# 990

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

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

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

OMB No. 1545-0047

2020

Open to Public Inspection

Department of the Treasur Internal Revenue Service

Inter	nal Reve	enue Service Go to www.irs.gov/Form990 for Instructions and the I		mation.		Inspec	tion
A I	For th	e 2020 calendar year, or tax year beginning 07/01, 2020, and end	ling			0, 20 21	
B (	Check if a	C Name of organization		D Employer ide		number	
_	_	DENVER SCHOOL OF SCIENCE AND TECHNOLOGY, INC.		84-160:	2733		
	Addre	ge Doing business as					
	Name	Number and street (or P.O. box if mail is not delivered to street address)  Room/su	ite	E Telephone nu			
	-	3401 QUEBEC STREET STE 2000		(303) 52	<u>4 – 632</u>	4	
	termi	return/ nated City or town, state or province, country, and ZIP or foreign postal code					
	Amen	DENVER, CO 00207		<b>G</b> Gross receipts		97,886	
	Applic			H(a) Is this a grown subordinates		H	X No
		3401 QUEBEC STREET SUITE 2000, DENVER, CO 80207	I	H(b) Are all subord			No
<u></u>		tempt status: X   501(c)(3)   501(c) ( ) ◀ (insert no.)   4947(a)(1) or	527			See instructions	
J		ite: ▶ WWW.DSSTPUBLICSCHOOLS.ORG		H(c) Group exem			
			ear of format	tion: 2001 <b>M</b>	State of le	egal domicile:	CO
Р	art I	Summary			001/0		
		Briefly describe the organization's mission or most significant activities: DSST PUBLIC			ORMS	URBAN	
nce		PUBLIC EDUCATION BY ELIMINATING EDUCATIONAL INEQUITY A		PARING			
rnai		ALL STUDENTS FOR SUCCESS IN COLLEGE AND THE 21ST CENTU					
Governance	2	Check this box   if the organization discontinued its operations or disposed of more			1 1		1.0
		Number of voting members of the governing body (Part VI, line 1a)			3		$\frac{16.}{16.}$
es	4	Number of independent voting members of the governing body (Part VI, line 1b)			4	1	
viti	5	Total number of individuals employed in calendar year 2020 (Part V, line 2a)			5	Ι,	,076. 150.
Activities &	6	Total number of volunteers (estimate if necessary)			6		
_		Total unrelated business revenue from Part VIII, column (C), line 12			7a		0.
	D	Net unrelated business taxable income from Form 990-T, Part I, line 11	<del></del>		7b	C	
		0 17 17 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		<b>Prior Year</b> 2,764,31	Q	23,015	
ine	8	Contributions and grants (Part VIII, line 1h)		13,561,11		73,955	·
Revenue	9	Program service revenue (Part VIII, line 2g)		759,94			,838.
Re	10 11	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		700,09	0.	520	0.
	12	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		17,085,37	• •	97,297	
	13	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		4,518,24		12,850	
	14	Benefits paid to or for members (Part IX, column (A), line 4)		1,010,21	0.	12,000	0.
	4.5	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		10,307,54		65,536	
Expenses	16 2	Professional fundraising fees (Part IX, column (A), line 11e)		20,00,,01	0.		0.
ber	h	Total fundraising expenses (Part IX, column (D), line 25) ► 416,930.	• •				
ñ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	_	7,172,87	8.	22,236	,855.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	• •	21,998,67		100,623	-
	19	Revenue less expenses. Subtract line 18 from line 12	• •	-4,913,29		-3,325	
or				ning of Current		End of Yea	
Net Assets or Fund Balances	20	Total assets (Part X, line 16)		23,821,01	6.	43,159	,982.
Ass I Ba	21	Total liabilities (Part X, line 26)	•	827,56	50.	8,473	,984.
Net	22	Net assets or fund balances. Subtract line 21 from line 20.		22,993,45	6.	34,685	,998.
	art II	Signature Block	'		<u>'</u>		
Un	der pei	nalties of perjury, I declare that I have examined this return, including accompanying schedules and s ect, and complete. Declaration of preparer (other than officer) is based on all information of which prepare	tatements, a	and to the best of	f my knov	ledge and b	elief, it is
tru	e, corre	ect, and complete. Declaration of preparer (other than officer us based on all information of which prepare	er has any ki	nowledge.			
		I fil the			5/6/20	122	
Sig		Signature of officer /		Date	0, 0, = 0		
He	re	NICHOLAS PLANTAN VP OF FINANC	CE				
		Type or print name and title					
Dai	4	Print/Type preparer's name Preparer's signature Date		Check	if PTIN		
Pai	a parer	ADAM R SMITH CPA 05/	06/202			0095896	56
	only	Firm's name ▶BKD, LLP			4-016		
		Firm's address ▶111 SOUTH TEJON, SUITE 800 COLORADO SPRINGS, CO 80903-9848				1-4290	
		IRS discuss this return with the preparer shown above? (see instructions)			[	X Yes	No
For	Pape	rwork Reduction Act Notice, see the separate instructions.				Form <b>99</b> (	<b>)</b> (2020)

DENVER SCHOOL OF SCIENCE AND TECHNOLOGY, INC. 84-1602733 Form 990 (2020) Page 2 Part III **Statement of Program Service Accomplishments** Check if Schedule O contains a response or note to any line in this Part III 1 Briefly describe the organization's mission: DSST PUBLIC SCHOOLS TRANSFORMS URBAN PUBLIC EDUCATION BY ELIMINATING EDUCATIONAL INEQUITY AND PREPARING ALL STUDENTS FOR SUCCESS IN COLLEGE AND THE 21ST CENTURY. 2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O. 3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?.... If "Yes," describe these changes on Schedule O. 4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported. 4a (Code: ) (Expenses \$ 97,607,469. including grants of \$ 17,088,836. ) (Revenue \$ 74,009,393. ) PROVIDING FUNDING AND MANAGEMENT SERVICES FOR THE ESTABLISHMENT AND GROWTH OF PUBLIC SCHOOLS. DSST CURRENTLY SERVES A STUDENT POPULATION OF 6,800 STUDENTS IN 15 SCHOOLS. AT FULL ENROLLMENT IN 2025, DSST WILL SERVE 8,850 STUDENTS IN 18 SCHOOLS ACROSS DENVER PUBLIC SCHOOLS AND AURORA PUBLIC SCHOOLS. TO DATE DSST HAS PREPARED 100% OF OUR GRADUATES TO ATTEND A FOUR YEAR COLLEGE. DSST SCHOOLS ARE RECONGIZED AMONG THE TOP PERFORMING SCHOOLS IN COLORADO. **4b** (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ ) (Expenses \$ including grants of \$ ) (Revenue \$ **4c** (Code:

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

**4e** Total program service expenses ▶ 97,607,469.

JSA 0E1020 1.000 ) (Revenue \$

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Par	t IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors See instructions?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			Х
	candidates for public office? If "Yes," complete Schedule C, Part I	3		Λ
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			Х
5	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	assessments, or similar amounts as defined in Revenue Procedure 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	-		
ŭ	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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
_	VII, VIII, IX, or X as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	110	x	
ŀ	Did the organization report an amount for investments-other securities in Part X, line 12, that is 5% or more	11a	21	
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
c	Did the organization report an amount for investments-program related in Part X, line 13, that is 5% or more	115		
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
c	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Х	
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
k	Was the organization included in consolidated, independent audited financial statements for the tax year? If		3.7	
40	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		21
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I See instructions	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
	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 domestic government on Part IX. column (A), line 1? If "Yes." complete Schedule I. Parts Land II	21	х	
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Part	Checklist of Required Schedules (continued)		V	
	Did the constitution and the AT 000 of constitution at the configuration of the desired		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	22		Х
23	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		
23	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	Х	
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		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		
25 a	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			Х
20	persons? If "Yes," complete Schedule L, Part III	27		
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
2	Part IV instructions, for applicable filing thresholds, conditions, and exceptions):  A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
а	"Yes," complete Schedule L, Part IV	28a		Х
h	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV.	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If	200		
·	"Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		Х
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 Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34	X	
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			v
	related organization? If "Yes," complete Schedule R, Part V, line 2.	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	27		Х
20	and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	37		
38	19? <b>Note:</b> All Form 990 filers are required to complete Schedule O.	38	Х	
Part		1 33		
ent.	Check if Schedule O contains a response or note to any line in this Part V			
	Chock is contiduo o containo a response of note to any into in the fact v	<u> </u>	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	X	

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Par	Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return. 2a 1,076			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
-	<b>Note:</b> If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
3 2	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
	If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation on Schedule O</i>	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
4a		4a		Х
L	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	-Tu		
D	If "Yes," enter the name of the foreign country ►			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	5a		X
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			Х
_	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	۵. ا		
	gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?.	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	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		
	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	<b>Note:</b> 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			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i> · · · · ·	14b		
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		Х
	If "Yes," see instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
10	If "Yes," complete Form 4720, Schedule O.			
	, and the second of the second			

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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

Sect	ion A. Governing Body and Management					
					Yes	No
12	Enter the number of voting members of the governing body at the end of the tax year	1a	16			
ıa	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	16			
2	Did any officer, director, trustee, or key employee have a family relationship or a business re	lations	ship with			
	any other officer, director, trustee, or key employee?			2		X
3	Did the organization delegate control over management duties customarily performed by or un	nder t	ne direct			
	supervision of officers, directors, trustees, or key employees to a management company or other p	person	?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was fi			4		X
5	Did the organization become aware during the year of a significant diversion of the organization's	assets	?	5		X
6	Did the organization have members or stockholders?			6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to el			_		v
	one or more members of the governing body?			7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval			76		X
_	stockholders, or persons other than the governing body?			7b		A
8	Did the organization contemporaneously document the meetings held or written actions und	ertake	n during			
	the year by the following:			8a	X	
a	The governing body?			8b	X	_
ь 9	Each committee with authority to act on behalf of the governing body?			0.5		
3	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O.			9		X
Secti	on B. Policies (This Section B requests information about policies not required by the Inte			Code	.)	
					Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a		Х
	If "Yes," did the organization have written policies and procedures governing the activities of					
	affiliates, and branches to ensure their operations are consistent with the organization's exempt p	urpose	s?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before for	ling th	e form? .	11a		X
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.					
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests	hat c	ould give			
	rise to conflicts?			12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the p	-			v	
	describe in 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	Λ	
15	Did the process for determining compensation of the following persons include a review are		-			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation			15a	X	
a	The organization's CEO, Executive Director, or top management official			15b	X	
b	Other officers or key employees of the organization			.02		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar	r arra	ngement			
IVa	with a taxable entity during the year?		ngemen	16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization	to eva	aluate its			
_	participation in joint venture arrangements under applicable federal tax law, and take steps to					
	organization's exempt status with respect to such arrangements?			16b		
Secti	on C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed ▶					
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable),		and 990-T	(Sec	tion 5	01(c)
	(3)s only) available for public inspection. Indicate how you made these available. Check all that ap		- 01			
	Own website Another's website X Upon request Other (explain on So		,			
19	Describe on Schedule O whether (and if so, how) the organization made its governing document for a solid state of the problem of the solid state o	nents,	conflict of	inter	est p	oolicy,
20	and financial statements available to the public during the tax year.	noolee	and record	o <b>b</b>		
20	State the name, address, and telephone number of the person who possesses the organization's NICHOLAS PLANTAN 3401 QUEBEC STREET STE 2000 DENVER, CO 80207	JUUKS	and record	<b>→</b>		

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

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

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

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	box, office or direct	unles	Pos neck ss pe	more rson	e than of is both cor/trust employee	an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
ANDIII MIDES	40.00									
(1)BILL KURTZ CEO	40.00			Х				239,797.	0.	20,118.
(2) CHRISTINE NELSON	40.00			Λ				239,191.	0.	20,110.
CHIEF OF SCHOOLS	0.			Х				152,550.	0.	17,354.
(3) HEATHER LAMM - (THRU 11/21)	40.00			21				132,330.	<u> </u>	17,331.
CHIEF ADVOCACY & COMM. OFFICER	0.			Х				146,006.	0.	16,856.
(4)NICOLE FULBRIGHT	40.00			- 21				110,000.	<u> </u>	10,030.
CHIEF ACADEMIC OFFICER	0.			Х				145,349.	0.	17,302.
(5) GREGG GONZALES	40.00									
VP OF SCHOOLS	0.	-				X		142,396.	0.	11,342.
(6) LEAH PETERS- (THRU 4/21)	40.00							<u>-</u>		
VP OF ACADEMICS	0.					X		143,402.	0.	9,360.
(7) REBECCA BLOCH	40.00									
SCHOOL DIRECTOR	0.					X		130,794.	0.	9,433.
(8) BECCA MEYER	40.00									
SCHOOL DIRECTOR	0.					X		127,973.	0.	7,770.
(9) SCOTT FINLAY - (THRU 5/21)	40.00									
VP OF DEVELOPMENT	0.					X		127,184.	0.	7,966.
(10)NICHOLAS PLANTAN	40.00									
VP OF FINANCE	0.			Х				90,543.	0.	19,438.
(11) TAMEEKA SMITH - (THRU 8/20)	40.00									
CHIEF OPERATING OFFICER	0.			Х				89,305.	0.	11,225.
(12) BRENDA ALLEN	2.00									
DIRECTOR	0.	Х						0.	0.	0.
(13) SCOTT ARTHUR	2.00									
DIRECTOR	0.	Х						0.	0.	0.
(14) BARBARA BROHL	2.00									_
DIRECTOR	0.	X						0.	0.	0.
										Form <b>QQ</b> (2020)

Form 990 (2020)

Pa	rt VII Section A. Officers, Directors, Tru	ustees, Ke	y En	nplo	ye	es,	and I	lig	hest Compensat	ed Employees (c	ontinue	ed)	
	(A)	(B)			(	C)			(D)	(E)		(F)	
	Name and title	Average hours per week (list any hours for	box,	unles	heck ss pe d a c	erson	e than o is both tor/trust	an ee)	Reportable compensation from the	Reportable compensation from related organizations	am	stimated nount of other pensation	f
		related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	org: and	om the anizatio d related anization	n d
15)	BILLY BROWN	2.00											
	DIRECTOR	0.	Х						0	0.			0
16)	PETER FRITZINGER	2.00											
	VICE CHAIR	1.00	Х		Х				0	. 0.			0
17)	DAVID GREENBERG	2.00											
	DIRECTOR	0.	Х						0	. 0.			0
18)	JUSTIN JASCHKE	2.00											
	DIRECTOR	0.	Х						0	. 0.			0
19)	JANET LOPEZ	2.00											
	DIRECTOR	0.	Х						0	. 0.			0
20)	PATRICK O'ROURKE	2.00											
	DIRECTOR	0.	Х						0	. 0.			0
21)	REGINA RODRIGUEZ	2.00											
	DIRECTOR	†ō.	Х						0	. 0.			0
22)	GLENN RUSSO	2.00											
	TREASURER	1.00	Х		Х				0	. 0.			0
23)	GREG SISSEL	2.00											
	DIRECTOR	0.	Х						0	. 0.			0
24)	GEORGE SPARKS	2.00											
	DIRECTOR	0.	Х						0	. 0.			0
25)	JEFF TARR	2.00											
	DIRECTOR	0.	Х						0	. 0.			0
1b	Sub-total				1			_	1,535,299.	0.	1	L48,1	<u>I64.</u>
	Total from continuation sheets to Part VII, S			• •	• •	• •		•	0.	0.			0.
	Total (add lines 1b and 1c)							•	1,535,299.	0.	1	L48,1	<u> 164.</u>
	Total number of individuals (including but not							o re	eceived more than	\$100.000 of			
	reportable compensation from the organizatio						,			, ,			
												Yes	No
3	Did the organization list any former office	er directo	or or	tri	iste	م	kev e	mn	alovee or highes	t compensated			
Ū	employee on line 1a? If "Yes," complete Sched										3		Х
4	For any individual listed on line 1a, is the organization and related organizations groups												
	individual										4	Х	
5	Did any person listed on line 1a receive or										-		
3	for services rendered to the organization? If "Y										5		Х

#### Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
ATTACHMENT 1		

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

Part VII Section A. Officers, Directors, Tru	ıstees, Ke	y En	nplo	ye	es,	and F	lig	hest Compensat	ed Emplo	yees (d	ontinue		ge <b>8</b>
(A) Name and title	(B) Average hours per week (list any hours for	(do r box, office	not cl unles	Pos heck ss pe	c) sition more erson direct	e than o is both or/trust	ne an ee)	(D)  Reportable compensation from the	(E) Reporta compensati relate organiza	able ion from ed	Estin amo ot	mated unt of her ensation	1
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099	9-MISC)	orgar and	n the nization related izations	
26) ALYSSA WHITEHEAD-BUST	2.00												
DIRECTOR	0.	X						0.		0.			C
27) GLORIA ZAMORA BOARD CHAIR	2.00	X		Х				0.		0.			0
28) CATHERINE OTTO - (BEGAN 3/21)	40.00	Λ		Λ				0.	•	0.			
CHIEF OPERATING OFFICER	0.			Х				0.		0.			О
		-											
								0		0			
1b Sub-total c Total from continuation sheets to Part VII, S d Total (add lines 1b and 1c)	ection A						<b>&gt;</b>	0.	<b>1</b>	0.			0.
Total number of individuals (including but not reportable compensation from the organization)		nose 31		d a	bove	e) who	re	eceived more than	\$100,000	of	1-		
3 Did the organization list any former offic employee on line 1a? If "Yes," complete Schedu											3		No X
4 For any individual listed on line 1a, is the sorganization and related organizations greindividual	eater than	\$15	50,0	00?	) If	"Yes	,"	complete Schedu	le J for	such	4	X	
5 Did any person listed on line 1a receive or for services rendered to the organization? If "Ye	accrue co	mpen	sati	on i	fron	n any	un	related organization	on or indiv	ridual	5		X
Section B. Independent Contractors													
<ol> <li>Complete this table for your five highest com- compensation from the organization. Report of year.</li> </ol>													
(A)								(B)			(C)		

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

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

#### Part VIII Statement of Revenue

ı aı	C VIII	Check if Schedule O contains a respon	nse or note to an	y line in this Part V	/III		
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ts ts	1a	Federated campaigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues					
عَ ق	C	Fundraising events 1c					
fts,	d	Related organizations					
ਛੂੰ	e	Government grants (contributions) 1e	10,810,830.				
ns,	f	All other contributions, gifts, grants,	10,010,050.				
흕	'	and similar amounts not included above . 1f	12,204,410.				
를	_	Noncash contributions included in	12,201,110.				
달	g		\$ 0.				
a Se	h	Total. Add lines 1a-1f		23,015,240.			
	-"	Total. Add lines 1a-11	Business Code	23/013/2101			
ė	20	PER PUPIL REVENUE	611710	57,626,347.	57,626,347.		
<u>ĕ</u> <u>₹</u>	2a	MILL LEVY	611710	15,955,423.	15,955,423.		
Program Service Revenue	b	STUDENT FEES	611710	371,280.	371,280.		
a s	C	MISC STUDENT FESS	611710	2,040.	2,040.		
200	d			_,,,,,,	_,,,,,,		
P.	e	All other program conting revenue					
	f g	All other program service revenue		73,955,090.			
	3	Investment income (including dividends,					
	•	other similar amounts)		315,742.			315,742.
	4	Income from investment of tax-exempt bond		0.			
	5	Royalties		0.			
		(i) Real	(ii) Personal				
	6a	Gross rents 6a					
	b	Less: rental expenses 6b					
	С	Rental income or (loss) 6c					
	d	Net rental income or (loss)		0.			
	7a	Gross amount from (i) Securities	(ii) Other				
		sales of assets					
		other than inventory <b>7a</b> 600,000.					
<u>e</u>	b	Less: cost or other basis					
evenue		and sales expenses <b>7b</b> 588,904.					
ě	С	Gain or (loss) 7c 11,096.					
<u>ت</u> 22	d	Net gain or (loss)		11,096.			11,096.
Other R	8a	Gross income from fundraising					
0		events (not including \$					
		of contributions reported on line					
		1c). See Part IV, line 18 8a	0.				
	b	Less: direct expenses 8b	0.				
	С	Net income or (loss) from fundraising events		0.			
	9a	Gross income from gaming					
		activities. See Part IV, line 19 9a	0.				
	b	Less: direct expenses 9b	0.				
	С	Net income or (loss) from gaming activities		0.			
	10a	Gross sales of inventory, less					
		returns and allowances10a	0.				
	b	Less: cost of goods sold	0.				
	С	Net income or (loss) from sales of inventory		0.			
ns			Business Code				
eo ne	11a						
Miscellaneous Revenue	b						
Sce Re	C						
Ĭ	d	All other revenue					
	e	Total Add lines 11a-11d		0.	73,955,090.		225 022
	12	Total revenue. See instructions	🗩	97,297,168.	13,955,090.		326,838.

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#### Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

	Check if Schedule O contains a resp	onse or note to any lin	e in this Part IX		
	not include amounts reported on lines 6b, 7b, 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	12,850,000.	12,850,000.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	0.			
3	Grants and other assistance to foreign				
	organizations, foreign governments, and	_			
	foreign individuals. See Part IV, lines 15 and 16	0.			
4	Benefits paid to or for members	0.			
5	Compensation of current officers, directors,				
	trustees, and key employees	933,124.	748,412.	83,957.	100,755.
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and	0			
	persons described in section 4958(c)(3)(B)	0.	40 411 020	1 601 045	055 204
7	Other salaries and wages	51,350,371.	49,411,930.	1,681,047.	257,394.
8	Pension plan accruals and contributions (include	2 227 212	2 155 (02	70 000	0 200
	section 401(k) and 403(b) employer contributions)	2,237,313.	2,155,682.	72,233.	9,398.
9	Other employee benefits	7,073,750. 3,941,637.	6,812,492.	229,510. 126,959.	31,748.
10	Payroll taxes	3,941,637.	3,798,657.	126,959.	16,021.
	Fees for services (nonemployees):	_			
а	Management	0. 185,504.		105 504	
	Legal	64,838.		185,504. 64,838.	
	Accounting	04,838.		04,030.	
	Lobbying	0.			
	Professional fundraising services. See Part IV, line 17	3,844.		3,844.	
	Investment management fees	3,044.		3,044.	
g	Other. (If line 11g amount exceeds 10% of line 25, column	13,547,932.	13,547,932.		
	(A) amount, list line 11g expenses on Schedule O.) ATCH 2	76,472.	76,472.		
	Advertising and promotion	98,613.	98,613.		
13	Office expenses	2,379,985.	2,379,985.		
14	Information technology	0.	273777333.		
15	Royalties	563,432.	563,432.		
16	Occupancy	102,331.	102,331.		
	Travel	102,001	101,001		
10	Payments of travel or entertainment expenses for any federal, state, or local public officials	0.			
10	Conferences, conventions, and meetings	0.			
	Interest	0.			
21	Payments to affiliates	0.			
22	Depreciation, depletion, and amortization	389,562.	377,887.	10,061.	1,614.
	Insurance	140,698.	·	140,698.	<u> </u>
24					
	above (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
а	EDUCATIONAL SUPPLIES	4,540,193.	4,540,193.		
b	DUES & FEES	143,451.	143,451.		
С					
d					
е	All other expenses				
	Total functional expenses. Add lines 1 through 24e	100,623,050.	97,607,469.	2,598,651.	416,930.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and				
	fundraising solicitation. Check here   if following SOP 98-2 (ASC 958-720)	0.			

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### Part X Balance Sheet

	art A	Check if Schedule O contains a response or note to any line in this Pa	art X		
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	12,386,501.	1	13,229,768.
	2	Savings and temporary cash investments	0.	2	0.
	3	Pledges and grants receivable, net	0.	3	0.
	4	Accounts receivable, net	30,573.	4	3,027,429.
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons	0.	5	0.
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)	0.	6	0.
Ś	7	Notes and loans receivable, net	0.	7	0.
Assets	8	Inventories for sale or use	0.	8	0.
As	9	Prepaid expenses and deferred charges	169,048.	9	190,458.
		Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 4,519,504.			
	h	Less: accumulated depreciation	413,304.	100	706,067.
	11	Investments - publicly traded securities	1,301,218.	11	5,735,462.
	12	Investments - other securities. See Part IV, line 11	0.	12	0.
	13	Investments - program-related. See Part IV, line 11.	0.	13	0.
	14	Intangible assets	0.	14	0.
	15	Other assets. See Part IV, line 11	9,520,372.	15	20,270,798.
	16	Total assets. Add lines 1 through 15 (must equal line 33)	23,821,016.	16	43,159,982.
	17		661,368.	17	4,636,850.
		Accounts payable and accrued expenses	0.	18	0.
	18	Grants payable	166,192.	19	0.
	19	Deferred revenue.	0.	20	0.
	20 21	Tax-exempt bond liabilities	0.	21	0.
	22		0.	21	0.
Liabilities	22	Loans and other payables to any current or former officer, director,			
ij		trustee, key employee, creator or founder, substantial contributor, or 35%	0.	22	0.
Lia	22	controlled entity or family member of any of these persons	0.	23	0.
	23	Secured mortgages and notes payable to unrelated third parties	0.	23	0.
	24	Unsecured notes and loans payable to unrelated third parties.	0.	24	0.
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X	0.	0.5	3,837,134.
	20	of Schedule D	827,560.		8,473,984.
	26	Total liabilities. Add lines 17 through 25	027,300.	26	0,473,904.
es		Organizations that follow FASB ASC 958, check here ► X and complete lines 27, 28, 32, and 33.			
anc	27	Net assets without donor restrictions	22,993,456.	07	30,848,864.
Bal	27 28	the state of the s	22,993,430.	27	3,837,134.
힏	28	Net assets with donor restrictions.	0.	28	3,037,134.
Fund Balances		Organizations that do not follow FASB ASC 958, check here ▶ and complete lines 29 through 33.			
ō	20			20	
sts	29	Capital stock or trust principal, or current funds		29	
Assets	30	Paid-in or capital surplus, or land, building, or equipment fund.  Retained earnings, endowment, accumulated income, or other funds.		30	
t A	31		22 002 450	31	24 605 000
Net	32	Total liebilities and not assets (fund belonces	22,993,456.	32	34,685,998.
_	33	Total liabilities and net assets/fund balances	23,821,016.	33	43,159,982. Form <b>990</b> (2020)

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Part	XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					_ X
1	Total revenue (must equal Part VIII, column (A), line 12)	1		97,2		
2	Total expenses (must equal Part IX, column (A), line 25)	2		100,623,050.		
3	Revenue less expenses. Subtract line 2 from line 1	3 -			25,8	882.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		22,9	93,4	156.
5	Net unrealized gains (losses) on investments	5			42,9	993.
6	Donated services and use of facilities	6				0.
7	Investment expenses	7				0.
8	Prior period adjustments	8		12,8	08,3	362.
9	Other changes in net assets or fund balances (explain on Schedule O)	9		2,1	67,0	069.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	32, column (B))	10		34,6	85,9	98.
Part	XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in					
	Schedule O.					
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 cor	npiled	lor			
	reviewed on a separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were aud	ted o	n a			
	separate basis, consolidated basis, or both:					
	Separate basis X Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over	ersigh	t of			
	the audit, review, or compilation of its financial statements and selection of an independent accounts	nt?.		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, e	xplain	on			
	Schedule O.					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set fo	rth in	the			
	Single Audit Act and OMB Circular A-133?			3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not und	lergo	the			
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such a			3b		

#### **SCHEDULE A** (Form 990 or 990-EZ)

## **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

► Attach to Form 990 or Form 990-EZ.

2001 201

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

cempt charitable trust.	
	Open to Public
ion.	Inspection
Employer identification	on number

DEI	IVEI	R SCHOOL OF SCIENCE	AND TECHNOLO	GY, INC.			84-16027	33
Pa	rt I	Reason for Public Cha	rity Status. (All o	organizations must o	complet	te this pa	art.) See instructions	3.
	ne organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)							
1		A church, convention of chu	urches, or associat	tion of churches descr	ibed in <b>s</b>	ection 1	70(b)(1)(A)(i).	
2		A school described in secti	on 170(b)(1)(A)(ii)	. (Attach Schedule E	(Form 99	90 or 990	)-EZ).)	
3		A hospital or a cooperative		·				
4		A medical research organiz	•	-				(iii). Enter the
		hospital's name, city, and st	•	,	•		( )( )(	` '
5		An organization operated f		a college or universit	v owned	d or ope	rated by a governme	ntal unit described in
		section 170(b)(1)(A)(iv). (C		5	,		, 0	
6		A federal, state, or local go		rnmental unit describe	d in <b>sect</b>	ion 170(	b)(1)(A)(v).	
7	X	An organization that norma	_			-		om the general public
		described in section 170(b)	=	· ·		3-		g p
8		A community trust describe		·	Part II )			
9		An agricultural research org	-		-		I in conjunction with a	land-grant college
Ŭ		or university or a non-land-	=			-		
		university:	gram conege or ag	grioditaro (oco motraci	10110). L	11101 1110 1	name, only, and state of	Title college of
10		An organization that norma	lly receives (1) mo	ore than 331/3 % of its	sunnort	from cor	ntributions membersh	in fees, and gross
. •		receipts from activities rela	ted to its exempt f	unctions, subject to c	ertain ex	ceptions	s: and (2) no more thar	n 331/3 % of its
		support from gross investm	ient income and ui	nrelated business taxa	able inco	ome (less	s section 511 tax) from	businesses
11		acquired by the organization An organization organization organized						
12		An organization organized	•	•	-			earry out the nurnoses
12		of one or more publicly su	•	•				• • •
		Check the box in lines 12a t						
_			•	• •		•	•	
а		_ Type I. A supporting organization	•	•	•		• , ,	
		the supported organization	` '	• • • •		ajority of	the directors of truste	es of the
<b>h</b>		supporting organization.	-			with ito	aupported organization	an(a) by baying
b		Type II. A supporting org	-					
		control or management of			me sam	e person	is that control of man	age the supported
_		organization(s). You must	•		م ما اممه	ti-	n with and functional	lu into anoto d suith
С		Type III functionally integ					•	ly integrated with,
		its supported organization		-				tad argonization(a)
d		Type III non-functionally						
		that is not functionally inte	-		-		•	an attentiveness
_		requirement (see instruct		-				I Time III
е		Check this box if the orga					•••	і, туре ііі
f	En	functionally integrated, or	. **		porting c	organizat	ION.	
g		ter the number of supported ovide the following information	-					
9		ame of supported organization	(ii) EIN	(iii) Type of organization	(iv) Is the	organization	(v) Amount of monetary	(vi) Amount of
	(,, .,	ame of supported organization	(,	(described on lines 1-10	listed in yo	ur governing	support (see	other support (see
				above (see instructions))		ment?	instructions)	instructions)
					Yes	No		
(A)								
(B)								
, _ \								
(C)								
(D)								
(D)						<u> </u>		
(E)								
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Tota	 							
Ota	al							

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

Page 2 Schedule A (Form 990 or 990-EZ) 2020

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 )

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2016	<b>(b)</b> 2017	(c) 2018	<b>(d)</b> 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1,934,464.	979,623.	4,123,258.	2,764,318.	25,383,010.	35,184,673.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4	Total. Add lines 1 through 3	1,934,464.	979,623.	4,123,258.	2,764,318.	25,383,010.	35,184,673.
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)						271,038.
6	Public support. Subtract line 5 from line 4						34,913,635.
	tion B. Total Support	(-) 0040	(1-) 0047	(-) 0040	(4) 0040	(-) 0000	(A) T-4-1
	ndar year (or fiscal year beginning in)	(a) 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
7 8	Amounts from line 4.  Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	1,934,464.	456,495.	4,123,258. 700,248.	2,764,318. 673,797.	25,383,010. 315,742.	35,184,673.
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						0.
11	Total support. Add lines 7 through 10						37,452,704.
12	Gross receipts from related activities, etc. (s	see instructions) .				12	119,641,584.
13	First 5 years. If the Form 990 is for organization, check this box and stop here	<u> </u>		, third, fourth,	or fifth tax yea	ar as a section	501(c)(3) ▶
Sec	tion C. Computation of Public Sup		_				
14	Public support percentage for 2020 (li		•			14	93.22%
15	Public support percentage from 2019					15	69.12 <b>%</b>
16a	331/3% support test - 2020. If the org	=					
	box and <b>stop here.</b> The organization q			_			
b	331/3% support test - 2019. If the org	=					
47-	this box and stop here. The organization			_			
17a	10%-facts-and-circumstances test - 2	_					
	10% or more, and if the organization Part VI how the organization meets					-	•
	organization			J	•		$\square$
h	10%-facts-and-circumstances test - 2						
b	15 is 10% or more, and if the organization	•					
	in Part VI how the organization meets					-	-
	organization			_	•		
18	Private foundation. If the organization						
	instructions						
						obodulo A (Form 0	

#### Support Schedule for Organizations Described in Section 509(a)(2) Part III

(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.)

16 Public support percentage from 2019 Schedule A, Part III, line 15	Sec	tion A. Public Support				· · · · · · · · · · · · · · · · · · ·	,	
1 dills, grams, contributions, and membership fees received. The one include any various grants 7) 2 Gross receipts from admissions, membandine sold or services performed, or facilities furnished in any activity that is related to the organization's time exempt perspose - or unrelated trade or business under section 513 - or any unrelated trade or business under section 513 - or appended on its behalf - or expended on			(a) 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
2 Gross receipts from activities that are not an universal experiment or findlines furnished in any activity that is related to the organization's tax essent purpose .  3 Gross receipts from activities that are not an universal experiment or findlines and activities that are not an universal experiment or activities that are not an universal experiment of the organization without charge or activities on the state of scale and activities on	_							
2 Gross receipts from activities that are not an universal experiment or findlines furnished in any activity that is related to the organization's tax essent purpose .  3 Gross receipts from activities that are not an universal experiment or findlines and activities that are not an universal experiment or activities that are not an universal experiment of the organization without charge or activities on the state of scale and activities on		received. (Do not include any "unusual grants.")						
turnished in any activity purpose	2							
a granization's beceive the purpose.  3 Gross receipts from activities that are not an unrelieud trade or business under accion 513.  4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.  5 The value of services or facilities furnished by a governmental unit to the organization without charge.  6 Total. Add lines 1 through 5.  7a Amounts included on lines 1, 2, and 3 received from disqualified persons.  b Amounts included on lines 2 and 3 received from disqualified apersons in the exceed the greater of \$5,000 or 1% of the amount on line 13 for the year of \$5,000 or 1% of the amount on line 13 for the year of \$6,000 or 1% of the amount on line 13 for the year of \$6,000 or 1% of the amount on line 13 for the year of \$6,000 or 1% of the amount on line 13 for the year of \$6,000 or 1% of the amount on line 13 for the year of \$6,000 or 1% of the amount on line 13 for the year of \$6,000 or 1% of the amount on line 13 for the year of \$6,000 or 1% of the amount on line 13 for the year of \$6,000 or 1% of the amount on line 13 for the year of \$6,000 or 1% of the amount on line 13 for the year of \$6,000 or 1% of the amount on line 13 for the year of \$6,000 or 1% of the amount on line 13 for the year of \$6,000 or 1% of the amount on line 13 for the year of \$6,000 or 1% of the amount on line 13 for the year of \$6,000 or 1% of the amount of line 14 for the organization of line 14 or line 15 is more than 331/3%, and line 15 is not more than 331/3%, check this box and stop here. The organization qualifies as a publicly supported organization. ▶ 15 or 10 for more than 331/3%, check this box and stop here. The organization qualifies as a publicly supported organization. ▶ 16 or 10 for more than 331/3%, check this box and stop here. The organization qualifies as a publicly supported organization. ▶ 16 or 10 for 14 fo		sold or services performed, or facilities						
3 Gross receipts from activities that are not an unrelated trade or business under section 513 .  4 Trax revenues leviced for the organization's benefit and either paid to or expended on its behalf .  5 The value of services or facilities for turnished by a governmental unit to the organization without charge .  6 Total. Add lines 1 through 5 .  7 a Amounts included on lines 1, 2, and 3 received from disqualified persons , .  9 Amounts included on lines 1, 2, and 3 received from other than disqualified persons .  9 Amounts included on lines 1, 2, and 3 received from other than disqualified persons .  9 Public support. (Subtreat line 7c from line 6) .  9 Amounts from line 6  9 Amounts from line 6  9 Amounts from line 6  9 Unrelated business taxable income (less section 511 taxes) from businesses acquired affer June 30, 1975 .  10 Agross income from interest, dividends, payments received on securities learns, rents, royalise, and income from similar societies acquired affer June 30, 1975 .  10 Agross income from line 100, whether or not the business is acquired affer June 30, 1975 .  11 All Net income from unrelated business acquired affer June 30, 1975 .  12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI) .  13 Total support. (Add lines 9, 10c, 11 and 12) .  14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(o)(3) organization, check this box and stop here.  15 Public support percentage from 2019 Schedule A, Part III, line 15 .  16 Section D. Computation of Investment income Percentage  17 Investment income percentage for 2020 (line 8, column (f), divided by line 13, column (fi)) .  18 Investment income percentage for 2020 (line 6) column (f), divided by line 13, column (fi)) .  19 a 331/3% support tests - 2020. If the organization did not check the box on line 14, and line 15 is more than 331/3%, and line 18 is not more than 331/3%, check this box and stop here. The organization qua		furnished in any activity that is related to the						
3 Gross receipts from activities that are not an unrelated trade or business under section 513 .  4 Trax revenues leviced for the organization's benefit and either paid to or expended on its behalf .  5 The value of services or facilities for turnished by a governmental unit to the organization without charge .  6 Total. Add lines 1 through 5 .  7 a Amounts included on lines 1, 2, and 3 received from disqualified persons , .  9 Amounts included on lines 1, 2, and 3 received from other than disqualified persons .  9 Amounts included on lines 1, 2, and 3 received from other than disqualified persons .  9 Public support. (Subtreat line 7c from line 6) .  9 Amounts from line 6  9 Amounts from line 6  9 Amounts from line 6  9 Unrelated business taxable income (less section 511 taxes) from businesses acquired affer June 30, 1975 .  10 Agross income from interest, dividends, payments received on securities learns, rents, royalise, and income from similar societies acquired affer June 30, 1975 .  10 Agross income from line 100, whether or not the business is acquired affer June 30, 1975 .  11 All Net income from unrelated business acquired affer June 30, 1975 .  12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI) .  13 Total support. (Add lines 9, 10c, 11 and 12) .  14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(o)(3) organization, check this box and stop here.  15 Public support percentage from 2019 Schedule A, Part III, line 15 .  16 Section D. Computation of Investment income Percentage  17 Investment income percentage for 2020 (line 8, column (f), divided by line 13, column (fi)) .  18 Investment income percentage for 2020 (line 6) column (f), divided by line 13, column (fi)) .  19 a 331/3% support tests - 2020. If the organization did not check the box on line 14, and line 15 is more than 331/3%, and line 18 is not more than 331/3%, check this box and stop here. The organization qua		·						
4 Tax revenues levided for the organization's benefit and either paid to or expended on its behalf.  5 The value of services or facilities furnished by a governmental unit to the organization without charge.  6 Total. Add lines 1 through 5	3							
Tax revenues levided for the organization's benefit and either paid to or expended on its behalf.  The value of services or facilities furnished by a governmental unit to the organization without charge.  Total. Add lines 1 through 5		·						
organization's benefit and either paid to or expended on its behalf	4							
or expended on its behalf  1 The value of services or facilities furnished by a governmental unit to the organization without charge								
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 other than disqualified persons.  b Amounts included on lines 1, 2, and 3 received from other than disqualified persons that exceed the greater 55,000 por 13 of the amount on line 15 for the year c Add lines 7 and 7 b.  Public support. (Subtract line 7 c from line 6.)  Section B. Total Support  Calendar year (or fiscal year beginning in) ▶ (a) 2016 (b) 2017 (c) 2018 (d) 2019 (e) 2020 (f) Total 9 Amounts from line 6.  10 Gross income from interest, dividends, payments received on securities boars, reins, royalties, and income from similar space in the security of								
furnished by a governmental unit to the organization without charge,	5	·						
organization without charge	-							
Total Add lines 1 through 5.  7a Amounts included on lines 1, 2, and 3 received from disqualified persons.  b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year or Add lines 7a and 7b.  8 Public support. (Subtract line 7c from line 6.  9 Amounts from line 6.  10a Gross income from interest, dividends, pression of the state of the support of the substance is required and securities leans, rents; royalties, and income from similar sources.  b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  c Add lines 10a and 10b.  11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on, loss from the sale of capital assets (Explain in Part VI.)  13 Total support. (Add lines 9, 10c, 11, and 12.).  14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.  5 Public support percentage from 2019 Schedule A, Part III, line 15.  1a Total support percentage from 2019 Schedule A, Part III, line 17 is not more than 331/3%, eheck this box and stop here. The organization qualifies as a publicly supported organization in line 18 is not more than 331/3%, and line 16 is more than 331/3%, and line 16 is nore than		, ,						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	6	_ · ·						
b Amounts included on lines 2 and 3 received from other than disqualified persons. In all exceed the greater of \$5,000 or 1 % of the amount on line 13 for the year c Add lines 7a and 7b		· · · · · · · · · · · · · · · · · · ·						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b	, a							
received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b	b	· · · · · · · · · · · · · · · · · · ·						
or 1% of the amount on line 13 for the year c Add lines 7a and 7b		received from other than disqualified						
c Add lines 7a and 7b								
8 Public support. (Subtract line 7c from line 6.) Section B. Total Support  Calendar year (or fiscal year beginning in) (a) 2016 (b) 2017 (c) 2018 (d) 2019 (e) 2020 (f) Total 9 Amounts from line 6.  10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources.  b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  c Add lines 10a and 10b.  11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on, loss from the sale of capital assets (Explain in Part VI).  13 Total support. (Add lines 9, 10c, 11, and 12.)  14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.  15 Public support percentage from 2019 Schedule A, Part III, line 15.  16 Public support percentage from 2019 Schedule A, Part III, line 15.  17 Investment income percentage from 2019 Schedule A, Part III, line 17.  18 Investment income percentage from 2019 Schedule A, Part III, line 17.  19 a 331/3% support tests - 2020. If the organization did not check the box on line 14, and line 15 is more than 331/3%, and line 17 is not more than 331/3%, check this box and stop here. The organization qualifies as a publicly supported organization.  b 331/3% support tests - 2019. If the organization did not check a box on line 14 or line 14 or line 19 and line 16 is more than 331/3%, and line 18 is not more than 331/3%, check this box and stop here. The organization qualifies as a publicly supported organization.	_	·						
Section B. Total Support  9 Amounts from line 6								
Section B. Total Support  Calendar year (or fiscal year beginning in)  Amounts from line 6,	-							
Calendar year (or fiscal year beginning in)    Amounts from line 6	Sec							
9 Amounts from line 6, 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources.  b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .  c Add lines 10a and 10b .  11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on, 12 Other income. Do not included gain or loss from the sale of capital assets (Explain in Part VI.)  13 Total support. (Add lines 9, 10c, 11, and 12.) .  14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.  5 Public support percentage for 2020 (line 8, column (f), divided by line 13, column (f)) .  15 Public support percentage from 2019 Schedule A, Part III, line 15.  16 Public support percentage from 2019 Schedule A, Part III, line 17  17 Investment income percentage from 2019 Schedule A, Part III, line 17  18 Investment income percentage from 2019 Schedule A, Part III, line 17  19 a 331/3% support tests - 2020. (If the organization did not check the box on line 14, and line 15 is more than 331/3%, and line 17 is not more than 331/3%, check this box and stop here. The organization qualifies as a publicly supported organization Part III, line 18 is not more than 331/3%, check this box and stop here. The organization qualifies as a publicly supported organization Part III, line 18 is not more than 331/3%, and line 18 is not more than 331/3%, check this box and stop here. The organization qualifies as a publicly supported organization Part III, line 18 is not more than 331/3%, check this box and stop here. The organization qualifies as a publicly supported organization Part III, line 18 is not more than 331/3%, check this box and stop here. The organization qualifies as a publicly supported organization Part III, line 18 is not more than 331/3%, check this box and stop here. The			(a) 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
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rents, royalties, and income from similar sources.  b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  c Add lines 10a and 10b.  11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.  12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).  13 Total support. (Add lines 9, 10c, 11, and 12.)								
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  c Add lines 10a and 10b								
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975								
section 511 taxes) from businesses acquired after June 30, 1975	b							
acquired after June 30, 1975	~	,						
c Add lines 10a and 10b		′						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.  12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)  13 Total support. (Add lines 9, 10c, 11, and 12.)  14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.  Section C. Computation of Public Support Percentage  15 Public support percentage for 2020 (line 8, column (f), divided by line 13, column (f))  16 Public support percentage from 2019 Schedule A, Part III, line 15.  Section D. Computation of Investment Income Percentage  17 Investment income percentage from 2019 Schedule A, Part III, line 17  18 Investment income percentage from 2019 Schedule A, Part III, line 17  19 a 331/3% support tests - 2020. If the organization did not check the box on line 14, and line 15 is more than 331/3%, and line  17 is not more than 331/3%, check this box and stop here. The organization qualifies as a publicly supported organization.   1	c							
activities not included in line 10b, whether or not the business is regularly carried on.  12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)  13 Total support. (Add lines 9, 10c, 11, and 12.)  14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.  Section C. Computation of Public Support Percentage  15 Public support percentage for 2020 (line 8, column (f), divided by line 13, column (f))  16 Public support percentage from 2019 Schedule A, Part III, line 15.  Section D. Computation of Investment Income Percentage  17 Investment income percentage for 2020 (line 10c, column (f), divided by line 13, column (f))  18 Investment income percentage from 2019 Schedule A, Part III, line 17  19 a 331/3% support tests - 2020. If the organization did not check the box on line 14, and line 15 is more than 331/3%, and line  17 is not more than 331/3%, check this box and stop here. The organization qualifies as a publicly supported organization  10 b 331/3% support tests - 2019. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 331/3%, and line 18 is not more than 331/3%, check this box and stop here. The organization qualifies as a publicly supported organization								
or not the business is regularly carried on.  12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)  13 Total support. (Add lines 9, 10c, 11, and 12.)								
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)  13 Total support. (Add lines 9, 10c, 11, and 12.)  14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.  Section C. Computation of Public Support Percentage  15 Public support percentage for 2020 (line 8, column (f), divided by line 13, column (f))  16 Public support percentage from 2019 Schedule A, Part III, line 15.  Section D. Computation of Investment Income Percentage  17 Investment income percentage from 2019 Schedule A, Part III, line 17  18 Investment income percentage from 2019 Schedule A, Part III, line 17  19 a 331/3% support tests - 2020. If the organization did not check the box on line 14, and line 15 is more than 331/3%, and line  17 is not more than 331/3%, check this box and stop here. The organization qualifies as a publicly supported organization  10 b 331/3% support tests - 2019. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 331/3%, and line 18 is not more than 331/3%, check this box and stop here. The organization qualifies as a publicly supported organization		·						
loss from the sale of capital assets (Explain in Part VI.)  13 Total support. (Add lines 9, 10c, 11, and 12.)  14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.  Section C. Computation of Public Support Percentage  15 Public support percentage for 2020 (line 8, column (f), divided by line 13, column (f))  16 Public support percentage from 2019 Schedule A, Part III, line 15.  Section D. Computation of Investment Income Percentage  17 Investment income percentage for 2020 (line 10c, column (f), divided by line 13, column (f))  18 Investment income percentage from 2019 Schedule A, Part III, line 17  19a 331/3% support tests - 2020. If the organization did not check the box on line 14, and line 15 is more than 331/3%, and line  17 is not more than 331/3%, check this box and stop here. The organization qualifies as a publicly supported organization.  b 331/3% support tests - 2019. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 331/3%, and line 18 is not more than 331/3%, check this box and stop here. The organization qualifies as a publicly supported organization.  ▶	40	, j						
(Explain in Part VI.)  13 Total support. (Add lines 9, 10c, 11, and 12.)  14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here	14	e e						
Total support. (Add lines 9, 10c, 11, and 12.)  14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here		-						
and 12.)	13							
14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here		```						
organization, check this box and stop here.  Section C. Computation of Public Support Percentage  15 Public support percentage for 2020 (line 8, column (f), divided by line 13, column (f))  16 Public support percentage from 2019 Schedule A, Part III, line 15  Section D. Computation of Investment Income Percentage  17 Investment income percentage for 2020 (line 10c, column (f), divided by line 13, column (f))  18 Investment income percentage from 2019 Schedule A, Part III, line 17  19 a 331/3% support tests - 2020. If the organization did not check the box on line 14, and line 15 is more than 331/3%, and line 17 is not more than 331/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶  b 331/3% support tests - 2019. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 331/3%, and line 18 is not more than 331/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶	14	· · · · · · · · · · · · · · · · · · ·	the organizati	on's first secon	d third fourth	or fifth tay ve	ar as a section	501(c)(3)
Section C. Computation of Public Support Percentage  15 Public support percentage for 2020 (line 8, column (f), divided by line 13, column (f))	1-7	-	-			•		` ` ` ` `
Public support percentage for 2020 (line 8, column (f), divided by line 13, column (f))  16 Public support percentage from 2019 Schedule A, Part III, line 15	Sec							
16 Public support percentage from 2019 Schedule A, Part III, line 15				<u> </u>	mn (f))		15	%
Section D. Computation of Investment Income Percentage  17 Investment income percentage for 2020 (line 10c, column (f), divided by line 13, column (f))								
17 Investment income percentage for 2020 (line 10c, column (f), divided by line 13, column (f))								70
18 Investment income percentage from 2019 Schedule A, Part III, line 17  19a 331/3% support tests - 2020. If the organization did not check the box on line 14, and line 15 is more than 331/3%, and line 17 is not more than 331/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶   b 331/3% support tests - 2019. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 331/3%, and line 18 is not more than 331/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶		-			13 column (f))		17	%
19a 331/3% support tests - 2020. If the organization did not check the box on line 14, and line 15 is more than 331/3%, and line 17 is not more than 331/3%, check this box and stop here. The organization qualifies as a publicly supported organization . ▶   b 331/3% support tests - 2019. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 331/3%, and line 18 is not more than 331/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶   [								
17 is not more than 331/3%, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization . ▶ <b>b</b> 331/3% support tests - 2019. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 331/3%, and line 18 is not more than 331/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶								
b 331/3% support tests - 2019. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 331/3%, and line 18 is not more than 331/3%, check this box and stop here. The organization qualifies as a publicly supported organization	134		-					
line 18 is not more than 331/3%, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization	h							
	D	• • • • • • • • • • • • • • • • • • • •				•		
ZU TITYANG TOUTHANDIN IT UTG OTGANIZANOH UNU HOL GHEGK A DOX OH HIRC 14. 138. OF 190. CHECK HIS DOX AND SEE INSTITUTIONS 🔛 T	20	•		•	•			<del></del>

#### 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

- 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 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 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 in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI.**
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in **Part VI.**
- 10 a 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.
  - 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
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	10a		
)	10b		

<ul> <li>Part IV Supporting Organizations (continued)</li> <li>11 Has the organization accepted a gift or contribution from any of the following persons?</li> <li>a A person who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, the governing body of a supported organization?</li> <li>b A family member of a person described in line 11a above?</li> <li>c A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.</li> <li>Section B. Type I Supporting Organizations</li> </ul>	11a 11b	Yes	
<ul> <li>a A person who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, the governing body of a supported organization?</li> <li>b A family member of a person described in line 11a above?</li> <li>c A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.</li> </ul>	11a 11b	res	NI-
<ul> <li>a A person who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, the governing body of a supported organization?</li> <li>b A family member of a person described in line 11a above?</li> <li>c A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.</li> </ul>	11b		No
<ul> <li>11c below, the governing body of a supported organization?</li> <li>b A family member of a person described in line 11a above?</li> <li>c A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.</li> </ul>	11b		
<ul> <li>b A family member of a person described in line 11a above?</li> <li>c A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.</li> </ul>	11b		
c A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in <b>Part VI.</b>			
detail in <b>Part VI.</b>	١ ١		
	11c		
		Yes	No
1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.			
	1		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
supervised, or controlled the supporting organization.	2		
Section C. Type II Supporting Organizations			
,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,,		Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
or management of the supporting organization was vested in the same persons that controlled or managed			
the supported organization(s).	1		
Section D. All Type III Supporting Organizations			
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		Yes	No
organization's tax year, (i) a written notice describing the type and amount of support provided during the prior			
tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of			
the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how			
the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3 By reason of the relationship described in line 2, above, did the organization's supported organizations have			
a significant voice in the organization's investment policies and in directing the use of the organization's			
income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's			
supported organizations played in this regard.	3		
Section E. Type III Functionally Integrated Supporting Organizations			
1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see ins	tructio	ons).	
The organization satisfied the Activities Test. Complete line 2 below.			
<ul> <li>b The organization is the parent of each of its supported organizations. Complete line 3 below.</li> <li>c The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see</li> </ul>	o instr	uctions	2)
The organization supported a governmental entity. Describe in Fait vi now you supported a governmental entity (se		Yes	
2 Activities Test. Answer lines 2a and 2b below.		103	110
2 Activities Test. <i>Answer lines 2a and 2b below.</i>			
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify</b>			
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes,			
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify</b>	2a		
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify those supported organizations and explain</b> how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
<ul> <li>a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</li> <li>b Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement,</li> </ul>	2a		
<ul> <li>a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</li> <li>b Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in</li> </ul>	2a		
<ul> <li>a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</li> <li>b Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in</li> </ul>	2a 2b		
<ul> <li>a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</li> <li>b Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in</li> </ul>			
<ul> <li>a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</li> <li>b Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</li> <li>3 Parent of Supported Organizations. Answer lines 3a and 3b below.</li> <li>a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or</li> </ul>	2b		
<ul> <li>a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</li> <li>b Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</li> <li>3 Parent of Supported Organizations. Answer lines 3a and 3b below.</li> </ul>			

Pa	art V Type III Non-Functionally Integrated 509(a)(3) Supporting Organ	nization	s				
1	1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See						
	instructions. All other Type III non-functionally integrated supporting organi	zations r	nust complete Sectio	ns A through E.			
Se	ction 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					
Se	ction 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):						
а	Average monthly value of securities	1a					
b	Average monthly cash balances	1b					
С	Fair market value of other non-exempt-use assets	1c					
d	Total (add lines 1a, 1b, and 1c)	1d					
_ е	Discount claimed for blockage or other factors (explain in detail in Part VI):	1e					
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					
Se	ction 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 integra	ited Type III supporting	g organization			
	(see instructions).	•					

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)						
Sect	ion D - Distributions				Current Year	
1	Amounts paid to supported organizations to accomplish e	xempt purposes		1		
2	Amounts paid to perform activity that directly furthers exer	mpt purposes of support	ed			
	organizations, in excess of income from activity			2		
3	Administrative expenses paid to accomplish exempt purpo	ses of supported organi	zations	3		
4	Amounts paid to acquire exempt-use assets	4				
5	Qualified set-aside amounts (prior IRS approval required - p	5				
6	Other distributions (describe in Part VI). See instructions.			6		
7	Total annual distributions. Add lines 1 through 6.			7		
8	Distributions to attentive supported organizations to which	the organization is resp	onsive			
	(provide details in Part VI). See instructions.	8				
9	Distributable amount for 2020 from Section C, line 6	9				
10	Line 8 amount divided by line 9 amount			10		
		(2)	(ii)		(iii)	

Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2020	(iii) Distributable Amount for 2020
1	Distributable amount for 2020 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2020			
	(reasonable cause required - explain in Part VI). See			
	instructions.			
3	Excess distributions carryover, if any, to 2020			
а	From 2015			
b	From 2016			
С	From 2017			
d	From 2018			
е	From 2019			
f	Total of lines 3a through 3e			
g	Applied to underdistributions of prior years			
h	Applied to 2020 distributable amount			
i	Carryover from 2015 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2020 from			
	Section D, line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2020 distributable amount			
C	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2020, if			
	any. Subtract lines 3g and 4a from line 2. For result			
	greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2020. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2021. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
а	Excess from 2016			
b	Excess from 2017			
С	Excess from 2018			
d	Excess from 2019			
<u>e</u>	Excess from 2020			

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

# Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

#### **Schedule of Contributors**

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

2020

Employer identification number

DENVER SCHOOL OF S	CIENCE AND TECHNOLOGY, INC.
Organization type (check o	ne):
organization type (encone	
Filers of:	Section:
Form 990 or 990-EZ	X 501(c)(3 ) (enter number) organization
	4947(a)(1) nonexempt charitable trust <b>not</b> 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
, ,	s covered by the General Rule or a Special Rule.
<b>Note:</b> Only a section 501(c instructions.	(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See
General Rule	
=	on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributions.
Special Rules	
regulations under 13, 16a, or 16b,	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line and that received from any one contributor, during the year, total contributions of the greater of (1) of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.
contributor, durir literary, or educa	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one g the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, ional purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering o) instead of the contributor name and address), II, and III.
contributor, durin contributions tota during the year fo <b>General Rule</b> app	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one go the year, contributions <i>exclusively</i> for religious, charitable, etc., purposes, but no such ed more than \$1,000. If this box is checked, enter here the total contributions that were received or an <i>exclusively</i> religious, charitable, etc., purpose. Don't complete any of the parts unless the lies to this organization because it received <i>nonexclusively</i> religious, charitable, etc., contributions are more during the year.
Caution: An organization th	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, ust answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its

Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

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

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

Name of organization DENVER SCHOOL OF SCIENCE AND TECHNOLOGY, INC.

Employer identification number 84-1602733

			84-1602/33
Part I	Contributors (see instructions). Use duplicate cop	ies of Part I if additional space is ne	eeded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1_	N/A	\$\$\$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	N/A	\$\$.	Person  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.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person 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.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization DENVER SCHOOL OF SCIENCE AND TECHNOLOGY, INC.

Employer identification number 84-1602733

Part II	Noncash Property	(see instructions)	Use duplicate copie	s of Part II if additiona	I space is needed
	140110a3111 10pcity	1000 111011 401101107.	. Obc adplicate copic	o oi i ait ii ii aaaiiioiia	i opace is riceaca.

(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
		\$	
(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
		\$	

Name of o	organization DENVER SCHOOL OF SCIEN	CE AND TECHNOLOGY	Y, INC.	Employer identification number
Part III	(10) that total more than \$1,000 for	the year from any on	e contributor.	Complete columns (a) through (e) and
	contributions of \$1,000 or less for th Use duplicate copies of Part III if addit	e year. (Enter this infor	mation once. S	of <i>exclusively</i> religious, charitable, etc. See instructions.) ►\$
(a) No. from Part I	(b) Purpose of gift	(c) Use of	gift	(d) Description of how gift is held
	Transferee's name, address, a	(e) Transfer o		onship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of	gift	(d) Description of how gift is held
	Transferente nama address au	(e) Transfer o	_	
	Transferee's name, address, at	- Iu ZIF + 4	Relatio	onship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of	gift	(d) Description of how gift is held
		(e) Transfer (	of aift	
	Transferee's name, address, ar			onship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of	gift	(d) Description of how gift is held
	Transferee's name, address, a	(e) Transfer o	•	onship of transferor to transferee
		-		

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

# 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.

OMB No. 1545-0047 **Open to Public** Inspection

Department of the Treasury Internal Revenue Service ► Go to www.irs.gov/Form990 for instructions and the latest information. Name of the organization Employer identification number

DEN	VER SCHOOL OF SCIENCE AND TECHNOLOGY, INC.	84-1602733
Pa	organizations Maintaining Donor Advised Funds or Other Similar Funds or	Accounts.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 6.	
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate value of contributions to (during year)	
3	Aggregate value of grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held i	in donor advised
J	funds are the organization's property, subject to the organization's exclusive legal control?	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant fu	
U	only for charitable purposes and not for the benefit of the donor or donor advisor, or for ar	
	conferring impermissible private benefit?	
Da	rt II Conservation Easements.	10
1 4	Complete if the organization answered "Yes" on Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the organization (check all that apply).	
•		of a historically important land area
		of a certified historic structure
	Preservation of open space	or a certified flistoric structure
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in	the form of a concentration
2	easement on the last day of the tax year.	Held at the End of the Tax Year
_	, ,	
a	Total number of conservation easements	24
b	Total acreage restricted by conservation easements	2b
C	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 7/25/06, and not on a	
_	historic structure listed in the National Register	2d
3	Number of conservation easements modified, transferred, released, extinguished, or termin	nated by the organization during the
_	tax year	
4	Number of states where property subject to conservation easement is located ▶	<del></del>
5	Does the organization have a written policy regarding the periodic monitoring, inspection	-
_	violations, and enforcement of the conservation easements it holds?	
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing of	conservation easements during the year
_		
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing co	onservation easements during the year
_	<b>&gt;</b> \$	470 (L) (A) (D) (I)
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section	
_	and section 170(h)(4)(B)(ii)?	
9	In Part XIII, describe how the organization reports conservation easements in its revenue and	
	balance sheet, and include, if applicable, the text of the footnote to the organization's financia	al statements that describes the
Do	organization's accounting for conservation easements.	Cimilar Assats
Га	rt III Organizations Maintaining Collections of Art, Historical Treasures, or Other Complete if the organization answered "Yes" on Form 990, Part IV, line 8.	Sillilai Assets.
_	· · · · · · · · · · · · · · · · · · ·	
1a	If the organization elected, as permitted under FASB ASC 958, not to report in its revenue of art, historical treasures, or other similar assets held for public exhibition, education,	e statement and balance sneet works or research in furtherance of public
	service, provide in Part XIII the text of the footnote to its financial statements that describes th	ese items.
b	If the organization elected, as permitted under FASB ASC 958, to report in its revenue st	atement and balance sheet works of
	art, historical treasures, or other similar assets held for public exhibition, education, or rese	earch in furtherance of public service,
	provide the following amounts relating to these items:	<b>&gt;</b> *
	(i) Revenue included on Form 990, Part VIII, line 1	
_	(ii) Assets included in Form 990, Part X	
2	If the organization received or held works of art, historical treasures, or other similar a	assets for financial gain, provide the
	following amounts required to be reported under FASB ASC 958 relating to these items:	<b>&gt;</b> •
a	Revenue included on Form 990, Part VIII, line 1	
b	Assets included in Form 990, Part X	· · · · · · · <b>&gt;</b> 5

Schedule D (Form 990) 2020

	rt    Organizations Maintaini	ng Collections of	Art Historical Tre	asures or	Other Similar A	ssets (co	ontinued	Page Z
3	Using the organization's acquisition					•		
•	collection items (check all that app		Andr Todordo, onco	it dily of the	Tollowing that if	iako oigin	nount do	0 01 110
а	Public exhibition	.37.	<b>d</b> Loan	or exchange	program			
b	Scholarly research		e Other	or oxonango	program			
С	Preservation for future gene	rations						
4	Provide a description of the organ		and explain how	thev further	the organization's	s exempt	purpose	in Part
	XIII.				<b>.</b>			
5	During the year, did the organization	on solicit or receive d	lonations of art, hist	orical treasu	res, or other simila	ar		
	assets to be sold to raise funds rath						Yes	No
Pa	rt IV Escrow and Custodial A	rrangements.						
	Complete if the organiza	ation answered "Ye	es" on Form 990, F	Part IV, line	9, or reported a	n amoun	t on Forr	n
	990, Part X, line 21.							
1a	Is the organization an agent, trus					ets not _	_	
	included on Form 990, Part X?					L	Yes	No
b	If "Yes," explain the arrangement in	n Part XIII and comp	plete the following tal	ole:				
						Amount		
	Beginning balance							
	Additions during the year							
е	Distributions during the year							
f	Ending balance						1	
	Did the organization include an am						Yes	No No
	If "Yes," explain the arrangement in	n Part XIII. Check he	ere if the explanation	has been pr	ovided on Part XIII	<u> </u>		
Pa	Tt V Endowment Funds.	ation answered "Ve	oc" on Form 000 I	Part IV/ line	10			
	Complete if the organiza			(c) Two years			(a) Faurus	ana haali
	•	(a) Current year 170,239.	<b>(b)</b> Prior year 167,661.		, , ,	6,199.	(e) Four ye	18000000000000000000000000000000000000
	Beginning of year balance	170,239.	107,001.	107,	,001.	7,199.	13	<u> </u>
	Contributions							
С	Net investment earnings, gains,	64,037.	6,274.		1 2	4,495.	1	9,901.
	and losses	04,037.	0,2/4.			1,100.		<u>.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>
	Grants or scholarships							
е	Other expenditures for facilities	3,844.	3,696.			3,033.		2,879.
	and programs	3,011.	3,050.			3,033.		
f	Administrative expenses	230,432.	170,239.	167	661. 165	7,661.	15	6,199.
g	End of year balance					, , , , , ,		,
2 a	Provide the estimated percentage Board designated or quasi-endown		end balance (line rg. %	column (a))	neid as:			
	Permanent endowment ► 54.2		_^~					
	Term endowment ► 45.7500							
	The percentages on lines 2a, 2b, a	and 2c should equal 1	100%.					
3a	Are there endowment funds not in			are held and	administered for	the		
	organization by:	•	_				Ye	es No
	(i) Unrelated organizations						<b>3a(i)</b> X	
	(ii) Related organizations						3a(ii)	X
b	If "Yes" on line 3a(ii), are the relate	ed organizations liste	d as required on Sch	edule R?			3b	
4	Describe in Part XIII the intended u		tion's endowment fu	nds.				
Pa	rt VI Land, Buildings, and Equ Complete if the organize	uipment.	os" on Form 000	Dart IV line	11a Soo Form	000 Par	t V line	10
	Description of property	(a) Cost or		or other basis	(c) Accumulated		Book value	
		(invest		other)	depreciation			
_	Land							
b	Buildings			770 471	F70 760		100	711
С	Leasehold improvements			772,471.	578,760.			3,711.
d	Equipment.		3,	747,033.	3,234,677.		512	2,356.
	Other		n 000 Part V salum	n (D) line 10			706	5,067.
ı ota	ı. Auu iilles ta illi büğli te. (C <i>01011111</i>	ı (u) ınusı eyual FOM	ıı əə∪, raıl ∧, c∪lulll	н ( <i>D),</i> IIII <del>C</del> 100	<i></i>		700	,,007.

Schedule D (Form 990) 2020

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

Schedule D (Form 990) 2020			Page 3
Part VII Investments - Other Securities. Complete if the organization answer	ered "Yes" on Form 990	, Part IV, line 11b. See Form 990, F	Part X, line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market	
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E) (F)			
(G)			
(H)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)	<b>&gt;</b>		
Part VIII Investments - Program Related. Complete if the organization answer	ered "Yes" on Form 990	, Part IV, line 11c. See Form 990, F	Part X, line 13.
(a) Description of investment	(b) Book value	(c) Method of valuation	
		Cost or end-of-year market	value
<u>(1)</u>			
(2)			
(3)			
(4)			
<u>(5)</u>			
<u>(6)</u> (7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)	<b>&gt;</b>		
Part IX Other Assets. Complete if the organization answer	red "Yes" on Form 990	, Part IV, line 11d. See Form 990, F	Part X, line 15.
	<b>)</b> Description		(b) Book value
(1) PENSION CERTIFICATES OF			
(2) PARTICIPATIONS CREDITS			2,947,685.
(3) INTERFUND RECEIVABLE			17,323,113.
(4)			
<u>(5)</u>		+	
<u>(6)</u> <u>(7)</u>		+	
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col.	(B) line 15.)		20,270,798
Part X Other Liabilities. Complete if the organization answer line 25.		·	990, Part X,
1. (a) Dec	scription of liability		(b) Book value
(1) Federal income taxes			2 502 025
(2) NET PENSION LIABILITY (3) NET OPEB LIABILITY			3,703,035.
			134,099.
<u>(4)</u> <u>(5)</u>			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	25.)		3,837,134.
2. Liability for uncertain tax positions. In Part XIII, provide			
organization's liability for uncertain tax positions under FA	SB ASC 740. Check here if	the text of the footnote has been provided	d in Part XIII

PAGE 30

	e D (Form 990) 2020		Page 4
Part	Reconciliation of Revenue per Audited Financial Statements With Revenue per Retur Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	n.	
1	Total revenue, gains, and other support per audited financial statements	1	
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		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
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.)		
С	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	
<b>Part</b>	XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Ret	urn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities 2a		
b	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIII.)		
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)		
	Add lines 4a and 4b	4c	
5	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.).	5	
Part	XIII Supplemental Information.		
Provid	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; I		ine 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 inform	nation.	
SEE	PAGE 5		

#### Part XIII Supplemental Information (continued)

SCHEDULE D, PART V, LINE 4

THE ENDOWMENT FUND IS TO BE USED TO SUPPORT THE DENVER SCHOOL OF SCIENCE AND TECHNOLOGY'S 1:1 LAPTOP PROGRAM. INCOME FROM THE FUND WILL BE USED FOR ANNUAL COMPUTER AND COMPUTER-RELATED EQUIPMENT PURCHASES TO SUSTAIN 1:1 COMPUTING PROGRAMS FOR THE SCHOOLS.

SCHEDULE D, PART X, LINE 2

DSST, INC., IS EXEMPT FROM FEDERAL INCOME TAX UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE, QUALIFIES FOR THE CHARITABLE CONTRIBUTION DEDUCTION UNDER SECTION 170(B)(1)(A)(VI), AND HAS BEEN CLASSIFIED AS AN ORGANIZATION OTHER THAN A PRIVATE FOUNDATION UNDER SECTION 509(A)(1). DSST, INC. IS ANNUALLY REQUIRED TO FILE A RETURN OF ORGANIZAITON EXEMPT FROM INCOME TAX (FORM 990) WITH THE IRS. IN ADDITION, DSST, INC. SUBJECT TO INCOME TAX ON NET INCOME THAT IS DERIVED FROM BUSINESS ACTIVITIES THAT ARE UNRELATED TO ITS EXEMPT PURPOSES. DSST, INC. HAS DETERMINED IT IS NOT SUBJECT TO UNRELATED BUSINESS INCOME TAX AND HAS NOT FILED AN EXEMPT ORGANIZATION BUSINESS INCOME TAX RETURN (FORM 990-T) WITH THE IRS.

#### SCHEDULE I (Form 990)

# **Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

2020

OMB No. 1545-0047

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization						Employer identificati	on number
DENVER SCHOOL OF SCIENCE AND TEC	HNOLOGY, II	NC.				84-160273	33
Part I General Information on Grants a	and Assistanc	е					
<ol> <li>Does the organization maintain records to the selection criteria used to award the graze.</li> <li>Describe in Part IV the organization's process.</li> <li>Part II Grants and Other Assistance to Part IV, line 21, for any recipient.</li> </ol>	ants or assistand cedures for more Domestic Or	ee? nitoring the use ganizations ar	of grant funds in the	e United States.	plete if the organiz	ation answered "Y	Yes No
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) DSST BUILDING CORPORATION							GENERAL
3401 QUEBEC STREET STE 2000	86-1305649	501(C)(3)	12,850,000.				SUPPORT
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
10)							
11)							
12)							
2 Enter total number of section 501(c)(3) ar	_	-					1.
3 Enter total number of other organizations	listed in the line	1 table				<u></u>	

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

Schedule I (Form 990) 2020

Schedule I (Form 990) (2020)

Part III	Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
	Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
_1					
2					
3					
4					
5					
6					
7					

**Part IV** Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b); and any other additional information.

SCHEDULE I, PART I, LINE 2

ORGANIZATION'S PROCEDURES FOR MONITORING USE OF GRANT FUNDS:

DSST ONLY GRANTS FUNDS TO AFFILIATED ORGANIZATIONS WITH WHICH IT HAS A

CLOSE RELATIONSHIP THAT ALLOWS MONITORING OF HOW GRANTED FUNDS ARE USED.

THE BUILDING CORPORATION'S ACCOUNTING IS PERFORMED BY DSST'S FINANCE

TEAM, ALLOWING COMPLETE OVERSIGHT OF HOW THE GRANT FUNDS WERE USED.

#### **SCHEDULE J** (Form 990)

**Compensation Information**For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** 

► Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990.

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

OMB No. 1545-0047 **Open to Public** Inspection

Department of the Treasury Internal Revenue Service Name of the organization

DENVER SCHOOL OF SCIENCE AND TECHNOLOGY, INC.

Employer identification number

84-1602733

Part	Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel  Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to			
	explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all			
	directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line			
	1a?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the			
	organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant  X Compensation survey or study			
	Form 990 of other organizations  X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
7	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		X
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only postion F04/5\(\0)\(\0)\(\0)\(\0)\(\0)\(\0)\(\0)\(\0			
_	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
_	compensation contingent on the revenues of:	F		Х
a b	The organization?	5a 5b		X
D	If "Yes" on line 5a or 5b, describe in Part III.	30		21
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
Ū	compensation contingent on the net earnings of:			
а	The organization?	6a		Х
b	Any related organization?	6b		Х
-	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed			
	payments not described on lines 5 and 6? If "Yes," describe in Part III.	7	X	
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject			
	to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe			
_	in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		1

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

Schedule J (Form 990) 2020

Schedule J (Form 990) 2020

#### Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown o	f W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
BILL KURTZ	(i)	208,526.	30,700.	571.	11,000.	9,118.	259,915.	
1 <sup>CEO</sup>	(ii)	0.	0.	0.	0.	0.	0.	
CHRISTINE NELSON	(i)	150,238.	2,000.	312.	7,900.	9,454.	169,904.	
2 <sup>CHIEF OF SCHOOLS</sup>	(ii)	0.	0.	0.	0.	0.	0.	
HEATHER LAMM - (THRU 11	(i)	143,719.	2,000.	287.	7,409.	9,447.	162,862.	
3 CHIEF ADVOCACY & COMM. OFFICER	(ii)	0.	0.	0.	0.	0.	0.	
NICOLE FULBRIGHT	(i)	143,230.	2,000.	119.	7,850.	9,452.	162,651.	
4 <sup>CHIEF</sup> ACADEMIC OFFICER	(ii)	0.	0.	0.	0.	0.	0.	
LEAH PETERS- (THRU 4/21	(i)	140,798.	2,500.	104.	7,330.	2,030.	152,762.	
5 <sup>VP</sup> OF ACADEMICS	(ii)	0.	0.	0.	0.	0.	0.	
GREGG GONZALES	(i)	140,245.	2,000.	151.	6,888.	4,454.	153,738.	
6 <sup>VP</sup> OF SCHOOLS	(ii)	0.	0.	0.	0.	0.	0.	
	(i)							
7	(ii)							
	(i)							
8	(ii)							
	(i)							
9	(ii)							
	(i)							
10	(ii)							
	(i)							
11	(ii)							
	(i)							
12	(ii)							
	(i)							
13	(ii)							
	(i)							
14	(ii)							
	(i)							
15	(ii)							
	(i)							
16	(ii)							

Schedule J (Form 990) 2020 Page 3

#### Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

SCHEDULE J, PART I, LINE 7

THE ORGANIZATION ANNUALLY REVIEWS THE PERFORMANCES OF ITS EMPLOYEES TO

DETERMINE IF ADDITIONAL COMPENSATION IN THE FORM OF BONUSES WILL BE PAID.

DURING CALENDAR YEAR ENDING DECEMBER 31, 2020, THE ORGANIZATION AWARDED

THE CHIEF EXECUTIVE OFFICER AND THE SCHOOL DIRECTORS A BONUS BASED ON

REVIEW OF THEIR PERFORMANCES AND SERVICES TO THE ORGANIZATION.

#### SCHEDULE O (Form 990 or 990-EZ)

#### Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

OMB No. 1545-0047

2020

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Employer identification number

84-1602733

DENVER SCHOOL OF SCIENCE AND TECHNOLOGY, INC.

FORM 990, PART VI, SECTION B, LINE 11B

THE FORM 990 IS REVIEWED BY THE EXECUTIVE OFFICERS THEN PRESENTED TO THE BOARD BEFORE FILING.

FORM 990, PART VI, SECTION B, LINE 12C

ALL BOARD MEMBERS ARE REQUIRED TO COMPLETE A CONFLICT OF INTEREST

STATEMENT ANNUALLY. DETERMINATIONS OF CONFLICTS AND REVIEWS OF

CONFLICTS ARE MADE BY THE ENTIRE BOARD OF DIRECTORS. IF A CONFLICT

EXISTS, THE CONFLICTED PERSON(S) ARE NOT ELIGIBLE TO VOTE ON THE

MATTER(S) RELATED TO THE CONFLICT.

FORM 990, PART VI, SECTION B, LINE 15A & 15B

THE DSST BOARD OF DIRECTORS ANNUALLY DECIDES AND APPROVES ANY CHANGES IN

PAY FOR THE CEO & OTHER KEY AND HIGHLY COMPENSATED EMPLOYEES, ALONG WITH

ANY BONUSES. A COMPENSATION REVIEW IS DONE BY THE VP OF TALENT OPERATIONS

THAT INCLUDES BENCHMARKING SALARIES FOR SIMILAR POSITIONS WITHIN THE

NON-PROFIT SECTOR OF THE DENVER METRO AREA. THE BENCHMARKS AND SUPPORT

FOR THE COMPENSATION ADJUSTMENTS ARE DOCUMENTED AND KEPT BY THE HUMAN

RESOURCE TEAM.

FORM 990, PART VI, SECTION C, LINE 19

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.

Name of the organization

DENVER SCHOOL OF SCIENCE AND TECHNOLOGY, INC.

Employer identification number

84-1602733

FORM 990, PART XI, LINE 9

OTHER CHANGES IN NET ASSETS:

2,167,069 CHANGE IN PENSION AND OPEB LIABILITY

IN ACCORDANCE WITH GASB 68 AND 75

ATTACHMENT 1

990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

NAME AND ADDRESS DESCRIPTION OF SERVICES COMPENSATION

DENVER PUBLIC SCHOOLS ADMIN/SPEN/SERVICES 10,240,653.

1860 LINCOLN STREET DENVER, CO 80203

AURORA PUBLIC SCHOOLS ADMIN/SPEN/SERVICES 369,694.

15701 E 1ST AVE AURORA, CO 80011

ATTACHMENT 2

FORM 990, PART IX - OTHER FEES

	(A) (B)		(C)	(D)
	TOTAL	PROGRAM	MANAGEMENT	FUNDRAISING
DESCRIPTION	FEES	SERVICE EXP.	AND GENERAL	EXPENSES
OTHER CONSULTING	2,142,488.	2,142,488.		

EDUCATIONAL SERVICE 11,405,444. 11,405,444.

TOTALS 13,547,932. 13,547,932.

#### SCHEDULE R (Form 990)

Department of the Treasury

Internal Revenue Service

### **Related Organizations and Unrelated Partnerships**

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

► Attach to Form 990.

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

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization

DENVER SCHOOL OF SCIENCE AND TECHNOLOGY, INC.

Employer identification number 84-1602733

Part I	identification of Disregarded Entities. Complete if the organization	answered "Yes" on	Form 990, Part I	v, line 33.		
	(a) Name, address, and EIN (if applicable) of disregarded entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						

Part II 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.

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section 5 contr	12(b)(13) rolled
						Yes	No
(1) DSST BUILDING CORPORATION 86-1305649							İ
3401 QUEBEC STREET STE 2000 DENVER, CO 80207	REAL ESTATE	CO	509(A)(3)	LINE 12A	DSST	X	İ
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							

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

Schedule R (Form 990) 2020

Schedule R (Form 990) 2020 Page **2** 

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512 - 514)	(f) Share of total income	(g) Share of end-of- year assets	Disprop	h) portionate ations?	(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	x 20 managing K-1 partner?		(k) Percentage ownership
		country)		300010110 012 011)			Yes	No		Yes	No	
(1)												
(2)												
(3)												
(4)												
(5)	_											
(6)												
(7)												

Part IV 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.

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity? Yes No
(1)								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								

Schedule R (Form 990) 2020	Page •

Par	Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.			
Not	te: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.	1	Yes	No
1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
а		la		X
	Gift, grant, or capital contribution to related organization(s)	lb	Х	
	Gift, grant, or capital contribution from related organization(s)	l c		X
	Loans or loan guarantees to or for related organization(s)	ld		X
		le		X
_				
f	Dividends from related organization(s)	1f		X
a	Sale of assets to related organization(s)	Ig		X
		lh		X
i	Exchange of assets with related organization(s).	1i		X
i	Lease of facilities, equipment, or other assets to related organization(s).	1j		X
,				
k	Lease of facilities, equipment, or other assets from related organization(s)	lk		X
ï	Performance of services or membership or fundraising solicitations for related organization(s)	11		X
m		m		X
		_	Х	
	=	lo	Х	
Ŭ	That might ball on project with foldied organization (b)			
n	Reimbursement paid to related organization(s) for expenses	a		X
		la		X
ч	Troinibulsement paid by related organization(s) for expenses 1111111111111111111111111111111111			
r	Other transfer of cash or property to related organization(s)	1r		Х
s		ls		X
	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 thresh	olds	. '	_
		d)		_

(a)  Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)			
(2)			
(3)			
(4)			
<u>(5)</u>			
(6)			

Schedule R (Form 990) 2020

Schedule R (Form 990) 2020

#### Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

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.

(a) Name, address, and EIN of entity	I		I from tay linder   Oldalizations:		(f) (g) Share of total income end-of-year assets		(h) Disproportionate allocations?		(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	partner?		ownership	
(4)			sections 512 - 514)	Yes	No			Yes	No		Yes	No	
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
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(12)													
(13)													
(14)													
(15)													
(16)													

Schedule R (Form 990) 2020

Schedule R (Form 990) 2020 Page 5

# Part VII

#### Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.

#### Form **8868**

(Rev. January 2020)

Department of the Treasury Internal Revenue Service

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

File a separate application for each return. Go to www.irs.gov/Form8868 for the latest information. OMB No. 1545-0047

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic

iling of this for	orm, visit www.irs.gov/e-file-providers/e-file-f	or-charities	-and-non-profits.							
Automatic	6-Month Extension of Time. Only subm	it original	(no copies needed).							
•	ons required to file an income tax return otherm 7004 to request an extension of time to f		, •	O-C filers), partnerships,	, RE	MICs,	and trusts			
Гуре or	Name of exempt organization or other filer, see in	structions.		Taxpayer identification nu	ımbe	r (TIN)				
orint	DENVER SCHOOL OF SCIENCE AND	rechnolo	GY, INC.	84-160273	3					
ile by the lue date for	Number, street, and room or suite no. If a P.O. bo	x, see instruc	ctions.							
iling your	3401 QUEBEC STREET STE 2000									
eturn. See nstructions.	City, town or post office, state, and ZIP code. For a foreign address, see instructions.  DENVER, CO 80207									
Enter the Re	turn Code for the return that this application	is for (file	a separate application fo	or each return)			0 1			
Application		Return	Application				Return			
s For		Code	Is For				Code			
	Form 990-EZ	01	Form 990-T (corporat	ion)			07			
orm 990-BL		02	Form 1041-A				08			
Form 4720 (i	,	03	Form 4720 (other tha	n individual)			09			
Form 990-PF	(sec. 401(a) or 408(a) trust)	04 05	Form 5227 Form 6069				10			
	(trust other than above)	06	Form 8870				12			
Telephone If the orga If this is fo or the whole	are in the care of ► 3401 QUEBEC STR.  No. ► 303 524-6324  nization does not have an office or place of large and range and range and range. It is names and TINs of all members the extension of the property of the propert	business in ur digit Gro f it is for pa on is for.	Fax No.  the United States, checoup Exemption Number (art of the group, check the process of the control of the group, check the group the group, check the group the group, check the group, check the group th	ck this box		If t and a	this is ttach			
for the o	st an automatic 6-month extension of time uporganization named above. The extension is calendar year 20 or tax year beginning 07/0	for the org	ganization's return for:	$\frac{22}{06/30}$ , to file the exempt						
	x year entered in line 1 is for less than 12 m	onths, ched	ck reason: Initial re	eturn Final retur	n					
3a If this a	application is for Forms 990-BL, 990-PF, 99	90-T, 4720	), or 6069, enter the	tentative tax, less any						
	ndable credits. See instructions.				3a	\$	0.			
	application is for Forms 990-PF, 990-T,		•				0			
	ed tax payments made. Include any prior yea				3b	<u>\$</u>	0.			
	e due. Subtract line 3b from line 3a. Include onic Federal Tax Payment System). See instru		ent with this form, if re	quirea, by using EFTPS		<b>c</b>	0			
	are going to make an electronic funds withdrawa		it) with this Form 9969 as	oo Form 8453 EO and Form	3c		for payment			
nstructions.	are going to make an electronic runus withdrawa	i (uirect deb	n, with this FUIII 0008, SE	E I OIIII 0400-EO ANG FOIII	11 001	J-EU	ioi payiiieiii			
	ct and Paperwork Reduction Act Notice, see instr	uctions.			Forn	8861	<b>8</b> (Rev. 1-2020)			

# Cumulative e-File History 2020

FED

**Return Type** 990 Tax Return 0625RY

**Taxpayer**DENVER SCHOOL OF SCIENCE AND TECHNOLOGY, INC.

**Account** 5974

Submitted Date	2021-09-08 13:46:52
Acknowledgement Date	2021-09-08 14:00:04
Status	Accepted
Submission ID	84022720212515000071