	_	Extended to May 16, 202 Return of Organization Exempt Free		ncome Tax	OMB No. 1545-0047
Forr	" <b>9</b>	90 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Co			2020
		Do not enter social security numbers on this form as	-		Open to Public
		of the Treasury enue Service Go to www.irs.gov/Form990 for instructions and th	-	-	Inspection
AF	or th			UN 30, 2021	
	heck if pplicab			D Employer identifica	tion number
	Addre				
	Name			27-073680	2
	Initial return Final return	Number and street (or P.U. box if mail is not delivered to street address) Ro	oom/suite	E Telephone number 303-282-6	437
	termin			G Gross receipts \$	6,162,323.
	Amen			H(a) Is this a group retu	ım
	Applie tion	F Name and address of principal officer: Calor Bowar		for subordinates?	Yes X No
	pendi	same as C above		H(b) Are all subordinates inclu	ided? Yes No
		tempt status: $X = 501(c)(3) = 501(c) ( ) $ (insert no.) $4947(a)(1)$ or [	527		st. See instructions
		ite: • www.galsdenver.org		H(c) Group exemption	
	orm o	f organization: X Corporation Trust Association Other	L Year o	of formation: 2010 M	State of legal domicile: CO
Fd		Summary	hođu		
e	1	Briefly describe the organization's mission or most significant activities: See Sc	meau.		
lanc	2	Check this box      if the organization discontinued its operations or disposed	of more	then 050/ of its not eased	
Governance	2	-			.s. 15
g	4	Number of independent voting members of the governing body (Part VI, line 1b)			15
	5	Total number of individuals employed in calendar year 2020 (Part V, line 13)			81
Activities &	6	Total number of volunteers (estimate if necessary)			45
cti∕		Total unrelated business revenue from Part VIII, column (C), line 12			0.
Ā					0.
				Prior Year	Current Year
e	8	Contributions and grants (Part VIII, line 1h)		936,235.	2,226,835.
nue	9	Program service revenue (Part VIII, line 2g)		5,767,160.	3,932,153.
Revenue		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		6,974.	2,554.
	11			185,852.	781.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		6,896,221.	6,162,323.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
	4-	Benefits paid to or for members (Part IX, column (A), line 4)			0.
ses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		5,117,444.	<u>3,598,669.</u> 0.
Expenses	10a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0•
Ĕ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,865,230.	1,522,052.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		6,982,674.	5,120,721.
	19	Revenue less expenses. Subtract line 18 from line 12		<86,453.>	1,041,602.
r sa				ginning of Current Year	End of Year
ets ( lanc	20	Total assets (Part X, line 16)		3,263,610.	2,935,167.
Ass Ba	21	Total liabilities (Part X, line 26)		5,175,558.	3,857,630.
Net Assets or Fund Balances	22	Net assets or fund balances. Subtract line 21 from line 20		1,911,948.>	<922,463.>
	irt II	Signature Block			
Und	er pena	alties of perjury, I declare that I have examined this return, including accompanying schedules an	nd stateme	nts, and to the best of my k	nowledge and belief, it is
true,	corre	ct, and complete. Declaration of preparer (other than officer) is based on all information of which	n preparer l	has any knowledge.	
Sig	า	Signature of officer		Date	

Here	Carol Bowar, Executive Type or print name and title	Director		
	Print/Type preparer's name	Preparer's signature	Date	
Paid	Thomas G. Sistare			self-employed P00356968
Preparer	Firm's name 🕨 Hoelting & Compar	ny, Inc.	Fi	rm's EIN 🕨 30-0514455
Use Only	Firm's address 31 E Platte Ave,	Ste 300		
	Colorado Springs	, CO 80903	Р	hone no.719-630-1091
May the IF	RS discuss this return with the preparer shown abo	ve? See instructions		Yes X No
032001 12-2	3-20 LHA For Paperwork Reduction Act Notic	e, see the separate instructions.		Form <b>990</b> (2020)

	The Girls A	Athletic Leader	ship School		
	990 (2020) of Denver			27-0736802	Page <b>2</b>
Pa	t III Statement of Program Service	Accomplishments			
	Check if Schedule O contains a response	or note to any line in this Pa	art III		X
1	Briefly describe the organization's mission:				
	See Schedule O				
2	Did the organization undertake any significant p				
	prior Form 990 or 990-EZ?			Yes [	X No
	If "Yes," describe these new services on Sched				
3	Did the organization cease conducting, or make	e significant changes in how	it conducts, any program service	es? Yes [	X No
	If "Yes," describe these changes on Schedule (	Э.			
4	Describe the organization's program service ac	complishments for each of it	s three largest program services	as measured by expenses.	
	Section 501(c)(3) and 501(c)(4) organizations ar	e required to report the amou	unt of grants and allocations to c	thers, the total expenses, and	
	revenue, if any, for each program service report	ed.			
4a		<u>, 122</u> including grants of \$	) (F	Revenue \$ 3,932,9	<u>34.</u> )
	See Schedule 0.				
					,
4b	(Code:) (Expenses \$	including grants of \$	) (F	Revenue \$	)
					,
					,
	-				
4c	(Code: ) (Expenses \$	including grants of \$	) (5	Revenue \$	
70	(code) (Expenses ©				/
		0)			
4d	Other program services (Describe on Schedule				
		ng grants of \$	) (Revenue \$	)	
4e	Total program service expenses 🕨	4,390,122.			

The Girls Athletic Leadership School Form 990 (2020) of Denver Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes." complete			
	Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		х
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		х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, IX, or X			_
••	as applicable.			
я	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
u	Part VI	11a	х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	114		
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
<b>c</b>	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
v	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
Ь	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in	110		
u	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	х	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	TIE		
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		х
100	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			- 23
120		100	х	
L	Schedule D, Parts XI and XII	12a	- 23	
u	Was the organization included in consolidated, independent audited financial statements for the tax year?	12b	х	
12	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional		X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If</i> "Yes," <i>complete Schedule E</i> Did the organization maintain an office, employees, or agents outside of the United States?	13	~~	X
14a		14a		- 23
a	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000	4.4%		х
16	or more? <i>If "Yes," complete Schedule F, Parts I and IV</i> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	14b		- 11
15		45		х
16	foreign organization? <i>If</i> "Yes," <i>complete Schedule F, Parts II and IV</i> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15		- 23
16		10		х
17	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u> </u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	47		х
40	column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>	17		<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	40		х
40	1c and 8a? If "Yes," complete Schedule G, Part II	18		<u> </u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Yes,"			v
00	complete Schedule G, Part III	19		X X
20a	Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i>	20a		<u> </u>
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			v
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21		Х

Form	<u>990 (2020)</u> of Denver 27-0736	802	Р	age <b>4</b>
Par	T IV Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No." go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
с	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L. Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>		
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 29	1		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0	1		
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			

(gambling) winnings to prize winners? 032004 12-23-20

1c

The	Girls	Athletic	Leadership	School
of I	Denver			

Form	<u>990 (2020)</u> of Denver 27-0736	802	Р	age 5				
Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)							
			Yes	No				
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,							
	filed for the calendar year ending with or within the year covered by this return 2a 81							
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х					
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)							
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X				
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	Зb						
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a							
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X				
b	If "Yes," enter the name of the foreign country							
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).							
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X				
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X				
с	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c						
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit							
	any contributions that were not tax deductible as charitable contributions?	6a		X				
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts							
	were not tax deductible?	6b						
7	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				
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b						
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required							
	to file Form 8282?	7c		X				
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d							
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e						
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f						
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g						
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h						
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the							
	sponsoring organization have excess business holdings at any time during the year?	8						
9	Sponsoring organizations maintaining donor advised funds.							
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						
10	Section 501(c)(7) organizations. Enter:							
а	Initiation fees and capital contributions included on Part VIII, line 12 10a							
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b							
11	Section 501(c)(12) organizations. Enter:							
а	Gross income from members or shareholders 11a							
b	Gross income from other sources (Do not net amounts due or paid to other sources against							
	amounts due or received from them.)							
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a						
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b							
13	Section 501(c)(29) qualified nonprofit health insurance issuers.							
а	Is the organization licensed to issue qualified health plans in more than one state?	13a						
	Note: See the instructions for additional information the organization must report on Schedule O.							
b	Enter the amount of reserves the organization is required to maintain by the states in which the							
	organization is licensed to issue qualified health plans 13b							
с	Enter the amount of reserves on hand 13c			x				
14a								
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		<u> </u>				
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or							
	excess parachute payment(s) during the year?	15		X				
	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		X				
	If "Yes," complete Form 4720, Schedule O.							

Form **990** (2020)

of Denver Form 990 (2020) Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management No Yes 15 **1a** Enter the number of voting members of the governing body at the end of the tax year 1a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule 0. 15 **b** Enter the number of voting members included on line 1a, above, who are independent 1h Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 Х officer, director, trustee, or key employee? 2 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision х of officers, directors, trustees, or key employees to a management company or other person? 3 Х Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 Х 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 6 х 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? х 7a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or Х persons other than the governing body? 7b 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: х a The governing body? 8a b Each committee with authority to act on behalf of the governing body? Х 8b 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the х organization's mailing address? If "Yes." provide the names and addresses on Schedule O 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Did the organization have local chapters, branches, or affiliates? х 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b Х 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990. Х 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Х b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe Х 12c in Schedule O how this was done ..... Х Did the organization have a written whistleblower policy? · · · · · 13 13 Did the organization have a written document retention and destruction policy? 14 х 14 Did the process for determining compensation of the following persons include a review and approval by independent 15 persons, comparability data, and contemporaneous substantiation of the deliberation and decision? Х The organization's CEO, Executive Director, or top management official 15a а Other officers or key employees of the organization Х 15b b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Х taxable entity during the year? 16a **b** If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure None 17 List the states with which a copy of this Form 990 is required to be filed 🕨 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available 18 for public inspection. Indicate how you made these available. Check all that apply. X Upon request X Own website X Another's website \_\_\_ Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial 19 statements available to the public during the tax year. 20 State the name, address, and telephone number of the person who possesses the organization's books and records Carol Bowar - 303-282-6437 750 Galapago Street, Denver, CO 80204 Form 990 (2020) 032006 12-23-20

Form 990 (2020) of Denver	2							E	27-0736	802 <sub>Page</sub> 7
Part VII Compensation of Officers, D		rus	tee	s, K	Key	En	nplo	oyees, Highest Co	mpensated	
Employees, and Independen	t Contracto	ors								
Check if Schedule O contains a respo	onse or note to	any	/ line	in t	his F	Part	VII			
Section A. Officers, Directors, Trustees, Key	Employees, a	nd H	lighe	est (	Com	nper	Isate	ed Employees		
<b>1a</b> Complete this table for all persons required to	be listed. Rep	ort o	com	pens	satio	on fo	r the	e calendar year ending v	vith or within the orgar	nization's tax year.
List all of the organization's current officers			es (w	heth	ner i	ndiv	idua	ls or organizations), reg	ardless of amount of c	ompensation.
Enter -0- in columns (D), (E), and (F) if no compense	-									
<ul> <li>List all of the organization's current key em</li> </ul>										
<ul> <li>List the organization's five current highest c able compensation (Box 5 of Form W-2 and/or Bo</li> </ul>										
<ul> <li>List all of the organization's former officers reportable compensation from the organization and</li> </ul>						omp	bens	ated employees who re	ceived more than \$100	0,000 of
<ul> <li>List all of the organization's former directo more than \$10,000 of reportable compensation fr</li> </ul>									or or trustee of the org	anization,
See instructions for the order in which to list the p	persons above.				-			-		
Check this box if neither the organization nei	or any related (	orda	niza	tion	com	nper	Isate	ed anv current officer. di	rector, or trustee.	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average	(-1-		Pos	ition			Reportable	Reportable	Estimated
	hours per	box	not c , unles	ss per	rson i	s botł	n an	compensation	compensation	amount of
	week		cer an	d a di	irecto	r/trus T	tee)	from	from related	other
	(list any	Individual trustee or director						the	organizations	compensation
	hours for related	e or d	tee			Highest compensated employee		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	organizations	truste	Institutional trustee		yee	mpen		(** 2/1000 1/1000)		and related
	below	idual t	ution	ar	Key employee	est co oyee	er			organizations
	line)	Indiv	In stit	Officer	Key e	Highe	Former			
(1) Carol Bowar	40.00									
Executive Director				Х				110,898.	0.	24,619.
(2) Adam Burrows	2.00									
Member		Х						0.	0.	0.
(3) Jamaica Burke	2.00									
Member		Х						0.	0.	0.
(4) Kristina Campos	2.00									
Member		Х						0.	0.	0.
(5) Julie Fincham	2.00									
Member		х						0.	0.	0.
(6) Ethan Hemming	2.00				ľ.,				•	
Member	0.00	X						0.	0.	0.
(7) Pamela Horiszny	2.00							•	0	
	6.00	Х		X				0.	0.	0.
(8) Edward Likovich	6.00							•	0	
Chair	2 00	X		Х				0.	0.	0.
(9) Frank Rowe	2.00							•	0	0
Member	2 00	Х				-		0.	0.	0.
(10) Barbara Washington	2.00	v						0	0	0
Member	2 00	Х				-		0.	0.	0.
(11) Emily Wasserman Member	2.00	x						0.	0.	0.
Member (12) Jennifer Evans	6.00	^				-		U •	0.	U•
Member	0.00	x						0.	0.	0.
(13) Trina Maull	2.00	- 11						0.	0.	

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Х

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2.00

2.00

2.00

The Girls Athletic Leadership School

Member

Member

Member

Member

(14) Shannon Saviers

(16) Wogahta Woldezghi

(15) Britt Stich

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The Girls		ic	L	ea	de	ers	hi	ip School					
Form 990 (2020) of Denver									27-0	736	802	P	age <b>8</b>
Part VII Section A. Officers, Directors, Trus		oloy	ees,			ghes	st C		, ,				
(A)	(B)			(C Pos	<b>C)</b> ition	'n		(D)	(E)		_	(F)	
Name and title	Average hours per			heck	more	than o		Reportable	Reportable			timate	
	week					s both pr/trus		compensation from	compensatio from related			nount other	OT
	(list any	tor						the	organization			pensa	tion
	hours for	· direc				B		organization	(W-2/1099-MIS			om th	
	related	tee or	ustee			ensat		(W-2/1099-MISC)			org	anizat	ion
	organizations	In dividual trustee or director	In stitutional trustee		key employee	Highest compensated employee						d relat	
	below line)	lividu	stitutio	Officer	/ em p	ploye	Former				orga	inizati	ons
		Inc	ű	9	Key	e Hi	ß						
1b Subtotal				<u> </u>		I		110,898.		0.	2	4,6	19.
c Total from continuation sheets to Part VI								0.		0.			0.
d Total (add lines 1b and 1c)								110,898.		0.	2	4,6	19.
2 Total number of individuals (including but n				_			o re	eceived more than \$100,	000 of reportable	)			
compensation from the organization													1
										,		Yes	No
<b>3</b> Did the organization list any <b>former</b> officer,	director, trust	ee, k	ey e	empl	oye	e, or	hig	phest compensated emp	loyee on				
line 1a? If "Yes," complete Schedule J for s	uch individual										3		X
4 For any individual listed on line 1a, is the su													
and related organizations greater than \$150											4		Х
5 Did any person listed on line 1a receive or a		-			-			-			_		37
rendered to the organization? <i>If "Yes," com</i> Section B. Independent Contractors	plete Schedule	e J fo	or si	ıch ı	oers	on .					5		Х
1 Complete this table for your five highest co	mpensated inc	lene	nde	nt co	ontra	acto	rs tł	hat received more than \$	100 000 of com	nensat	ion fro	m	
the organization. Report compensation for									, ,	Joniou			
(A)				0				(B)			(C	;)	
Name and business	address	NC	ONE	3				Description of s	ervices	С	omper	nsatio	n
2 Total number of independent contractors (ii	ncludina but n	ot lin	nited	d to	thos	se lis	ted	above) who received ma	ore than				
\$100,000 of compensation from the organiz	•			-	(			,					

			2020) of Denver		-		27-0736	802 Page 9
Pa	rt VI		Statement of Revenue					_
			Check if Schedule O contains a response	or note to any lin	ie in this Part VIII (A)	(B)	(C)	[]
					Total revenue	Related or exempt	Unrelated	Revenue excluded
						function revenue	business revenue	from tax under sections 512 - 514
ς, ω	1 a	a	Federated campaigns 1a					
s, Grants mounts	k		Membership dues 1b					
, Mo	c		Fundraising events 1c					
ar A	c		Related organizations 1d					
s, C	e	е	Government grants (contributions) 1e 1,	905,862.				
tion S	f	f	All other contributions, gifts, grants, and					
Contributions, Gifts, and Other Similar A				320,973.				
onti D	ç	-	Noncash contributions included in lines 1a-1f					
<u>o</u> e	ł	h	Total. Add lines 1a-1f		2,226,835.			
	•	_	Per Pupil Revenue	Business Code	3,137,752.	3 137 752		
/ice	28		District Mill Levy	611110	743,338.			
Serv	L L		Other Program Services	611110	51,063.	51,063.		
ven S		d	other riogram bervices	011110	51,005.	51,005.		
Program Service Revenue	-	e						
Pro	f		All other program service revenue					
			Total. Add lines 2a-2f	<b>&gt;</b>	3,932,153.			
	3		Investment income (including dividends, intere					
			other similar amounts)		2,554.			2,554.
	4		Income from investment of tax-exempt bond p	roceeds				
	5		Royalties					
			(i) Real	(ii) Personal				
	6 a		Gross rents 6a					
			Less: rental expenses 6b Rental income or (loss) 6c					
			Rental income or (loss)     6c       Net rental income or (loss)					
			Gross amount from sales of (i) Securities	(ii) Other				
			assets other than inventory <b>7a</b>					
	k	b	Less: cost or other basis					
en			and sales expenses 7b					
venue	c	С	Gain or (loss)					
Re			Net gain or (loss)	<b>&gt;</b>				
Other Re	8 8	a	Gross income from fundraising events (not					
ð			including \$ of					
			contributions reported on line 1c). See					
	ŀ	h	Part IV, line 18     8a       Less: direct expenses     8b		-			
			Net income or (loss) from fundraising events					
			Gross income from gaming activities. See					
			Part IV, line 19					
	k	b	Less: direct expenses 9b					
	c	с	Net income or (loss) from gaming activities	►				
	10 a	а	Gross sales of inventory, less returns					
			and allowances 10a					
			Less: cost of goods sold10b					
	C	C	Net income or (loss) from sales of inventory					
sn	44 -	_	Miscellaneous Revenue	Business Code 611110	781.	781.		
neo	118	a b		011110	/01.	/01.		
Miscellaneous Revenue	د م	c						
lisce			All other revenue					
Σ	6		Total. Add lines 11a-11d	<b>&gt;</b>	781.			
	12		Total revenue. See instructions		6,162,323.	3,932,934.	0.	2,554.

	990 (2020) of Denver t IX Statement of Functional Expense	es	ersnip School		36802 Page 10
Secti	on 501(c)(3) and 501(c)(4) organizations must comp	olete all columns. All othe	er organizations must cor	mplete column (A).	
	Check if Schedule O contains a respon		this Part IX		
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	<b>(A)</b> Total expenses	<b>(B)</b> Program service expenses	<b>(C)</b> Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations		-		
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	137,565.	61,904.	34,391.	41,270.
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	2,732,544.	2,459,290.	273,254.	
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	402,093.	358,993.	43,100.	
9	Other employee benefits	287,207.	256,421.	30,786.	
10	Payroll taxes	39,260.	35,052.	4,208.	
11	Fees for services (nonemployees):				
а	Management				
b	Legal	3,875.		3,875.	
с	Accounting	15,850.		15,850.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17		4		
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch 0.)	102,209.	32,581.	15,331.	<u>54,297.</u> 306.
12	Advertising and promotion	7,827.	6,347.	1,174.	
13	Office expenses	6,271.	5,012.	941.	318.
14	Information technology				
15	Royalties				
16	Occupancy	324,488.	275,815.	48,673.	
17	Travel	10,261.	8,722.	1,539.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	~			
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	13,847.		13,847.	
23	Insurance	50,391.	42,832.	7,559.	
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	Purchased Services	673,009.	569,964.	100,953.	2,092.
b	Instructional Supplies	113,517.	112,802.		715.
с	Non-Capital Equipment	83,383.	70,876.	12,507.	
d	Telephone Expenses	70,922.	54,239.	10,638.	6,045.
е	All other expenses	46,202.	39,272.	6,930.	
25	Total functional expenses. Add lines 1 through 24e	5,120,721.	4,390,122.	625,556.	105,043.
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)				

Check here if following SOP 98-2 (ASC 958-720)

# The Girls Athletic Leadership School of Denver

'ar	tΧ	Balance Sheet					
		Check if Schedule O contains a response or no	te to an	line in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			1,082,280.	1	1,607,902
	2	Savings and temporary cash investments			511,706.	2	C
	3	Pledges and grants receivable, net			477,247.	3	273,548
	4	Accounts receivable, net			194,867.	4	81,121
	5	Loans and other receivables from any current o					
		trustee, key employee, creator or founder, subs	tantial c	ontributor, or 35%			
		controlled entity or family member of any of the	se pers	ns		5	
	6	Loans and other receivables from other disqual					
		under section 4958(f)(1)), and persons describe		6			
2	7	Notes and loans receivable, net			7		
499619	8	Inventories for sale or use				8	
ťΙ	9					9	8,10
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	56,677.			
	b	Less: accumulated depreciation	10b	27,859.	33,593.	10c	28,81
	11	Investments - publicly traded securities			11		
	12	Investments - other securities. See Part IV, line		12			
	13	Investments - program-related. See Part IV, line		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11			963,917.	15	935,67
	16	Total assets. Add lines 1 through 15 (must equ			3,263,610.	16	2,935,16
	17	Accounts payable and accrued expenses	338,293.	17	345,13		
	18	Grants payable		18			
	19	Deferred revenue	367,027.	19			
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete				21	
,	22	Loans and other payables to any current or form	ner offic	er, director,			
		trustee, key employee, creator or founder, subs	tantial o	ontributor, or 35%			
		controlled entity or family member of any of the	se pers	ns		22	
i	23	Secured mortgages and notes payable to unrela	ated thi		841,700.	23	
	24	Unsecured notes and loans payable to unrelate	d third I	arties		24	
	25	Other liabilities (including federal income tax, pa	ayables	o related third			
		parties, and other liabilities not included on line	s 17-24)	Complete Part X			
		of Schedule D			3,628,538.		3,512,49
	26	Total liabilities. Add lines 17 through 25			5,175,558.	26	3,857,63
		Organizations that follow FASB ASC 958, che	eck her				
8		and complete lines 27, 28, 32, and 33.					
5	27	Net assets without donor restrictions			<2,990,620.>		<1,087,290
3	28				1,078,672.	28	164,82
		Organizations that do not follow FASB ASC 9	958, che	ck here 🕨 📃			
		and complete lines 29 through 33.					
	29	Capital stock or trust principal, or current funds				29	
8	30	Paid-in or capital surplus, or land, building, or e	quipme	t fund		30	
2	31	Retained earnings, endowment, accumulated in	ncome,	r other funds		31	
	32	Total net assets or fund balances			<1,911,948.>	32	<922,463
	33	Total liabilities and net assets/fund balances	<u></u>	<u></u>	3,263,610.	33	2,935,16 Form <b>990</b> (20

The Girls	Athletic	Leadership	School
of Denver		_	

	n 990 (2020) of Denver	27-	0736	802	Pa	<sub>ge</sub> 12
Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1	6	,162	2.3	23.
2	Total expenses (must equal Part IX, column (A), line 25)	2		$\frac{120}{120}$		
3	Revenue less expenses. Subtract line 2 from line 1	3		,04:	<u> </u>	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		911		
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8		<52	,11	7.>
9	Other changes in net assets or fund balances (explain on Schedule O)	9				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	<	922	,46	3.>
Pa	rt 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	0.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis				37	
b	Were the organization's financial statements audited by an independent accountant?			2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,				
	consolidated basis, or both:					
_	Separate basis Consolidated basis X Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the			2c	х	
	review, or compilation of its financial statements and selection of an independent accountant?			20	Λ	
20	If the organization changed either its oversight process or selection process during the tax year, explain on Scho As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin					
Ja	Act and OMB Circular A-133?	•		3a		x
h	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required			54		
<sup>D</sup>	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b		
					990	(2020)
				1 Onn		(2020)

SCHEDULE A			Dublic Cha						OMB No. 1545-0047
(For	m 990 or 990-EZ)		Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section					2020	
			4947(a)(1) nonexempt charitable trust.						2020
	ment of the Treasury I Revenue Service			Attach to Form 990 or F //Form990 for instruction			formation		Open to Public Inspection
Nam	e of the organizati			etic Leadersh			normation.	Employer	identification number
	-	of D	enver		-				7-0736802
Par	t I Reason	for Public	Charity Status.	(All organizations must c	omplete th	nis part.) S	ee instruction	S.	
The c		•		For lines 1 through 12, cl	•	,			
1				on of churches described			I)(A)(i).		
2				Attach Schedule E (Form					
3   4	·	•		anization described in <b>se</b> njunction with a hospital			•	Viii) Entor	the hospital's name
4 [	city, and stat	-	ation operated in col	njunction with a nospital	described	Sectio			the hospital's hame,
5		-	or the benefit of a col	llege or university owned	l or operat	ed by a go	overnmental u	nit describe	ed in
		-	Complete Part II.)	с ,		, ,			
6	A federal, sta	te, or local go	vernment or governm	nental unit described in	section 17	70(b)(1)(A)	(v).		
7	An organizati	on that norma	ally receives a substa	ntial part of its support fr	om a gove	ernmental	unit or from th	ne general p	public described in
- [			Complete Part II.)						
8   9				(1)(A)(vi). (Complete Part			upotion with o	land grant	
9	-		-	in section 170(b)(1)(A)(i ulture (see instructions).		-		-	-
	university:		grant concige of agric				, and state of	the conege	
10		on that norma	ally receives (1) more	than 33 1/3% of its supp	ort from c	ontributior	ns, membersh	ip fees, and	d gross receipts from
	activities rela	ted to its exer	npt functions, subjec	t to certain exceptions; a	and (2) no	more than	33 1/3% of it	s support f	rom gross investment
				(less section 511 tax) fro	m busines	sses acqui	red by the org	anization a	fter June 30, 1975.
[			mplete Part III.)						
11   12		-	-	ively to test for public sat	· · · · · · · · · · · · · · · · · · ·			way out the	numpeopo of one or
12	-	-		ively for the benefit of, to d in <b>section 509(a)(1)</b> o	-			-	
				f supporting organization					
а				upervised, or controlled					giving
	the suppor	ted organizati	on(s) the power to reg	gularly appoint or elect a	majority c	of the direc	tors or truste	es of the su	ipporting
			complete Part IV, Se						
b				l or controlled in connect			-		-
		0	st complete Part IV,	anization vested in the sa	ame perso	ns that co	ntroi or mana	ge the supp	orted
с	_ ĭ	. ,		g organization operated	in connect	tion with. a	and functional	lv integrate	d with.
		-		). You must complete I				, ,	,
d	Type III no	n-functionall	y integrated. A supp	oorting organization oper	ated in co	nnection v	vith its suppor	ted organiz	zation(s)
	that is not	unctionally in	tegrated. The organiz	ation generally must sat	isfy a distr	ibution rec	quirement and	an attentiv	veness
				nplete Part IV, Sections					
е		0		written determination from			Туре I, Туре	II, Type III	
f		•		nally integrated supporti	0 0				
g			n about the supporte						
	(i) Name of supp		(ii) EIN	(iii) Type of organization (described on lines 1-10	(iv) Is the orga in your governi	anization listed ing document?	(v) Amount of	-	(vi) Amount of other
	organizatior			above (see instructions))	Yes	No	support (see ir	istructions)	support (see instructions)
Total									
-									

### The Girls Athletic Leadership School Schedule A (Form 990 or 990-EZ) 2020 of Denver

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 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.)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4.						
See	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
7	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
	Gross receipts from related activities,	etc. (see instructio	ons)			12	
13	First 5 years. If the Form 990 is for th	ne organization's fir	rst, second, third,	fourth, or fifth tax y	/ear as a section 5	01(c)(3)	
	organization, check this box and stop						
Se	ction C. Computation of Publi	c Support Per	centage				
14	Public support percentage for 2020 (I	ine 6, column (f), d	ivided by line 11, o	column (f))		14	%
15	Public support percentage from 2019	Schedule A, Part	II, line 14			15	%
16a	33 1/3% support test - 2020. If the	organization did no	ot check the box o	n line 13, and line <sup>-</sup>	14 is 33 1/3% or m	ore, check this bo	x and
	stop here. The organization qualifies	as a publicly supp	orted organization				
b	33 1/3% support test - 2019. If the o	organization did no	ot check a box on I	ine 13 or 16a, and	line 15 is 33 1/3%	or more, check th	is box
	and stop here. The organization qual	ifies as a publicly s	supported organization	ation			▶□
17a	10% -facts-and-circumstances test	- 2020. If the org	anization did not o	check a box on line	e 13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the fact	s-and-circumstance	es test, check this	box and stop here	<b>re.</b> Explain in Part	VI how the organiz	ation
	meets the facts-and-circumstances te	st. The organizatio	on qualifies as a pu	blicly supported o	rganization		
b	10% -facts-and-circumstances test	- 2019. If the org	anization did not o	check a box on line	e 13, 16a, 16b, or 1	7a, and line 15 is	10% or
	more, and if the organization meets the	ne facts-and-circum	nstances test, che	ck this box and <b>st</b>	t <b>op here.</b> Explain i	n Part VI how the	
	organization meets the facts-and-circl	umstances test. Th	e organization qua	alifies as a publicly	supported organiz	ation	
18	Private foundation. If the organization	n did not check a l	box on line 13, 16	a, 16b, 17a, or 17b	, check this box a	nd see instructions	<u>s</u> <b>&gt;</b>

Schedule A (Form 990 or 990-EZ) 2020

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

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

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

Section A. Public Support						
Calendar year (or fiscal year beginning in) 🕨 🗌	<b>(a)</b> 2016	<b>(b)</b> 2017	<b>(c)</b> 2018	(d) 2019	(e) 2020	(f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do not						
include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						
<ul> <li>4 Tax revenues levied for the organ- ization's benefit and either paid to</li> </ul>						
or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to				$\mathbf{O}$		
the organization without charge						
6 Total. Add lines 1 through 5						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						
amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						
Section B. Total Support	() 22 (2	(1) 2017	4 1 2 2 4 2	( )) 00 ( 0	()	(0,
Calendar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
<ul> <li>9 Amounts from line 6</li> <li>10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources</li> </ul>						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
<ul> <li>c Add lines 10a and 10b</li> <li>11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on</li> </ul>						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
<b>13</b> Total support. (Add lines 9, 10c, 11, and 12.)		rot occord their f	outh or fifth to a		[ [(1/0)/2) 0====================================	
<b>14 First 5 years.</b> If the Form 990 is for the	•					·
check this box and stop here Section C. Computation of Public	Support Per	contago				
•			olumn (f))		15	0/
<b>15</b> Public support percentage for 2020 (lin			.,,			<u>%</u>
16 Public support percentage from 2019 Section D. Computation of Invest					16	%
17 Investment income percentage for 20			20.12. oolump (f))		17	04
<ul><li>18 Investment income percentage from 2</li></ul>					18	<u> </u>
<b>19a 33 1/3% support tests - 2020.</b> If the					· · · ·	
more than 33 1/3%, check this box an						
b 33 1/3% support tests - 2019. If the	-	•		•		······ • —
line 18 is not more than 33 1/3%, chec	k this box and <b>st</b>	<b>op here.</b> The orga	nization qualifies a	s a publicly suppo	orted organization	▶□
20 Private foundation. If the organization	n did not check a	box on line 14, 19a	a, or 19b, check th	is box and see ins	structions	

1

2

3a

3b

3c

4a

4b

4c

Yes

No

## Schedule A (Form 990 or 990 EZ) 2020 of Denver

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

### Section A. All Supporting Organizations

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

	5a		
	5b		
	5c		
	6		
	7		
	8		
	9a		
	50		
	9b		
	35		
	9c		
	10a		
	100		
	10b		
/ <b>F</b> arm 0			2000
(Form 9	90 or 99	ю-е <b>с</b> )	2020

Schedule A

Schedule A (Form 990 or 990 EZ) 2020 of Denver 27-0736802 Page 5 Part IV Supporting Organizations (continued) Yes No 11 Has the organization accepted a gift or contribution from any of the following persons? a A person who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, the governing body of a supported organization? 11a b A family member of a person described in line 11a above? 11b c A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide <u>detail in P</u>art VI 11c Section B. Type I Supporting Organizations Yes No Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or 1 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 1 supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. 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, upervised. or controlled the supporting organization. 2

## Section C. Type II Supporting Organizations

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

#### Section D. All Type III Supporting Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		

#### Section E. Type III Functionally Integrated Supporting Organizations

- 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
- a The organization satisfied the Activities Test. Complete line 2 below.
- **b** The organization is the parent of each of its supported organizations. *Complete* **line 3** *below.*

c 🗌	The organization supported a governmental entity.	Describe in Part VI how you supported a governmental entity (see instructions).	
-----	---	---	--

- 2 Activities Test. Answer lines 2a and 2b below.
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in **Part VI identify those supported organizations and explain** how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- 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.
- **3** Parent of Supported Organizations. **Answer lines 3a and 3b below.**
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If* "Yes" or "No" provide details in **Part VI.**
- **b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If* "Yes." *describe in* **Part VI** *the role played by the organization in this regard.*

2a

2b

3a

3b

Yes No

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

#### Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations 1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E. (B) Current Year Section A - Adjusted Net Income (A) Prior Year (optional) 1 Net short-term capital gain 1 2 Recoveries of prior-year distributions 2 3 Other gross income (see instructions) 3 4 4 Add lines 1 through 3. 5 5 Depreciation and depletion 6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or 6 maintenance of property held for production of income (see instructions) 7 7 Other expenses (see instructions) 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 (B) Current Year Section B - Minimum Asset Amount (A) Prior Year (optional) 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): **a** Average monthly value of securities 1a b Average monthly cash balances 1b c Fair market value of other non-exempt-use assets 1c d Total (add lines 1a, 1b, and 1c) 1d e Discount claimed for blockage or other factors (explain in detail in Part VI): 2 Acquisition indebtedness applicable to non-exempt-use assets 2 3 3 Subtract line 2 from line 1d. Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, 4 4 see instructions). 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 5 Multiply line 5 by 0.035. 6 6 7 Recoveries of prior-year distributions 7 8 Minimum Asset Amount (add line 7 to line 6) 8 Section C - Distributable Amount **Current Year** 1 Adjusted net income for prior year (from Section A, line 8, column A) 1 2 Enter 0.85 of line 1. 2 Minimum asset amount for prior year (from Section B, line 8, column A) 3 3 Enter greater of line 2 or line 3. 4 4 5 5 Income tax imposed in prior year 6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions). 6

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

Schedule A (Form 990 or 990-EZ) 2020

_	Schedule A (Form 990 or 990-EZ) 2020 of Denver 27-0736802 Page 7						
Par		a)(3) Supporting Orga	nizations (continu	ied)			
Sect	on D - Distributions				Current Year		
_1	Amounts paid to supported organizations to accomplish exer			1			
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported					
	organizations, in excess of income from activity			2			
3	Administrative expenses paid to accomplish exempt purpose	s of supported organizations	;	3			
_4	Amounts paid to acquire exempt-use assets			4			
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5			
6	Other distributions (describe in Part VI). See instructions.			6			
_7	Total annual distributions. Add lines 1 through 6.			7			
8	Distributions to attentive supported organizations to which the	e organization is responsive					
	(provide details in Part VI). See instructions.			8			
9	Distributable amount for 2020 from Section C, line 6			9			
10	Line 8 amount divided by line 9 amount			10			
Sect	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2020	IS	(iii) Distributable Amount for 2020		
1	Distributable amount for 2020 from Section C, line 6						
2	Underdistributions, if any, for years prior to 2020 (reason-						
	able 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: \$						
а	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						
8	and 4c. Breakdown of line 7:						
	Excess from 2016						
	Excess from 2017						
	Excess from 2018						
	Excess from 2019						
e	Excess from 2020						

Schedule A (Form 990 or 990-EZ) 2020

Schedule A	(Form 990 or 990-EZ) 2020	The of D	Girls enver	Athletic	Leadership	School 27-0736802 Page 8
Part VI	Supplemental Inform Part IV, Section A, lines 1, line 1; Part IV, Section D, I	nation. 2, 3b, 3c ines 2 an	Provide th c, 4b, 4c, 5a d 3; Part IV	a, 6, 9a, 9b, 9c, 11 ′, Section E, lines ′	a, 11b, and 11c; Part 1c, 2a, 2b, 3a, and 3b	0; Part II, line 17a or 17b; Part III, line 12; IV, Section B, lines 1 and 2; Part IV, Section C, ; Part V, line 1; Part V, Section B, line 1e; Part V, s part for any additional information.
				<u> </u>		
				~		

## Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury

## 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

oer

Internal Revenue Service		
Name of the organizat	tion The Girls Athletic Leadership School	Employer identification num
	of Denver	27-0736802
Organization type (ch	neck one):	
Filers of:	Section:	
Form 990 or 990-EZ	$\fbox$ 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	
Check if your organiza	ation is covered by the General Rule or a Special Rule.	

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

#### **General Rule**

X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

#### Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

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

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year

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

LHA 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)

Name of organization

The Girls Athletic Leadership School of Denver

Employer identification number

27-0736802

Part I	<b>Contributors</b> (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u> </u>	Virginia W. Hill FDN 1700 Lincoln St. Denver, CO 80203	\$7,500.	Person X Payroll (Complete Part II for noncash contributions.)
(a)	(b)	(c) Total contributions	(d)
<u>No.</u>	Name, address, and ZIP + 4 J. Landis Martin 150 Vine Street Denver, CO 80206	\$ 10,000.	Type of contribution         Person       X         Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	MidFirst Bank 101 Cook Street Denver, CO 80206	\$ <u>6,500.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	Cielo Foundation <u>6658 Gunpark Drive Ste 202A</u> Boulder, CO 80301	\$7,284.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	Tankersly Family FDN501 Silverside Road, Suite 123Wilmington, DE 19809	\$10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	Terry Considine Family Fdn 4582 S. Ulster St. Denver, CO 80237	\$10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

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

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

Name of organization

The Girls Athletic Leadership School of Denver

Employer identification number

27-0736802

Part I	<b>Contributors</b> (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
7	Anschutz Foundation 555 17th Street, Unit 960 Denver, CO 80202	\$50,000.	Person     X       Payroll
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
8	Monticello Associates <u>1800 Larimer St.</u> <u>Denver, CO 80202</u>	\$5,181.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9	William Latourette       111 East Busse Ave. #310       Mount Prospect, IL 60056	\$ <u>10,204.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>    10</u>	Daniels Fund       101 Monroe Street       Denver, CO 80206	\$7,500.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>    11    </u>	The Denver Foundation          1009 Grant Street         Denver, CO 80203	\$25,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b) Name address, and ZID + 4	(c)	(d)
<u>No.</u>	Name, address, and ZIP + 4 <u>Carson Foundation</u> <u>450 E 9th Ave.</u> Denver, CO 80203	Total contributions         \$7,500.	Type of contribution         Person       X         Payroll

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

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

Name of organization

The Girls Athletic Leadership School of Denver

Employer identification number

27-0736802

Part I	<b>Contributors</b> (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	Verizon Foundation PO Box 627, Basking Ridge New Jersey, NJ 07920	\$ <u>10,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
14	WHH Foundation 1060 Avondale Road San Marino, CA 91108	\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(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 Oronash Oronash Contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

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

		Employer identification numbe
iver		27-0736802
Noncash Property (see instructions). Use duplicate copies of Part II if a	dditional space is needed	I.
(b) Description of noncash property given	(c) FMV (or estimate (See instructions)	
	\$	
(b) Description of noncash property given	(c) FMV (or estimate (See instructions)	
	\$	
(b) Description of noncash property given	(c) FMV (or estimate (See instructions)	
	\$	
(b) Description of noncash property given	(c) FMV (or estimate (See instructions)	
	\$	
(b) Description of noncash property given	(c) FMV (or estimate (See instructions.	
	\$	
(b) Description of noncash property given	(c) FMV (or estimate (See instructions)	
	1	1
	Noncash Property (see instructions). Use duplicate copies of Part II if a         (b)         Description of noncash property given         (b)         Description of noncash property given	rls Athletic Leadership School         Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed         (b)       FMV (or estimate (See instructions))         (c)       FMV (or estimate (See instructions))         (b)       FMV (or estimate (See instructions))         (c)       FMV (or estimate (See instructions))         (b)       FMV (or estimate (See instructions))         (c)       FMV (or estimate (See instructions))         (c) <t< td=""></t<>

Page **3** 

	rganization	~ ] ]	Employer identification number
The G: of Der	irls Athletic Leadershij nver	o School	27-0736802
Part III		) through (e) and the following line entry. For charitable, etc., contributions of <b>\$1,000 or less</b>	n 501(c)(7), (8), or (10) that total more than \$1,000 for the year or organizations
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-		(e) Transfer of gift	
-	Transferee's name, address, a	nd ZIP + 4	Relationship 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 gift	
-	Transferee's name, address, a	nd ZIP + 4	Relationship 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 gift	
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
(c) No			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee

SC	HEDULE D	Supplementa	al Financial Statements	OMB No. 1545-0047	
(Forr	n 990)	Complete if the org	anization answered "Yes" on Form 990,	2020	
Depart	ment of the Treasury		), 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990.	Open to Public Inspection	
Interna	ternal Revenue Service <b>Or WWW.irs.gov/Form990 for instructions and the latest information.</b>				
Nam	e of the organizati	of Denver	-	Employer identification number $27 - 0736802$	
Pa	tl Organiza	ations Maintaining Donor Advise	d Funds or Other Similar Funds or Acc	counts. Complete if the	
	organizatio	n answered "Yes" on Form 990, Part IV, lin	ie 6.		
			(a) Donor advised funds (b)	b) Funds and other accounts	
1		nd of year			
2		f contributions to (during year)			
3		f grants from (during year)			
4		t end of year			
5	-		writing that the assets held in donor advised funds		
•			exclusive legal control?		
6	0	<b>o</b> , , ,	dvisors in writing that grant funds can be used on	,	
	impermissible priv		r donor advisor, or for any other purpose conferrin		
Pa			ganization answered "Yes" on Form 990, Part IV, I		
1		servation easements held by the organizati			
•		of land for public use (for example, recrea		rically important land area	
		f natural habitat	Preservation of a certifi	, ,	
		n of open space			
2		• •	fied conservation contribution in the form of a con	servation easement on the last	
	day of the tax yea	• •		Held at the End of the Tax Year	
а				2a	
b				2b	
с	Number of conser		ucture included in (a)	2c	
d			after 7/25/06, and not on a historic structure		
				2d	
3			eased, extinguished, or terminated by the organiz	ation during the tax	
	year 🕨				
4	Number of states	where property subject to conservation eas	sement is located		
5	Does the organiza	tion have a written policy regarding the pe	iodic monitoring, inspection, handling of		
	violations, and enf	orcement of the conservation easements it	t holds?	Yes No	
6	Staff and voluntee	r hours devoted to monitoring, inspecting,	handling of violations, and enforcing conservation	easements during the year	
	▶				
7	Amount of expense	es incurred in monitoring, inspecting, hand	lling of violations, and enforcing conservation ease	ements during the year	
	▶\$				
8		· · · · · · · · · · · · · · · · · · ·	e satisfy the requirements of section 170(h)(4)(B)(i)		
•					
9			on easements in its revenue and expense stateme		
		ounting for conservation easements.	note to the organization's financial statements that	l describes the	
Pa			Art, Historical Treasures, or Other Si	milar Assets.	
		f the organization answered "Yes" on Form			
1a			8, not to report in its revenue statement and balar	nce sheet works	
	of art, historical tre	easures, or other similar assets held for put	olic exhibition, education, or research in furtherand	ce of public	
			ncial statements that describes these items.		
b	If the organization	elected, as permitted under FASB ASC 95	8, to report in its revenue statement and balance	sheet works of	
	art, historical treas	sures, or other similar assets held for public	exhibition, education, or research in furtherance	of public service,	
	provide the follow	ing amounts relating to these items:			
	(i) Revenue inclu	ded on Form 990, Part VIII, line 1		▶ \$	
	(ii) Assets include	ed in Form 990, Part X		▶ \$	
2	If the organization	received or held works of art, historical tre	asures, or other similar assets for financial gain, p	rovide	
	the following amo	unts required to be reported under FASB A	SC 958 relating to these items:		
а	Revenue included	on Form 990, Part VIII, line 1		▶ \$	
b	Assets included in	Form 990. Part X		► \$	

LHA	For Paperwork Reduction Act Notice, see the Instructions for Form 990.
032051	12-01-20

		ls Athletic	c Lea	adersh	ip Scho	01				
	dule D (Form 990) 2020 of Denve								36802	
Par	t III Organizations Maintaining C	ollections of Ar	t, Histe	orical Tre	easures, or	Other	Similar	Assets	continu	ed)
3	Using the organization's acquisition, accession collection items (check all that apply):	on, and other record	s, check	any of the f	following that	make sig	nificant u	se of its		
а	Public exhibition	c		Loan or evo	hange progra	m				
		e			010					
b	Scholarly research Preservation for future generations	e	; L							
C A		lastions and synlair	a haw th	ov furthor th		n'o ovom		a in Dart	VIII	
4	Provide a description of the organization's co							se in Part	XIII.	
5	During the year, did the organization solicit o									
Dar	to be sold to raise funds rather than to be ma t IV Escrow and Custodial Arrange								Yes	No
Fai	t IV Escrow and Custodial Arrang reported an amount on Form 990, Par		ete if the	e organizatio	n answered "	Yes" on F	orm 990	, Part IV,	line 9, or	
<b>1</b> a	Is the organization an agent, trustee, custodi		•					_	٦	<u> </u>
	on Form 990, Part X?							L	Yes	No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing t	able:						
									Amount	
	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						1f		_	
2a	Did the organization include an amount on Fe	orm 990, Part X, line	21, for e	escrow or cu	ustodial accou	unt liability	/?	L	Yes	No
	If "Yes," explain the arrangement in Part XIII.									
Par	t V Endowment Funds. Complete i	f the organization an	swered	"Yes" on Fo	orm 990, Part	IV, line 10	).		-	
		(a) Current year	(b) P	rior year	(c) Two year	s back 🚺	<b>d)</b> Three y	ears back	<b>(e)</b> Four y	ears back
1a	Beginning of year balance									
b	Contributions									
	Net investment earnings, gains, and losses									
	Grants or scholarships									
	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
g	End of year balance	4								
2	Provide the estimated percentage of the curr	ent year and balance	e (line 1 c	n column (a)	)) held as:					
	Board designated or quasi-endowment	•	%	j, column (aj	<i>))</i> Held <b>4</b> 3.					
	Permanent endowment	%	_^0							
		% %								
C										
•	The percentages on lines 2a, 2b, and 2c shot									
за	Are there endowment funds not in the posse	ssion of the organiza	ation that	t are neid ar	nd administer	ed for the	organiza	tion	5	<
	by:									<u>es No</u>
	(i) Unrelated organizations								3a(i)	
	(ii) Related organizations								3a(ii)	
b	If "Yes" on line 3a(ii), are the related organiza								3b	
4	Describe in Part XIII the intended uses of the		wment f	unds.						
Par	, <b>3</b> , 11									
	Complete if the organization answered	d "Yes" on Form 990	), Part IV	í .						
	Description of property	(a) Cost or c		• •	t or other	• •	cumulate	d	<b>(d)</b> Book	value
		basis (investr	nent)	basis	(other)	depi	reciation			
1a	Land									
	Buildings									
	Leasehold improvements									
	Equipment			5	6,677.		27,85	59.	28	,818.
	Other									
	. Add lines 1a through 1e. (Column (d) must e		X colur	nn (B) line 1	0c)				28	,818.
		<u></u>		, <u>, , , , , , , , , , , , , , , , , </u>				Schedule	D (Form	

032052 12-01-20

The Girls	Athletic	Leadership	School
of Denver		_	

Schedule D (Form 990) 2020 of Denver			27-0736802 <sub>Page</sub> 3
Part VII Investments - Other Securities.			
Complete if the organization answered "Yes"			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or	end-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11c. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or	end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11d. See Form 990. Part X. line 15.	
	Description		(b) Book value
(1) Deferred Outflows of Reso	urces		935,674.
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
	o 15 )		▶ 935,674.
Total. (Column (b) must equal Form 990. Part X, col. (B) lin Part X Other Liabilities.	<u>e [5.]</u>		555,0740
Complete if the organization answered "Yes"	on Form 990 Part IV line	11e or 11f See Form 990 Part X line	25
			(b) Book value
1.         (a) Description of liability           (1) Federal income taxes			
(2) Deferred Inflows of Resou	rces		1,765,192.
	ICEB		84,603.
(3) Net OPEB Liability (4) Net Pension Liabilities			1,662,697.
			<u> </u>
(5)			
(6)			
<u>(8)</u>			
<u>(9)</u>			
Total. (Column (b) must equal Form 990, Part X, col. (B) lin	<u>e 25.)</u>		▶ 3,512,492.

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

The	Girls	Athletic	Leadership	School
of T	000000			

Sche	edule D (Form 990) 2020 OI DENVER				0/36802	Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Statem	nents With Rev	enue per Ro	eturn.		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	2a.				
1	1 Total revenue, gains, and other support per audited financial statements			1	6,162,	323.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	a Net unrealized gains (losses) on investments					
b	b Donated services and use of facilities 2b					
с	c Recoveries of prior year grants 2c					
d	d Other (Describe in Part XIII.) 2d					
е	e Add lines 2a through 2d			2e		0.
3	Subtract line <b>2e</b> from line <b>1</b>			3	6,162,	323.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIII.)	4b				
c Add lines 4a and 4b				4c		0.
-	Add lines 4a and 4b		5 Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)			202
5	Total revenue. Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990 Part 1 line 12)			5	6,162,	323.
5 Pa	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	ments With Exp	penses per		6,162, n.	323.
5 Pa	Total revenue. Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990 Part 1 line 12)	ments With Exp	penses per		n.	
5 Pa 1	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	ments With Exp 2a.	penses per		6,162, n. 5,120,	
	Total revenue. Add lines 3 and 4c. ( <i>This must equal Form 990, Part I, line 12.</i> ) <b>t XII</b> Reconciliation of Expenses per Audited Financial States Complete if the organization answered "Yes" on Form 990, Part IV, line 12	ments With Exp 2a.	penses per	Retur	n.	
1	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)         rt XII Reconciliation of Expenses per Audited Financial States         Complete if the organization answered "Yes" on Form 990, Part IV, line 12         Total expenses and losses per audited financial statements	ments With Exp 2a.	penses per	Retur	n.	
1 2	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)         rt XII         Reconciliation of Expenses per Audited Financial State         Complete if the organization answered "Yes" on Form 990, Part IV, line 12         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:	ments With Exp 2a. 	penses per	Retur	n.	
1 2	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)         rt XII         Reconciliation of Expenses per Audited Financial State         Complete if the organization answered "Yes" on Form 990, Part IV, line 12         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities	2a.           2a           2a           2a	penses per	Retur	n.	
1 2	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)         Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)         Reconciliation of Expenses per Audited Financial Statem         Complete if the organization answered "Yes" on Form 990, Part IV, line 12.         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments       Other losses	2a.           2a.           2a.           2b.           2c.	penses per	Retur	n.	721.
1 2 a b c	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) <b>Reconciliation of Expenses per Audited Financial Staten</b> Complete if the organization answered "Yes" on Form 990, Part IV, line 12         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments       Other losses	2a.           2a           2b           2c           2d	penses per	Retur	n. 5,120,	721.
1 2 a b c	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) <b>Reconciliation of Expenses per Audited Financial Staten</b> Complete if the organization answered "Yes" on Form 990, Part IV, line 12         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)	2a.           2a.           2b           2c           2d	penses per		n.	721.
1 2 b c d e	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)         Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)         Reconciliation of Expenses per Audited Financial Statem         Complete if the organization answered "Yes" on Form 990, Part IV, line 12.         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments       Other losses         Other (Describe in Part XIII.)       Add lines 2a through 2d	2a.           2a.           2b           2c           2d	penses per	1 2e	n. 5,120,	721.
1 2 b c d 3	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)         Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)         Reconciliation of Expenses per Audited Financial Statem         Complete if the organization answered "Yes" on Form 990, Part IV, line 12.         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1	2a.           2a.           2b           2c           2d	penses per	1 2e	n. 5,120,	721.
1 2 3 4	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)         rt XII         Reconciliation of Expenses per Audited Financial Statem         Complete if the organization answered "Yes" on Form 990, Part IV, line 12         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1         Amounts included on Form 990, Part IX, line 25, but not on line 1:         Investment expenses not included on Form 990, Part VIII, line 7b	2a.         2a         2a         2b         2c         2d         2d         4a	penses per	1 2e	n. 5,120,	721.
1 2 a b c d e 3 4 a	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)         rt XII         Reconciliation of Expenses per Audited Financial Statem         Complete if the organization answered "Yes" on Form 990, Part IV, line 12         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1         Amounts included on Form 990, Part IX, line 25, but not on line 1:         Investment expenses not included on Form 990, Part VIII, line 7b         Other (Describe in Part XIII.)         Add lines 4a and 4b	2a           2a           2b           2c           2d           2d	penses per	Return	n. 5,120, 5,120,	721. 0. 721. 0.
1 2 d c d e 3 4 a b c 5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)         rt XII         Reconciliation of Expenses per Audited Financial Statem         Complete if the organization answered "Yes" on Form 990, Part IV, line 12         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1         Amounts included on Form 990, Part IX, line 25, but not on line 1:         Investment expenses not included on Form 990, Part VIII, line 7b         Other (Describe in Part XIII.)	2a           2a           2b           2c           2d           2d	penses per	Return	n. 5,120,	721. 0. 721. 0.

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

SC	HEDULE E	Schools	1	OMB No.	1545-004	47
(Form 990 or 990-EZ)		Complete if the organization answered "Yes" on Form 990,		20	20	
		Part IV, line 13, or Form 990-EZ, Part VI, line 48.			2020	
	Department of the Treasury Attach to Form 990 or Form 990-EZ.			Open to Inspect		ic
			Employer id	identification number		
	o and organization	of Denver		-0736		
Pa	rtl					
					YES	NO
1	Does the organizati	on have a racially nondiscriminatory policy toward students by statement in its charter,				
		ning instrument, or in a resolution of its governing body?		1	Х	
2	v	on include a statement of its racially nondiscriminatory policy toward students in all its broc			37	
•		her written communications with the public dealing with student admissions, programs, and	scholarships	? 2	X	
3		n publicized its racially nondiscriminatory policy on its primary publicly accessible Internet les during its taxable year in a manner reasonably expected to be noticed by visitors to the				
		igh newspaper or broadcast media during the period of solicitation for students, or during the	פר			
		f it has no solicitation program, in a way that makes the policy known to all parts of the gen				
	•	s? If "Yes," please describe. If "No," please explain. If you need more space, use Part II		3	х	
		cies are available on the school website.				
				_		
				_		
				_		
				_		
4	v	on maintain the following?			v	
a		the racial composition of the student body, faculty, and administrative staff?		<u>4a</u>	X X	<u> </u>
		ing that scholarships and other financial assistance are awarded on a racially nondiscrimina gues, brochures, announcements, and other written communications to the public dealing	tory basis?	4b	~	<u> </u>
С	•	sions, programs, and scholarships?		4c	х	
d		al used by the organization or on its behalf to solicit contributions?			X	
		b" to any of the above, please explain. If you need more space, use Part II.				
				_		
				_		
				_		
				_		
5	•	on discriminate by race in any way with respect to:		_		v
a ⊾		privileges?				X X
D O	Admissions policies					X
J h	Scholarships or oth	ulty or administrative staff?		5d		X
		5?				X
						X
g						X
		ar activities?				X
		es" to any of the above, please explain. If you need more space, use Part II.				
				_		
				-		
				-		
6-		on reading any financial aid or accistance from a sourcemental access.		-	x	
		on receive any financial aid or assistance from a governmental agency?			~	x
U		es" on either line 6a or line 6b, explain on Part II.				
7	•	on certify that it has complied with the applicable requirements of sections 4.01 through				
•	•	75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Part II		7	х	
LHA			Schedule E (Fo			) 2020

Schedule E (Form 990 or 990-EZ) 2020

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

## Line 6 - Explanation of Government Financial Aid:

## The school receives grant funding from the Colorado Department of

#### Education.

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization

## 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. ► Go to www.irs.gov/Form990 for the latest information. The Girls Athletic Leadership School



27-0736802

#### Form 990, Part I, Line I

of Denver

The mission of Girls Athletic Leadership Schools of Denver (GALS) is to

empower students to succeed academically, lead confidently, live boldly

and thrive physically.

Form 990, Part III, Line I:

With our unique movement-based, positive gender focused school model,

Girls Athletic Leadership Schools of Denver empowers all students to

succeed academically, lead confidently, live boldly and thrive

physically.

Form 990, Part III, Line 4a:

GALS Denver is Colorado's only public, single gender school that serves

about 350 Denver-Area middle and high school girls. Our two schools

provide an innovative and necessary educational option that engages

health and wellness as a key contributing factor in optimizing academic

achievement and self-development. Founded in 2010 the GALS Middle

School serves 6-8th grade students. We have 270 students from all

corners of Denver. The GALS Denver High School, founded in 2014, serves

approximately 117 9-12th grade students. Our students are honing their

leadership skills (both inside and outside of the classroom) to go out

and make a positive difference in the world. Salaries and benefits

account for 70% of our annual budget. We believe our biggest investment

is our teachers and staff.

Form 990, Part VI, Section B, line 11b:

Schedule O (Form 990 or 990-EZ) 2020 Page 2				
Name of the organization	The Girls Athletic Leadership School of Denver	Employer identification number $27 - 0736802$		
The 990 is rev	viewed by the Finance Committee, the Board and	1 Executive		

Director before it is filed.

Form 990, Part VI, Section B, Line 12c:

Prospective board members disclose any potential conflicts of interest during the vetting process. If the board deems them significant, then board members will not be approved. Once a board member is confirmed, if a potential conflict arises, the board will discuss and vote on whether the amount in question is above a threshold, and if so, will ask the board member to step down or withdraw from the bidding process. All board members sign conflict of interest forms annually, and are asked to disclose any conflicts.

Form 990, Part VI, Section B, Line 15a:

An ad hoc committee performs an evaluation of the Executive Director, using data and outcomes from the previous year. They bring the findings to the full board, where there is a discussion in Executive Session, and come to a conclusion on performance based increases for the Executive Director.

Form 990, Part VI, Section C, Line 19:

Governing documents and policies are available upon request. Financial

statements are available on the School's website.

Form 990, Part XII, Line 2c

The finance committee oversees audit services and selection of the

independent auditor. This has not changed from the prior year.