Form 990			Return of Organization Exempt From Income Tax									OMB No. 1545-0047
				ept private foundation	ns)	2020						
			Do no	,	Open to Public							
		of the Treasury enue Service	► Go	to www.irs.	.gov/Form99	0 for instr	uctions and	d the la	test i	nformation.		Inspection
Α	For th	e 2020 calend	ar year, or tax year	beginning	JUL 1	, 2020) and	ending	J	UN 30, 2021		
	Check if applicat	C Name of	forganization							D Employer identifi	catio	on number
•	Addr		.									
	chan	ge wya t	t Academy									
	chan Initia	ge Doing bi	usiness as		84-14686							
Initial returnNumber and street (or P.0. box if mail is not delivered to street address)Final return3620 Franklin Street								Room/s	suite	E Telephone numbe		1 -
	returr termi									303-292-	22-	3,596,743.
	ated Amer	nded Dont	own, state or provincer, CO 80		and ZIP or to	oreign post	al code			G Gross receipts \$		
	returr Appli		nd address of princip		ami Ogl		H(a) Is this a group re for subordinates					
	tion pend		as C above		anii 051		H(b) Are all subordinates in					
1	Гах-ех	empt status:		501(c) () 🗲 (inse	ert no)	4947(a)(1)	٥r	527	.,		See instructions
			://www.wya				10 17 (0)(1)	01	021	H(c) Group exemptio		
		f organization:		Trust	Association		ner 🕨	L	Year c	of formation: 1998		
	art I	Summary										
	1	Briefly describ	e the organization's	mission or n	nost significa	int activitie	s: See	Sche	du.	le O.		
nce			-		-							
rna	2	Check this bo	x 🕨 if the or	ganization d	iscontinued i	ts operatio	ns or dispos	sed of n	nore	than 25% of its net as	sets.	
ove	3	Number of vot	ting members of the	governing b	ody (Part VI,	line 1a)						8
ڻ م	4		lependent voting me									8
es	5		of individuals employ									36
Activities & Governance	6		of volunteers (estima									50
Act	7 a		d business revenue f									0.
	b	Net unrelated	business taxable inc	come from F	orm 990-T, Pa	art I, line 1	1	<u></u>	1			
	8	Contributions	and grants (Part VIII,	line 1h)						Prior Year 447,744.		Current Year 662,164.
ne	9		ce revenue (Part VIII,							1,965,319.		2,011,896.
Revenue	10		come (Part VIII, colur							149.		1,335.
Å	11		e (Part VIII, column (A							715,968.		921,348.
	12		- add lines 8 through							3,129,180.		3,596,743.
	13		nilar amounts paid (F							0.		0.
	14		to or for members (P							0.		0.
es	15	Salaries, other	r compensation, emp	oloyee benef	its (Part IX, c	olumn (A),	lines 5-10)			1,790,146.		1,768,103.
nse	16a	Professional fu	undraising fees (Part	IX, column	(A), line 11e)					0.		0.
Expense	. b	Total fundraisi	ing expenses (Part I)	K, column (D), line 25)	▶		0.				
Ш	17	-	es (Part IX, column (A							1,020,058.		970,778.
	18	-	s. Add lines 13-17 (n	-		n (A), line 2	25)			2,810,204.		2,738,881.
	19	Revenue less	expenses. Subtract	line 18 from	line 12	<u></u>				318,976.		857,862.
Net Assets or									Beç	jinning of Current Year	-	End of Year
Sset	20	Total assets (F								2,674,951.		2,810,082.
et A	21		(Part X, line 26)						<u> </u>	<u>3,414,946.</u> -739,995.	-	2,692,215.
	<u>22</u> art II		fund balances. Subt	ract line 21 f	rom line 20				1		I	117,867.
		-		amined this re	turn including		ing scheduled	s and sta	teme	nts, and to the best of my	/ knov	wledge and helief it is
			. Declaration of prepare				•				, 1101	הייסטעט עווע אטווטו, וג וא
	,											

Sign Here	Signature of officer Kami Osborne, Operatio Type or print name and title	ns Director		Date									
	Print/Type preparer's name	Preparer's signature	Date	Check if	PTIN P00532558								
Paid	aid James D. Hinkle James D. Hinkle 05/12/22												
Preparer	Firm's name 🕨 Hinkle & Company			Firm's EIN ▶ 27	-1494012								
Use Only	Firm's address 🖕 5028 East 101st	Street											
	Tulsa, OK 74137 Phone no. (918) 492-3388												
May the IF	RS discuss this return with the preparer shown abo	ove? See instructions			X Yes No								
032001 12-2	032001 12-23-20 LHA For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2020)												

⁰³²⁰⁰¹ 12-23-20 LHA For Paperwork Reduction Act Notice, see the separate instructions. See Schedule O for Organization Mission Statement Continuation

Form	n 990 (2020) Wyatt Academy	84-1468640	Page 2
Par	Int III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		
1	Briefly describe the organization's mission:		
•	The Charter School is a nonprofit entity organized for	the nurnose c	of
	operating a public school that provides education to ch.		<u>, </u>
	kindergarten through 5th grade in accordance with the te	erms of the	
	charter application.		
2	Did the organization undertake any significant program services during the year which were not listed on the		
	prior Form 990 or 990-EZ?	Yes	s X No
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services'		s X No
3			
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, a	s measured by expenses	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to oth	ers, the total expenses, a	and
	revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$1, 200, 967. including grants of \$) (Rev	enue \$ 2,931,	,137.)
	To provide quality education under the charter issued by		
	Schools for kindergarten through 5th grade, benefiting	approximatel	7
	183 students for the 2020-2021 school year.	<u>appi onimacci j</u>	
	105 students for the 2020-2021 school year.		
4b	(Code:) (Expenses \$ including grants of \$) (Rev	enue \$)
4c	(Code:) (Expenses \$ including grants of \$) (Rev	enue \$)
4d	Other program services (Describe on Schedule O.)		
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses 1,200,967.		
		Form	990 (2020)
032002	02 12-23-20		(
002002			

3 2020.05094 wyatt academy

	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		_X_
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		<u> </u>
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а			37	
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			77
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		<u> </u>
С	d the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			v
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<u> </u>
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in	11d	v	
	X, line 16? If "Yes," complete Schedule D, Part IX		X X	
e		11e	<u> </u>	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	4 4 5		х
10-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If</i> "Yes," <i>complete Schedule D, Part X</i> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If</i> "Yes," <i>complete</i>	11f		
IZa		12a	Х	
h	Schedule D, Parts XI and XII	12a	- 23	
U		12b		х
13	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Х	
	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,	1.0		
-	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		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		L
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
03200	3 12-23-20	Form	990	(2020)

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WYA50101

Yes

No

Form 990 (2020) Wyatt Academy
Part IV Checklist of Required Schedules

1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?

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			/

 Form 990 (2020)
 Wyatt
 Academy

 Part IV
 Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? 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	00-		x
	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? <i>If</i> "Yes," <i>complete Schedule L, Part IV</i>	28b		
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If	000		x
20	"Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	28c 29		X
29 30		29		- 23
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	30		x
31	contributions? <i>If "Yes," complete Schedule M</i> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		X
32	Did the organization requirate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete</i>			
02		32		x
33	Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		х
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R. Part VI	37		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pa	rt 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			
			Yes	No

						110			
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	14						
b	b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b								
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming								
	(gambling) winnings to prize winners?			1c					
032004	12-23-20			Form	990	(2020)			

032004 12-23-20

Part M Statements Regarding Other IRS Filings and Tax Compliance (continued) Yes No. 2a Entry the number of employees reported on form WJ. Treamittat of Wage and Tax Statements. 2a 36 b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 3a X 3b Dott be enginetiation have unreaded basines groups income of 51,000 rance during the year? 3a X 3b Dott be enginetiation have unreaded basines groups income of 51,000 rance during the year? 3a X 3b TYms, "hast filed a from 590-10 ro this year? (fifwor to line 3b, provide an explanation or 3chedule 0 3a X 3b TYms, "hast filed a from 590-10 ro this year? (fifwor to line 3b, provide an explanation or 3chedule 0 3a X 3b TYms, "hast filed a from 590-10 ro this year? (fifwor to line 3b, provide an explanation or 3chedule 0 3a X 3b TYms, "inst filed a provide an explanation and yritine during the tax year? 5a X 3c TYms, "indit the organization file one of mode 300-10 Tyms, indit the organization file of mode 300-10 5c 4a TYms, "indit the organization indice with explanatitanorexplanation organitatanon file of mode 300-10		990 (2020) Wyatt Academy 84-1468	640	Р	age 5						
2a Enter the number of employees reported on From W-3, Transmittal of Wage and Tax Statements, 2a 36 b If at least one is reported on line 2a, di the organization file all required tearlie employment tax returns? 2b X 3a Dott the organization have unrelated business gross income of \$1,000 or mone during the year? 3a 3a X 3b Phas: Thas If flad 2 Form 500 Tor this year? if "No" to line 30, provide an exploration on Schedule 0 3b X b If Yes: Thas If flad 2 Form 500 Tor this year? if "No" to line 30, provide an exploration or Schedule 0 3b X b If Yes: Thas If flad 2 Form 500 Tor this year? if "No" to line 30, provide an exploration or Schedule 0 3b X b If Yes: That If the a foreign contry! 4a X 4a X b If Yes: The solutions to the wort organization in Form 510.000, and cid the organization solicit any contributions that were not exactive that any contributions that were not exactable contributions? 6a X c If Yes: Total exactable party notify the organization include with every solicitation an express statement that such contributions collicit any contributions that were not thangot the norganization solicit any contributions that were not thanked to the approximation include with every solicitation an express statement that such contribution or	Par	TV Statements Regarding Other IRS Filings and Tax Compliance (continued)									
Interface 26 26 b If a lead on is reported on ince 2.0 (of the organization file all required federal employment tax returns? 2a X A Dot the organization is and 2a is greater than 250, you may be required to a_{PB} (see instructions) 2a X A Dot the organization is and 2a is greater than 250, you may be required to a_{PB} (see instructions) 2a X B D Tox - Than the ord Form 300 Tor this you? If Viro to its in S0, provide an explanation on Schedule O 3a A B I Tox - Than the organization has account, securits account, or other functial accounts (FEAR). A X B I Tox - Than of the foreign country V So instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FEAR). So X B Dot any taxoual gross receipts that an enormal greater than \$10,000, and did the organization avail or a protivibuted tax sheler transaction? So X C Dot any taxoual gross receipts that an enormal greater than \$10,000, and did the organization select a solution or of the save of the organization select account or the organization neuro end the discount of the organization file fore models at the organization file fore models at the organization file fore models or the organization file fore models at the organization file fore m				Yes	No						
b If a last one is monitor to 2.a did the organization the all required fearing the year? 25 X 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a X 3b Tyes, "that I thied a form 990 T for the year? If No' to line 2b, provide an explanation or 2b fordule O 3a X 3b Tyes, "that I the d form 990 T for the year? If No' to line 2b, provide an explanation or 2b fordule O 3a X 3b If Yes, "that I the d form 990 T for the year? If No' to line 2b, provide an explanation or 2b fordule O 3a X 3b If Yes, "that I the d form 990 T for the year? If No' to line 2b, provide an explanation or 2b fordule O 3a X 3c If Yes, "that I the d form 990 T for the year? If the year? 5a X 3c Wash to organization have annual process receipts that an onomaly greater than \$100,000, and did the organization line for seven of the value of the granization are provided to the organization nolucid with every solicitation an express statement that such contributions or gifts were not tax deductibles or that denotible as explanation and parity for goods and services provided T 7a X 7 Ves, "idid the organization for the value of the good or services provided T 7a X 7a X 7 Ves, "idid the organization nordify the donor of the value of the goods or services provided	2a										
Note: Internation these ta and 2 is ignerator than 250, your may be required to e-fig (see instructions) Image: the organization have unailated business gross income of \$1,000 or more during the year? Image: the organization have unailated business gross income of \$1,000 or more during the year? Image: the organization have an interest in, or a signature or other subhority over, a financial accounts in toring norm outry (such as a bank account, sacurities account, or other financial accounts of fing requirements for finit graving interest in, or a signature or other subhority over, a financial accounts for fing requirements for finit graving interest in, or a signature or other subhority over, a financial accounts for fing requirements for finit graving intermests for finit graving intermests for finit graving to a prohibited tax shelter transaction? Image: table for the signature of the organization have an interest in, or a signature or other subhority over, a financial Accounts (FBAR). 56 Dot set to account al prose receives that are normally greater than \$100,000, and did the organization solicit any contributions multic as charatable contributions or gifts were not tax deductible? Image: table for the signature or the subhority or prohibited tax shelter transaction? Image: table for the signature or table for table signature or table sis table for table signature o		, , , , ,		v							
3a Did the organization have unrelated business gross income of \$1.000 or more during the year? 3a X bit "Yes," has it field a Ferm 890-17 for this year? (I' Wo'to fine 3b, provide an explanation on Schedule O 3b X bit "Yes," has it field a Ferm 890-17 for this year? (I' Wo'to fine 3b, provide an explanation on Schedule O 3b X bit "Yes," the it field a Ferm 890-17 for this year? (I' Wo'to fine 3b, provide an explanation on Schedule O 3c X bit "Yes," the it field a Ferm 890-17 for this year? (I' Wo'to fine 3b, provide an explanation on Schedule O 4a X bit "Yes," the it field a Ferm 890-17 5a X 5b X bit any totable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5a X bit organization nave annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that way receive aduatable contributions? 6a X bit The sciencit that are receive aduatable contributions under section 170(c). 6b X 6a X bit the organization nexule way solicitation an express statement that such contributions or gifts were not tax deductible? 7a X 7a X bit The sciencit that are receive aduatable contributions under section 170(c). 10 the organization nexule aduatable party as	b		2b								
b If "Yes," inte it field a Form 90-1 for this yes/? If Yeb's to line 3b, provide an explanation on Schedule 0 9b 4 At any time during the calendar year, did the organization have an interest in, or a signature or other authonity over, a financial accounts in a foreign country (such as a bank account, securities account, or other financial accounts? 4a X b If Yes," enter the name of the foreign country (such as a bank account, securities account, or other financial accounts? 5a 5 See instructions for fining requirements for FinCNN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5a X 5 Did any taxable party notify the organization that was or is a party to a prohibited tax shelter transaction? 5c C 6 Dod any taxable party notify the organization that was or is a party to a prohibited tax shelter transaction? 5c C 7 Organization set, and any receive deductable contributions? 6a X 9 If Yes," idit the organization neice was partent in excess 515' made party as a contribution and party for goods and services provided to the pary? 7a X 7 Organization set, enderwas a partent in excess 515' made party as a contribution of a party in property for which it was required? 7c X 8 If Yes," indicate the number of Forms 8282 filed during the year? 7e X 1	0-		0-		v						
4a At any time during the calendar year, did 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 filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5a X 5a Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year? 5a X 5b If Yes, 'enter the name of the organization that it was ris a party to a prohibited tax shelter transaction? 5b X 5a Us any taxable party notify the organization that it was ris a party to a prohibited tax shelter transaction? 5a X 5a Us any taxable party notify the organization that it was ris a party to a prohibited tax shelter transaction? 5a X 5a Us any taxable party notify the organization that it was ris a party to a prohibited tax shelter transaction? 5a X 5a Us any taxable party notify the organization cances of \$3/5 mide party as a contributions any entry torgonds and services provided? 5a X 5b If Yes, 'idd the organization notify the doro or the value of the organization conceve a portion of the value of the organization notify the doro or the value of the organization notify the doro or the value of the organization notify the doro or the value of the organization notify the doro or the value of the organization notify the organization notify the doro or underectly, on a personal brenet northace? 7b 7c <											
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14a 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	с										
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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 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 X If "Yes," complete Form 4720, Schedule O. 16 X	b										
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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? If "Yes," complete Form 4720, Schedule O.		excess parachute payment(s) during the year?	15		X						
If "Yes," complete Form 4720, Schedule O.											
	16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X						
		If "Yes," complete Form 4720, Schedule O.		0000							

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Par	t VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for	or a "No" re	espon	se
	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.			
	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
_		0	Yes	No
1 a	Enter the number of voting members of the governing body at the end of the tax year 1a	8		
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
-	Enter the number of voting members included on line 1a, above, who are independent	8		
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		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?			X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?			X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?			X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		<u>x</u>
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		X
3	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)		1	
			Yes	
0a	Did the organization have local chapters, branches, or affiliates?	<u>10a</u>		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10 b		
1a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form	? 11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
2a	Did the organization have a written conflict of interest policy? If "No," go to line 13		-	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12 b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c	X	
3	Did the organization have a written whistleblower policy?	13	X	
4	Did the organization have a written document retention and destruction policy?	14	X	
5	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	The organization's CEO, Executive Director, or top management official			
b	Other officers or key employees of the organization	15b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
6a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
ec	tion C. Disclosure			
7	List the states with which a copy of this Form 990 is required to be filed None			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only)	availa	ble
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy.	, and finan	cial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	Wyatt Academy - (303) 292-5515			
	3620 Franklin Street, Denver, CO 80205			
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	7			
05	16 151129 WYA5010 2020.05094 WYATT ACADEMY		WY	'A50

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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.

Average hours per week Average hours per (list any hours for related organizations Average hours per week (do not check more than one box, unless person is both an officer and a director/trustee) Reportable compensation Repor	ated	(F)	(E)	(D)				(0		(B)	(A)
hours per weekbox, unless person is both an officer and a director/trustee)compensationcompensationamount of officer(list anygiifromfrom relatedother(list anygiitheorganizationscompensation		Estimat	Reportable	Reportable	Position				verage	Name and title	
$\left(\text{list any } \frac{3}{8} \right)$ the organizations compensation				compensation	an	s both	son is	ss per	, unle	ours per t	
(list any burner of the compensation of the compe					ie)	r/trust	recio		Cer ar	week	
related at the organization (W-2/1099-MISC) from the organization (W-2/1099-MISC) organization and related at the organization and related organization and related organization (W-2/1099-MISC) organization and related organization (W-2/1099-MISC) organization (W-2/1099-WISC) organization (W-2/1099-WISC) organization (W-2/1099-WISC) o			v							list any	
organizations light ligh			(W-2/1099-MISC)			sated			ee	OURS FOR	
				(00-2/1099-00130)		npen:	ee,		l trus	anizations	
		organizat			-	st cor iyee	nploy		ltiona	below	
					Forme	Highe	Key ei	Office	Institu	line)	
(1) Kate Mishara 40.00											(1) Kate Mishara
Principal 0.00 X								x		0.00	Principal
(2) Chuck Born 40.00										10.00	(2) Chuck Born
Operations Director 0.00 X								Х		0.00	Operations Director
(3) Amy Swieringa 2.00											(3) Amy Swieringa
Chair 0.50 X X								Х		0.50	Chair
(4) Francesca Galarraga 2.00											(4) Francesca Galarraga
Vice Chair 0.50 X											Vice Chair
(5) Kaycee Gerhart 2.00											(5) Kaycee Gerhart
Treasurer 0.50 X X								Х			Treasurer
(6) Brandon De Benedet 2.00											(6) Brandon De Benedet
Member 0.50 X											Member
(7) Michael Miera 2.00											(7) Michael Miera
Member 0.50 X											Member
(8) Katie Brown 2.00											(8) Katie Brown
Member 0.50 X											Member
(9) Rodney Bates 2.00											(9) Rodney Bates
Member 0.50 X											Member
(10) Dedrick Sims 2.00											(10) Dedrick Sims
Member 0.50 X										0.50	Member
					_						
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Par	t VII Section A. Officers, Directors, Trus	tees, Key Emp	oloy	ees,			ghes	st C	ompensated Employee	s (continued)			
(A) (B) Name and title Average hours per week					ss per	ition more rson i	than o s both r/trus	n an	(D) Reportable compensation from	(E) Reportable compensation from related	n ai	(F) stimat mount other	of
		(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC	C) f org an	npensa rom th ganiza nd rela anizat	ne tion ted
			-										
			-										
			-										
			-										
	Subtotal												
	Total from continuation sheets to Part VI Total (add lines 1b and 1c)										<u> </u>		
2	Total number of individuals (including but n compensation from the organization							o re	eceived more than \$100,	000 of reportable			
3	Did the organization list any former officer,	, director, truste	ee, k	key e	empl	oye	e, or	hig	hest compensated emp	loyee on		Yes	
4	line 1a? If "Yes," complete Schedule J for s For any individual listed on line 1a, is the su										3		X
5	and related organizations greater than \$150 Did any person listed on line 1a receive or a										4		X
	rendered to the organization? <i>If</i> "Yes," corr ion B. Independent Contractors					-			-		5		X
1	Complete this table for your five highest co										ensation fr	om	
	the organization. Report compensation for (A)	the calendar ye	ear e	endir	ng w	ith c	or wi	thin	<u>the organization's tax y</u> (B)	ear.	(*	C)	
	Name and business	address	NC	ONE	3				Description of s	ervices	Compe	ensatio	on
2	Total number of independent contractors (i	ncluding but no	ot lin	nited	d to	thos	se lis	ted	above) who received mo	ore than			
	\$100,000 of compensation from the organi	zation				C)			_	Form	990	(2020)

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			2020) Wyatt Academy				84-1468	640 Page 9
Pa	rt V	/	Statement of Revenue					
			Check if Schedule O contains a response of	or note to any lin	e in this Part VIII	<u></u>	<u></u>	<u></u>
			· · ·		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
S G	1	2	Federated campaigns 1a					
ants	'							
Dor:								
ts, An			Fundraising events					
Contributions, Gifts, Grants and Other Similar Amounts			Related organizations 1d	E10 262	-			
ns,				510,362.				
er S		f	All other contributions, gifts, grants, and					
ibu				151,802.				
ontr d O		g	Noncash contributions included in lines 1a-1f					
an		h	Total. Add lines 1a-1f		662,164.			
				Business Code				
e	2		Per Pupil Revenue	611600	1,528,531.	<u>1,528,531.</u>		
e ric			Mill Levy	611600	482,290.	482,290.		
Se		с	Pupil Activities and F	611710	1,075.	1,075.		
am eve		d						
Program Service Revenue		е						
Pre		f	All other program service revenue					
			Total. Add lines 2a-2f	▶	2,011,896.			
	3		Investment income (including dividends, interes					
	_		other similar amounts)		1,335.			1,335.
	4		Income from investment of tax-exempt bond pr					
	5		Royalties	-				
	5		(i) Real	(ii) Personal				
	6	_		1,050.				
	0		Gross rents 6a Less: rental expenses 6b	0.				
				1,050.				
			Rental income or (loss) 6c	<u> </u>	1,050.	1,050.		
	_		Net rental income or (loss)	(ii) Other	1,050.	1,050.		
	(а			-			
			assets other than inventory 7a		-			
		b	Less: cost or other basis					
anu			and sales expenses 7b					
evenue			Gain or (loss) 7c					
			Net gain or (loss)	🕨				
Other R	8	а	Gross income from fundraising events (not					
đ			including \$ of					
			contributions reported on line 1c). See					
			Part IV, line 18	2,107.				
		b	Less: direct expenses	0.				
			Net income or (loss) from fundraising events		2,107.			2,107.
	9		Gross income from gaming activities. See					
			Part IV, line 19 9a					
		b	Less: direct expenses 9b					
			Net income or (loss) from gaming activities	>				
	10		Gross sales of inventory, less returns					
			and allowances 10a					
		þ	Less: cost of goods sold					
			Net income or (loss) from sales of inventory					
	-			Business Code				
sn	11	2	Pension Accrual Adj	611600	559,601.	559,601.		
oer ue			Misc Revenue	611600	358,590.	358,590.		
Miscellaneous Revenue			mise nevenue	011000	550,590.	550,590.		
Sce		c						
Mis			All other revenue	⊾	918,191.			
	L		Total. Add lines 11a-11d	····· •		2 021 127	0	2 4 4 2
	12		Total revenue. See instructions	►	3,596,743.	⊿, ۲۵۲, ۲۵/۰	0.	3,442.
03200	9 12-	-23-	20					Form 990 (2020)

Wyatt Academy

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Form 990 (2020) Wyatt Academy
Part IX Statement of Functional Expenses

Sect	on 501(c)(3) and 501(c)(4) organizations must comp			nplete column (A).	X
	Check if Schedule O contains a respon	se or note to any line in t (A)	his Part IX	(C)	<u>A</u>
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
_	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	148,965.		148 965	
•	trustees, and key employees	140,903.		148,965.	
6	Compensation not included above to disqualified				
	persons (as defined under section $4958(f)(1)$) and				
-	persons described in section 4958(c)(3)(B)	1,192,458.	735,200.	457,258.	
7 0	Other salaries and wages	1,174,4J0•	133,200.	-11,200	
8	Pension plan accruals and contributions (include	201,680.	143,522.	58,158.	
•	section 401(k) and 403(b) employer contributions)	196,155.	130,817.	65,338.	
9 10	Other employee benefits	28,845.	15,252.	13,593.	
10	Payroll taxes	20,04J•	,		
11	Fees for services (nonemployees):				
a b	Management	7,738.	537.	7,201.	
		3,000.	208.	2,792.	
с С	Accounting	5,000.	2001	2,752.	
d	Lobbying Professional fundraising services. See Part IV, line 17				
e f	Investment management fees				
f	Other. (If line 11g amount exceeds 10% of line 25,				
g	column (A) amount, list line 11g expenses on Sch 0.)	303,867.	51,870.	251,997.	
12	Advertising and promotion	16,537.	4,306.	12,231.	
13	Office expenses	9,034.	2,352.	6,682.	
14	Information technology	37,522.	9,770.	27,752.	
15	Royalties	5775220	5,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
16	Occupancy	154,697.	25,808.	128,889.	
17	Travel	6,769.	1,762.	5,007.	
18	Payments of travel or entertainment expenses	• • • • • • •			
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	603.		603.	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	101,582.		101,582.	
23	Insurance	41,036.	10,685.	30,351.	
24	Other expenses. Itemize expenses not covered	÷	·		
	above (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	Supplies, Books & Perio	199,267.	59,131.	140,136.	
b	Non-Capitalized Equipme	87,082.	9,737.	77,345.	
с	All Other Expenses	2,044.	10.	2,034.	
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	2,738,881.	1,200,967.	1,537,914.	0.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				
03201) 12-23-20				Form 990 (2020)
		11			

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Balance Shee	t						
Check if Schedule	O contains a	a response or note to any line in this Pa	rt X	 			

		Check it Schedule O contains a response or note to any line in this Part X	(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	793,784.	1	707,800.
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	164,760.	4	93,520.
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
s	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
As	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other			
		basis Complete Part VI of Schedule D 10a 2,912,185.			
	b	Less: accumulated depreciation	1,502,060.	10c	1,436,880.
	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	214,347.	15	571,882.
	16	Total assets. Add lines 1 through 15 (must equal line 33)	2,674,951.	16	2,810,082.
	17	Accounts payable and accrued expenses	173,383.	17	239,541.
	18	Grants payable		18	
	19	Deferred revenue	126,838.	19	0.
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
s	22	Loans and other payables to any current or former officer, director,			
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%			
abil		controlled entity or family member of any of these persons		22	
ן בי	23	Secured mortgages and notes payable to unrelated third parties	380,264.	23	175,215.
	24	Unsecured notes and loans payable to unrelated third parties	218,534.	24	0.
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D	2,515,927.	25	2,277,459.
	26	Total liabilities. Add lines 17 through 25	3,414,946.	26	2,692,215.
		Organizations that follow FASB ASC 958, check here 🕨 🔀			
ces		and complete lines 27, 28, 32, and 33.			
aŭ	27	Net assets without donor restrictions	-800,995.	27	47,867.
Ba	28	Net assets with donor restrictions	61,000.	28	70,000.
pu		Organizations that do not follow FASB ASC 958, check here			
щ		and complete lines 29 through 33.			
0 v	29	Capital stock or trust principal, or current funds		29	
set	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
As	31	Retained earnings, endowment, accumulated income, or other funds		31	
Net Assets or Fund Balances	32	Total net assets or fund balances	-739,995.	32	117,867.
	33	Total liabilities and net assets/fund balances	2,674,951.	33	2,810,082.

Form 990 (2020)

Form 990 (2020) Part X Balance Sheet

	1990 (2020) Wyatt Academy	84-146	<u>8640</u>	Pag	_{je} 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI	<u> </u>			
1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,596	5,74	43.
2	Total expenses (must equal Part IX, column (A), line 25)		2,738		
3	Revenue less expenses. Subtract line 2 from line 1	3	857	7,80	62.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	-739	, 9	95.
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	117	', 8 (67.
Pa	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
1	Accounting method used to prepare the Form 990: Cash X Accrual Other	0.		Yes	No
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis	on a			
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis	e 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?		2c	Х	
	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		Х
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		3b		
			Form	DON /	

Form **990** (2020)

Department of the Treasury Internal Revenue Service

(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

Name	of the organization							identification number
		t Academy						4-1468640
Part	I Reason for Public	Charity Status.	(All organizations must o	complete th	nis part.) S	ee instruction	S.	
The or	ganization 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 associatio	on of churches described	in sectio	n 170(b)(1	I)(A)(i).		
	X A school described in sect							
3	A hospital or a cooperative					•		
4	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state:							
5	An organization operated for section 170(b)(1)(A)(iv).		llege or university owned	d or operat	ed by a go	overnmental u	nit describe	ed in
6	A federal, state, or local go	vernment or governn	nental unit described in	section 17	70(b)(1)(A)	(v).		
7	An organization that norma section 170(b)(1)(A)(vi). (C		ntial part of its support f	rom a gove	ernmental	unit or from th	ne general p	public described in
8	A community trust describe	ed in section 170(b)	(1)(A)(vi). (Complete Par	t II.)				
9	An agricultural research or	ganization described	in section 170(b)(1)(A)((ix) operate	ed in conju	inction with a	land-grant	college
	or university or a non-land- university:	grant college of agric	ulture (see instructions).	Enter the	name, city	, and state of	the college	or
10	An organization that norma activities related to its exer income and unrelated busi See section 509(a)(2). (Co	npt functions, subject ness taxable income	t to certain exceptions;	and (2) no	more than	33 1/3% of its	s support fi	rom gross investment
11	An organization organized	and operated exclusi	ively to test for public sa	fety. See	section 50	09(a)(4).		
12	An organization organized	and operated exclusi	ively for the benefit of, to	perform t	he functio	ns of, or to ca	rry out the	purposes of one or
	more publicly supported or	ganizations describe	ed in section 509(a)(1) of	or section	509(a)(2).	See section &	509(a)(3). (Check the box in
	lines 12a through 12d that	describes the type o	f supporting organization	n and com	plete lines	12e, 12f, and	12g.	
а	Type I. A supporting orga	anization operated, s	upervised, or controlled	by its supp	ported org	anization(s), ty	pically by	giving
	the supported organization	on(s) the power to re	gularly appoint or elect a	a majority c	of the direc	tors or trustee	es of the su	ipporting
	organization. You must o	complete Part IV, Se	ections A and B.					
b	Type II. A supporting org	anization supervised	l or controlled in connec	tion with it	s supporte	ed organization	n(s), by hav	ving
	control or management of	of the supporting orga	anization vested in the s	ame perso	ns that co	ntrol or manag	ge the supp	ported
	organization(s). You mus	-						
С	Type III functionally inte						ly integrate	ed with,
	its supported organizatio		· ·					
d	Type III non-functionally						-	
	that is not functionally in			-			an attentiv	/eness
	requirement (see instruct	,	•					
е	Check this box if the org					Type I, Type	II, Type III	
£ 1	functionally integrated, o Enter the number of supported		, , , , , , , , , , , , , , , , , , , ,	0 0				
	Provide the following information	•	d organization(c)					
<u> </u>	(i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga	nization listed ng document?	(v) Amount of	monetary	(vi) Amount of other
	organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see ir	structions)	support (see instructions)
Total								

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 14

Schedule A (Form 990 or 990-EZ) 2020 Wyatt Academy

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Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization

fails to qualify under the tests listed below, please complete Part III.)

See	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.						
See	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						
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	ne organization's fi	rst, second, third,	fourth, or fifth tax	year as a section 5	601(c)(3)	
	organization, check this box and stop						>
See	ction C. Computation of Publi	c Support Pe	rcentage			, ,	
14	Public support percentage for 2020 (I	ine 6, column (f), c	livided by line 11,	column (f))		14	%
	Public support percentage from 2019					15	%
16 a	33 1/3% support test - 2020. If the o	organization did no	ot check the box o	n line 13, and line	14 is 33 1/3% or m	ore, check this bo	x and
	stop here. The organization qualifies		•				
b	33 1/3% support test - 2019. If the o	organization did no	ot check a box on	line 13 or 16a, and	l line 15 is 33 1/3%	or more, check th	is box
	and stop here. The organization qual		•••				
17a	10% -facts-and-circumstances test	- 2020. If the org	anization did not	check a box on line	e 13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the fact	s-and-circumstanc	es test, check this	box and stop he	ere. Explain in Part	VI how the organiz	zation
	meets the facts-and-circumstances te	est. The organization	on qualifies as a pu	ublicly supported o	organization		►
b	10% -facts-and-circumstances test	- 2019. If the org	ganization did not	check a box on line	e 13, 16a, 16b, or	17a, and line 15 is	10% or
	more, and if the organization meets the	ne facts-and-circur	nstances test, che	ck this box and s	top here. Explain i	n Part VI how the	
	organization meets the facts-and-circu	umstances test. Th	ne organization qu	alifies as a publicly	/ supported organi	zation	►
18	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 16b, 17a, or 17l			
					Sch	edule & (Form 990) or 990-EZ) 2020

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	D (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						
	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						
	Public support. (Subtract line 7c from line 6.)						
		(-) 0010	(1-) 0017	(-) 0010	(1) 0010	(-) 000	
	ndar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	D (f) Total
	Amounts from line 6 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						
	acquired after June 30, 1975						
	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.)						
	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the	•		·			
_	check this box and stop here						<u></u>
	ction C. Computation of Publi						
	Public support percentage for 2020 (I		•	column (f))		15	%
	Public support percentage from 2019					16	%
	ction D. Computation of Inves						
17	Investment income percentage for 20					17	%
18	Investment income percentage from					18	%
19a	33 1/3% support tests - 2020. If the						line 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						ation Þ
20	Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check t			►
03202	23 01-25-21				Sch	nedule A (For	m 990 or 990-EZ) 2020

Schedule A (Form 990 or 990-EZ) 2020 Wyatt Academy

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")? // "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?
- 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 disgualified 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.) Schedule A (Form 990 or 990-EZ) 2020

032024 01-25-21

Pa	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described in line 11a above?	11b		
с	A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	ction B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	ction C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
0	the supported organization(s).	1		
Sec	ction D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		_
3	By reason of the relationship described in line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
800	supported organizations played in this regard. Stion E. Type III Functionally Integrated Supporting Organizations	3		
Sec				
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction	ns).		
a	The organization satisfied the Activities Test. <i>Complete</i> line 2 <i>below</i> .			
b				
c		e instruction	· ·	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а				
	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

Зb

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

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

Schedule A (Form 990 or 990-EZ) 2020

032026 01-25-21

Schedule A (Form 990 or 990 EZ) 2020 Wyatt Academy

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

Par	t V Type III Non-Functionally Integrated 509	a)(3) Supporting Orga	nizations (continued	<u>d)</u>	
Secti	on D - Distributions			\square	Current Year
1	Amounts paid to supported organizations to accomplish exer	mpt purposes		1	
2	Amounts paid to perform activity that directly furthers exemp				
	organizations, in excess of income from activity		2		
3	Administrative expenses paid to accomplish exempt purpose	3	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 Part VI</i>). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	e organization is responsive			
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2020 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			0	<i></i>
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2020		(iii) Distributable Amount for 2020
1	Distributable amount for 2020 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2020 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2020				
a	From 2015				
b	From 2016				
C	From 2017				
d	From 2018				
e	From 2019			_	
	Total of lines 3a through 3e			_	
	Applied to underdistributions of prior years			_	
<u>h</u>	Applied to 2020 distributable amount				
i	Carryover from 2015 not applied (see instructions)				
	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2020 from Section D,				
	line 7: \$			_	
	Applied to underdistributions of prior years			-	
	Applied to 2020 distributable amount				
	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2020, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
6	than zero, <i>explain in</i> Part VI. See instructions. Remaining underdistributions for 2020. Subtract lines 3h				
0	C C				
	and 4b from line 1. For result greater than zero, <i>explain in</i>				
7	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

032027 01-25-21

Schedule A (Form 990 or 990 EZ) 2020 Wyatt Academy

Section D, lines 5, 6, and 8; and Part V, 5 (See instructions.)	4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information.
(See instructions.)	
032028 01-25-21	Schedule A (Form 990 or 990-EZ) 2020

Schedule B

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

Name of the organization

Organization type (check one)

ī

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

84-	-14	68	64	0
<u> </u>		:00	0 -	- 0

Iyatt	Academy
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Organization type (check of	
Filers of:	Section:
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization
	4947(a)(1) nonexempt charitable trust not treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation

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

General Rule

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).

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

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

Name of organization

84-1468640

Wyatt Academy

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 1 X Person Payroll 8,000. Noncash \$ (Complete Part II for noncash contributions.) (a) (b) (c) (d) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution 2 X Person Payroll 16,500. Noncash \$ (Complete Part II for noncash contributions.) (d) (a) (b) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution

		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
<u>No.</u>	Name, address, and ZIP + 4	Total contributions	Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

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

WYA50101

23 2020.05094 WYATT ACADEMY

023452 11-25-20

Schedule B	(Form 990,	990-EZ, o	r 990-PF)	(2020)
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Name of organization

Employer identification number

84 - 1468640

Wyatt Academy Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. (a) (c) No. (b) (d) FMV (or estimate) from Description of noncash property given Date received (See instructions.) Part I \$ (a) (c) No. (d) (b) FMV (or estimate) from Description of noncash property given **Date received** (See instructions.) Part I \$ (a) (c) No. (b) (d) FMV (or estimate) from Description of noncash property given **Date received** (See instructions.) Part I \$ (a) (c) No. (d) (b) FMV (or estimate) from Description of noncash property given **Date received** (See instructions.) Part I \$ (a) (c) No. (b) (d) FMV (or estimate) from Date received Description of noncash property given (See instructions.) Part I \$ (a) (c) No. (b) (d) FMV (or estimate) from Description of noncash property given **Date received** (See instructions.) Part I \$

023453 11-25-20

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

2020.05094 WYATT ACADEMY

24

Page 4

ization		Employer identification number
cademy		84-1468640
Acclusively religious, charitable, etc., contributi om any one contributor. Complete columns (a) mpleting Part III, enter the total of exclusively religious,) through (e) and the following line entricharitable, etc., contributions of \$1,000 or l	ction 501(c)(7), (8), or (10) that total more than $1,000$ for the ye
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift	
Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift	
Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift	
Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee
	[
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Transferee's name, address, ar	na ZIP + 4	Relationship of transferor to transferee
	cademy colusively religious, charitable, etc., contribution any one contributor. Complete columns (a mpleting Part III, enter the total of exclusively religious, se duplicate copies of Part III if additional (b) Purpose of gift (b) Purpose of gift	csademy cclusively religious, charitable, etc., contributions to organizations described in seeme may one contributor. Complete columns (a) through (a) and the following line entropeting Part III enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or lise duplicate copies of Part III if additional space is needed. (b) Purpose of gift (c) Use of gift (b) Purpose of gift (c) Use of gift (c) Transfer of gift (c) Use of gift (b) Purpose of gift (c) Use of gift (c) Use of gift (c) Use of gift (b) Purpose of gift (c) Use of gift (c) Use of gift (c) Use of gift (b) Purpose of gift (c) Use of gift (c) Use of gift (c) Use of gift (b) Purpose of gift (c) Use of gift (c) Transfer of gift (c) Use of gift (b) Purpose of gift (c) Use of gift (b) Purpose of gift (c) Use of gift (b) Purpose of gift (c) Use of gift (c) Transfer of gift (c) Use of gift (c) Transfer of gift (c) Use of gift (b) Purpose of gift (c) Use of gift (c) Transfer of gift (c) Transfer of gift

25 2020.05094 wyatt academy

Department of the Treasury

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.



	nal Revenue Service		
Nar	ne of the organi	izatic	'n

mploy	er	ide	nti	fic	ca	tic	on	n	um	b
	-	-	-	-	-	-	-	-	-	

Nam	e of the organization Wyatt Academy		E	mployer identification number $84 - 1468640$
Par		d Funds or Other Similar Funds	or Acco	
	organization answered "Yes" on Form 990, Part IV, lin		0171000	
		(a) Donor advised funds	(b) F	unds and other accounts
4	Total number at and of year		(2)	
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3 ⊿	Aggregate value of grants from (during year)			
4	Aggregate value at end of year Did the organization inform all donors and donor advisors in v	uriting that the apparts hold in depart advis	od fundo	
5	-	-		Yes No
6	are the organization's property, subject to the organization's Did the organization inform all grantees, donors, and donor a			Yes No
6	for charitable purposes and not for the benefit of the donor of			
			°,	Yes No
Par		anization answered "Ves" on Form 900 I		
	Purpose(s) of conservation easements held by the organization		i art iv, inic	
•	Preservation of land for public use (for example, recreation		f a historica	Illy important land area
	Protection of natural habitat			historic structure
	Preservation of open space		acentineu	
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the form	of a conser	vation easement on the last
2	day of the tax year.			Held at the End of the Tax Year
а			2	
a b				
c	Number of conservation easements on a certified historic stru	ucture included in (a)	······	
d	Number of conservation easements included in (c) acquired a			
u	listed in the National Register			4
3	Number of conservation easements modified, transferred, rele			
U	year		organizatio	
4	Number of states where property subject to conservation eas	ement is located		
5	Does the organization have a written policy regarding the per			
Ū	violations, and enforcement of the conservation easements it			Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,			
Ū				according the year
7	Amount of expenses incurred in monitoring, inspecting, hand	ling of violations, and enforcing conservat	tion easem	ents during the year
-	► \$			
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170(h)(4)(B)(i)	
	and section 170(h)(4)(B)(ii)?			Yes No
9	In Part XIII, describe how the organization reports conservation	on easements in its revenue and expense	statement	and
	balance sheet, and include, if applicable, the text of the footn			
	organization's accounting for conservation easements.	C C		
Par	t III Organizations Maintaining Collections of	Art, Historical Treasures, or Ot	her Simi	lar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.		
1a	If the organization elected, as permitted under FASB ASC 95	8, not to report in its revenue statement a	nd balance	e sheet works
	of art, historical treasures, or other similar assets held for pub	lic exhibition, education, or research in fu	irtherance of	of public
	service, provide in Part XIII the text of the footnote to its finan	cial statements that describes these item	IS.	
b	If the organization elected, as permitted under FASB ASC 95	8, to report in its revenue statement and b	balance she	eet works of
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in furth	nerance of p	public service,
	provide the following amounts relating to these items:			
	(i) Revenue included on Form 990, Part VIII, line 1		🕨	► \$
				► \$
2	If the organization received or held works of art, historical trea	asures, or other similar assets for financia	l gain, prov	ide
	the following amounts required to be reported under FASB A	SC 958 relating to these items:		
а	Revenue included on Form 990, Part VIII, line 1		🕨	► \$
b	Assets included in Form 990, Part X			► \$
				• • • • • • • • • • • • • • • • • •

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

Sche	dule <u>D (Form 990) 2020</u> Wyatt A	cademy				8	84-14	68640	Page 2
Pa	t III Organizations Maintaining C	ollections of Ar	t, Historica	Treasures,	or Othe	r Similar	Assets	(continu	ed)
3	Using the organization's acquisition, accessi	on, and other record	s, check any o	f the following th	nat make s	gnificant u	se of its		
	collection items (check all that apply):								
а	Public exhibition	d	I 🔄 Loan d	r exchange pro	gram				
b	Scholarly research	е	• Dther						
С	Preservation for future generations								
4	Provide a description of the organization's co	ollections and explair	n how they furt	her the organiza	ation's exer	npt purpos	e in Part	XIII.	
5	During the year, did the organization solicit of	or receive donations of	of art, historica	treasures, or of	ther similar	assets			
	to be sold to raise funds rather than to be ma							Yes	No
Pa	t IV Escrow and Custodial Arran		ete if the organ	ization answere	d "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	lowing table:						
								Amount	
С	Beginning balance								
d	Additions during the year								
е	Distributions during the year								
f	Ending balance							7	
	Did the organization include an amount on F					ity?		Yes	No
Pa	t V Endowment Funds. Complete								
I U							ara baak		aara baali
4.		(a) Current year	(b) Prior ye	ar (C) 100 y	/ears back	(d) Three ye	ars Dack	(e) Four y	ears Dack
1a	Beginning of year balance								
D	Contributions								
ر ام	Net investment earnings, gains, and losses								
a	Grants or scholarships								
е	Other expenditures for facilities								
4	and programs								
ו מ	Administrative expenses								
g 2	End of year balance Provide the estimated percentage of the cur			nn (a)) hold as:					
2	Board designated or quasi-endowment		%						
b	Permanent endowment								
c		%							
Ŭ	The percentages on lines 2a, 2b, and 2c sho	-							
3a	Are there endowment funds not in the posse		tion that are h	eld and adminis	tered for th	e organiza [.]	tion		
	by:					5		Y	'es No
	(i) Unrelated organizations							3a(i)	
	(ii) Related organizations							3a(ii)	
b	If "Yes" on line 3a(ii), are the related organiza							3b	
4	Describe in Part XIII the intended uses of the								
Pa	t VI Land, Buildings, and Equipm	nent.							
	Complete if the organization answere	d "Yes" on Form 990), Part IV, line 1	1a. See Form 9	90, Part X,	line 10.			
	Description of property	(a) Cost or o basis (investr	. ,	Cost or other basis (other)		ccumulate preciation	d	(d) Book v	value
1a	Land								
b	Buildings								
с	Leasehold improvements		944.		1,	454,54	9.	1,391	<u>,395.</u>
	Equipment	29,	839.			20,75		9	,083.
	Other		402.						,402.
	I. Add lines 1a through 1e. <i>(Column (d) must e</i>		X. column (B).	line 10c.)				1,436	,880.

Schedule D (Form 990) 2020

10380516 151129 WYA5010

(2) OPEB, Net of Acc Amort 8,076. (3) Accounts Receivable - DPS 36,402. (4) (6) (5) (7) (8) (7) (9) 571,882. Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. 571,882. 1 (a) Description of liability (b) Book value (1) Federal income taxes 708,001. (2) Net Pension Liability 708,001. (3) Net OPEB Liability 36,025. (4) Pensions, Net of Acc Amort 1,447,056. (5) OPEB, Net of Acc Amort 86,377. (6) (6) (7) (7) (8) (9)	Complete if the organization answered "Ves"	on Form 990 Part IV line	a 11b. See Form 990. Part X line 12	
2) Closely held equity interests				f-year market value
2) Closely held equity interests	(1) Financial derivatives			-
(a) (b) (b) (c) (c)				
(A) (B) (B) (C) (C) (D) (B) (D) (C) (D) (B) (D) (F) (D) (B) (D) (F) (D) (B) (D) (F) (D) (B) (D) (F) (D) (B) (D) (D) (D) (D) (D) (D) (D) (D) (D) (D) (D) (D)				
(B) (C) (C) (C) (D) (C) (F) (C) (G)				
CD Complete If the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 13. (a) (b) (b) Complete If the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 13. (a) (b) (b) (c) (c) (c) <				
D (B) (B) (C) (F) (C) (G) (G) (G) (G				
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Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶ Part VIII Investments - Program Related. Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13. (a) Description of investment (b) Book value (1) (c) Method of valuation: Cost or end-of-year market value (1) (c) Method of valuation: Cost or end-of-year market value (1) (c) Method of valuation: Cost or end-of-year market value (1) (c) Method of valuation: Cost or end-of-year market value (1) (c) Method of valuation: Cost or end-of-year market value (1) (c) Method of valuation: Cost or end-of-year market value (1) (c) Method of valuation: Cost or end-of-year market value (1) (c) Method of valuation: Cost or end-of-year market value (1) (c) Method of valuation: Cost or end-of-year market value (7) (c) Method of valuation: Cost or end-of-year market value (a) (c) Method of valuation: Cost or end-of-year market value (a) (c) Method of valuation: Cost or end-of-year market value (b) (c) Method of valuation: Cost or end-of-year market value (c) (c) Method of valuation: Cost or end-of-year market value (c)	(G)			
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(2) (3) (3) (4) (4) (5) (6) (7) (7) (7) (8) (7) (9) (7) (9) (7) (9) (7) (9) (7) (9) (7) (9) (7) (9) (7) (1) Pensions, Net of Acc Amort (2) OPEB, Net of Acc Amort (2) OPEB, Net of Acc Amort (3) Accounts Receivable - DPS (4) (6) (7) (7) (8) (9) Jotacl (Column (b) must equal Form 990, Part X col. (B) line 15.) > 571, 882. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. 1. (a) Description of liability (b) Book value (1) Federal income taxes (b) Description of liability (1) Federal income taxes (b) Description of liability (2) Net OPEB Liability 36, 025. (3) Net of Acc Amort 1, 447, 056.				f-year market value
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(5) (5) (6) (7) (7) (8) (9) (9) (1) (1) (2) (1) (1) Pensions, Net of Acc Amort (2) OPEB, Net of Acc Amort (3) (2) (4) (2) (5) (3) (6) (4) (5) (5) (6) (6) (7) (7) (8) (9) Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. (6) (7) (7) (8) (9) (9) Total (Column (b) must equal Form 990, Part X, col (B) line 15.) 571, 882. Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. (a) (b) Book value (1) Federal income taxes (2) Net Pension Liability 708, 001. (3) Net OPEB Liability 708, 025.				
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(9) Image: constraint of the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15. (a) Description (b) Book value (1) Pensions, Net of Acc Amort 527, 404. (2) OPEB, Net of Acc Amort 8,076. (3) Accounts Receivable - DPS 36, 402. (4)				
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Part IX Other Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15. (a) Description (b) Book value (1) Pensions, Net of Acc Amort 527, 404. (2) OPEB, Net of Acc Amort 8,076. (3) Accounts Receivable - DPS 36,402. (4) (5) (6) (7) (8) (7) (9) 571,882. Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. 1. (a) Description of liability (b) Book value (1) Federal income taxes 708,001. (2) Net Pension Liability 708,001. (3) Net OPEB Liability 36,225. (4) Pensions, Net of Acc Amort 86,377. (6) (7) (7) (8) (9) (9) (9)				
(a) Description (b) Book value (1) Pensions, Net of Acc Amort 527,404. (2) OPEB, Net of Acc Amort 8,076. (3) Accounts Receivable - DPS 36,402. (4)				
(a) Description (b) Book value (1) Pensions, Net of Acc Amort 527,404. (2) OPEB, Net of Acc Amort 8,076. (3) Accounts Receivable - DPS 36,402. (4)	Complete if the organization answered "Yes" of	on Form 990, Part IV, line	e 11d. See Form 990, Part X, line 15.	
(2) OPEB, Net of Acc Amort 8,076. (3) Accounts Receivable - DPS 36,402. (4) (5) (6) (7) (7) (8) (9) 571,882. Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. 571,882. 1 (a) Description of liability (b) Book value (1) Federal income taxes 708,001. (3) Net OPEB Liability 708,001. (3) Net OPEB Liability 36,025. (4) Pensions, Net of Acc Amort 1,447,056. (7) (6) (7) (8) (9) (9)	(a)	Description		(b) Book value
(3) Accounts Receivable - DPS 36,402. (4) (5) (5) (6) (7) (7) (8) (7) (9) 571,882. Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. (9) (1) Federal income taxes (9) (2) Net Pension Liability 708,001. (3) Net OPEB Liability 36,025. (4) Pensions, Net of Acc Amort 1,447,056. (7) (8) (9) (9) (9) 0 (1) Federal income taxes 0.025. (2) Net OPEB Liability 36,025. (4) Pensions, Net of Acc Amort 1,447,056. (6) (7) (8) (9)	(1) Pensions, Net of Acc Amort			527,404.
(4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) > 571, 882. Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. 1. (a) Description of liability (b) Book value (1) Federal income taxes 708,001. (2) Net Pension Liability 708,001. (3) Net OPEB Liability 366,025. (4) Pensions, Net of Acc Amort 1,447,056. (5) OPEB, Net of Acc Amort 86,377. (6) (7) (8) (9)	(2) OPEB, Net of Acc Amort			8,076.
(5) (6) (7) (8) (9) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) > 571, 882. Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. (b) Book value (1) Federal income taxes (b) Book value (2) Net OPEB Liability 708,001. (3) Net OPEB Liability 36,025. (4) Pensions, Net of Acc Amort 1,447,056. (5) OPEB, Net of Acc Amort 86,377. (6) (7) (8) (9) (9) (9)	(3) Accounts Receivable - DPS			36,402.
(5) (6) (7) (8) (9) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) > 571, 882. Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. (b) Book value (1) Federal income taxes (b) Book value (2) Net OPEB Liability 708,001. (3) Net OPEB Liability 36,025. (4) Pensions, Net of Acc Amort 1,447,056. (5) OPEB, Net of Acc Amort 86,377. (6) (7) (8) (9) (9) (9)	(4)			
(6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) > 571, 882. Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. (b) Book value (1) Federal income taxes (b) Book value (2) Net OPEB Liability 708,001. (3) Net OPEB Liability 36,025. (4) Pensions, Net of Acc Amort 1,447,056. (5) OPEB, Net of Acc Amort 86,377. (6) (7) (8) (9) (9) (9)				
(7) (8) (9) 571,882. Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. (b) Book value (1) Federal income taxes (2) Net Pension Liability 708,001. (3) Net OPEB Liability 36,025. (4) Pensions, Net of Acc Amort 1,447,056. (5) OPEB, Net of Acc Amort 86,377. (6) (7) (8) (9) (9) 2,277,450.				
(9) ▶ 571,882. Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. 1. (a) Description of liability (b) Book value (1) Federal income taxes (2) Net Pension Liability 708,001. (3) Net OPEB Liability 36,025. (4) Pensions, Net of Acc Amort 1,447,056. (5) OPEB, Net of Acc Amort 86,377. (6) (7) (8) (9)				
(9) ▶ 571,882. Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. 1. (a) Description of liability (b) Book value (1) Federal income taxes (2) Net Pension Liability 708,001. (3) Net OPEB Liability 36,025. (4) Pensions, Net of Acc Amort 1,447,056. (5) OPEB, Net of Acc Amort 86,377. (6) (7) (8) (9)	(8)			
Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. 1. (a) Description of liability (1) Federal income taxes (2) Net Pension Liability (3) Net OPEB Liability (4) Pensions, Net of Acc Amort (5) OPEB, Net of Acc Amort (6) (7) (8) (9)				
Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. 1. (a) Description of liability (b) Book value (1) Federal income taxes (2) Net Pension Liability 708,001. (3) Net OPEB Liability 36,025. (4) Pensions, Net of Acc Amort 1,447,056. (5) OPEB, Net of Acc Amort 86,377. (6) (6) (7) (8) (9) (9)	Total. (Column (b) must equal Form 990. Part X. col. (B) line	15.)		571,882.
1.(a) Description of liability(b) Book value(1) Federal income taxes				
(1) Federal income taxes 708,001. (2) Net Pension Liability 708,001. (3) Net OPEB Liability 36,025. (4) Pensions, Net of Acc Amort 1,447,056. (5) OPEB, Net of Acc Amort 86,377. (6) (7) (8) (9)	Complete if the organization answered "Yes" of	on Form 990, Part IV, line	e 11e or 11f. See Form 990, Part X, line 25.	
(2) Net Pension Liability 708,001. (3) Net OPEB Liability 36,025. (4) Pensions, Net of Acc Amort 1,447,056. (5) OPEB, Net of Acc Amort 86,377. (6) (7) (7) (8) (9) 2,277,450.	1. (a) Description of liability			(b) Book value
(3) Net OPEB Liability 36,025. (4) Pensions, Net of Acc Amort 1,447,056. (5) OPEB, Net of Acc Amort 86,377. (6) (7) (8) (9)				
(4) Pensions, Net of Acc Amort 1,447,056. (5) OPEB, Net of Acc Amort 86,377. (6) (6) (7) (7) (8) (9)	(2) Net Pension Liability			708,001.
(5) OPEB, Net of Acc Amort 86,377. (6) (7) (8) (9)	(3) Net OPEB Liability			36,025.
(6) (7) (7) (8) (9) (9)	(4) Pensions, Net of Acc Amort			1,447,056.
(6) (7) (8) (9)				86,377.
(7) (8) (9)	(6)			
(8) (9)				
(9)				
		25.)	>	2,277,459.

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

Schedule D (Form 990) 2020

032053 12-01-20

Sche	dule D (Form 990) 2020 Wyatt Academy				1468640 Page 4
Pa	t XI Reconciliation of Revenue per Audited Financial Stateme	ents With	Revenue per Re	turn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	a.			
1	Total revenue, gains, and other support per audited financial statements			1	3,037,142.
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				
d	Other (Describe in Part XIII.)				
е	Add lines 2a through 2d			2e	0.
3	Subtract line 2e from line 1			3	3,037,142.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	. 4a			
b	Other (Describe in Part XIII.)	. 4b	559,601.		
с	Add lines 4a and 4b			4c	559,601.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	3,596,743.
Pa	t XII Reconciliation of Expenses per Audited Financial Statem	ents With	Expenses per F	Returr	າ.
Pa	TXII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	ents With	Expenses per F	Returr	า.
Pa 1		ents With a.	Expenses per F	Returr	n. 2,179,280.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	ents With a.	Expenses per F		า.
1	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements	a.	Expenses per F		า.
1 2	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:	a. 	Expenses per F		า.
1 2 a	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments	22 20 20 20 20 20 20 20 20 20 20 20 20 2	Expenses per F		า.
1 2 a	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities	2a 2b 2c	Expenses per F		า.
1 2 a	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	2a 2b 2c 2d	Expenses per F		n. <u>2,179,280.</u> 0.
1 2 a b c d	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other losses Other (Describe in Part XIII.) Add lines 2a through 2d	2a2b2c2d2d2d	Expenses per F	1	า.
1 2 b c d e	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	2a2b2c2d2d2d	Expenses per F	1 2e	n. <u>2,179,280.</u> 0.
1 2 b c d 3	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1	2a 2b 2c 2d	Expenses per F	1 2e	n. <u>2,179,280.</u> 0.
1 2 6 6 8 3 4	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1:	2a 2b 2c 2d	Expenses per F	1 2e	n. 2,179,280. 0. 2,179,280.
1 2 6 6 8 3 4	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b	2a 2b 2c 2d	Expenses per F	1 2e	n. <u>2,179,280.</u> <u>0.</u> <u>2,179,280.</u> 559,601.
1 2 a b c d e 3 4 a b c 5	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)	2a 2a 2b 2b 2c 2d 2d 2d	Expenses per F	1 2e 3	n. 2,179,280. 0. 2,179,280.

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

Part XI, Line 4b - Other Adjustments:

Pension Accrual Adjustment

Part XII, Line 4b - Other Adjustments:

Pension Accrual Adjustment

032054 12-01-20

Schedule D (Form 990) 2020

559,601.

559,601.

81 - 1168610 Doce 4

SCHEDULE E

(Form 990 or 990-EZ)

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

Part IV, line 13, or Form 990-EZ, Part VI, line 48. ► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2020	
Open to Public	

Department of the Treasury Internal Revenue Service

Part I

Name of the	organization
-------------	--------------

Wyatt Academy

Employer identification number 84 - 1468640

			YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter,			
	bylaws, other governing instrument, or in a resolution of its governing body?	. 1	Х	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures,			
	catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	Х	
3	Has the organization publicized its racially nondiscriminatory policy on its primary publicly accessible Internet			
	homepage at all times during its taxable year in a manner reasonably expected to be noticed by visitors to the			
	homepage, or through newspaper or broadcast media during the period of solicitation for students, or during the			
	registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general			
	community it serves? If "Yes," please describe. If "No," please explain. If you need more space, use Part II	3	X	
		-		
		-		
		-		
		-		
л	Does the organization maintain the following?	-		
*		4a	x	
a b			X	
	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing	<u>4b</u>	- 23	
C		4c	x	
Ь	with student admissions, programs, and scholarships? Copies of all material used by the organization or on its behalf to solicit contributions?		X	
u	If you answered "No" to any of the above, please explain. If you need more space, use Part II.			
	If you answered the to any of the above, please explain. If you need there space, use Part II.			
		-		
		-		
		-		
5	Does the organization discriminate by race in any way with respect to:	-		
	Students' rights or privileges?	5a		x
	Admissions policies?			x
c	Employment of faculty or administrative staff?	5c		x
	Scholarships or other financial assistance?			x
	Educational policies?			x
	Use of facilities?		1	X
	Athletic programs?		1	X
	Other extracurricular activities?			x
	If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.			
		-		
		-		
		-		
6a	Does the organization receive any financial aid or assistance from a governmental agency?	6a		X
b	Has the organization's right to such aid ever been revoked or suspended?	. 6b		X
	If you answered "Yes" on either line 6a or line 6b, explain on Part II.			
7	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through			
	4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Part II	7	Х	
LHA	For Paperwork Reduction Act Notice, see the Instructions for Form 990 or Form 990-EZ. Schedule E (For		990-EZ) 2020

10380516 151129 WYA5010

Schedule E (Form 990 or 990-EZ) 2020 Wyat	itt Aca	demy
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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.

332062 11-10-20	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 Name of the organization



84-1468640

Wyatt Academy

Form 990, Part I, Line 1, Description of Organization Mission:

The Charter School is a nonprofit entity organized for the purpose of

operating a public school that provides education to children

kindergarten through 5th grade in accordance with the terms of the

charter application.

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

Line 11b Explanation - A copy of the Form 990 was distributed and reviewed

by the governing body prior to its filing.

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

New board members are required to sign a Conflict of Interest policy, and each year the board reviews the policy and asks if there are any ongoing conflicts. Each board member is required to disclose any conflicts before votes that may be affected by a conflict. Conflicted members are expected to recuse themselves from votes pertaining to the matter that the member has a conflict with.

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

The process for determining compensation of Wyatt Academy's key employees

includes a review and approval by independent persons, comparability data

and contemporaneous substantiation of the deliberation and decision.

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

Wyatt Academy makes its governing documents, Conflict of Interest policy,

and financial statements available to the public upon request.

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

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 11-20-20

Schedule O (Form 990 or 990-EZ) 2020 Name of the organization	Page 2 Employer identification number
Wyatt Academy	84-1468640
Form 990, Part IX, Line 11g, Other Fees:	
Other Purchased Services:	
Program service expenses	51,870.
Management and general expenses	251,997.
Fundraising expenses	0.
Total expenses	303,867.
Total Other Fees on Form 990, Part IX, line 11g, Col A	303,867.
Form 990, Part XII, Line 2c	
The Academy has not changed its oversight or selection pr	ocess during
the year.	

Schedule O (Form 990 or 990-EZ) 2020

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

SCHEDULE R (Form 990)

032161 10-28-20 LHA

Schedule R (Form 990) 2020

34

Identification of Related Tax-Exempt Organizations during the tax year.	zations. Complete if the organizati	ion answered "Yes" on Form 990), Part IV, line 34, I	pecause it had one	or more related tax-exe	mpt	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section 5 contr enti	olled
Wyatt Building Corporation - 45-5080297 3620 Franklin Street Denver, CO 80205-3325	Support Wyatt Academy	Colorado	501(c)(3)		N/A		X

Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information.								
Name of the organization Wyatt Academy Employer identification number 84-1468640								
Part I Identificat	tion of Disregarded Entities. Complet	e if the organization answered "Yes" o	n Form 990, Part IV, line 33.					
	(a) dress, and EIN (if applicable) f disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year asse	its Dire	(f) ect controlling entity	

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

Attach to Form 990.

OMB No. 1545-0047

2020

Open to Public

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total income	Share of end-of-year assets	Disproportion allocations				or Percentage ownership
		country)		sections 512-514)		400010	Yes	No	K-1 (Form 1065)	Yes	10
										+	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	Sec 512(t contr ent	(i) ction b)(13) rolled tity?
		country)						Yes	No
									<u> </u>

Schedule R (Form 990) 2020 Wyatt Academy

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

lote: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	5 N
During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		Σ
b Gift, grant, or capital contribution to related organization(s)			2
c Gift, grant, or capital contribution from related organization(s)			2
d Loans or loan guarantees to or for related organization(s)			
e Loans or loan guarantees by related organization(s)			2
f Dividends from related organization(s)	1f		
g Sale of assets to related organization(s)	1g		
h Purchase of assets from related organization(s)			
i Exchange of assets with related organization(s)			
j Lease of facilities, equipment, or other assets to related organization(s)	<u>1j</u>		-
k Lease of facilities, equipment, or other assets from related organization(s)	1k		
Performance of services or membership or fundraising solicitations for related organization(s)			
m Performance of services or membership or fundraising solicitations by related organization(s)			
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		
o Sharing of paid employees with related organization(s)			
p Reimbursement paid to related organization(s) for expenses			
a Reimbursement paid by related organization(s) for expenses			
r Other transfer of cash or property to related organization(s)	1r		
s Other transfer of cash or property from related organization(s)	1s		

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

Schedule R (Form 990) 2020 Wyatt Academy

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

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e Are partne 501(org Yes	e) all rs sec. c)(3) s.? No	(f) Share of total income	(g) Share of end-of-year assets	(ř Dispr tior allocat Yes	n) opor- late tions? No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) Genera manag partne Yes I	l or Pe ing er? 0	(k) ercentage ownership

Schedule R (Form 990) 2020

Wyatt Academy

Part VII Supplemental Information

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

Schedule R (Form 990) 2020

032165 10-28-20

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Application for Automatic Extension of Time To File an	
Exempt Organization Return	OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Form **8868** (Rev. January 2020)

File a separate application for each return.

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

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.

Туре о	r Name of exempt organization or other filer, see inst	Taxpaye	xpayer identification number (TIN)							
print	Wyatt Academy		91_1	68640						
File by the			04-14	00040						
due date filing your return. Se	Number, street, and room or suite no. If a P.O. box, see instructions. 3620 Franklin Street									
instructions. City, town or post office, state, and ZIP code. For a foreign address, see instructions. Denver, CO 80205										
Enter th	ne Return Code for the return that this application is for (file a separa	te application for each return)							
Applica	ation	Return	Application			Return				
Is For Code Is For						Code				
Form 9	90 or Form 990-EZ	01	Form 990-T (corporation)			07				
Form 9	90-BL	02	Form 1041-A			08				
Form 4	720 (individual)	03	Form 4720 (other than individual)			09				
Form 9	90-PF	04	Form 5227			10				
Form 9	90-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11				
Form 9	90-T (trust other than above) Wyatt Academy	06	Form 8870			12				
box ▶ 1 I ti	 is is for a Group Return, enter the organization's four dig . If it is for part of the group, check this box ▶ request an automatic 6-month extension of time until ne organization named above. The extension is for the organization ramed above. The extension ramed above. The ex	and atta rganization's , an	ch a list with the names and TINs of 7 16, 2022 , to file return for: d ending JUN 30, 2021	all memb	ers the exte					
3a lf	Change in accounting period	20 or 6069 d	enter the tentative tax less							
	3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. 3a									
-										
	estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b									
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by										
using EFTPS (Electronic Federal Tax Payment System). See instructions.										
Cautio instruct	n: If you are going to make an electronic funds withdraw ions.	al (direct det	bit) with this Form 8868, see Form 8	453-EO an	d Form 887	9-EO for payment				
LHA	For Privacy Act and Paperwork Reduction Act Notice	e. see instru	ictions.		Form	8868 (Rev. 1-2020)				

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