	-		Return of Organization Exempt From Inco	ome Tax	OMB No. 1545-0047
Forr	n g	90	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except pr		2020
		••	Do not enter social security numbers on this form as it may be made		Open to Public
Depa Interr	rtment o al Reve	of the Treasury enue Service	Go to www.irs.gov/Form990 for instructions and the latest inform	mation.	Inspection
ΑF	or th	e 2020 calenda	ar year, or tax year beginning JUL 1 , 2020 and ending JUN	30, 2021	
	heck if pplicab		f organization D E	Employer identifica	ation number
	Addre chang	Mont	essori del Mundo Charter School		
	Name		usiness as	45-542802	3
	Initial return			elephone number	
	Final return	1550	3 E. Mississippi Ave. Ste. B	720-863-8	629
	termir ated	2	own, state or province, country, and ZIP or foreign postal code G G	iross receipts \$	4,844,915.
	Amen return	Auro.		Is this a group ret	um
	Applic tion			for subordinates?	Yes X No
	pendi	same		Are all subordinates incl	luded? Yes No
		empt status: 🗌		lf "No," attach a li	st. See instructions
				Group exemption	
				nation: 2012 <u>M</u>	State of legal domicile: CO
Pa	art I	Summary			
e	1	Briefly describ	be the organization's mission or most significant activities: See Schedule	0.	
Governance					
ern	2	Check this box			ets. 7
Š	3		ting members of the governing body (Part VI, line 1a)		<u> </u>
∞ŏ	4		dependent voting members of the governing body (Part VI, line 1b)		62
Activities	5		of individuals employed in calendar year 2020 (Part V, line 2a)		25
ť			d business revenue from Part VIII, column (C), line 12		0.
Ă			business taxable income from Form 990-T, Part I, line 11		0.
				rior Year	Current Year
	8	Contributions		079,321.	1,213,025.
Revenue	9		• • • • • • • • • • • • • • • • • • • •	044,973.	2,599,464.
eve	10	Investment inc	come (Part VIII, column (A), lines 3, 4, and 7d)	0.	0.
Ĕ	11	Other revenue	e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	109,626.	1,032,415.
	12	Total revenue	- add lines 8 through 11 (must equal Part VIII, column (A), line 12) 4,	,233,920.	4,844,904.
	13	Grants and sin	milar amounts paid (Part IX, column (A), lines 1-3)	0.	0.
	14	Benefits paid t	to or for members (Part IX, column (A), line 4)	0.	0.
es	15			,313,591.	2,220,778.
sus(16a		undraising fees (Part IX, column (A), line 11e)	0.	0.
Expense	b		ing expenses (Part IX, column (D), line 25)	205 010	1 000 000
ш	17			305,812.	1,277,866.
	18			619,403.	3,498,644.
<u> </u>	19	Revenue less e	expenses. Subtract line 18 from line 12	614,517.	1,346,260.
Net Assets or Fund Balances	00	Total assists /2		g of Current Year 127,696.	End of Year 4,212,238.
Bala	20	Total assets (P	<u> </u>	,044,230.	5,782,512.
let ∕	21			916,534.	-1,570,274.
	122 Int II	Signature		510,5510	1,3/0,2/1.
		-	I declare that I have examined this return, including accompanying schedules and statements, ar	nd to the best of my I	knowledge and belief it is
			. Declaration of preparer (other than officer) is based on all information of which preparer has an		and bolion it is
				<u>,</u>	

Sign	Signature of officer		Date	;	
Here	Wendy Renee, Executive	Director			
	Type or print name and title				
	Print/Type preparer's name	Preparer's signature	Date	Check	PTIN
Paid	James D. Hinkle	James D. Hinkle	05/09/22		P00532558
Preparer	Firm's name 🕨 Hinkle & Company		Firm	ı's EIN ⊾ 27	-1494012
Use Only	Firm's address 🖕 5028 East 101st	Street			
	Tulsa, OK 74137		Pho	ne no. (918)492-3388
May the I	RS discuss this return with the preparer shown ab	ove? See instructions			X Yes No
032001 12-2	3-20 LHA For Paperwork Reduction Act Not	ice, see the separate instructions.			Form 990 (2020

03200112-23-20LHA For Paperwork Reduction Act Notice, see the separate instructions.SeeSchedule 0 for Organization Mission Statement Continuation

	1990 (2020) Montessori del Mundo Charter School 45-5428023 Pagert III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
	Briefly describe the organization's mission:
	See Schedule O.
	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ? Yes X If "Yes," describe these new services on Schedule O.
	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
<u> </u>	revenue, if any, for each program service reported. (Code:) (Expenses \$1,737,100 •including grants of \$0 •) (Revenue \$3,627,956
a	Montessori del Mundo prepares PK3 through 6th grade students from a
	multitude of communities in Metro Denver for success in high school and
	graduation from college. In an academically rigorous bilingual
	environment, students will master the core subjects, maximizing their
	knowledge in reading, writing, and math benefiting approximately 289
	students in 2020-2021.
5	(Code:) (Expenses \$ including grants of \$) (Revenue \$
	(Code:) (Expenses \$ including grants of \$) (Revenue \$
;	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
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c	(Code:) (Expenses \$ including grants of \$) (Revenue \$) =
6	(Code:) (Expenses \$ including grants of \$) (Revenue \$) (Expenses \$) (Revenue \$
	<pre></pre>
	Other program services (Describe on Schedule O.)
c d	

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			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		<u> </u>
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		<u> </u>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			37
_	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		<u> </u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			37
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		<u> </u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		v
-	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			v
~	Schedule D, Part III	8		_X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			v
40	If "Yes," complete Schedule D, Part IV	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			х
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
_	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	44-	х	
h	Part VI	<u>11a</u>		
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	11b		х
~	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			- 23
C		11c		х
Ь	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			- 23
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		- 11	
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	11f		х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
12u	Schedule D, Parts XI and XII	12a	х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	120		
~	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Х	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	<u> </u>		<u> </u>
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
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	330	

			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		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? 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
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If	00		x
00	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			x
24	contributions? If "Yes," complete Schedule M	<u>30</u> 31		X
31 32	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If</i> "Yes," <i>complete Schedule N, Part I</i> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," <i>complete</i>	31		
32		32		x
33	Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		
55	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			
04	Part V. line 1	34		x
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	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			<u> </u>
	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?	<u> </u>		
-		38	х	
Pa	Note: All Form 990 filers are required to complete Schedule O 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>	<u></u> .	
			Yes	No

					103	110
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	17			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0			
с	Did the organization comply with backup withholding rules for reportable payments to vendors and re	portab	ole gaming			
	(gambling) winnings to prize winners?			1c		
032004	12-23-20			Form	990 ((2020)

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032004 12-23-20

Part V Statements Regaring Other IRS Flings and Tax Compliance (continued) Ves No 2a Inter the number of employees reported on Form W3, Transmital of Wage and Tax Statements, 2a 62 5 b Tat least one is reported on line 2a, did the organization file at required foedral employment tax returns? 2a 5 X a Did the organization have unelated business goos income of \$1,000 or more during the year? 3a 3a X b If Yas, 'Inste The num of the fargin country (such as a bark account, securities account, or other financial account)? 4a X b If Yas, 'Inste The num of the foreign country (such as a bark account, securities account, or other financial account)? 4a X b If Yas, 'Inste The num of the foreign country (such as a bark the massaction at any time during the tax year? 5a X b If Yas, 'Inste The num of the foreign country (such as a bark the a ponty to a prohibid tax shelter transaction? 5a X b If Yas, 'Inste The num of the foreign country (such as a bark the a ponty to a prohibid tax shelter transaction? 5a X b If Yas, 'Inste The num of the foreign country (such as a bark the a ponty to a prohibid tax shelter transaction? 5a X b If Yas, 'Inste The num of the foreign country (such as a bark the nunorinsity greater than \$100,000, and did the organizat	Form	990 (2020) Montessori del Mundo Charter School 45-5428	023	P	_{age} 5
2a Enter the number of employees reported on form W3, Transmital of Wage and Tax Stataments, 2 2a 62 b If at least one is reported on line 2a, did the organization file all required toderal employment tax returns? 2b X Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>a</i> - <i>Ba</i> (see instructions) 3a X a At any time detain base employees anomal of 3, DOW on rone during the year? 3b X b If the requiration have uninelization have an interest in, or a significan to or schedule O 3b X b If the required to a prohibit data schedules in, or a significan contry. 4a X b If the required to the re	Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
Heat or the calendar year ending with or within the year covered by this return Image: Cale Cale Cale Cale Cale Cale Cale Cale				Yes	No
b If a least one is reported on lime 2a, did the organization file all required fedral employment to returns? 2b X 3a Did the organization have unmetated business grass income of \$1,000 or more during the selection of \$-Rig (see instructions) 3a X 3a Did the organization have unmetated business grass income of \$1,000 or more during the selection start income a transmission on Schedule O 3a X b If "main income the name of the forgin country is used in the set, part 3 againture or other authority over, a financial account in a foreign country is used at the rest in or a signature or other authority over, a financial account is or porticip to tax whether transaction at any time during the tax year? 5a X b If "main is a or Sb, did the organization flare in the set year? 5a X b If "main is a or Sb, did the organization flare in the set year? 5a X c If "main is a or Sb, did the organization in the set year is a party to a prohibited tax shelter transaction? 5b X c If "main is a cost Sb, did the organization in the seques statement that such contributors or gifts were not tax deductible from state elsectible achibito contributors? 7a X c Organization that may receive deductible contributions under section 170c(.) 10 11 7a X d If "main indicate th	2a				
Note: If the organization have unrelated business gross income of \$1,000 or more during the year? 3a X 3a Diff the organization abuse unrelated business gross income of \$1,000 or more during the year? 3a X 3a Diff the organization abuse unrelated business gross income of \$1,000 or more during the year? 3a X 3a Diff the organization have an interest in, or a signature or other authority over, a financial accounts of thing requirements for FinCNEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5a X 5a Was the organization and party to a prohibited tax shelter transaction? 5a X 5b Did any taxabis party notify the organization that two or is a party to a prohibited tax shelter transaction? 5a X 5a Did any taxabis party notify the organization that was or is a party to a prohibited tax shelter transaction? 5a X 5a Did the organization include with every solicitation are section 170C). 5a X 5b Did the organization neitly section that are normally greater than \$100,000, and did the organization and the organization neitly section that are normally greater than \$100,000, and did the organization facto are section 170C). 5a X 7b Tys Yes, 'idd the organization neitly section tare				37	
a Dot the organization have unrelated business gross income of \$1,000 or more during the year? 3a X b ff Yes, 'has if field a Form 980-T for this year? if 'No' to line 3b, provide an explanation on Schedule O 3b X b ff Yes, 'has if field a Form 980-T for this year? if 'No' to line 3b, provide an explanation on Schedule O 3b X b ff Yes, 'has if field a Form 980-T for this year? if 'No' to line 3b, provide an explanation on Schedule O 3b X b bit 'ns, 'neutre the name of the foreign country, securities account, or other financial accounts (FBAP). 5a X b Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization file from 88677 5a X b If 'ns, 'in the organization include with every solitation an express statement that such contributions or gifts we not tax deductible? 5a X b If 'ns, 'in did the organization include with every solitation an express statement that such contributions or gifts we not tax deductible? 7a X b If 'ns, 'in did the organization notify the done of the value of the pools or sorkes provided? 7a X b If 'ns, 'in did the organization notify the done of the value of the pools or sorkes provided? 7a X b If 'ns, 'in did the organization notify the done of the value of the pools or sorkes provided? 7a X c D If the organization	b		2b	X	
b # Yes,* has it filed a form 990-T for this year? If Yes's form 3bs provide an explanation on Schedule 0 3b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other national account? 4a b If Yes,* form of the organization have an interest in, or a signature or other national account? 4a b If Yes,* enter the name of the foreign country buck as bark account; securits account, or other hancel alaccount? 5a 5a Was the organization a party to a prohibited tax shefter transaction at any time during the tax year? 5a 5a Was the organization have organization the form 8808-17? 5a 6a X If Yes,* load the organization have an interest in for 000,00, and did the organization solid. 5c 6a X If Yes,* load the organization have a prohibited tax shefter transaction? 6a X 7b If Yes,* load the organization netwe as young account have as contributions or gifts 6a X 7b If Yes,* load the organization netwe as young account have as contribution and party for goods and services provided? 7a X 7b If Yes,* indicate the number of Form \$2822 field during the year? 7a X 7c Yas,* indicate the number of Form \$2822 field during the year? 7a <t< th=""><th>_</th><th></th><th></th><th></th><th>v</th></t<>	_				v
4a At any time during the calendar year, idit the organization have an interest in, or a signature or other fauncial account)? 4a X b If Yes, "enter the name of the foreign country ▶ See instructions for fining requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAP). 5a X b Id any taxable party notify the organization that was or is a party to a prohibited tax shelter transaction? 5b X b Id any taxable party notify the organization fine form 68867? 5a X c II Yes' to the Sa or 5b, did the organization fine form 68867? 5a X c II Yes' to the Sa or 5b, did the organization fine form 68867? 5a X c II Yes' to the Sa or 5b, did the organization include with every solicitation an express statement that such contributions or gits were not tax docubites a charable contributions? 5a X b II Yes, 'idd the organization notify the donor of the value of the goods or services provided to the party? 7a X b II Yes, 'idd the organization notify the donor of the value of the goods or services provided to the party? 7a X b II Yes, 'idd the organization notify the donor of the value of the organization notify the donor of the value of the organization notify the donor of the value of the organization notify the donor of the value of the service? 7a 7a b II Yes, 'indicate the number of Forms 8282 filed during the year?					<u> </u>
Image: Interval Image: Image			30		
b If "Yes," enter the name of the foreign country → See instructions for fling requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAP), 5a X B Was the organization aper to a prohibited tas shelter transaction? 5b X D Id any taxable party notify the organization find If was or is a party to a prohibited tas shelter transaction? 5c X B D Id any taxable party notify the organization find If was or is a party to a prohibited tas shelter transaction? 5c X B D 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 contributions ander section 170(c). Bull the organization networks apayment in excess of \$75 made partly as a contribution and partly for goods and services provided to the party or to file Form 8829? 7c X D If the organization network the value of the goods or services provided to the party or to file Form 8829? 7c X D If the organization network and, directly or indirectly, to pay premiums on a personal beneft contract? 7t 7t D Id the organization network acontribution of called funds, Did a dora advised fund maintained by the sponsoring organization make a distribution sudnet section 4966? 9a 9a D Id the organization network acontribution or advised funds. Did a dorna advised funds. Did a dora advised fund	4a		10		x
See instructions for fling requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5a X See instructions for fling requirements for FinCEN form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5a X So Did any stable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5a X If "Yes' to line 5a or 5b, did the organization the HF orm 8886 T? 5a X B Des the organization shear annual gross requires that are normally greater than \$100,000, and did the organization solid any contributions include with every solicitation an express statement that such contributions or gifts were not tax deductible? 5a X 7 Organization receive apartmetin excess of S7 made party as contribution and party for goods and services provided to the particulation receive apartmetin excess os IS7 made party as contributions and party for goods and services provided to the particulation receive apartmetin excess os IS7 made party as contribution and party for goods and services provided to the particulation receive apartmetin excess os IS7 made party as continuous on apartson to receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7b 7b 10 the organization necever any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7f 71 10 the organization necever any funds, directly or indirectly, on a personal benefit contract? 7f 71 10 the organization necever any funds, dir	h		40		- 23
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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 12a 13 Section 501(c)(29) qualified nonprofit health insurance issuers. 13a 13a a Is the organization licensed to issue qualified health plans in more than one state? 13a 13a Note: See the instructions for additional information the organization must report on Schedule O. 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 13c c Enter the amount of reserves on hand 13c 14a X b If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i> 14b 14b 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. 15 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 X	b	Gross income from other sources (Do not net amounts due or paid to other sources against			
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13 Section 501(c)(29) qualified nonprofit health insurance issuers. 13a a Is the organization licensed to issue qualified health plans in more than one state? 13a Note: See the instructions for additional information the organization must report on Schedule O. 13b b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 14b 14b 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 16 X	12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
a Is the organization licensed to issue qualified health plans in more than one state? 13a Note: See the instructions for additional information the organization must report on Schedule O. Image: Comparization is licensed to issue qualified health plans 13b b Enter the amount of reserves on hand 13b 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X b If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i> 14b 14b 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 X	b				
Note: See the instructions for additional information the organization must report on Schedule O. Image: Description of the serves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans Image:					
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 13b c Enter the amount of reserves on hand 13c 14a 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X b If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i> 14b 14b 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. 15 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 X	а	-	13a		
organization is licensed to issue qualified health plans 13b 13b c Enter the amount of reserves on hand 13c 14a 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 14b 14b 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. 15 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 X					
c Enter the amount of reserves on hand 13c 14a X 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 14b 14b 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 X	b				
14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 14b 14b 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 16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 X	~				
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 14b 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 16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 X	C 1/1-2		140		x
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 X 16 X					<u> </u>
excess parachute payment(s) during the year?					
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?	10		15		x
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income?					
	16		16		x
	_				

Form **990** (2020)

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 Form 990 (2020)
 Montessori del Mundo Charter School
 45-5428023
 Page 6

 Part VI
 Governance, Management, and Disclosure
 For each "Yes" response to lines 2 through 7b below, and for a "No" response

 to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. .. X

Check if Schedule O contains a response or note to any line in this Part VI	
Section A. Governing Body and Management	

						Yes	No
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.						
b	Enter the number of voting members included on line 1a, above, who are independent	1b		7			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with any	other				
	officer, director, trustee, or key employee?				2		Х
3	Did the organization delegate control over management duties customarily performed by or under the						
	of officers, directors, trustees, or key employees to a management company or other person?			;	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 9				4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's ass			·····	5		Х
6	Did the organization have members or stockholders?				6		Х
7a		point one	• or	····· –	_		
74	more members of the governing body?				7a		х
h	Are any governance decisions of the organization reserved to (or subject to approval by) members, st			····· +	<u>a</u>		
D				-	76		Х
~	persons other than the governing body?				7b		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year					v	
	The governing body?				Ba	X	
b	Each committee with authority to act on behalf of the governing body?			<u>8</u>	3b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read						
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O				9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	venue Co	<u>de.)</u>				
				_		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			1	0a		Х
b	If "Yes," did the organization have written policies and procedures governing the activities of such ch	apters, af	filiates,				
	and branches to ensure their operations are consistent with the organization's exempt purposes?			<u>1</u> 0	0b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body	/ before fi	ling the forr	n? 1	1a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.						
	Did the organization have a written conflict of interest policy? If "No," go to line 13			1:	2a	Х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise				2b	Х	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? $f = \gamma$			·····			
Ŭ		,			2c	х	
13	in Schedule O how this was done Did the organization have a written whistleblower policy?			·····	13	X	
					13	X	
14 15	Did the organization have a written document retention and destruction policy?				4	<u></u>	
15	Did the process for determining compensation of the following persons include a review and approva	i by indep	endent				
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				_	v	
	The organization's CEO, Executive Director, or top management official				5a	X	
b	Other officers or key employees of the organization			1	5b	X	
	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 arrangen	nent with	а				_
	taxable entity during the year?			1	6a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluat	e its parti	cipation				
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	ization's					
	exempt status with respect to such arrangements?			10	6b		
Sec	tion C. Disclosure						
17	List the states with which a copy of this Form 990 is required to be filed None						
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, ar	nd 990-T (Section 501	1(c)(3)s or	nly)	availal	ole
	for public inspection. Indicate how you made these available. Check all that apply.	·		()()			
	X Own website Another's website X Upon request Other (explain)	on Sche	dule ())				
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co			v and fir	เลกก	ial	
	statements available to the public during the tax year.		isoroor polic	<i>y</i> , and in	and		
20	State the name, address, and telephone number of the person who possesses the organization's boo	ke and re	corde 🕨				
20	Wendy Renee - (720) 863-8629	no anu re					
	15503 E Mississippi Avenue, Aurora, CO 80017						
						000	(000
32006	5 12-23-20 7			F	orm	990	(202
705	7 510 151129 MON5010 2020.05094 MONTESSO	RI DE	L MUNI	ю сн	AR	MO	1

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

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

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

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

Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

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

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A)	(B)	(C)						(D)	(E)	(F)
Name and title	Average	Position (do not check more than one) than (ane	Reportable	Reportable	Estimated	
	hours per	box	, unle	ss pei	rson i	s both	n an	compensation	compensation	amount of
	week		cer ar I	nd a d I	irecto	r/trus [:]	tee)	from	from related	other
	(list any	rector						the	organizations	compensation
	hours for	or di	96			ated		organization	(W-2/1099-MISC)	from the
	related	ustee	trust		e	bens		(W-2/1099-MISC)		organization
	organizations below	ual tr	ional		ploye	t com				and related organizations
	line)	Individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) Wendy Renee	40.00	=	=		×	<u> </u>	ш			
Executive Director		1		x						
(2) Amanda Mailloux	2.00									
Member		х								
(3) David Romero	2.00									
Treasurer		х		x						
(4) Brian Cichon	2.00									
Chair		х		X						
(5) Latia Henderson	2.00									
Member		х								
(6) Ashley Muramoto	2.00									
Member		х								
(7) Armondo Rivera	2.00									
Secretary		X		Х						
(8) Elasha Nunez	2.00									
Vice Chair		X								
000007 10 00 00										Form 990 (2020)

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032007 12-23-20

Form 990 (2020)

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Form 990		ri del M	lun	ldo) C	'ha	ırt	er	: School	45-54	28023	Pa	age 8
Part V	II Section A. Officers, Directors, Trus	tees, Key Em	oloy	ees,	anc	d Hig	ghes	st C	ompensated Employee	s (continued)			
	(A) Name and title	(B) Average hours per	(do box	not cl	(C Pos heck i ss per	C) itior ^{more} rson i	ا than d is both	one 1 an	(D) Reportable compensation	(E) Reportable compensatior		(F) stimate mount o	
		week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer Officer		Highest compensated sn1/x		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MIS	C) f org ar	other npensat rom the ganizati id relate anizatio	e ion ed
			-										
			-										
			- 										
			-										
			-										
	btotal												
d To	tal from continuation sheets to Part VI tal (add lines 1b and 1c)												
	tal number of individuals (including but n n n n n n n n n n n n n n n n n n n	ot limited to th	ose	liste	d ab	ove	e) wh	o re	eceived more than \$100,	000 of reportable		<u></u>	<u></u>
	the organization list any former officer,	-			•	-		Ŭ	• •	•		Yes	No
4 For	a 1a? If "Yes," complete Schedule J for s r any individual listed on line 1a, is the su	im of reportabl	e co	mpe	ensa	tion	and	oth	ner compensation from t	he organization			x x
5 Dic	d related organizations greater than \$150 I any person listed on line 1a receive or a Idered to the organization? <i>If</i> "Yes." corr	accrue comper	nsati	on fr	rom	any	unre	elate	ed organization or individ		4		x
	B. Independent Contractors	iplete Scheaule	<u>e J T</u>	or sl	icn į	oers	on .			<u></u>	J	1 1	- 21
	mplete this table for your five highest co organization. Report compensation for	-									ensation fr	om	
	(A) Name and business				<u> </u>				(B) Description of s		(Compe	C) ensatior	<u></u> า
	ada Partners, LLC, 10												
	nouth Avenue, #360, A					14			Rent		30	1,40	58.
	Inc., 7570 West Coal	. Mine A	ve	nu	e,				Professional		1 1		C 1
	Leton, CO 80123								Services		⊥ ⊥	6,06) 1 •
	al number of independent contractors (i 20,000 of compensation from the organi		ot lir	nitec	d to f		se lis 2	ted	above) who received mo	ore than			
											Form	990 (2	2020)

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						de	l Mundo	Charter Scl	hool	45-5428	023 Page 9
Pa	rt V	111	Statement of Re	ven	ue						
			Check if Schedule O	conta	ains a respo	nse o	or note to any lir		(5)	(2)	(5)
								(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
ស ស	1	а	Federated campaigns		1a						
rani			Membership dues					1			
Š, G		с	Fundraising events								
ar /			Related organizations		1d						
inil inil		е	Government grants (contr	ibuti	ons) 1e	1,	077,211.				
tion sr S	1	f	All other contributions, gifts,	grant	s, and						
Contributions, Gifts, Grants and Other Similar Amounts			similar amounts not included				135,814.	-			
onti nd (-	Noncash contributions included in				`	1 212 025			
Οē		h	Total. Add lines 1a-1f				Business Code	1,213,025.			
	•	_	Per Pupil Rev	on	10			2,403,123.	2 103 123		
Program Service Revenue	2		District Mill				611710	85,483.			
Ser			Student Fees			t	611710	79,772.	79,772.		
am (Tuition			-	611710	31,086.	31,086.		
ogra Re		ē									
Pro	1	f	All other program service	rever	nue						
			Total. Add lines 2a-2f				►	2,599,464.			
	3		Investment income (inclue	ding	dividends, ir	ntere	st, and				
			other similar amounts) \dots				►				
	4 Income from investment of tax-exempt bond pro					nd p	roceeds				
	5		Royalties	· · · · · · · · · · · · · · · · · · ·		<u></u>					
	_				(i) Real		(ii) Personal	4			
	6		Gross rents	6a				-			
			Less: rental expenses	6b 6c				-			
			Rental income or (loss) Net rental income or (loss								
			Gross amount from sales of	/ <u></u>	(i) Securit	ies	(ii) Other				
		u	assets other than inventory	7a	()		(.,	1			
		b	Less: cost or other basis								
е			and sales expenses	7b							
venue		с	Gain or (loss)	7c				-			
Re			Net gain or (loss)			. <u></u>	►				
Other			Gross income from fundraisi	ng ev	ents (not						
đ			including \$								
			contributions reported on		,						
			Part IV, line 18			8a	3,934.	-			
			Less: direct expenses			8b	11.	2 0 2 2			2 0 2 2
			Net income or (loss) from		-		▶	3,923.			3,923.
	9	а	Gross income from gamin	-							
		h	Part IV, line 19 Less: direct expenses			9a 9b		-			
			Net income or (loss) from				►				
			Gross sales of inventory,	-	-						
			and allowances			10a					
		b	Less: cost of goods sold			10b					
			Net income or (loss) from			y					
s							Business Code				
Miscellaneous Revenue	11		Pension Accru	a1	Adj		611710	768,393.		ļ	
lane		b	Misc Revenue				900099	260,099.	260,099.		
Sev		с									
Mis			All other revenue				⊾	1 0 2 9 4 0 2			
		e	Total. Add lines 11a-11d					1,028,492. 4,844,904.	3 627 956	0.	3,923.
03200	<u>12</u>	00	Total revenue. See instruction	SIIC			🟲	F,044,304•	0,041,930.		Form 990 (2020)
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032009 12-23-20

Montessori del Mundo Charter School Part IX Statement of Functional Expenses

	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations		oxponoco	general expenses	oxperiece
•	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	102,566.		102,566.	
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	1,654,656.	1,164,324.	490,332.	
3	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	265,367.	180,032.	85,335.	
9	Other employee benefits	150,322.	92,419.	57,903.	
D	Payroll taxes	47,867.	29,080.	18,787.	
1	Fees for services (nonemployees):				
а	Management				
b	Legal	8,359.	3,684.	4,675.	
С	Accounting	7,200.	3,173.	4,027.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,	204 056	1 61 100		
	column (A) amount, list line 11g expenses on Sch 0.)	394,256.	161,790.	232,466.	
2	Advertising and promotion	26,823.	5,140.	21,683.	
3	Office expenses	19,804.	5,459.	14,345.	
4	Information technology	113,717.	22,725.	90,992.	
5	Royalties	156 267	20 400	425 067	
6		456,267. 34,152.	20,400. 6,544.	435,867.	
7	Travel	54,152.	0,344.	27,608.	
3	Payments of travel or entertainment expenses				
_	for any federal, state, or local public officials				
9	Conferences, conventions, and meetings	9,658.		9,658.	
0	Interest	9,000.		9,000.	
1	Payments to affiliates	84,737.		84,737.	
2 3	Depreciation, depletion, and amortization	20,250.	3,880.	16,370.	
5 -	Insurance	20,230.	5,000.	10,370.	
•	above (List miscellaneous expenses not covered line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
2	Supplies & Food Service	85,899.	35,947.	49,952.	
a b	Other Expenses	16,744.	2,503.	14,241.	
c		_ , , , , , , , , , , , , , , , , , , ,	_,		
d					
	All other expenses				
5	Total functional expenses. Add lines 1 through 24e	3,498,644.	1,737,100.	1,761,544.	(
, ;	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 The infollowing SOP 98-2 (ASC 958-720)				

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Form 990 (2020)

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Form 990 (2020)

Montessori del Mundo Charter School Part X Balance Sheet

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		Check if Schedule O contains a response or note to	o any line in this Part X	(
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		L	1,890,543.	1	2,120,341.
	2	Savings and temporary cash investments			5,225.	2	5,225.
	3	Pledges and grants receivable, net		L	79,516.	3	71,333.
	4	Accounts receivable, net		L	0.	4	5,490.
	5	Loans and other receivables from any current or for					
		trustee, key employee, creator or founder, substant	tial contributor, or 35%	6			
		controlled entity or family member of any of these p	persons			5	
	6	Loans and other receivables from other disqualified	l persons (as defined				
		under section 4958(f)(1)), and persons described in		6			
S	7	Notes and loans receivable, net		7			
Assets	8	Inventories for sale or use				8	
Ä	9	Duran side sources and she forms of the sources			7,500.	9	0.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D 1	0a 878, 0b 277,	992.			
	b	Less: accumulated depreciation	510,169.	10c	601,626.		
	11	Investments - publicly traded securities			11		
	12	Investments - other securities. See Part IV, line 11				12	
	13	Investments - program-related. See Part IV, line 11			13		
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11		634,743.	15	1,408,223.	
	16	Total assets. Add lines 1 through 15 (must equal li			3,127,696.	16	4,212,238.
	17	Accounts payable and accrued expenses		200,452.	17	334,239.	
	18	Grants payable			18		
	19	Deferred revenue		371,792.	19	116,206.	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete Part				21	
s	22	Loans and other payables to any current or former	officer, director,				
Liabilities		trustee, key employee, creator or founder, substant	tial contributor, or 35%	6			
abil		controlled entity or family member of any of these p	persons			22	
Ë	23	Secured mortgages and notes payable to unrelated	third parties			23	
	24	Unsecured notes and loans payable to unrelated th	ird parties		270,919.	24	120,978.
	25	Other liabilities (including federal income tax, payab	oles to related third				
		parties, and other liabilities not included on lines 17	7-24). Complete Part X				
		of Schedule D			5,201,067.	25	5,211,089.
	26	Total liabilities. Add lines 17 through 25			6,044,230.	26	5,211,089. 5,782,512.
		Organizations that follow FASB ASC 958, check	here 🕨				
ces		and complete lines 27, 28, 32, and 33.					
ano	27	Net assets without donor restrictions				27	
Ba	28	Net assets with donor restrictions		L		28	
pu		Organizations that do not follow FASB ASC 958,					
Ę		and complete lines 29 through 33.					
Net Assets or Fund Balances	29	Capital stock or trust principal, or current funds			-3,155,784.	29	-2,050,922.
set	30	Paid-in or capital surplus, or land, building, or equip	ment fund	L	239,250.	30	480,648.
As	31	Retained earnings, endowment, accumulated incom	ne, or other funds		0.	31	0.
Net	32	Total net assets or fund balances			-2,916,534.	32	-1,570,274.
	33	Total liabilities and net assets/fund balances			3,127,696.	33	<u>4,212,238</u> .

Form 990 (2020)

Form	1990 (2020) Montessori del Mundo Charter School	45-	542802	3 г	Page 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			904.
2	Total expenses (must equal Part IX, column (A), line 25)	2			644.
3	Revenue less expenses. Subtract line 2 from line 1	3			260.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	-2,9	16,	<u>534.</u>
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	-1,5	70,	<u>274.</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Ye	s 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?			3	<u> </u>
	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				
b	Were the organization's financial statements audited by an independent accountant?		21	5 X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?			5 X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	edule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audit	:		
	Act and OMB Circular A-133?		3a	a	<u> </u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits	<u></u>	3ł)	
			E eu		0 (2020)

Form **990** (2020)

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047	
2020	
Open to Public Inspection	

Department of the Treasury Internal Revenue Service

Nam	e of the organization				_			dentification number				
			Mundo Charte					5-5428023				
Pa	rt I Reason for Public	Charity Status.	(All organizations must c	omplete t	his part.) S	ee instruction	IS.					
The o	organization is not a private found	lation because it is: ((For lines 1 through 12, c	heck only	one box.)							
1	A church, convention of ch	urches, or association	on of churches described	l in sectio	on 170(b)(*	1)(A)(i).						
2	X A school described in sect	tion 170(b)(1)(A)(ii).	(Attach Schedule E (Forn	n 990 or 9	90-EZ).)							
3	A hospital or a cooperative											
4	A medical research organiz	ation operated in co	njunction with a hospital	described	l in sectio	on 170(b)(1)(A)(iii). Enter	the hospital's name,				
	city, and state:											
5	An organization operated for		ollege or university owned	l or operat	ed by a go	overnmental u	nit describe	ed in				
	section 170(b)(1)(A)(iv). (0											
6	A federal, state, or local go	-										
7	An organization that norma		antial part of its support fi	rom a gove	ernmental	unit or from th	ne general p	oublic described in				
		section 170(b)(1)(A)(vi). (Complete Part II.)										
8	A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)											
9	An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college											
	or university or a non-land-	grant college of agric	culture (see instructions).	Enter the	name, city	, and state of	the college	e or				
	university:											
10	An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment											
	income and unrelated busin		e (less section 511 tax) fro	om busines	sses acqui	red by the org	janization a	aπer June 30, 1975.				
	See section 509(a)(2). (Co			fat. 0 a a		O(-)(4)						
11 10	An organization organized	•		•			m out the	purpasso of ana ar				
12	An organization organized	-	-	-			-					
	more publicly supported or							Sheck the box in				
а	lines 12a through 12d that Type I. A supporting orga							aivina				
a	the supported organization		-	•	-							
	organization. You must			i majority t				pporting				
b	Type II. A supporting org			tion with it	s supporte	ed organizatio	n(s) by hay	vina				
	control or management of											
	organization(s). You mus			anne peree			ge are eapp					
с	Type III functionally inte			in connec	tion with.	and functional	llv integrate	ed with.				
-	its supported organizatio						.,					
d	Type III non-functionally						ted organiz	zation(s)				
	that is not functionally in											
	requirement (see instruct			•		-						
е	Check this box if the org	anization received a	written determination fro	m the IRS	that it is a	Туре I, Туре	II, Type III					
	functionally integrated, o											
f	Enter the number of supported of	organizations										
g	Provide the following information	n about the supporte	ed organization(s).									
	(i) Name of supported	(ii) EIN	(iii) Type of organization (described on lines 1-10	(iv) Is the org in your govern	anization listed ing document?	(v) Amount o	-	(vi) Amount of other				
	organization		above (see instructions))	Yes	No	support (see ii	istructions)	support (see instructions)				
				1	1	1		1				

Total

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LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 032021 01-25-21 Schedule A (Form 990 or 990-EZ) 2020

Schedule A (Form 990 or 990 EZ) 2020MontessoridelMundoCharterSchool45-5428023Page 2Part IISupport Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual 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.						
Sec	ction B. Total Support		-			.	
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2016	(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 \dots						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	
13	First 5 years. If the Form 990 is for th	e organization's fi	irst, second, third,	fourth, or fifth tax	year as a section 5	501(c)(3)	
	organization, check this box and stop						►
Sec	ction C. Computation of Publi	c Support Per	rcentage				
	Public support percentage for 2020 (li		•			14	%
	Public support percentage from 2019					15	%
16 a	33 1/3% support test - 2020. If the c				14 is 33 1/3% or n	nore, check this bo	ox and
	stop here. The organization qualifies		-				
b	33 1/3% support test - 2019. If the c	-			d line 15 is 33 1/3%	6 or more, check th	nis box
	and stop here. The organization qual		•••••				
17a	10% -facts-and-circumstances test		-				
	and if the organization meets the facts			-	-	VI how the organi	zation
	meets the facts-and-circumstances te	-			-		
b	10% -facts-and-circumstances test		-				10% or
	more, and if the organization meets th						
	organization meets the facts-and-circu						►
18	Private foundation. If the organizatio	n did not check a	box on line 13, 16	6a, 16b, 17a, or 17			
					Sch	edule A (Form 990) or 990-EZ) 2020

032022 01-25-21

Schedule A (Form 990 or 990-EZ) 2020 Montessori del Mundo Charter School 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) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do not						
include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that						
are not an unrelated trade or bus- iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons						
b 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		1	-	-		
Calendar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from businesses						
acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First 5 years. If the Form 990 is for th	e organization's fi	rst, second, third,	fourth, or fifth tax	year as a section 5	i01(c)(3) orgar	ization,
check this box and stop here	-			-		
Section C. Computation of Publi	c Support Per	rcentage				
15 Public support percentage for 2020 (li	ne 8, column (f), d	livided by line 13,	column (f))		15	%
16 Public support percentage from 2019	Schedule A, Part	III, line 15			16	%
Section D. Computation of Inves	tment Income	e Percentage				
17 Investment income percentage for 20	20 (line 10c, colur	mn (f), divided by I	ine 13, column (f))		17	%
18 Investment income percentage from 2					18	%
19a 33 1/3% support tests - 2020. If the	organization did r	not check the box	on line 14, and lin	e 15 is more than 3	3 1/3%, and I	ine 17 is not
more than 33 1/3%, check this box ar						►
b 33 1/3% support tests - 2019. If the						
line 18 is not more than 33 1/3%, che						tion Þ
20 Private foundation. If the organizatio	n did not check a	box on line 14, 19	a, or 19b, check t			►
032023 01-25-21			-	Sch	edule A (Forr	n 990 or 990-EZ) 2020
		16)			

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Schedule A (Form 990 or 990-EZ) 2020 Montessori del Mundo Charter School

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

Yes No

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

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Schedule A (Form 990 or 990-EZ) 2020

Schedule A (Form 990 or 990-EZ) 2020 Montessori del Mundo Charter School

Pa	rt IV	Supporting Organizations (continued)			age e
				Yes	No
11	Has th	he organization accepted a gift or contribution from any of the following persons?			
		son who directly or indirectly controls, either alone or together with persons described in lines 11b and			
		elow, the governing body of a supported organization?	11a		
b		hily member of a person described in line 11a above?	11b		
		6 controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
		in Part VI.	11c		
Sec		3. Type I Supporting Organizations			
				Yes	No
1	Did th	e governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more	supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
		ors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
		ively operated, supervised, or controlled the organization's activities. If the organization had more than one supported ization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	-	borted organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2		e organization operate for the benefit of any supported organization other than the supported			
	organ	ization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part \	<i>I</i> how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	super	vised, or controlled the supporting organization.	2		
Sec	tion (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 tru	stees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or ma	nagement of the supporting organization was vested in the same persons that controlled or managed			
	the su	ipported organization(s).	1		
Sec		D. All Type III Supporting Organizations			
				Yes	No
1		ne organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organ	ization'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			
	•	ization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2		any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organ	ization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
		ganization maintained a close and continuous working relationship with the supported organization(s).	2		
3	-	ason of the relationship described in line 2, above, did the organization's supported organizations have a			
	-	icant voice in the organization's investment policies and in directing the use of the organization's			
	incom	ne or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
800	suppo	orted organizations played in this regard.	3		
		E. Type III Functionally Integrated Supporting Organizations	<u></u>		
1	Checl	k 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. <i>Complete</i> line 2 <i>below</i> .			
b		The organization is the parent of each of its supported organizations. <i>Complete</i> line 3 <i>below</i> .			
С		The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in	struction	1 <u>s).</u>	

- 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.*

032025 01-25-21

Schedule A (Form 990 or 990-EZ) 2020

2a

2b

3a

3b

Yes No

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	dule A (Form 990 or 990-EZ) 2020 Montessori del Mundo Cl			45-5428023 Page 6
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporti			
1	Check here if the organization satisfied the Integral Part Test as a qualifyi			n Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mus	st complete	e Sections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
_1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-function	ally integrat	ed Type III supporting or	ganization (see

Schedule A (Form 990 or 990-EZ) 2020

032026 01-25-21

instructions).

Schedule A (Form 990 or 990-EZ) 2020 Montessori del Mundo Charter School 45-5428023 Page 7

Par	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	nizations _{(continu}	ued)	
Secti	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		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	es of supported organizations	6	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 (<i>describe in</i> Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	ne organization is responsive			
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2020 from Section C, line 6			9	
	Line 8 amount divided by line 9 amount			10	
		(i)	(ii)		(iii)
Secti	on E - Distribution Allocations (see instructions)	Excess Distributions	Underdistribution Pre-2020	าร	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				
с	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2020, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2020. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2021. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
	Excess from 2016				
	Excess from 2017				
	Excess from 2018				
	Excess from 2019				
	Excess from 2020				

Schedule A (Form 990 or 990-EZ) 2020

Schedule A	(Form 990 or 990-EZ) 2020	Montessori	del Muno	lo Charter	School	45-5428023	Page 8
Part VI	Supplemental Infor	mation. Provide the	explanations re	ouired by Part II. line	e 10: Part II. line 17a (or 17b; Part III, line 12;	•
	Part IV, Section A, lines 1 line 1; Part IV, Section D,	lines 2 and 3; Part IV,	Section E, lines ⁻	lc, 2a, 2b, 3a, and 3	3b; Part V, line 1; Part	V, Section B, line 1e; Pa	irtV,
	Section D, lines 5, 6, and (See instructions.)	8; and Part V, Section	E, lines 2, 5, and	6. Also complete t	his part for any additi	onal information.	
000000 01 05 5	14				Cala -	ule A (Form 990 or 990-	E7) 0000
032028 01-25-2	. 1		2	1	Sched	-טפפ זו טפפ וווזט זן א סוט	-21 2020

or 990-PF) Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2020

Employer identification number

	Montessori del Mundo Charter School	45-5428023			
Organization type (cheo	:k one):				
Filers of:	Section:				
Form 990 or 990-EZ X 501(c)(3) (enter number) organization					
527 political organization					
Form 990-PF	501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a private foundation				
	501(c)(3) taxable private foundation				

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

General Rule

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

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 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 $e_{XClusively}$ 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 $e_{XClusively}$ 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 \dots \blacktriangleright \$______

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).

 $\label{eq:LHA} \ \ \mbox{For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.}$

X

X

X

Employer identification number

Name of organization Montessori del Mundo Charter School 45-5428023 Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (b) (d) (c) Name, address, and ZIP + 4 No. **Total contributions** Type of contribution 1 Person Payroll 50,000. Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 2 Person Payroll 5,000. Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. 3 Person Payroll Noncash 41,413. \$ (Complete Part II for noncash contributions.) (d) (a) (b) (c) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. Person Payroll Noncash \$ (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.) (b) (c) (d) (a) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution Person Payroll

> (Complete Part II for noncash contributions.)

Noncash

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

023452 11-25-20

Employer identification number

45-5<u>428023</u>

Montessori del Mundo Charter School

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received

24

Schedule E	B (Form 990, 990-EZ, or 990-PF) (2020)		Page					
Name of or	rganization		Employer identification number					
Montes	ssori del Mundo Charter	School	45-5428023					
Part III	from any one contributor. Complete columns (a) through (e) and the following line er	section 501(c)(7), (8), or (10) that total more than \$1,000 for the year entry. For organizations					
	completing Part III, enter the total of exclusively religious, Use duplicate copies of Part III if additional	charitable, etc., contributions of \$1,000 or	rr less for the year. (Enter this info. once.) ► \$					
(a) No.	· · · · ·							
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
-		(a) Transfer of si						
		(e) Transfer of gi	int.					
-	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					
-								
		ift						
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee					
(a) No								
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
			<u> </u>					
	(e) Transfer of gift							
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee					
023454 11-25	-20		Schedule B (Form 990, 990-EZ, or 990-PF) (202					

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SCHEDULE D)
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Department of the Treasury Internal Revenue Service

Supplemental Financial Statements ► Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► Go to www.irs.gov/Form990 for instructions and the latest information.



Part II Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered 'Yes' on Form 990, Part IV, line 6. 1 Total number at end of year (a) Donor advised funds (b) Funds and other accounts 2 Aggregate value of contributions to (during year) (a) Donor advised funds (b) Funds and other accounts 3 Aggregate value of agregates and donor advisors in writing that the assets held in donor advised funds are the organization inform all grantes, donors, and donor advisors in writing that grant funds can be used only for chartable purposes and not to the benefit of the donor advisors in writing that grant funds can be used only for chartable purposes and not to the benefit of the organization answered 'Yes' on Form 990, Part IV, line 7. Purpose(s) or observation casements held by the organization (heck all that appt). Yes Part III Conservation of and for public use (for example, recreation or education) Preservation of a historically important land area Preservation of a certified historic structure Propose(s) or observation casements. (b) equiled after 7/25/06, and not on a historic structure 2 3 Total number of conservation easements modified, transfered, released, extinguished, or terminated by the organization during the tax year 2 4 Number of conservation easements in blocka? 2 2 3 Number or conservation easeaments modified, transfered, released, ex	Name	of the organization Montessori del Mundo Charter School	Employer identification number 45-5428023
organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year (a) Donor advised funds (b) Funds and other accounts 2 Aggregate value of contributions to (during year) (a) Donor advised funds (b) Funds and other accounts 3 Aggregate value of contributions to (during year) (c) Did the organization inform all donors and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor advisors of roany other purpose conferring mpermissible private benefit? Yes 6 Did the organization inform all grantees, donors, and donor advisors of roany other purpose conferring mpermissible private benefit? Yes 7 Purpose(s) of conservation essements. Complete if the organization answered 'Yes' on Form 990, Part IV, line 7. Preservation of a historically important land area protection of all dor public use (for example, recreation or education) Preservation of a historically important land area Protection of all dor public use (for example, recreation or education) Preservation of a conservation essements a Total number of conservation essements Ze Ze 4 Addregate at strugget 20 the arganization held a qualified conservation conservation essements on the la did the Ta Ze a Total acreage restricted by conservation essements Ze Ze	Par		
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day of the tax year. Held at the End of the T a Total number of conservation easements 2a b Total acreage restricted by conservation easements 2c c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register 2d 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ 4 4 Number of states where property subject to conservation easement is located ▶	2		onservation easement on the last
a Total number of conservation easements b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure isted in the National Register 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year > 4 Number of states where property subject to conservation easement is located > 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? 6 Number of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year > \$ 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization seconting for conservation easements. Part IIII Organization elected, as permitted under FASB ASC 958, not report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the form 990, Part IV, line 8. 1a If the organization elected, as permitted under FASB ASC 958, not report in its revenue statement and balance sheet works			Held at the End of the Tax Yea
b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure ilisted in the National Register 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 4 Number of states where property subject to conservation easement is located 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year *	а		
c Number of conservation easements on a certified historic structure included in (a) 22 d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure 2d 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ 2d 4 Number of states where property subject to conservation easement is located ▶			
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register 2d 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶		o ,	
listed in the National Register 2d 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ 4 Number of states where property subject to conservation easement is located ▶ 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes 9 In Part XIII Organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's inaccounting for conservation easements. Part III Organization Baintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered 'Yes' on Form 990, Part IV, line 8. If the organization elected, as permitted under FASB ASC 958, not report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furt			
 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶			2d
 year ▶	3		
 4 Number of states where property subject to conservation easement is located ▶ 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ii) and section 170(h)(4)(B)(ii)? 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answerd "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected as permitted under FASB ASC 958, to r			5
 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year \$	4	Number of states where property subject to conservation easement is located	
 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶			
 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year \$		violations, and enforcement of the conservation easements it holds?	Yes No
 \$	6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservat	ion easements during the year
 \$		▶	
 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation e	asements during the year
 and section 170(h)(4)(B)(ii)?		▶\$	
 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part XIII, line 1 \$ \$ (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide 	8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(E	3)(i)
 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part XIII, line 1 \$ \$ (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide 		and section 170(h)(4)(B)(ii)?	
 organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part X \$	9	In Part XIII, describe how the organization reports conservation easements in its revenue and expense state	ment and
 Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X \$ 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide 		balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements the	hat describes the
Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide		organization's accounting for conservation easements.	
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 service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide 	1a	If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and ba	alance sheet works
 b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide 		of art, historical treasures, or other similar assets held for public exhibition, education, or research in furthera	ance of public
 art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 > \$ (ii) Assets included in Form 990, Part X > \$ 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide 		service, provide in Part XIII the text of the footnote to its financial statements that describes these items.	
 provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide 	b	If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance	ce sheet works of
 (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide 		art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherand	ce of public service,
 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide 		provide the following amounts relating to these items:	
 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide 		(i) Revenue included on Form 990, Part VIII, line 1	► \$
	2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain,	, provide
the following amounts required to be reported under FASB ASC 956 relating to these items.		the following amounts required to be reported under FASB ASC 958 relating to these items:	
a Revenue included on Form 990, Part VIII, line 1	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. Schedule D (Form 99	LHA	For Paperwork Reduction Act Notice, see the Instructions for Form 990.	Schedule D (Form 990) 202

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		ori del Mur							28023	
Par	t III Organizations Maintaining C	ollections of Ar	t, Histo	orical Trea	isures, or	[·] Other	Simila	r Assets	(continu	ied)
3	Using the organization's acquisition, accessi	on, and other record	s, check	any of the fo	llowing that	make sig	gnificant ι	use of its		
	collection items (check all that apply):									
а	Public exhibition	d		oan or exch						
b	Scholarly research	e	. [] (Other						
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explair	n how the	ey further the	organizatio	n's exerr	npt purpos	se in Part	XIII.	
5	During the year, did the organization solicit of	or receive donations of	of art, his	torical treasu	ires, or othe	r similar	assets			
	to be sold to raise funds rather than to be ma								Yes	No
Par	t IV Escrow and Custodial Arran		ete if the	organization	answered "	Yes" on	Form 990	, Part IV, I	ine 9, or	
	reported an amount on Form 990, Pa									
1a	Is the organization an agent, trustee, custod		•							
	on Form 990, Part X?								Yes	No
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	llowing ta	able:						
									Amount	
	Beginning balance									
	Additions during the year									
	Distributions during the year									
	Ending balance									N
	Did the organization include an amount on F						• • • • • • • • • • • • • • • • • • • •	∟	Yes	No
Par	If "Yes," explain the arrangement in Part XIII. t V Endowment Funds. Complete									
		(a) Current year		rior year	(c) Two year			vears back		/ears back
10	Beginning of year balance	(a) Current year	(0) PI	nor year		S DAUK	(u) mee y	Cars Dack	(e) Four	Cais Daux
la b										
0	Contributions Net investment earnings, gains, and losses									
с А	Grants or scholarships									
	Other expenditures for facilities									
e	and programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the curr		e (line 1a	column (a))	held as:					
_ a	Board designated or quasi-endowment		%	, oolanni (a))						
b	Permanent endowment		_/*							
		<u> </u>								
-	The percentages on lines 2a, 2b, and 2c sho									
3a	Are there endowment funds not in the posse		ation that	are held and	administer	ed for the	e organiza	ation		
	by:						9			Yes No
	(i) Unrelated organizations								3a(i)	
	(ii) Related organizations								3a(ii)	
b	If "Yes" on line 3a(ii), are the related organiza	ations listed as requir	ed on Sc	hedule R?					3b	
4	Describe in Part XIII the intended uses of the									•
Par	t VI Land, Buildings, and Equipm	ient.								
	Complete if the organization answere	d "Yes" on Form 990), Part IV,	, line 11a. Se	e Form 990	, Part X, I	line 10.			
	Description of property	(a) Cost or o basis (investr		(b) Cost o basis (c		• •	ccumulate preciation	ed	(d) Book	value
19	Land	· · ·	,	345.5 (6	,					
	LandBuildings									
	Leasehold improvements			873	3,182.	2	276,20	04.	596	,978.
	Equipment				5,810.		1,10			,648.
	Other			~	,		- / - \			, • 10 •
	. Add lines 1a through 1e. (Column (d) must e		X colum	n (R) line 10	2)				601	,626.
Tota	i Alaa mido ha thiodigh he. (Columni (d) Must e	<u>iqual FUITI 990, Part</u>	<u>, coium</u>	<u>п (р), ште 10</u> 0	<i></i>					, • = • •

Schedule D (Form 990) 2020

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(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			
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-o	f-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 1	1d. See Form 990. Part X. line 15.	
) Description		(b) Book value
(1) Deposits	, ,		10,000.
(2) Pension Deferred Outflows	(GASB 68)		1,346,008.
<u></u>	ASB 68)		25,175.
(4) Other Assets			27,040.
			27,040.
(5)			
(6)			
(7)			
(8)			
(9)			1 400 000
Total. (Column (b) must equal Form 990. Part X. col. (B) lir	<u>1e 15.)</u>	>	1,408,223.
Part X Other Liabilities.			
Complete if the organization answered "Yes	on Form 990, Part IV, line 1	1e or 11f. See Form 990, Part X, line 25.	
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2) Pension Liability (GASB 6	-		3,522,646.
(3) Pension Deferred Inflows	(GASB 68)		1,518,682.
(4) OPEB Liability (GASB 68)			128,056.
(5) OPEB Deferred Inflows (GA	ASB 68)		41,705.
(6)			
(7)			
(8)			
(9)			
			5,211,089.
Total. (<i>Column (b) must equal Form 990, Part X, col. (B) lir</i> 2. Liability for uncertain tax positions. In Part XIII, provid			
Liability for uncertain tax positions. In Part All, provid		the organization 5 intancial statements that	

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

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Part VII Investments - Other Securities.

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

(a) Description of security or category (including name of security)	(b) Book value	(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)		

Sche	dule D (Form 990) 2020 Montessori del Mundo Charte	r Sch	001	45-5	5428023 Page 4
	t XI Reconciliation of Revenue per Audited Financial Statemen				<u> </u>
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1	Total revenue, gains, and other support per audited financial statements			1	4,076,522.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b			
с	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d	11.		
е	Add lines 2a through 2d			2e	11.
3	Subtract line 2e from line 1			3	4,076,511.
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.)		768,393.		
с	Add lines 4a and 4b			4c	768,393.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	4,844,904.
Pa	t XII Reconciliation of Expenses per Audited Financial Stateme	nts With	I Expenses per R	eturr	າ.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1	Total expenses and losses per audited financial statements			1	2,730,262.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
с	Other losses	2c			
d	Other (Describe in Part XIII.)	2d	-768,382.		
е	Add lines 2a through 2d			2e	-768,382.
3	Subtract line 2e from line 1			3	3,498,644.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
	Other (Describe in Part XIII.)				
	Add lines 4a and 4b			4c	0.
5	Total expenses. Add lines 3 and 4c. (<i>This must equal Form 990. Part I. line 18.</i>)			5	3,498,644.
_	t XIII Supplemental Information.			I	-,,-
Prov	de 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	Lline 2: Part XI.
	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additi				,,
		onarmon			
Pai	rt XI, Line 2d - Other Adjustments:				
Dii	ect Fundraising Expenses				11.

<u> Part XI, Line 4b - Other Adjustments:</u>

Pension Accrual Adjustment

Part XII, Line 2d - Other Adjustments:

Direct Fundraising Expenses

Pension Accrual Adjustment

Total to Schedule D, Part XII, Line 2d

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768,393.

-768,393.

-768,382.

11.

Schedule D (Form 990) 2020 Montessori del Mundo Charter School 45-5428023 Page 5 Part XIII Supplemental Information (contravo)	Schedule D (Form 990) 2020	Montessori	del	Mundo	Charter	School	45-5428023	Page 5
	Part XIII Supplemental Info	rmation (continued)						
							Schedule D (Form 9	90) 2020
	032055 12-01-20							,

SCHEDULE E	Schools	(OMB No.	1545-004	47	
(Form 990 or 990-			20	20		
Department of the Treasury Part IV, line 13, or Form 990-EZ, Part VI, line 48. Mattach to Form 990 or Form 990 or Form 990-EZ. Internal Revenue Service Go to www.irs.gov/Form990 for the latest information.			2020			
			Open to Public Inspection			
Name of the organiz		Employer ider	-		mber	
	Montessori del Mundo Charter School		5428		nbei	
Part I	Honoosport dor Hando Ondroor Sonoor			010		
				YES	NO	
•	nization have a racially nondiscriminatory policy toward students by statement in its charter,					
	governing instrument, or in a resolution of its governing body?		1	X	<u> </u>	
	nization include a statement of its racially nondiscriminatory policy toward students in all its broc			v		
e .	d other written communications with the public dealing with student admissions, programs, and	scholarships?	2	X		
•	ization publicized its racially nondiscriminatory policy on its primary publicly accessible Internet all times during its taxable year in a manner reasonably expected to be noticed by visitors to the					
1 0	through newspaper or broadcast media during the period of solicitation for students, or during the	he				
	riod if it has no solicitation program, in a way that makes the policy known to all parts of the gen					
	serves? If "Yes," please describe. If "No," please explain. If you need more space, use Part II		3	Х		
The Sch	ool includes its anti-discrimination policy in it	s				
parent	handbook and on its website.					
•	nization maintain the following?			v		
	ating the racial composition of the student body, faculty, and administrative staff?	ton / bacio?	4a 4b	X X		
	menting that scholarships and other financial assistance are awarded on a racially nondiscrimina atalogues, brochures, announcements, and other written communications to the public dealing	LOTY DASIS?	40			
	dmissions, programs, and scholarships?		4c	х		
	naterial used by the organization or on its behalf to solicit contributions?		4d	X		
	d "No" to any of the above, please explain. If you need more space, use Part II.					
-	nization discriminate by race in any way with respect to:		_		v	
	ts or privileges?		<u>5a</u>		X X	
b Admissions p	blicies?		5b		X	
c Employment of	f faculty or administrative staff? or other financial assistance?		5c 5d		X	
	Dicies?		5u 5e		X	
f Use of facilitie			5f		X	
	ams?		5g		X	
	ricular activities?		5h		X	
	d "Yes" to any of the above, please explain. If you need more space, use Part II.					
-	nization receive any financial aid or assistance from a governmental agency?		<u>6a</u>	X		
	ization's right to such aid ever been revoked or suspended?		6b		X	
-	d "Yes" on either line 6a or line 6b, explain on Part II.					
	nization certify that it has complied with the applicable requirements of sections 4.01 through		_	v		
4.05 of Rev. F	roc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Part II		7	Х	1	

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

Schedule E (Form 990 or 990-EZ) 2020

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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:

Per-pupil revenue and grants are passed through the Colorado Charter

School Institute to the School.

Schedule E (Form 990 or 990-EZ) 2020

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SCHEDULE O (Form 990 or 990-EZ) Department of the Treasury Internal Revenue Service	Supplemental Information to Form 990 or 990 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.	-EZ						
Name of the organization	Montessori del Mundo Charter School	Employer identification number $45-5428023$						
Form 990, Part I, Line 1, Description of Organization Mission:								
To prepare all students for success in college and the future bilingual								
workforce and	workforce and to build a strong, educated, bilingual community.							
<u>Form 990, Pa</u>	rt III, Line 1, Description of Organization Mi	ssion:						
To prepare a	ll students for success in college and the fut	ure bilingual						
workforce and	to build a strong, educated, bilingual commu	nity.						
<u>Form 990, Pa</u>	rt VI, Section B, line 11b:							
Line 11b Exp	lanation - The 990 is presented to the Board a	nnually prior to						
submission.								
	rt VI, Section B, Line 12c:							
	quires all board members to read and sign a co							
	icy at the beginning of their term. At the an							
	asks that each member self-disclose any potent							
	interest (such as a business or personal relationship) that would keep a							
<u>member from </u>	roting on business for the School.							
Form 990, Pa:	Form 990, Part VI, Section B, Line 15:							
The Board of Directors performed a salary analysis of similar schools in								
the same district and compensation was set according to this review.								
Form 990, Part VI, Section C, Line 19:								
On the websi	e and available in the office, upon request.							
LHA For Paperwork R	eduction Act Notice, see the Instructions for Form 990 or 990-EZ.	edule O (Form 990 or 990-EZ) 2020						

Schedule O (Form 990 or 990-EZ) 2020	Page 2
Name of the organization Montessori del Mundo Charter School	Employer identification number 45-5428023
Form 990, Part IX, Line 11g, Other Fees:	
Purchased Professional Services:	
Program service expenses	161,790.
Management and general expenses	232,466.
Fundraising expenses	0.
Total expenses	394,256.
Total Other Fees on Form 990, Part IX, line 11g, Col A	394,256.
Form 990, Part XII, Line 2c	
The School has not changed its oversight or selection proc	ess during
the year.	
032212 11-20-20 Sch	edule O (Form 990 or 990-EZ) 2020

Application for Automatic Extension of Time To File an Form **8868 Exempt Organization Return**

(Rev. January 2020)

File a separate application for each return.

Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or	r Name of exempt organization or other filer, see instructions.			Taxpayer identification number (TIN)		ımber (TIN)		
print	Montessori del Mundo Charter School				45-5428023			
File by the due date fo					45 5420	025		
filing your return. See	15503 E. Mississippi Ave.,	No. S	te. B					
instructions								
Enter the Return Code for the return that this application is for (file a separate application for each return)								
Applicat	Application Return Application							
ls For		Code	Is For	Code				
Form 99	0 or Form 990-EZ	01	Form 990-T (corporation)			07		
Form 99	0-BL	02	Form 1041-A			08		
Form 47	20 (individual)	03	Form 4720 (other than individual)			09		
Form 99	0-PF	04	Form 5227			10		
Form 99	0-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11		
Form 99	0-T (trust other than above) Wendy Renee	06	Form 8870			12		
Telephone No. ► (720) 863-8629 Fax No. ► • If the organization does not have an office or place of business in the United States, check this box ► • If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box ► • If it is for part of the group, check this box ► (May 16, 2022), to file the exempt organization return for the organization named above. The extension is for the organization's return for: ► (alendar year or (alendar year or (alendar year or (alendar year or (block the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return 2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return								
	this application is for Forms 990-BL, 990-PF, 990-T, 4720 y nonrefundable credits. See instructions.	, or 6069, e	enter the tentative tax, less	3a	s	0.		
	his application is for Forms 990-PF, 990-T, 4720, or 6069	69, enter any refundable credits and						
estimated tax payments made. Include any prior year overpayment allowed as a credit.			owed as a credit.	3b	\$	0.		
c Balance due. Subtract line 3b from line 3a. Include your payn			h this form, if required, by					
using EFTPS (Electronic Federal Tax Payment System). See instructions. 3c \$			\$	0.				
Caution instruction	: If you are going to make an electronic funds withdrawal ons.	(direct det	bit) with this Form 8868, see Form 84	153-EO an	nd Form 8879-EO	for payment		
LHA	For Privacy Act and Paperwork Reduction Act Notice,	see instru	ictions.		Form 8868	(Rev. 1-2020)		

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