELL, BOARD TREASURER		Dato	
Her	e	Type or print name and title			
		· · · · · · · · · · · · · · · · · · ·	Тг	Date Check	PTIN
ם מים		Print/Type preparer's name  Preparer's signature  TA CON D TOTIK		2/08/23 off-employ	
Paid	-	JASON D. LOUK     JASON D. LOUK       Firm's name     ▶ MARR AND COMPANY, P.C.	ļ0		**-***0039
			<u> </u>	Firm's EIN ▶	
use	Only	•	U	Disc. / 0	16\ 262 0700
		KANSAS CITY, MO 64131		Phone no. ( 8	16) 363-8700
May	the IR	S discuss this return with the preparer shown above? See instructions			X Yes No

Form	990 (2021) ACADEMY FOR INTEGRATED ARTS	**-***1816	Page 2
Pa	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		X
1	Briefly describe the organization's mission:  THE ACADEMY IS A FREE PUBLIC CHARTER SCHOOL SERVING AT-R	ISK STUDENT	s.
	MISSION IS TO PREPARE STUDENTS FOR AN ADMISSIONS-BASED S	ECONDARY	
	SCHOOL. STUDENTS WILL BE ABLE TO CREATE AND ACTIVELY EX	PRESS A DEE	PER
	MEANING OF SUBJECT MATTER CONTENT THROUGH USING VISUAL A	RTS AS WELL	AS
2	Did the organization undertake any significant program services during the year which were not listed on the		
	prior Form 990 or 990-EZ?	Ye	es X No
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Ye	s X No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, as	measured by expense	S.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to othe	ers, the total expenses,	and
	revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$3, 393, 598 • including grants of \$) (Rever	nue \$ 215	,345.)
	INITIATION OF INSTRUCTIONAL SERVICES FOR PRE-KINGERGARTE		IXTH
	GRADE SERVING 248 ENROLLED STUDENTS.		
	•		
415			
4b	(Code:) (Expenses \$ including grants of \$) (Rever	nue \$	)
	-		
	-		
4c	(Code:) (Expenses \$ including grants of \$) (Rever	nue \$	)
4d	Other program services (Describe on Schedule O.)		
_	(Expenses \$ including grants of \$ ) (Revenue \$	)	
<u>4</u> e	Total program service expenses ▶ 3,393,598.		
		Form	990 (2021)

### Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>			
	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
•	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	۲		<u></u>
10	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		x
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,	.0		
••	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
u	Part VI	11a	Х	
h	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	110		
b	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
_	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	110		1
C		11c		x
a	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII  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	110		
u		11d		x
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11e	Х	1
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	Tie	- 21	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	444	Х	
40-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Λ	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	40-	Х	
	Schedule D, Parts XI and XII	12a	Λ	
D	Was the organization included in consolidated, independent audited financial statements for the tax year?	406		x
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	Α_
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Λ	Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u> </u>
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	14b		x
4-	or more? If "Yes," complete Schedule F, Parts I and IV	140		Α_
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	4-		x
40	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	40		x
47	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,	47		x
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	40		<sub>y</sub>
40	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	ا مد ا		<sub>v</sub>
00	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		-
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			<sub>v</sub>
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II	21		X

132003 12-09-21

Form **990** (2021)

Form 990 (2021) ACADEMY FOR INTEGRATED ARTS
Part IV | Checklist of Required Schedules (continued)

ı uı	Official of Required Scriedules (continued)			
	Did the consideration and the off 000 of constant and the consideration of a decrease in the constant and th		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			Х
00	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III  Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current	22		
23	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
		23		х
24 a	Schedule J  Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	25		
ZTU	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			37
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			37
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and		v	
05-	Part V, line 1	34	X	Х
	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	256		
26	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2  Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	35b		
36		36		Х
37	If "Yes," complete Schedule R, Part V, line 2  Did the organization conduct more than 5% of its activities through an entity that is not a related organization	30		
J,		37		Х
38	and that is treated as a partnership for federal income tax purposes? <i>If</i> "Yes," <i>complete Schedule R, Part VI</i> Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	0,		
-	Note: All Form 990 filers are required to complete Schedule O	38	х	
Pai	t V Statements Regarding Other IRS Filings and Tax Compliance	, 50		
	Check if Schedule O contains a response or note to any line in this Part V			
	1		Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 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	X	
			000	

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Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V Yes No 2a Enter the number of employees reported on Form W-3. Transmittal of Wage and Tax Statements. filed for the calendar year ending with or within the year covered by this return **b** If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Х 2h Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions. 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? Х За **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, a X financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a **b** If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). X **5a** Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? **b** Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? Х 5b c If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit Х any contributions that were not tax deductible as charitable contributions? 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 If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required Х to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year 7d Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h 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 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 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? 13a 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 c Enter the amount of reserves on hand X 14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 14b 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? If "Yes," see the instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 If "Yes," complete Form 4720, Schedule O. Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?

5 Form **990** (2021)

If "Yes," complete Form 6069.

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

	Check if Schedule O contains a response or note to any line in this Part VI			X			
Sec	tion A. Governing Body and Management						
			Yes	No			
1a	Enter the number of voting members of the governing body at the end of the tax year	3					
	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.						
b	Enter the number of voting members included on line 1a, above, who are independent 1b	3					
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other						
	officer, director, trustee, or key employee?	2	Х				
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision						
	of officers, directors, trustees, or key employees to a management company or other person?	3		Х			
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х			
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х			
6	Did the organization have members or stockholders?	6		Х			
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		Х			
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		Х			
8							
а	The governing body?	8a	X				
b	Each committee with authority to act on behalf of the governing body?	8b	Х				
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		Х			
Sec	tion 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		Х			
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?						
b							
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X				
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X				
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe						
	on Schedule O how this was done	12c	X				
13	Did the organization have a written whistleblower policy?	13	X				
14	Did the organization have a written document retention and destruction policy?	14		Х			
15	Did the process for determining compensation of the following persons include a review and approval by independent						
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?						
а	The organization's CEO, Executive Director, or top management official	15a	X				
	Other officers or key employees of the organization	15b		Х			
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.						
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a						
	taxable entity during the year?	16a		X			
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation						
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's						
	exempt status with respect to such arrangements?	16b					
Sec	tion C. Disclosure						
17	List the states with which a copy of this Form 990 is required to be filed ▶ NONE						
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)	s only)	availa	ble			
	for public inspection. Indicate how you made these available. Check all that apply						
	Own website X Another's website X Upon request Other (explain on Schedule O)						
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	d finan	cial				
	statements available to the public during the tax year.						
20	State the name, address, and telephone number of the person who possesses the organization's books and records						
	LYNNE BROWN - 816-444-1720						
	7910 TROOST, KANSAS CITY, MO 64131						

Form **990** (2021)

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

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

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

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

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

See the instructions for the order in which to list the persons above.

(A)	(B)		(C) Position				lout	(D)	(E)	(F)
Name and title	Average		not c	heck	more	than o		Reportable	Reportable	Estimated
	hours per week					s both or/trus		compensation from	compensation from related	amount of other
	(list any	ector						the	organizations	compensation
	hours for	ndividual trustee or director	99			sated		organization	(W-2/1099-MISC/	from the
	related organizations	rustee	nstitutional trustee		/ee	Highest compensated employee		(W-2/1099-MISC/ 1099-NEC)	1099-NEC)	organization and related
	below	idual t	utiona	 	Key employee	est cor	ь	1000 1120)		organizations
	line)	Indiv	Instit	Officer	Key e	High	Former			
(1) TRICIA DEGRAFF	40.00									
EXECUTIVE DIRECTOR				Х				117,835.	0.	31,185.
(2) LYNNE BROWN	1.00							_	_	_
BOARD PRESIDENT		Х						0.	0.	0.
(3) BRAD EPSTEIN	1.00							_		_
BOARD VICE PRESIDENT	1 2 2 2	Х		_				0.	0.	0.
(4) CARA NEWELL	1.00									_
BOARD TREASURER	1 00	Х	_			-		0.	0.	0.
(5) EMILY BROWN	1.00								•	•
BOARD SECRETARY	1 00	Х						0.	0.	0.
(6) PETER BROWN	1.00								•	•
DIRECTOR	1 00	Х						0.	0.	0.
(7) JENNIFER WADDELL DIRECTOR	1.00	Х						0.	0.	0
(8) LINDA EDWARDS	1.00	Δ						0.	0.	0.
DIRECTOR	1.00	Х						0.	0.	0.
(9) PATRICK LENOIR	1.00	Λ						0.	0.	<u></u>
DIRECTOR	1.00	Х						0.	0.	0.
<u> </u>		25						•	<b>.</b>	
-										
				_						
	ı							I.		

Form 990 (2021)

Section A. Officers, Directors, Trus		oloy	ees,			ghes	it C		,	$\overline{}$	<b>(=</b> )	
(A)	(B)	(C) Position		(D)	(E)		(F)					
Name and title	Average hours per		not c	heck i	more	than o		Reportable	Reportable	- 1	Estima amoun	
	week					s both r/trus		compensation from	compensation from related		othe	
	(list any	ctor						the	organizations	cc	ompens	
	hours for	r dire	0			pe J		organization	(W-2/1099-MISC/	<i>'</i>	from t	:he
	related	stee o	rustee		-	pensa		(W-2/1099-MISC/	1099-NEC)		organiza	
	organizations below	nal tru	onal t		ployee	com		1099-NEC)		- 1	and rela	
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			0	rganiza	เนอกร
	<del> </del>	트	트	0	3	工品	Œ			+		
		1										
										+		
		1										
										$\top$		
										$\top$		
										$\perp$		
		1										
								115 005			24	
1b Subtotal							<b>&gt;</b>	117,835.			31,.	185.
c Total from continuation sheets to Part VI								117 025		).	21 -	<u>0.</u> 185.
d Total (add lines 1b and 1c)							<u> </u>	117,835.		•	<u>эт,.</u>	100.
2 Total number of individuals (including but n	ot limited to th	ose	liste	a ac	oove	e) wn	o re	eceived more than \$100,	υυυ of reportable			1
compensation from the organization											Yes	No
3 Did the organization list any <b>former</b> officer,	director trust	00 k	·0\/ 0	mnl	0.40	0 Or	hia	shoet componented omn	ovoc on		1.00	110
line 1a? If "Yes," complete Schedule J for s	•		•	•	•		_		•	3		X
4 For any individual listed on line 1a, is the su												122
and related organizations greater than \$150								•	•	4		X
5 Did any person listed on line 1a receive or a												
rendered to the organization? If "Yes," com	•				-		,,,,,,	od organization or manne	1441 101 001 11000	. 5		Х
Section B. Independent Contractors	proto Ochodan	<i>,</i>	<i>71</i>		<i>5</i> 075	<i>.</i>						•
1 Complete this table for your five highest co	mpensated inc	lepe	nder	nt co	ontra	acto	rs th	nat received more than \$	100,000 of comper	nsation	from	
the organization. Report compensation for												
(A)								(B)			(C)	
Name and business	address							Description of s	ervices	Com	pensati	ion
AMERICAN DINING CREATION												
7910 TROOST AVE, KANSAS CITY, MO 64131						FOOD SERVICES		2	00,1	<u>113.</u>		
STA OF MISSOURI, INC.					ı	TRANSPORTATION						
3511 CLARK LANE, COLUMBIA, MO 65202						SERVICES		1	54,5	<u>550.</u>		
							- 1					

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Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 of compensation from the organization

\*\*-\*\*\*1816

Form 990 (2021) ACADEMY
Part VIII Statement of Revenue

		Check if Schedule O contains a response or	note to any lin	e in this Part VIII			
		•	<b>,</b>	(A)	(B)	(C)	(D)
				Total revenue	Related or exempt	Unrelated	Revenue excluded from tax under
					function revenue	business revenue	sections 512 - 514
<b>'</b> 0 '0	4.	a Federated campaigns 1a					
nts an		1 9		-			
يخ و				-			
Contributions, Gifts, Grants and Other Similar Amounts		c Fundraising events 1c		-			
ig ig		d Related organizations 1d					
ns,			65,535.				
흔	f	f All other contributions, gifts, grants, and	4 - 6 - 6				
g		similar amounts not included above 1f 4	<u> 151,616.</u>				
dat	ç	g Noncash contributions included in lines 1a-1f 1g \$					
<u> ဗိ ဗ</u>	ŀ	h Total. Add lines 1a-1f	<b></b>	4,017,151.			
		L	Business Code				
ø.	2 8	a	611710	215,345.	215,345.		
ξ	k	b					
Program Service Revenue	(	с					
E S		d					
ρğ	•	е					
Pro		f All other program service revenue					_
		g Total. Add lines 2a-2f		215,345.			
	3	Investment income (including dividends, interest		,			
		other similar amounts)		372.			372.
	4	Income from investment of tax-exempt bond pro		7			
	5	Royalties	-				
	Ŭ	(i) Real	(ii) Personal				
	6 =	a Gross rents 6a	( )				
		b Less: rental expenses 6b					
		c Rental income or (loss) 6c					
		d Net rental income or (loss)					
		a Gross amount from sales of (i) Securities	(ii) Other				
	, .	assets other than inventory 7a	(-,				
		b Less: cost or other basis		-			
a)							
ğ	_	and sales expenses 7b					
eve	(	c Gain or (loss)7c					
her Revenue		d Net gain or (loss)	<b>&gt;</b>				
	8 8	a Gross income from fundraising events (not					
ō		including \$ of					
		contributions reported on line 1c). See					
		Part IV, line 18 8a		-			
		b Less: direct expenses 8b					
		c Net income or (loss) from fundraising events	·····				
	9 8	a Gross income from gaming activities. See					
	_	Part IV, line 19 9a		-			
		b Less: direct expenses 9b					
		c Net income or (loss) from gaming activities	<b>)</b>				
	10 a	a Gross sales of inventory, less returns					
		and allowances 10a					
		b Less: cost of goods sold 10b					
_		c Net income or (loss) from sales of inventory	<b></b>				
Sī		<del>-</del>	Business Code				
eo e	11 a	a					
llan /en	k	b					
Miscellaneous Revenue		d All other revenue					
Ξ		d All other revenue					
	12	Total revenue. See instructions		4,232,868.	215,345.	0.	372.

# Form 990 (2021) ACADEMY FOR I

	Check if Schedule O contains a respons	se or note to any line in t			
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	167 012	125 012	22 100	
_	trustees, and key employees	167,913.	135,813.	32,100.	
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
7	persons described in section 4958(c)(3)(B)	1,877,587.	1,508,854.	368,733.	
7 8	Other salaries and wages  Pension plan accruals and contributions (include	±,011,301•	1,500,054.	300,733.	
0	section 401(k) and 403(b) employer contributions)	201,958.	162,297.	39,661.	
9	Other employee benefits	144,716.	123,528.	21,188.	
10	Payroll taxes	148,499.	119,799.	28,700.	
11	Fees for services (nonemployees):	_ 10 / 100 0	,	20,700.	
''	Management				
b	Legal	13,130.		13,130.	
c	Accounting	10,253.		10,253.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
Ū	column (A), amount, list line 11g expenses on Sch O.)				
12	Advertising and promotion				
13	Office expenses	140,538.	103,243.	37,295.	
14	Information technology				
15	Royalties				
16	Occupancy	530,015.	451,685.	78,230.	100
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates	4 252	4 -4-	4-0	
22	Depreciation, depletion, and amortization	1,868.	1,715.	153.	
23	Insurance	28,517.		28,517.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A),				
_	amount, list line 24e expenses on Schedule 0.) TECHNICAL SERVICES	308,390.	124,780.	183,610.	
a b	CONTRACTED TRANSPORTATI	244,663.	244,663.	100,0100	
C	FOOD SERVICES	238,174.	238,174.		
d	PROGRAM EXPENSES - INST	127,688.	127,688.		
	All other expenses	52,770.	51,359.	433.	978
25	Total functional expenses. Add lines 1 through 24e	4,236,679.	3,393,598.	842,003.	1,078
<u>20</u> 26	Joint costs. Complete this line only if the organization	.,===,,===	2,223,3231	/	_,
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

Form **990** (2021)

Pai	rt X	Balance Sneet					
		Check if Schedule O contains a response or r	ote to an	y line in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			1,150.	1	1,151.
	2	Savings and temporary cash investments			1,141,751.	2	1,128,326
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net		4			
	5	Loans and other receivables from any current					
		trustee, key employee, creator or founder, sul					
		controlled entity or family member of any of the		5			
	6	Loans and other receivables from other disqu	sons (as defined				
		under section 4958(f)(1)), and persons describ	ed in sec	tion 4958(c)(3)(B)		6	
छ	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
ĕ	9					9	
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	256,614. 251,249.			
	b	Less: accumulated depreciation	7,234.	10c	5,365		
	11	Investments - publicly traded securities		11			
	12	Investments - other securities. See Part IV, lin		12			
	13	Investments - program-related. See Part IV, lin		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11			15		
	16	Total assets. Add lines 1 through 15 (must e		1,150,135.	16	1,134,842	
	17	Accounts payable and accrued expenses				17	
	18	Grants payable		18			
	19	Deferred revenue		19			
	20	Tax-exempt bond liabilities		20			
	21	Escrow or custodial account liability. Complet	e Part IV	of Schedule D		21	
S	22	Loans and other payables to any current or fo	rmer offic	er, director,			
≝		trustee, key employee, creator or founder, sul	ostantial c	contributor, or 35%			
Liabilities		controlled entity or family member of any of the	nese pers	ons		22	
_	23	Secured mortgages and notes payable to unr				23	
	24	Unsecured notes and loans payable to unrela				24	
	25	Other liabilities (including federal income tax,					
		parties, and other liabilities not included on lin	nes 17-24)	. Complete Part X	45 005		6 252
		of Schedule D			17,835.	25	6,353
	26	Total liabilities. Add lines 17 through 25		. 🕶	17,835.	26	6,353
G		Organizations that follow FASB ASC 958, c	heck her	e ▶ X			
čě		and complete lines 27, 28, 32, and 33.		-	1 116 600		000 700
<u>aa</u>	27			·····	1,116,602.	27	999,720
Ä	28	Net assets with donor restrictions			15,698.	28	128,769
Ĭ		Organizations that do not follow FASB ASC	eck here				
F		and complete lines 29 through 33.		-			
ţs c	29	Capital stock or trust principal, or current fund				29	
sse	30	Paid-in or capital surplus, or land, building, or				30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated			1 120 200	31	1 100 400
Š	32	Total net assets or fund balances			1,132,300.	32	1,128,489
	33	Total liabilities and net assets/fund balances			1,150,135.	33	1,134,842

Form **990** (2021)

Form **990** (2021)

or audits, explain why on Schedule O and describe any steps taken to undergo such audits

Form	1 990 (2021) ACADEMY FOR INTEGRATED ARTS	~ ~ - ~	. " "ТО	Тο	Pag	ge IZ
Pa	rt 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	4,	232	2,8	<u>68.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	4,			79.
3	Revenue less expenses. Subtract line 2 from line 1	3				11.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,	132	2,3	00.
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	1,	128	3,4	89 <b>.</b>
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII		<u></u>	<u></u>		
			_		Yes	No
1	Accounting method used to prepare the Form 990: Cash Cash Counting method used to prepare the Form 990: Cash Cash Cash Cash Cash Cash Cash Cash	D CAS	<u>;H</u>			
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.	L			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
	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		L			
b	Were the organization's financial statements audited by an independent accountant?		L	2b	X	
	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:					
	X Separate basis Consolidated basis Both consolidated and separate basis		L			
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the					
	review, or compilation of its financial statements and selection of an independent accountant?			2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule O.				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single	gle Audit				
	Act and OMB Circular A-133?		L	За		X
h	If "Ves " did the organization undergo the required audit or audits? If the organization did not undergo the required	tibus ha				l

132012 12-09-21

### **SCHEDULE A**

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

## **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

ACADEMY FOR INTEGRATED ARTS

Employer identification number \*\*-\*\*\*1816

				IDONATED ANT				1010		
Pa	rt I	Reason for Public (	Charity Status.	(All organizations must c	omplete th	nis part.) S	ee instructions.			
The	organ	zation is not a private found	ation because it is: (F	For lines 1 through 12, cl	neck only o	one box.)				
1		A church, convention of chi	urches, or associatio	n of churches described	in <b>sectio</b>	n 170(b)(1	I)(A)(i).			
2	X	A school described in secti	ion 170(b)(1)(A)(ii). (	Attach Schedule E (Form	n 990).)					
3		A hospital or a cooperative	hospital service orga	anization described in se	ection 170	(b)(1)(A)(ii	ii).			
4		A medical research organization					•	the hospital's name,		
		city, and state:	•							
5	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in									
	section 170(b)(1)(A)(iv). (Complete Part II.)									
6		A federal, state, or local gov	vernment or governm	nental unit described in	section 17	70(b)(1)(A)	(v).			
7		An organization that norma	lly receives a substar	ntial part of its support fr	om a gove	ernmental i	unit or from the general p	oublic described in		
		section 170(b)(1)(A)(vi). (C	omplete Part II.)							
8		A community trust describe	ed in section 170(b)(	1)(A)(vi). (Complete Part	: II.)					
9		An agricultural research org	ganization described	in section 170(b)(1)(A)(i	x) operate	ed in conju	ınction with a land-grant	college		
		or university or a non-land-g	grant college of agric	ulture (see instructions).	Enter the r	name, city	, and state of the college	or		
		university:								
10		An organization that norma	lly receives (1) more	than 33 1/3% of its supp	ort from co	ontributior	ns, membership fees, and	d gross receipts from		
		activities related to its exem	npt functions, subjec	t to certain exceptions; a	and (2) no r	more than	33 1/3% of its support f	rom gross investment		
		income and unrelated busin	ness taxable income	(less section 511 tax) fro	m busines	ses acquii	red by the organization a	after June 30, 1975.		
		See section 509(a)(2). (Cor	mplete Part III.)							
11		An organization organized a	and operated exclusi	vely to test for public sat	ety. See 🧯	section 50	09(a)(4).			
12		An organization organized a	and operated exclusi	vely for the benefit of, to	perform th	ne functior	ns of, or to carry out the	purposes of one or		
		more publicly supported or	ganizations describe	d in section 509(a)(1) o	r section &	509(a)(2).	See section 509(a)(3).	Check the box on		
		lines 12a through 12d that	describes the type of	f supporting organization	and comp	plete lines	12e, 12f, and 12g.			
а		Type I. A supporting orga	anization operated, si	upervised, or controlled	oy its supp	orted orga	anization(s), typically by	giving		
		the supported organization	on(s) the power to reg	gularly appoint or elect a	majority o	f the direc	ctors or trustees of the su	upporting		
		organization. You must o	complete Part IV, Se	ections A and B.						
b		Type II. A supporting org	anization supervised	or controlled in connect	ion with its	s supporte	ed organization(s), by hav	ving		
		control or management o	f the supporting orga	anization vested in the sa	ame persor	ns that co	ntrol or manage the supp	ported		
		organization(s). You mus	t complete Part IV,	Sections A and C.						
С		Type III functionally inte	grated. A supporting	g organization operated	in connect	ion with, a	and functionally integrate	ed with,		
		its supported organization	n(s) (see instructions)	. You must complete F	Part IV, Se	ctions A,	D, and E.			
d		Type III non-functionally	integrated. A supp	orting organization oper	ated in cor	nnection w	vith its supported organiz	zation(s)		
		that is not functionally int	egrated. The organiz	ation generally must sati	sfy a distri	ibution rec	quirement and an attentiv	veness .		
		requirement (see instructi	ions). <b>You must con</b>	nplete Part IV, Sections	A and D,	and Part	V.			
е		Check this box if the orga	anization received a v	written determination from	m the IRS	that it is a	Type I, Type II, Type III			
		functionally integrated, or	Type III non-function	nally integrated supportir	ng organiza	ation.				
f	f Enter the number of supported organizations									
g		ride the following information								
	(	Name of supported	(ii) EIN	(iii) Type of organization (described on lines 1-10	(iv) Is the orga in your governi	ng document?	(v) Amount of monetary	(vi) Amount of other		
		organization		above (see instructions))	Yes	No	support (see instructions)	support (see instructions)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	I III VUUI UUVEIIIIIIU UUGUIIIEIIL?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
Total						

### Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support	
Calendar year (or fiscal year beginning in) ▶ (a) 2017 (b) 2018 (c) 2019 (d) 2020 (e) 2	2021 <b>(f)</b> Total
1 Gifts, grants, contributions, and	
membership fees received. (Do not	
include any "unusual grants.")	
2 Tax revenues levied for the organ-	
ization'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)	
6 Public support. Subtract line 5 from line 4.	
Section B. Total Support	
Calendar year (or fiscal year beginning in) ▶ (a) 2017 (b) 2018 (c) 2019 (d) 2020 (e) 3	2021 <b>(f)</b> Total
7 Amounts from line 4	
8 Gross income from interest,	
dividends, payments received on	
securities loans, rents, royalties,	
and income from similar sources	
9 Net income from unrelated business	
activities, whether or not the	
business is regularly carried on	
10 Other income. Do not include gain	
or loss from the sale of capital	
assets (Explain in Part VI.)	
11 Total support. Add lines 7 through 10	
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	<u>▶□</u>
Section C. Computation of Public Support Percentage	
14 Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f))	%
15 Public support percentage from 2020 Schedule A, Part II, line 14	%
16a 33 1/3% support test - 2021. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check	ck this box and
stop here. The organization qualifies as a publicly supported organization	▶□
b 33 1/3% support test - 2020. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more,	check this box
and stop here. The organization qualifies as a publicly supported organization	▶□
17a 10% -facts-and-circumstances test - 2021. If the organization did not check a box on line 13, 16a, or 16b, and line 1	4 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	ne organization
meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization	<b>&gt;</b>
b 10% -facts-and-circumstances test - 2020. If the organization did not check a box on line 13, 16a, 16b, or 17a, and	line 15 is 10% or
more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI	how the
organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization	▶□

Schedule A (Form 990) 2021

### 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	now, please comp	piete Part II.)				
Calendar year (or fiscal year beginning in)	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and	(4) 2011	(3) 2010	(0) 2010	(4) 2020	(6) 2321	(i) iotai
membership fees received. (Do not						
include any "unusual grants.")						
2 Gross receipts from admissions,						
merchandise sold or services per-						
formed, 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 bus-						
iness under section 513						
4 Tax revenues levied for the organ-						
ization'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>b</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						
<b>c</b> 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) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(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>b</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 on 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.)						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)						
14 First 5 years. If the Form 990 is for the	e organization's f	irst, second, third,	fourth, or fifth tax	year as a section :	501(c)(3) organizati	on,
check this box and stop here	- 0 1 D-					<b>)</b>
Section C. Computation of Publi					T T	
15 Public support percentage for 2021 (li		•	column (f))		15	%
16 Public support percentage from 2020 Section D. Computation of Inves					16	%
•			no 12 column (fl)		17	0/
17 Investment income percentage for 20					18	%
18 Investment income percentage from 2 19a 33 1/3% support tests - 2021. If the						7 is not
more than 33 1/3%, check this box an						1 13 HUL
b 33 1/3% support tests - 2020. If the						
line 18 is not more than 33 1/3%, chec						
20 Private foundation. If the organization						

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Schedule A (Form 990) 2021

### Part IV | Supporting Organizations

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

### Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1		
2		
3a		
3b		
3с		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
9b		
9c		
10a		
10b		

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Par	t IV	Supporting Organizations (continued)			
		·		Yes	No
11	Has th	ne organization accepted a gift or contribution from any of the following persons?			
а		son who directly or indirectly controls, either alone or together with persons described on lines 11b and			
		elow, the governing body of a supported organization?	11a		
b	A fam	ily member of a person described on line 11a above?	11b		
С	A 35%	6 controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail	in Part VI.	11c		
Sect	ion E	3. Type I Supporting Organizations			
				Yes	No
1	Did th	e governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
		supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
		ors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) ively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
		ization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
		orted organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did th	e organization operate for the benefit of any supported organization other than the supported			
	organi	ization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part V	N how providing such benefit carried out the purposes of the supported organization(s) that operated,			
_	supen	vised, or controlled the supporting organization.	2		
Sect	tion C	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 trus	stees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or mai	nagement of the supporting organization was vested in the same persons that controlled or managed			
<u> </u>	the su	pported organization(s).	1		
Sect	ion L	D. All Type III Supporting Organizations			
		·		Yes	No
1		e organization provide to each of its supported organizations, by the last day of the fifth month of the			
	-	ization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
		(ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	-	ization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2		any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
		ization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	_		
		ganization maintained a close and continuous working relationship with the supported organization(s).	2		
3		ason of the relationship described on line 2, above, did the organization's supported organizations have a			
	-	cant voice in the organization's investment policies and in directing the use of the organization's			
		ne or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
Sact	suppo	orted organizations played in this regard.  E. Type III Functionally Integrated Supporting Organizations	3		
1		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 institute Test. Appared lines 20 and 25 below.	truction	1	No
2		ties Test. Answer lines 2a and 2b below.		Yes	No
а		ubstantially all of the organization's activities during the tax year directly further the exempt purposes of			
		upported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
		supported organizations and explain how these activities directly furthered their exempt purposes,			
		the organization was responsive to those supported organizations, and how the organization determined	2a		
b		nese activities constituted substantially all of its activities. The activities described on line 2a, above, constitute activities that, but for the organization's involvement,	Za		
b					
		r more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
		If the reasons for the organization's position that its supported organization(s) would have engaged in	2b		
3		activities but for the organization's involvement. t of Supported Organizations. Answer lines 3a and 3b below.	20		
		e organization have the power to regularly appoint or elect a majority of the officers, directors, or			
u		es of each of the supported organizations? If "Yes" or "No" provide details in <b>Part VI.</b>	3a		
b		e organization exercise a substantial degree of direction over the policies, programs, and activities of each			
		2			

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

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

Section A - Adjusted Net Income

(A) Prior Year
(optional)

Net short-term capital gain

1

Section A - Adjusted Net Income		(A) Prior Year	(b) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
<b>b</b> Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors			
(explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by 0.035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, column A)	1		
2 Enter 0.85 of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions).	6		
7 Check here if the current year is the organization's first as a non-functional	ly integrated	d Type III supporting orga	nization (see

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

Schedule A (Form 990) 2021

Schedule A (Form 990) 2021

e Excess from 2021

132028 01-04-22 Schedule A (Form 990) 2021 2 0

### Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

### Schedule of Contributors

► Attach to Form 990 or Form 990-PF.

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

OMB No. 1545-0047

ACADEMY FOR INTEGRATED ARTS

**Employer identification number** 

\*\*-\*\*\*1816

Organization type (check one):

Filers of: Section:

X 501(c)( 3) (enter number) organization Form 990 or 990-EZ

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

X 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 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), 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), 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).

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990) (2021)

Schedule B (Form 990) (2021) Page **2** 

Name of organization

Employer identification number

### ACADEMY FOR INTEGRATED ARTS

\*\*-\*\*\*1816

Part I	Contributors (see instructions). Use duplicate copies of Part I if  (b)	(c)	(d)
(a) No.	(D) Name, address, and ZIP + 4	(c) Total contributions	(a) Type of contribution
1		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No. 3	Name, address, and ZIP + 4	* \$ 25 , 000 .	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	Trainic, deal coo, and En 111	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990) (2021)

Name of organization

Employer identification number

### ACADEMY FOR INTEGRATED ARTS

\*\*-\*\*\*1816

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8		\$\$\$7,036.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9		\$\$, 5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10		\$\$ 44,291.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
11		\$\$\$75,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990) (2021) Page **3** 

Name of organization Employer identification number

### ACADEMY FOR INTEGRATED ARTS

\*\*-\*\*\*1816

	II ION INTEGNATED AND	l l	1010
art II	Noncash Property (see instructions). Use duplicate copies of Pa	art II if additional space is needed.	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_			
		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		<del></del> -	
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
arti			

Name of organization **Employer identification number** \*\*-\*\*\*1816 ACADEMY FOR INTEGRATED ARTS Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

### **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No. 1545-0047

Inspection

Name of the organization

ACADEMY FOR INTEGRATED ARTS

**Employer identification number** \*\*-\*\*\*1816

Par	t I Organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line		er Si	milar Fund	s or Ac	coun	its. Complete if the	:
	Giganization answered Tee Girl Gill Goo, Fattiv, ink	(a) Donor ac	lvised	d funds	Τ (	<b>b)</b> Fun	ds and other accoun	ts
1	Total number at end of year	. , ,			<u> </u>			
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 v		s hel	d in donor adv	ised fund	ds		
	are the organization's property, subject to the organization's e	-					Yes	No
6	Did the organization inform all grantees, donors, and donor ad							
	for charitable purposes and not for the benefit of the donor or							
	impermissible private benefit?						Yes	No
Par	t II Conservation Easements. Complete if the org	ganization answered	"Yes	" on Form 990	), Part IV,	line 7.		
1	Purpose(s) of conservation easements held by the organization	on (check all that app	oly).	_				
	Preservation of land for public use (for example, recreat	tion or education)		Preservation	of a histo	rically	important land area	
	Protection of natural habitat			Preservation	of a certi	fied his	storic structure	
	Preservation of open space							
2	Complete lines 2a through 2d if the organization held a qualifi	ied conservation cor	ntribu	ition in the for	m of a co	nserva		
	day of the tax year.						Held at the End of the	Tax Year
а	Total number of conservation easements					2a		
b						2b		
С	Number of conservation easements on a certified historic stru	ucture included in (a)				2c		
d	Number of conservation easements included in (c) acquired a							
	listed in the National Register					<b>2</b> d		
3	Number of conservation easements modified, transferred, rele	eased, extinguished	or te	erminated by t	ne organi	zation	during the tax	
	year ▶							
4	Number of states where property subject to conservation eas		_		_			
5	Does the organization have a written policy regarding the peri							
_	violations, and enforcement of the conservation easements it						Yes	No
6	Staff and volunteer hours devoted to monitoring, inspecting, I	nandling of violation	s, an	d enforcing co	nservatio	n ease	ements during the year	ır
-	Amount of auroration made in an arithmic incorporation to an attention				4:		ka alumina dha u an	
7	Amount of expenses incurred in monitoring, inspecting, hand $\blacktriangleright \   \! \! \! \! \! \! \! \! \! \! \! \! \! \! \! \! \! $	ling of violations, an	a eni	ording conser	vation eas	semeni	ts during the year	
	▶ \$	a actiofy the requirer	nonte	of coation 17	O(b)(4)(D)	(;)		
8							Yes	No
9	and section 170(h)(4)(B)(ii)?							NO
9	balance sheet, and include, if applicable, the text of the footn							
	organization's accounting for conservation easements.	ote to the organizati	0115	ili lai loiai State	ilielits tile	at uesc	inces trie	
Par	t III Organizations Maintaining Collections of	Art, Historical	Trea	sures, or (	Other S	imila	r Assets.	
	Complete if the organization answered "Yes" on Form			,				
1a	If the organization elected, as permitted under FASB ASC 958		reve	nue statemen	and bala	nce sh	neet works	
	of art, historical treasures, or other similar assets held for pub	•						
	service, provide in Part XIII the text of the footnote to its finan	•						
b	If the organization elected, as permitted under FASB ASC 958					sheet	works of	
	art, historical treasures, or other similar assets held for public							
	provide the following amounts relating to these items:		,				,	
	(i) Revenue included on Form 990, Part VIII, line 1					•	\$	
							\$	
2	If the organization received or held works of art, historical trea							
	the following amounts required to be reported under FASB AS				5 , 1			
а	Revenue included on Form 990, Part VIII, line 1						\$	
	Assets included in Form 990, Part X						\$	

Schedule D (Form 990) 2021

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

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 (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
<b>b</b> Buildings				
c Leasehold improvements		152,867.	152,230.	637.
<b>d</b> Equipment		53,616.	53,459.	157.
e Other		50,131.	45,560.	4,571.
Total. Add lines 1a through 1e. (Column (d) must equa	5,365.			

Schedule D (Form 990) 2021

Schedule D (Form 990) 2021 ACADEMY FOR	R INTEGRATED A	RTS **	-***1816 Page
Part VII Investments - Other Securities.	-		
Complete if the organization answered "Yes'		11b. See Form 990, Part X, line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or en	d-of-year market value
1) Financial derivatives			
2) Closely held equity interests			
<b>3)</b> Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes'			
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or en	d-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes'		11d. See Form 990, Part X, line 15.	T
(a	) Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
otal. (Column (b) must equal Form 990, Part X, col. (B) lin	ne 15.)	<b>&gt;</b>	
Complete if the organization answered "Yes'	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 25	<u>.                                    </u>
(a) Description of liability			(b) Book value
(1) Federal income taxes			
(2) PAYROLL WITHHOLDINGS			6,353
(3)			1

<u>1.</u>	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)	PAYROLL WITHHOLDINGS	6,353.
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.)	6,353.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the X 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

Schedule D (Form 990) 2021

Part XI	Recond	iliation	of Revenue	per Audited	Financial	<b>Statements</b>	With	Revenue	per Return

га	T XI Reconciliation of Revenue per Audited Financial State		ic per metam.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line	e 12a.		
1	Total revenue, gains, and other support per audited financial statements		1	4,232,868.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
С	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)			
е	Add lines 2a through 2d		2e	0.
3	Subtract line 2e from line 1		3	4,232,868.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
С	Add lines 4a and 4b		4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)		5	4,232,868.
			• • • • • • • • • • • • • • • • • • • •	
Pa	t XII Reconciliation of Expenses per Audited Financial Sta		• • • • • • • • • • • • • • • • • • • •	
Pa		tements With Expen	ses per Return	<b>).</b>
Pa 1	t XII Reconciliation of Expenses per Audited Financial Sta	tements With Expen e 12a.	ses per Return	
	T XII Reconciliation of Expenses per Audited Financial Star  Complete if the organization answered "Yes" on Form 990, Part IV, line	tements With Expen e 12a.	ses per Return	<b>).</b>
1	Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements	tements With Expen	ses per Return	<b>).</b>
1 2	Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:	tements With Expen	ses per Return	<b>).</b>
1 2 a	Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities	2a 2b	ses per Return	<b>).</b>
1 2 a b	Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments	2a 2b 2c	ses per Return	<b>).</b>
1 2 a b	Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses	2a 2b 2c 2d	ses per Return	0. 0.
1 2 a b c	Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	2a 2b 2c 2d	ses per Return	4,236,679.
1 2 a b c d	Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d	2a 2b 2c 2d	ses per Return	0. 0.
1 2 a b c d e	Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1	2a   2b   2c   2d	ses per Return	0. 0.
1 2 a b c d e 3 4	Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1:	2a	ses per Return	0. 0.
1 2 a b c d e 3 4 a	Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b	2a	2e 3	0. 0.

| Part XIII | Supplemental Information.

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 X, LINE 2:

THE ACADEMY IS EXEMPT FROM FEDERAL INCOME TAX UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE(THE "CODE") AND COMPARABLE STATE LAW AS CHARITABLE ORGANIZATIONS WHEREBY ONLY UNRELATED BUSINESSINCOME, AS DEFINED BY SECTION 509(A)(2) OF THE CODE, IS SUBJECT TO FEDERAL INCOME TAX. THE ACADEMYCURRENTLY HAS NO UNRELATED BUSINESS INCOME. ACCORDINGLY, NO PROVISION FOR INCOME TAXES HAS BEENRECORDED. THE ACADEMY HAS ADOPTED PROVISIONS OF FASB STANDARD ON ACCOUNTING FOR UNCERTAINTY ININCOME TAXES (ASC 740-10-25). THE ACADEMY DOES NOT BELIEVE THERE ARE ANY MATERIAL UNCERTAIN TAXPROVISIONS AND, ACCORDINGLY, THEY WILL NOT RECOGNIZE ANY LIABILITY FOR UNRECORDED TAX BENEFITS. FOR THEYEAR ENDED JUNE 30, 2022, THERE WAS NO INTEREST OR PENALTIES RECORDED IN THE FINANCIAL STATEMENTS.

Schedule D (Form 990) 2021

Schedule D	(Form 990) 2021	ACADEMY FOR	INTEGRATED	ARTS	**-***1816	Page 5
Part XIII	(Form 990) 2021 Supplemental Inform	nation (continued)				
	1	(00.11.11.10.00)				
					<u></u>	

### **SCHEDULE E**

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

### **Schools**

► Complete if the organization answered "Yes" on Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

ACADEMY FOR INTEGRATED ARTS

Employer identification number \*\*-\*\*1816

rtI		Y	ES
Does the organization have a racially nondiscriminatory policy toward students by statem	nent in its charter,		
bylaws, other governing instrument, or in a resolution of its governing body?		1	
Does the organization include a statement of its racially nondiscriminatory policy toward s			
catalogues, and other written communications with the public dealing with student admis		2 2	Х
Has the organization publicized its racially nondiscriminatory policy on its primary publicly			
homepage at all times during its taxable year in a manner reasonably expected to be notice			
homepage, or through newspaper or broadcast media during the period of solicitation for	-		
registration period if it has no solicitation program, in a way that makes the policy known	-		
community it serves? If "Yes," please describe. If "No," please explain. If you need more s	· · · · · · · · · · · · · · · · · · ·	3 2	X
RACIALLY NONDISCRIMINATORY POLICY IS PUBLICIZ			
Does the organization maintain the following?			
Records indicating the racial composition of the student body, faculty, and administrative	e staff?	la 2	X
Records documenting that scholarships and other financial assistance are awarded on a Copies of all catalogues, brochures, announcements, and other written communications		lb	
with student admissions, programs, and scholarships?	4	lc 2	X
Copies of all material used by the organization or on its behalf to solicit contributions?	4	ld 2	X
If you answered "No" to any of the above, please explain. If you need more space, use Pa	- 4 11		
	art II.		
THE SCHOOL DOES NOT AWARD SCHOLARSHIPS OR PRO			
	OVIDE FINANCIAL		
THE SCHOOL DOES NOT AWARD SCHOLARSHIPS OR PRO	OVIDE FINANCIAL		
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THE SCHOOL DOES NOT AWARD SCHOLARSHIPS OR PROASSISTANCE BECAUSE THE SCHOOL IS A TUITION FROM Does the organization discriminate by race in any way with respect to:  Students' rights or privileges?	OVIDE FINANCIAL REE ORGANIZATION	ia	
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THE SCHOOL DOES NOT AWARD SCHOLARSHIPS OR PROASSISTANCE BECAUSE THE SCHOOL IS A TUITION FROM Does the organization discriminate by race in any way with respect to:  Students' rights or privileges?  Admissions policies?  Employment of faculty or administrative staff?  Scholarships or other financial assistance?  Educational policies?  Use of facilities?  Athletic programs?  Other extracurricular activities?  If you answered "Yes" to any of the above, please explain. If you need more space, use Public to any of the above, please explain. If you need more space, use Public to any of the above, please explain. If you need more space, use Public to any of the above, please explain. If you need more space, use Public to any of the above, please explain. If you need more space, use Public to any of the above, please explain. If you need more space, use Public to any of the above, please explain. If you need more space, use Public to any of the above, please explain. If you need more space, use Public to any of the above, please explain. If you need more space, use Public to any of the above, please explain. If you need more space, use Public to any of the above, please explain. If you need more space, use Public to any of the above, please explain.	OVIDE FINANCIAL REE ORGANIZATION  5 5 5 5 5 7 7 Cart II.	ib ic id id id id id id id id id id id id id	X

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

Schedule E (Form 990) 2021

**Part II** Supplemental Information. Provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also provide any other additional information.

### LINE 6 - EXPLANATION OF GOVERNMENT FINANCIAL AID:

### AFIA RECEIVED GOVERMENT FUNDING FROM THE FOLLOWING IN FISCAL YEAR '22:

LOCAL

PROPOSITION C \$327,937

STATE

BASIC FORMULA 2,056,238

TRANSPORTATION 21,121

BASIC FORMULA CLASSRM TRUST FUND 99,724

SCHOOL FOOD SERVICE (ST REIMB)& OTHER REV 7,022

FEDERAL

MEDICAID 59,125

SPECIAL ED PART B ENTITLEMENT CFDA 84.027A 60,569

SCHOOL LUNCH CFDA 10.555,10.551 110,933

SCHOOL BREAKFAST CFDA 10.553,10.551 59,163

TITLE I CFDA 84.010A 166,297

TITLE IVA CFDA 84.424A 11,769

TITLE II CFDA 84.367 18,173

<u>CARES</u> 567,464

32062 10-18-21 Schedule E (Form 990) 2021

### SCHEDULE O (Form 990)

Department of the Treasury

Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on

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

▶ Attach to Form 990 or Form 990-EZ.

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

2021
Open to Public Inspection

Internal Revenue Service

Name of the organization

ACADEMY FOR INTEGRATED ARTS

Employer identification number \*\*-\*\*1816

·
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
COLLEGE PREPARATORY SECONDARY SCHOOL. THE ARTS WILL SERVE AS A
CATALYST FOR LEARNING, ACHIEVEMENT, CURIOSITY AND SELF-ESTEEM.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
MUSIC, DANCE AND DRAMATIZATION.
LEARNING THROUGH THE ARTS ENLIVENS INSTRUCTION, INCREASES STUDENT
INVOLVEMENT AND STRENGTHENS BOTH MEMORY AND MEANING. STUDENTS WILL
DEMONSTRATE DEPTH OF KNOWLEDGE IN THEIR ABILITY TO DESIGN, CONNECT,
APPLY CONCEPTS, ANALYZE, CREAT AND CRITQUE.
FORM 990, PART VI, SECTION A, LINE 2:
EMILY BROWN (BOARD SECRETARY) IS THE DAUGHTER OF PETER BROWN (DIRECTOR) AND
LYNNE BROWN (BOARD PRESIDENT) WHO ARE HUSBAND-WIFE.
FORM 990, PART VI, SECTION B, LINE 11B:
COPIES OF FORM 990 ARE DISTRIBUTED TO BOARD MEMBERS AT THE BOARD MEETING
FOR REVIEW PRIOR TO FILING THE RETURN.
FORM 990, PART VI, SECTION B, LINE 12C:
ALL BOARD MEMBERS ARE REQUIRED TO FILE AN ANNUAL DISCLOSURE WITH THE
MISSOURI ETHICS COMMISSION.
FORM 990, PART VI, SECTION B, LINE 15A:
COMPENSATION FOR EXECUTIVE DIRECTORS AND PRINCIPALS ARE BASED ON

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

132211 11-11-21

Schedule O (Form 990) 2021

Schedule O (Form 990) 2021	Page 2
Name of the organization  ACADEMY FOR INTEGRATED ARTS	Employer identification number **-**1816
COMPARISONS WITH OTHER CHARTER SCHOOLS.	
FORM 990, PART VI, SECTION C, LINE 19:	
ALL DOCUMENTS REQUIRED BY SECTION 1604 FOR PUBLIC INSPECT	ON ARE AVAILABLE
AT OUR OFFICE LOCATION UPON REQUEST.	

# SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Related Organizations and Unrelated Partnerships

▶ Attach to Form 990.

2021

OMB No. 1545-0047

Open to Public Inspection

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

Employer identification number \*\*-\*\*1816Direct controlling End-of-year assets Total income ூ Legal domicile (state or Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33. foreign country) Primary activity ACADEMY FOR INTEGRATED ARTS Name, address, and EIN (if applicable) of disregarded entity Name of the organization Part I

Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year. Part II

Ulganizations duning the tay year.							
(a)	(q)	(c)	(p)	(e)	(f)	(6)	VE V40)
Name, address, and EIN	Primary activity	Legal domicile (state or	Exempt Code	Public charity	Direct controlling	section 3 (20)(13)	(c) (d); led
of related organization		foreign country)	section	status (if section	entity	entity?	5
				501(c)(3))		Yes	No
AFIA HOLDING COMPANY - 81-3107573							
800 W MEYER BLVD							
KANSAS CITY, MO 64113		MISSOURI		LINE 12B, II			×
AFIA SUPPORTING FOUNDATION - 81-0692147							
10206 DELMAR LN							
OVERLAND PARK, KS 66207		MISSOURI		LINE 12B, II			×

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

Schedule R (Form 990) 2021

ACADEMY FOR INTEGRATED ARTS Schedule R (Form 990) 2021

Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year. Part III

Page 2

\*\*-\*\*1816

Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year. Part IV

ļ		_ <del>@ p</del>	No										
	<b>(</b>	Percentage 512(b)(13) ownership controlled entity?	Yes										
		age hip	Y										
	Ē	ercenta wnersl											
	(a)	Share of end-of-year	2000										
		end &	ਤੋ										
		otal											
	Œ	Share of total income											
		Shar											
		ortity corp,	,										
	(e)	e of er orp, So	1 1 2										
		(C C T C C C C C C C C C C C C C C C C C	,										
		Direct controlling Type of entity Stentity (C corp. S corp.)											
	Ø	t contr entity											
		Direc											
	(c)	Legal domicile (state or foreign	ntry)										
	<u> </u>	Legal d (stat fore	noo										
		Primary activity											
	<b>(</b> Q)	nary a											
		Prin											
١							1					I	1
		Z ⊆											
		and E nizatio											
	(a)	dress, d orga											
		Name, address, and EIN of related organization											
		Nai of											
I						1	1		I		l	1	I

132162 11-17-21

Schedule R (Form 990) 2021

# Schedule R (Form 990) 2021 ACADEMY FOR INTEGRATED ARTS

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

<b>Note:</b> Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes	٩
1 During the tax year, did the organization engage in any of the following transact	tions with one or more re	transactions with one or more related organizations listed in Parts II-IV?	in Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	entity			1a		×
<b>b</b> Gift, grant, or capital contribution to related organization(s)				1b		×
c Gift, grant, or capital contribution from related organization(s)				10	X	
d Loans or loan guarantees to or for related organization(s)				10		×
e Loans or loan guarantees by related organization(s)				1e		×
						Þ
				= ,		4 >
g sale of assets to related organization(s)				6 -		( ا
h Purchase of assets from related organization(s)				무		×
i Exchange of assets with related organization(s)				1j		×
j Lease of facilities, equipment, or other assets to related organization(s)				1j		×
k Lease of facilities, equipment, or other assets from related organization(s)				#	X	
l Performance of services or membership or fundraising solicitations for related c	related organization(s)			=		×
<b>m</b> Performance of services or membership or fundraising solicitations by related o	elated organization(s)			1m		×
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	ization(s)			1n		×
o Sharing of paid employees with related organization(s)				10		×
<b>p</b> Reimbursement paid to related organization(s) for expenses				1p		×
<b>q</b> Reimbursement paid by related organization(s) for expenses				19		×
r Other transfer of cash or property to related organization(s)				11		×
s Other transfer of cash or property from related organization(s)				1s		×
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	on who must complete th	is line, including covered r	elationships and transaction thresholds.			
(a)	(q)	(0)	(p)			

Name of related organization	Transaction type (a-s)	Amount involved	Method of determining amount involved
(1) AFIA HOLDING COMPANY	Ж	300,000	
(2) AFIA SUPPORTING FOUNDATION	ນ	.000,27	
(3)			
(4)			
(5)			
(9)			
132163 11-17-21	37		Schedule R (Form 990) 2021

Schedule R (Form 990) 2021 ACADEMY FOR INTEGRATED ARTS

Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37. Part VI Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(k) Percentage ownership					Schedule R (Form 990) 2021
al or F					orm
(j) General or managing partner? Yes No					R (F
(h)         (i)         (j)         (k)           Disproportional propertional amount in box 2 languages         Code V-UBI ceneral or Percentage managing partners         Percentage partners           allocations? of Schedule K-1 res   No         Peartner? partners         Ownership           Ves   No         (Form 1065)         Yes   No					Schedule
(h) Disproportionate allocations? Yes No					
(g) Share of end-of-year assets					
(f) Share of total income					
(e) Are all partners sec. 501(c)(3) er orgs.? Yes No					
(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)					
(c) Legal domicile (state or foreign country)					
(b) Primary activity					
(a) Name, address, and EIN of entity					

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# ACADEMY FOR INTEGRATED ARTS EDUCATION COMMITTEE AGENDA

May 18, 2023 4:00 – 5:30 PM 7910 Troost Ave., Kansas City, Missouri

This meeting will be held over Zoom.

https://us06web.zoom.us/j/91718629229?pwd=eXRjdHc5Q2tCK1RuU0w4anhKRjNKQT09

Meeting ID: 917 1862 9229

Passcode: cqvjE5

Dial by your location

+1 312 626 6799 US (Chicago)

- +1 646 558 8656 US (New York)
- +1 301 715 8592 US (Washington DC)
- +1 346 248 7799 US (Houston)
- +1 720 707 2699 US (Denver)
- +1 253 215 8782 US (Tacoma)

Meeting ID: 917 1862 9229

Passcode: 414140

### I. CALL TO ORDER

### II. <u>DISCUSSION ITEMS</u>

Reference Material: Performance Contract

Approval of new hires: Dean of Students/Culture and School Counselor

**Evaluation of Executive Director update and timeline** 

Other items

### III. <u>Meeting Adjournment</u>