			Exte	nded to May 15, 2023						
	n	0	Return of Orga	nization Exempt Fror	n Income Tax	OMB No. 1545-0047				
Form 990			Under section 501(c), 527, or 49	47(a)(1) of the Internal Revenue Code	e (except private foundation	s) 2021				
Department of the Treasury			Do not enter socia	security numbers on this form as it n	nay be made public.	Open to Public				
Intern	al Revenu	le Service		ov/Form990 for instructions and the la		Inspection				
<u>A</u> F	or the	2021 calend	ar year, or tax year beginning	JUL 1, 2021 and ending	<u>g JUN 30, 2022</u>					
	heck if oplicable:	C Name o	forganization		D Employer identific	ation number				
	Address change	Park	er Performing Art	s School						
	Name change		usiness as		47-214184	47-2141843				
	Initial	Number	and street (or P.O. box if mail is not	delivered to street address) Room/	/suite E Telephone number					
	 Final return/		5 Compark Road	720-709-7	400					
	termin- ated	City or t	own, state or province, country, ar	nd ZIP or foreign postal code	G Gross receipts \$	10,902,358.				
	Amende return	d Park	er, CO 80134		H(a) Is this a group ret	turn				
	Applica-	F Name a	nd address of principal officer: ${\tt Ph}$	ilip Molfino	for subordinates?	9 Yes 🔀 No				
	pending	same	as C above		H(b) Are all subordinates inc	luded? Yes No				
			X 501(c)(3) 501(c) ()◀ (insert no.)	527 If "No," attach a l	ist. See instructions				
			parkerperforminga		H(c) Group exemption					
			X Corporation Trust	Association Other L	Year of formation: 2015 M	State of legal domicile: CO				
Pa		Summary								
a	1 B	Briefly describ	e the organization's mission or mo	st significant activities: <u>See Sche</u>	edule O.					
anc	_									
Activities & Governance		heck this bo	•	continued its operations or disposed of	more than 25% of its net asse					
Š		lumber of vo	8							
~				governing body (Part VI, line 1b)		8				
ies				r year 2021 (Part V, line 2a)		100				
i și				(y)		<u>400</u> 0.				
Act				column (C), line 12		0.				
	b N	let unrelated	business taxable income from For	m 990-T, Part I, line 11						
	8 C	ontributiono	and grants (Part VIII, line 1h)		Prior Year 1,476,995.	Current Year 529,649.				
an					6,177,385.	6,819,638.				
Revenue				4, and 7d)	100	1,379.				
۳ ۳				Bc, 9c, 10c, and 11e)	3,413,177.	3,514,720.				
			- add lines 8 through 11 (must equ	11,068,037.	10,865,386.					
			milar amounts paid (Part IX, colum	0.	0.					
			to or for members (Part IX, column		0.	0.				
ം				(Part IX, column (A), lines 5-10)	4,200,403.	4,433,179.				
Ise), line 11e)	0.	0.				
Expenses			ing expenses (Part IX, column (D),							
۵	17 O	ther expens	es (Part IX, column (A), lines 11a-1	ld, 11f-24e)	4,258,381.	3,483,133.				
	18 T	otal expense	s. Add lines 13-17 (must equal Pa	t IX, column (A), line 25)	8,458,784.	7,916,312.				
	19 R	levenue less	expenses. Subtract line 18 from lir	ne 12	2,609,253.	2,949,074.				
Net Assets or Fund Balances					Beginning of Current Year	End of Year				
sets alan	20 T	otal assets (I	Part X, line 16)		22,472,826.	21,049,507.				
tAs	21 T				34,231,012.	29,858,619.				
ES	22 N			m line 20	-11,758,186.	-8,809,112.				
		Signatur								
				rn, including accompanying schedules and st		knowledge and belief, it is				
true,	correct,	and complete	. Declaration of preparer (other than of	icer) is based on all information of which pre	parer has any knowledge.					
		Signatur	e of officer		Date					
Sign		, .		inal	υαισ					
Here	•		ip Molfino, Princ	ipai						
		Print/Type pre		Preparer's signature	Date Check	PTIN				
Paid			• Hinkle	James D. Hinkle	04/26/23					

132001 12-09	9-21 LHA For	Paperwork Reduc	tion Act Notice, see t	he sepa	rate instructions	s.		Form 990	(2021)
May the IF	RS discuss this re	eturn with the prepa	rer shown above? See	instruct	ions			X Yes	No
	-	Tulsa, OK	74137				Phone no. (91	8)492-338	88
Use Only	Firm's address 🕨	5028 E. 1	01st Street						
Preparer	Firm's name	.Hinkle &	Company PC				Firm's EIN ▶ 2'	7-1494012	2
Paid	pames D.	HINKLE	pame	S D.	ніпкте	04/20	/ 4 3 self-employed	P005325:	00

132001 12-09-21 LHA For Paperwork Reduction Act Notice, see the separate instructions. See Schedule O for Organization Mission Statement Continuation

orm Dev	1990 (2021) Parker Performing Arts School Tt III Statement of Program Service Accomplishments	47-2141843	Page
a	Check if Schedule O contains a response or note to any line in this Part III		X
	Briefly describe the organization's mission:		
	See Schedule O.		
	Did the organization undertake any significant program services during the year which were not listed on the		v .
	prior Form 990 or 990-EZ?	Yes 2	
	If "Yes," describe these new services on Schedule O.	s? Yes 🗌	v.
	Did the organization cease conducting, or make significant changes in how it conducts, any program services If "Yes," describe these changes on Schedule O.	37 Yes 🗳	<u>л</u>
	Describe the organization's program service accomplishments for each of its three largest program services,	as measured by expenses	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to ot		
	revenue, if any, for each program service reported.		
a		evenue \$ 10,371,33	30.
	Parker Performing Arts School equips students to become	independent	
	creative thinkers, critical problem solvers, and succes		
	collaborators. In our safe learning environment, studen		
	rich and innovative instruction in academics and the pe		
	preparation for their roles as citizens of a diverse an		
	globalized community. School enrollment during fiscal y	<u>rear 2021-2022</u>	
	was 657 students.		
b	(Code:) (Expenses \$ including grants of \$) (Re	venue \$	
c	(Code:) (Expenses \$ including grants of \$) (Re	evenue \$	
	· · · · · · · · · · · · · · · · · · ·		
d	Other program services (Describe on Schedule O.)		
	(Expenses \$ including grants of \$) (Revenue \$)	
	Total program service expenses ► 3,862,925.		
е		Form 990	

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JUII	990	(2021)	

Form 990 (2021) Parker Performing Arts School
Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2		X
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			v
_	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	_		x
6	similar amounts as defined in Rev. Proc. 98-19? <i>If</i> "Yes," <i>complete Schedule C, Part III</i>	5		
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? <i>If</i> " <i>Yes</i> ," <i>complete Schedule D, Part I</i>	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	0		- 23
'	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
•	Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	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			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			v
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<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	444	х	
•	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d 11e	X	
e f	Did the organization report an amount for other liabilities in Part X, line 25? <i>If</i> "Yes," <i>complete Schedule D, Part X</i> Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	_ i ie	<u></u>	
'	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		x
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D. Parts XI and XII	12a	х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Х	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
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		X_
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			37
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	4-	v	
10	column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</i> See instructions	17	X	<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	18	х	
19	1c and 8a? <i>If</i> "Yes," <i>complete Schedule G, Part II</i> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Yes,"	10	- 22	
19		19		x
20a	complete Schedule G, Part III Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a		<u> </u>
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		x
132003	12-09-21	Form	990	(2021)

132003 12-09-21

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 Form 990 (2021)
 Parker Performing Arts School
 47-2141843
 Page 4

 Part IV
 Checklist of Required Schedules (continued)
 Formation of the state of the s

			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		<u>x</u>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
с	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		x
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
20	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,	20		<u> </u>
21				
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled	07		x
00	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			v
	"Yes," complete Schedule L, Part IV	28a		X X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		<u>x</u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Par				
	Check if Schedule O contains a response or note to any line in this Part V	<u></u> .		
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 10			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		
132004	¥ 12-09-21	Form	990	(2021)
	5			

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	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)				Yes	No
а	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				100	140
	filed for the calendar year ending with or within the year covered by this return	2a	100			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?		2b	Х	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions					
а	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule	0		3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other a					
	financial account in a foreign country (such as a bank account, securities account, or other financial a	ccount)	?	4a		Х
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 Ad	ccounts	s (FBAR).			
ja				5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transact	ction?		5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c		
à	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	e organ	ization solicit			37
	any contributions that were not tax deductible as charitable contributions?			6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	ons or g	gifts			
_	were not tax deductible?			6b		
,	Organizations that may receive deductible contributions under section 170(c).			-		77
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser			7a		Х
				7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	•		_		v
	to file Form 8282?	I I		7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	<u>,</u>	_		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co			7e		
T	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra	-	0	7f 7		
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo			7g 7h		
n	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?					
3						
	sponsoring organization have excess business holdings at any time during the year?			8		
)	Sponsoring organizations maintaining donor advised funds.			0-		
a h	Did the sponsoring organization make any taxable distributions under section 4966?			9a 9b		
ь)	Section 501(c)(7) organizations. Enter:			30		
' a	Initiation fees and capital contributions included on Part VIII, line 12	10a				
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10a				
	Section 501(c)(12) organizations. Enter:					
a	Gross income from members or shareholders	11a				
h	Gross income from other sources. (Do not net amounts due or paid to other sources against	114				
~	amounts due or received from them.)	11b				
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form			12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
5	Section 501(c)(29) qualified nonprofit health insurance issuers.					
а	Is the organization licensed to issue qualified health plans in more than one state?			13a		
	Note: See the instructions for additional information the organization must report on Schedule O.					
b	Enter the amount of reserves the organization is required to maintain by the states in which the					
	organization is licensed to issue qualified health plans	13b				
с	Enter the amount of reserves on hand	13c				
a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedul			14b		
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner					
	excess parachute payment(s) during the year?			15		Х
	If "Yes," see the instructions and file Form 4720, Schedule N.					
;	Is the organization an educational institution subject to the section 4968 excise tax on net investment	incom	e?	16		Х
	If "Yes," complete Form 4720, Schedule O.					
,	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in	any				
I.	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	•		17		

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Form 990	(2021)
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 Form 990 (2021)
 Parker Performing Arts School
 47-2141843
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 Part VI
 Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response

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

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

					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1 a	8	3	100	
	If there are material differences in voting rights among members of the governing body, or if the governing	<u>.</u>		-		
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.					
b	Enter the number of voting members included on line 1a, above, who are independent	1b	6	3		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationshi	p with	any other			
	officer, director, trustee, or key employee?			2		Х
3	Did the organization delegate control over management duties customarily performed by or under th					
	of officers, directors, trustees, or key employees to a management company or other person?			3		X
4	Did the organization make any significant changes to its governing documents since the prior Form §	990 wa	s filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's as	sets?		5		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 ap	opoint	one or			
	more members of the governing body?			7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, s	tockho	lders, or			
	persons other than the governing body?			7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	ar by th	e following:		x	
а						
b	, , , , , , , , , , , , , , , , , , , ,					
9	y , , , , y , , , , , , , , , , , , , , , , , , ,					
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O					X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	evenue	Code.)		<u> </u>	
					Yes	
	Did the organization have local chapters, branches, or affiliates?			10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such ch					
				10b 11a	v	
	1a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?				X	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			10-	x	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "	,		10-	х	
40	on Schedule O how this was done			12c	X	
13 14	Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy?			14	X	
14 15	Did the organization have a written document retention and destruction policy?			14	- 23	
15	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	ai by in	dependent			
-				15a	х	
				15a	X	<u> </u>
5	Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			100		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment w	rith a			
	taxable entity during the year?			16a		x
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evalua			100		
~	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ		-			
	exempt status with respect to such arrangements?			16b		
Sec	tion C. Disclosure					•
17	List the states with which a copy of this Form 990 is required to be filed None					
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, a	nd 990	-T (section 501(c)(3)	s only)	availal	ble
	for public inspection. Indicate how you made these available. Check all that apply.			.,		
	X Own website Another's website X Upon request Other (explain	n on Sa	chedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co		,	d finan	cial	
	statements available to the public during the tax year.					
20	State the name, address, and telephone number of the person who possesses the organization's bo	oks an	d records			

Parker Performing Arts School - (720) 709-7400 15035 Compark Blvd, Parker, CO 80134

132006 12-09-21

7 2021.05080 PARKER PERFORMING ARTS SC PAR51001

Form 990 (2021)

Form 990 (2		47-2141843	Page 7
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Com	npensated	
	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 Comple	te this table for all persons required to be listed. Report compensation for the calendar year ending wi	th or within the organization'	s tax year.
● List a	Il of the organization's current officers, directors, trustees (whether individuals or organizations), regar	dless of amount of compens	ation.

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

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

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

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

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

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

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

(A)	(B)	(C)		(D)	(E)	(F)				
Name and title	Average	Position (do not check more than one		Reportable	Reportable	Estimated				
	hours per	box	box, unless person is both an officer and a director/trustee)		compensation	compensation	amount of			
	week		cer ar I	nd a d I	irecto	r/trus	tee)	from	from related	other
	(list any	rector						the	organizations	compensation
	hours for	or di	ee e			ated		organization	(W-2/1099-MISC/	from the
	related organizations	ustee	trust		98	suadi		(W-2/1099-MISC/ 1099-NEC)	1099-NEC)	organization and related
	below	ual tr	tional		yolqr	t con /ee	-	1099-NEC)		organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) Philip Molfino	40.00				-		<u> </u>			
Principal		1		x				98,170.	0.	11,272.
(2) Rochonne Sanchez	2.00									
President		Х		Х				0.	0.	0.
(3) Katie McDonald	2.00									
Vice President		х		X				0.	Ο.	0.
(4) Dylan Hyland	2.00									
Secretary		Х		Х				0.	0.	0.
(5) Chantae Thomas	2.00									
Director		Х						0.	0.	0.
(6) Elizabeth Remington	2.00									
Director		Х						0.	0.	0.
(7) Stephanie Cooke	2.00									
Director		Х						0.	0.	0.
(8) Virginia Olivas-Smith	2.00									
Director		Х						0.	0.	0.
(9) Cassidy Walker	2.00									
Director		Х						0.	0.	0.
		1								
		1								
132007 12-09-21	1					1		1		Form 990 (2021)

132007 12-09-21

Form 990 (2021)

11200426 151129 PAR5100

	<u>Parker Pe</u>	erformin	g	Ar	ts	S	lch	00	ol	47-23	1418	<u>343</u>	Pa	age 8
Part VII Section A. Officers,	Directors, Trus	tees, Key Emp	oloye	ees,	and	l Hig	ghes	t C	ompensated Employee	s (continued)				
(A)	-	(B)			(0				(D)	(E)			(F)	
Name and title		Average			Pos	ition			Reportable	Reportable		Fet	timate	Ч
Name and the		hours per					than c s both		compensation	compensatio			ount o	
		week					r/trust		from	from related			other	
		(list any	tor						the	organization			oensat	tion
		hours for	direc				-		organization	(W-2/1099-MIS			om the	
		related	e or	stee			Isate		(W-2/1099-MISC/	1099-NEC)			anizati	
		organizations	ruste	al tru		/ee	mper		1099-NEC)			•	relate	
		below	dual t	ltion	_	lploy	st co iyee	5	,				nizatio	
		line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former						
					0	×	1 0							
											-+			
											$ \rightarrow $			
									00 170		_	1 1		70
1b Subtotal									98,170.		0.	<u> </u>	L,27	
c Total from continuation s	heets to Part VI	I, Section A							0.		0.			0.
d Total (add lines 1b and 1c	c)								98,170.		0.	11	L,27	72.
2 Total number of individuals								o re	eceived more than \$100,	000 of reportable	9			
compensation from the org	anization													1
													Yes	No
3 Did the organization list an	v former officer	director truste	bo k		mol		o or	hia	hest compensated emp		ſ			
0	,	,					,	0		,		2		Х
line 1a? If "Yes," complete												3	-	<u> </u>
4 For any individual listed on														
and related organizations g	greater than \$150),000? If "Yes,"	" со	mple	ete S	Sche	dule	J f	or such individual			4	\rightarrow	Х
5 Did any person listed on lin	ne 1a receive or a	ccrue compen	satio	on fr	om	any	unre	late	ed organization or individ	dual for services				
rendered to the organizatio	on? If "Yes." com	plete Schedule) J fo	or su	ich r	oers	on .					5		Х
Section B. Independent Contra	actors													
1 Complete this table for you	ir five highest co	mpensated ind	ene	nder	nt co	ontra	actor	s th	nat received more than \$	100 000 of com	ensat	ion fro		
the organization. Report co	-	-									Joniout			
	•	ine calendar ye	are	nuin	iy w	unc				cai.				
Nor	(A) me and business	addross							(B) Description of s	onvicos	C	(C ompen		`
			- 1		- 1			_				ompen	Sation	1
G & G Consulting			οT	ora	ad	0								
Blvd, Ste 380, De	<u>enver, CC</u>	80222							Finance and 1	HR		102	2,73	32.
								-						
								-+						
2 Total number of independe	ent contractors (ir	ncluding but no	ot lin	nited	to	thos	se lis	ted	above) who received mo	ore than				
\$100,000 of compensation						1								
	<u> </u>	F										Form 9	990 (;	2021)
													14)

132008 12-09-21

Pa	πν	/111	Statement of Rev	venue						
			Check if Schedule O o	contains	a respons	se or note to any lin			(<u>)</u>	
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
ts t	1	а	Federated campaigns		1a					
Contributions, Gifts, Grants and Other Similar Amounts		b	Membership dues		1b					
¶ Gud		с	Fundraising events		1c	76,077.				
ar /		d	Related organizations		1d					
s, (е	Government grants (contri	ibutions)	1e	407,553.				
tion S		f	All other contributions, gifts,	grants, ar	d					
ibu			similar amounts not included	above	1f	46,019.				
ontr of O		-	Noncash contributions included in		1g \$					
ы С		h	Total. Add lines 1a-1f				529,649.			
						Business Code		5 544 000		
ice	2		Per Pupil Revenue			611710	5,744,292.	· · ·		
er v			District Mill Levy	D		611710	787,934.	· · · · ·		
n S /eni		C	Tuition and Student	rees		611/10	287,412.	287,412.		
Program Service Revenue		d				_				
, ro		e				_				
			All other program service				6,819,638.			
	3	g	Total. Add lines 2a-2f Investment income (includ				0,010,000.			
	3		other similar amounts)	-			1,379.			1,379.
	4		Income from investment of							
	5		Royalties		•	1 ,				
	-				(i) Real	(ii) Personal				
	6	а	Gross rents	6a	8,45	1.				
			Less: rental expenses	6b		0.				
			Rental income or (loss)	6c	8,45	1.				
			Net rental income or (loss))		···· •	8,451.	8,451.		
	7	а	Gross amount from sales of	(i)	Securitie	s (ii) Other				
			assets other than inventory	7a						
		b	Less: cost or other basis							
ne			and sales expenses	7b						
Revenue		с	Gain or (loss)	7c						
Re			Net gain or (loss)			►				
Other	8	а	Gross income from fundraising							
ð					— 1					
			contributions reported on	-						
			Part IV, line 18			8a ⁰ .				
			Less: direct expenses		····· L	8b 36,972.				
			Net income or (loss) from		- r	<u> </u>	-36,972.			-36,972.
	9	а	Gross income from gamin							
			Part IV, line 19			9a				
			Less: direct expenses		_	9b				
			Net income or (loss) from		Г	▶				
	10	а	Gross sales of inventory, I							
		Ŀ	and allowances			10a				
			Less: cost of goods sold		_	10b				
		С	Net income or (loss) from	Sales Of	nventory	Business Code				
sn	44	2	Pension Accrual Adju	1stmen+		611710	3,417,073.	3,417,073.		
neo		a b				-	-,11,,073.	-,,		
sllar ven						-				
Miscellaneous Revenue		с d	All other revenue			611710	126,168.	126,168.		
Σ			Total. Add lines 11a-11d				3,543,241.	,		
	12		Total revenue. See instruction				10,865,386.	10371330.	0.	-35,593.
13200						F	, , , •			Form 990 (2021)

Parker Performing Arts School

Form 990 (2021)

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Page **9**

47-2141843

Parker Performing Arts School Part IX Statement of Functional Expenses

	Check if Schedule O contains a respons			(C)	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	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,	141,272.		141,272.	
~	trustees, and key employees	141,2/2.		141,2/2.	
6	Compensation not included above to disqualified				
	persons (as defined under section $4958(f)(1)$) and				
7	persons described in section 4958(c)(3)(B) Other salaries and wages	3,129,907.	2,261,694.	868,213.	
7 8	Pension plan accruals and contributions (include	5,125,3010	2,201,094•	000,2100	
0	section 401(k) and 403(b) employer contributions)	681,287.	516,366.	164,921.	
9	Other employee benefits	424,062.	313,754.	110,308.	
9 10	Payroll taxes	56,651.	38,400.	18,251.	
11	Fees for services (nonemployees):				
'' a	Management				
b	Legal	5,574.		5,574.	
c		94,737.		94,737.	
d	⁻				
e					
f	Investment management fees				
g					
•	column (A), amount, list line 11g expenses on Sch 0.)	451,073.	208,270.	242,803.	
12	Advertising and promotion	8,067.		8,067.	
13	Office expenses	30,937.	13,772.	17,165.	
14	Information technology	209,311.	151,080.	58,231.	
15	Royalties				
16	Occupancy	436,399.	107,233.	329,166.	
17	Travel	19,440.	10,756.	8,684.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	1 0 - 0		1 0 5 0 1 1 0	
20	Interest	1,379,448.		1,379,448.	
21	Payments to affiliates	401 110		401 110	
22	Depreciation, depletion, and amortization	401,117.	01 000	401,117.	
23	Insurance	39,595.	21,908.	17,687.	
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.)				
я	Supplies and Materials	392,541.	217,575.	174,966.	
a b	Non-Capitalized Equipme	14,295.	1,558.	12,737.	
c	Debt Service Expenses	40.		40.	
d					
e	All other expenses	559.	559.		
25	Total functional expenses. Add lines 1 through 24e	7,916,312.	3,862,925.	4,053,387.	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 Fight if following SOP 98-2 (ASC 958-720)				

132010 12-09-21

11200426 151129 PAR5100

Form 990 (2021)

11200426 151129 PAR5100

Parker Performing Arts &	School
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		Check if Schedule O contains a response or not	e to an	y line in this Part X			
		· · ·			(A)		(B)
<u> </u>					Beginning of year		End of year
	1				1,543,674.	1	1,907,293.
	2	Savings and temporary cash investments	551,174.	2	231,125.		
	3	Pledges and grants receivable, net			0 600	3	
	4	Accounts receivable, net			9,699.	4	74,217.
	5	Loans and other receivables from any current or					
		trustee, key employee, creator or founder, subst					
		controlled entity or family member of any of thes	•	·····		5	
	6	Loans and other receivables from other disqualif					
		under section 4958(f)(1)), and persons described		F		6	
ets	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use			4 500	8	0.046
۹	9				4,500.	9	8,246.
	10a	Land, buildings, and equipment: cost or other		10 004 004			
	_	basis. Complete Part VI of Schedule D	10a	18,064,264. 963,324.	17 400 060		17 100 040
		Less: accumulated depreciation	10b		17,492,068.		17,100,940.
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, line 1				12	
	13	Investments - program-related. See Part IV, line				13	
	14	Intangible assets			2,871,711.	14	1,727,686.
	15	Other assets. See Part IV, line 11			22,472,826.	15	
	16	Total assets. Add lines 1 through 15 (must equa			522,621.	16	21,049,507. 493,413.
	17	Accounts payable and accrued expenses	JZZ,0ZI.	17	495,415.		
	18 10	Grants payable			19,962.	18 19	44,135.
	19 20	Deferred revenue			19,396,900.	20	19,486,660.
	20 21	Tax-exempt bond liabilities Escrow or custodial account liability. Complete F			15,550,500.	20	19,400,0000
	21	Loans and other payables to any current or form				21	
ties	22	trustee, key employee, creator or founder, subst					
Liabilities		controlled entity or family member of any of thes				22	
Lia	23	Secured mortgages and notes payable to unrela		F		22	
	23 24	Unsecured notes and loans payable to unrelated		Г		23	
	2 . 25	Other liabilities (including federal income tax, pa		F		27	
	20	parties, and other liabilities not included on lines					
			-		14,291,529.	25	9,834,411.
	26				34,231,012.	26	29,858,619.
		Organizations that follow FASB ASC 958, che			- / - / -		
es		and complete lines 27, 28, 32, and 33.					
anc	27					27	
Bala	28	Net assets with donor restrictions		E E E E E E E E E E E E E E E E E E E		28	
l pu		Organizations that do not follow FASB ASC 9					
Net Assets or Fund Balances		and complete lines 29 through 33.	-				
کر ارچ	29	Capital stock or trust principal, or current funds			-9,853,354.	29	-6,423,392.
Sets	30	Paid-in or capital surplus, or land, building, or eq			-1,904,832.	30	-6,423,392. -2,385,720.
As	31	Retained earnings, endowment, accumulated in			0.	31	0.
let	32	Total net assets or fund balances		E E E E E E E E E E E E E E E E E E E	-11,758,186.	32	-8,809,112.
-	33	Total liabilities and net assets/fund balances			22,472,826.	33	21,049,507.
							Form 990 (2021)

Form 990 (2021)
Part X Balance Sheet

	1990 (2021) Parker Performing Arts School	47-	<u>21418</u>	43	Pag	_{ge} 12
Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1	10,			
2	Total expenses (must equal Part IX, column (A), line 25)	2				12.
3	Revenue less expenses. Subtract line 2 from line 1	3				74.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	-11,	758	,18	<u>36.</u>
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	-8,	809	,11	12.
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII			<u></u>		X
			_	`	/es	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		- 1			
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	О.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		<u>X</u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,				
	consolidated basis, or both:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,				
	review, or compilation of its financial statements and selection of an independent accountant?		L	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	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 Audi [.]	t			
	Act and OMB Circular A-133?		·····	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b		

Form **990** (2021)

Department of the Treasury Internal Revenue Service

(Form 990)

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
2021
Open to Public Inspection

1

Name of t	the or	ganization
-----------	--------	------------

Nam	lame of the organization Employer identification number								
		Park	er Perform:	ing Arts Scho	ool			4	7-2141843
Par	tl	Reason for Public (Charity Status.	All organizations must c	omplete th	nis part.) S	ee instruction	S.	
The c	rgani	zation is not a private found	ation because it is: (F	or lines 1 through 12, c	heck only	one box.)			
1 [A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).							
2	Х	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).)							
3		A hospital or a cooperative	hospital service orga	nization described in se	ection 170	(b)(1)(A)(ii	i).		
4 [A medical research organization	ation operated in cor	njunction with a hospital	described	in sectio	n 170(b)(1)(A))(iii). Enter	the hospital's name,
		city, and state:							
5		An organization operated for	or the benefit of a col	lege or university owned	l or operat	ed by a go	vernmental u	nit describe	ed in
		section 170(b)(1)(A)(iv). (C	Complete Part II.)						
6		A federal, state, or local gov	vernment or governm	nental unit described in	section 17	70(b)(1)(A)	(v).		
7		An organization that norma	lly receives a substar	ntial part of its support fi	om a gove	ernmental	unit or from th	ne general p	public described in
		section 170(b)(1)(A)(vi). (C	omplete Part II.)						
8		A community trust describe	ed in section 170(b)(1)(A)(vi). (Complete Par	t II.)				
9		An agricultural research org	anization described	in section 170(b)(1)(A)(ix) operate	ed in conju	nction with a	land-grant	college
		or university or a non-land-g	grant college of agricu	ulture (see instructions).	Enter the I	name, city	, and state of	the college	or
r		university:							
10		An organization that norma							
		activities related to its exem		-					-
		income and unrelated busir		(less section 511 tax) fro	m busines	ses acquii	red by the org	anization a	ifter June 30, 1975.
		See section 509(a)(2). (Cor	-						
11		An organization organized a	-	•	•				
12		An organization organized a more publicly supported or	-	-	-			•	
		lines 12a through 12d that	-						
а		Type I. A supporting orga						-	aivina
u		the supported organization		-	•	-			
		organization. You must c			indjointy o				pporting
b		Type II. A supporting org	-		ion with its	s supporte	d organizatio	n(s), by hay	vina
		control or management o	-				-		-
		organization(s). You mus			·		·		
с] Type III functionally inte	-		in connect	ion with, a	nd functional	ly integrate	d with,
		its supported organization	n(s) (see instructions)	. You must complete I	Part IV, Se	ctions A,	D, and E.		
d] Type III non-functionally	integrated. A supp	orting organization oper	ated in cor	nnection w	rith its suppor	ted organiz	zation(s)
		that is not functionally int	egrated. The organiz	ation generally must sat	isfy a distri	ibution rec	uirement and	an attentiv	/eness
		requirement (see instructi	ions). You must con	nplete Part IV, Sections	A and D,	and Part	V.		
е		Check this box if the orga	anization received a v	vritten determination fro	m the IRS	that it is a	Type I, Type	II, Type III	
		functionally integrated, or	Type III non-functior	nally integrated supportion	ng organiz	ation.			
f		r the number of supported o	•						
g		ride the following information) Name of supported	about the supporte (ii) EIN	d organization(s). (iii) Type of organization	(iv) Is the orga	inization listed	(v) Amount of	monetany	(vi) Amount of other
	(organization		(described on lines 1-10	in your governi	ng document?	support (see in	3	support (see instructions)
		5		above (see instructions))	Yes	No		,	, , ,
Total									

Schedule	A (Form 990)) 2021
Part II	Suppor	t Sc

(Form 990) 2021 Parker Performing Arts School 47-2141 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support				_	_	
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(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)						
	Public support. Subtract line 5 from line 4.						
	ction B. Total Support		1			T	1
	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	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.)						
	Total support. Add lines 7 through 10						
	Gross receipts from related activities,		,			12	
13	First 5 years. If the Form 990 is for th	0			5	()()	. —
800	organization, check this box and stop						>
	tion C. Computation of Publi						
	Public support percentage for 2021 (li		•			14	%
	Public support percentage from 2020						. %
168	33 1/3% support test - 2021. If the c						
	stop here. The organization qualifies		•			/	
D	33 1/3% support test - 2020. If the c						
47-	and stop here. The organization qual						
17a	10% -facts-and-circumstances test						
	and if the organization meets the facts			-		-	
Ŀ	meets the facts-and-circumstances te	0	•	,	•	170 and line 15 in	······ •
a	10% -facts-and-circumstances test	-	-				10% 01
	more, and if the organization meets the						
18	organization meets the facts-and-circu Private foundation. If the organizatio				• • • •		
10	The organization. In the organizatio	TH GIG HOL CHECK a		a, 100, 17a, 01 17	D, CHECK LINS DUX ((Form 990) 2021

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Schedule A	(Form 990)	2021	Parker	Performing	Arts	School
Part III	Support	Schedule	for Organizat	tions Described	in Sectio	on 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	tion A. Public Support		,				
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(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						
F	or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
с	Add lines 10a and 10b						
11	Net income from unrelated business activities not included on line 10b, whether or not the business is regulately corriged on						
12	regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for th	e organization's fi	rst, second, third,	fourth, or fifth tax	year as a section 5	i01(c)(3) organizat	ion,
_	check this box and stop here						
Sec	ction C. Computation of Publi	c Support Per	rcentage				
	Public support percentage for 2021 (I			column (f))		15	%
	Public support percentage from 2020 ction D. Computation of Invest					16	%
	•					47	
	Investment income percentage for 20 Investment income percentage from 2					17 18	<u>%</u>
	33 1/3% support tests - 2021. If the						
	more than 33 1/3%, check this box ar						
b	33 1/3% support tests - 2020. If the						
	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organizatio						
13202	3 01-04-22					Schedule	A (Form 990) 2021
			16				

Parker Performing Arts School

1

2

Yes No

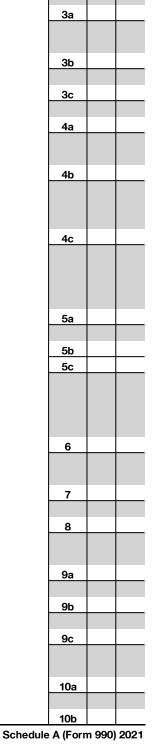
Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

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Sche	dule A (Form 990) 2021 Parker Periorming Arts School	4/-214104	3 Pa	age 5
Pai	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 on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
с	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion 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? <i>If</i> " <i>No</i> ," <i>describe in</i> Part VI <i>how the supported organization(s)</i> 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	
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors	

or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control
or management of the supporting organization was vested in the same persons that controlled or managed
the supported organization(s)

Sec	tion D. All Type III Supporting Organizations		
			Yes
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 on line 2, above, did the organization's supported organizations have a		
	significant voice in the organization's investment policies and in directing the use of the organization's		
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's		

supported organizations played in this regard.

Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year	(coo instructions)
	Greck the box next to the method that the ordanization used to satisfy the integral Fart rest during the year	

a ____ The organization satisfied the Activities Test. Complete line 2 below.

b		The organization is the	parent of each of its supported	organizations. Complete line 3 below.
---	--	-------------------------	---------------------------------	---------------------------------------

The organization supported a governmenta	al entity. Describe in Part VI how y	you supported a governmental entity	(see instruction <u>s).</u>
	The organization supported a government	The organization supported a governmental entity. Describe in Part VI how	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity

- 2 Activities Test. Answer lines 2a and 2b below.
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in **Part VI identify those supported organizations and explain** how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on 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.*

3b | | Schedule A (Form 990) 2021

3

2a

2b

3a

Yes No

Yes No

No

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Ра	rt V Type III Non-Functionally Integrated 509(a)(3) Support	ing Organi	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualify	ring trust on N	lov. 20, 1970 (<i>explain in</i>	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mu			
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
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		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functior	ally integrated	d Type III supporting orga	inization (see

Parker Performing Arts School

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Schedule A (Form 990) 2021

Schedule A (Form 990) 2021

instructions).

Parker Performing Arts School

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	dule A (Form 990) 2021 Parker Perform	ming Arts Schoo			7-2141843 Page 7
Par		a)(3) Supporting Orga	nizations (continu	ued)	
Secti	on D - Distributions				Current Year
_1	Amounts paid to supported organizations to accomplish exer	npt 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	s of supported organizations	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 (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	e organization is responsive			
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2021 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount	<i>(</i> 1)		10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2021	าร	(iii) Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2021 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2021				
а	From 2016				
b	From 2017				
с	From 2018				
d	From 2019				
e	From 2020				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2021 distributable amount				
i	Carryover from 2016 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2021 from Section D,				
	line 7: \$				
a	Applied to underdistributions of prior years				
b	Applied to 2021 distributable amount				
C	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2021, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2021. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2022. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
a	Excess from 2017				
b	Excess from 2018				
C	Excess from 2019				
d	Excess from 2020				
e	Excess from 2021				

Schedule A (Form 990) 2021

<u>Schedule A</u>	(Form 990) 2021	Parker	Performing	<u>Arts Sc</u> h	001	47-2141843	Page 8
Part VI	Supplemental Part IV, Section A, line 1; Part IV, Sect	Information. Pro lines 1, 2, 3b, 3c, 4b ion D, lines 2 and 3;	ovide the explanations , 4c, 5a, 6, 9a, 9b, 9c Part IV, Section E, lin	s required by Part I , 11a, 11b, and 11c es 1c, 2a, 2b, 3a, a	, line 10; Part II, line 17a ; Part IV, Section B, lines	or 17b; Part III, line 12; s 1 and 2; Part IV, Section t V, Section B, line 1e; Pa	C,
132028 01-04-2	2			21		Schedule A (Form 9	90) 202

SCHEDULE D)
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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. OMB No. 1545-0047

Internal Revenue Service
Name of the organization

Parker Performing Arts School

Employer identification number

Pa		d Funds or Other Similar Funds	or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin	e 6. (a) Donor advised funds	(b) Funds and other accounts
4	Total number at and of year		
1 2	Total number at end of year Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in v		ed funds
Ū	are the organization's property, subject to the organization's		
6	Did the organization inform all grantees, donors, and donor a		
-	for charitable purposes and not for the benefit of the donor of		
	impermissible private benefit?		ľ – –
Pa		anization answered "Yes" on Form 990, I	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).	
	Preservation of land for public use (for example, recreat	tion or education) Preservation of	a historically important land area
	Protection of natural habitat	Preservation of	a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
с	Number of conservation easements on a certified historic stru	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired a	fter 7/25/06, and not on a historic structu	ire
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rele		
	year ►		
4	Number of states where property subject to conservation eas	ement is located	
5	Does the organization have a written policy regarding the per	iodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it	holds?	Yes 📃 No
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing cons	servation easements during the year
	▶		
7	Amount of expenses incurred in monitoring, inspecting, hand	ling of violations, and enforcing conserva	tion easements 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)?		
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	ote to the organization's financial stateme	ents that describes the
	organization's accounting for conservation easements.		
Pa	t III Organizations Maintaining Collections of	Art, Historical Treasures, or Ot	her Similar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB ASC 95	8, not to report in its revenue statement a	nd balance sheet works
	of art, historical treasures, or other similar assets held for pub	lic exhibition, education, or research in fu	irtherance 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 t	palance sheet works of
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in furth	nerance of public service,
	provide the following amounts relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		• • •
	(ii) Assets included in Form 990, Part X		• • •
2	If the organization received or held works of art, historical trea	asures, or other similar assets for financia	l gain, provide
	the following amounts required to be reported under FASB A	-	
а	Revenue included on Form 990, Part VIII, line 1		
	Assets included in Form 990, Part X		> \$
LHA	For Paperwork Reduction Act Notice, see the Instructions	for Form 990.	Schedule D (Form 990) 2021
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Sche		Performing							14184		age 2
Par	t III Organizations Maintaining C	Collections of Ar	t, Hist	orical Tre	easures, or	r Othe	r Simila	r Asse	ts _{(contin}	nued)	
3	3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its										
	collection items (check all that apply):										
а	Public exhibition	c	1 🗌	Loan or exc	hange progra	am					
b	Scholarly research	e	•	Other							
с	Preservation for future generations										
4	Provide a description of the organization's c	ollections and explair	n how th	ney further th	ne organizatio	n's exer	npt purpo	se in Pa	rt XIII.		
5	During the year, did the organization solicit of	or receive donations of	of art, hi	storical trea	sures, or othe	er similar	assets				
	to be sold to raise funds rather than to be m	aintained as part of t	he orga	nization's co	llection?			[Yes		No
Par	TIV Escrow and Custodial Arran reported an amount on Form 990, Pa		ete if the	e organizatio	on answered "	'Yes" on	Form 990), Part IV	', line 9, or		
1a	Is the organization an agent, trustee, custod	lian or other intermed	liary for	contribution	s or other ass	sets not	included				
	on Form 990, Part X?							C	Yes		No
b	If "Yes," explain the arrangement in Part XIII										
									Amoun	t	
с	Beginning balance						. 1c				
d	Additions during the year						. 1d				
	Distributions during the year										
f	Ending balance						. 1f				
2a	Did the organization include an amount on F	Form 990, Part X, line	21, for	escrow or cu	ustodial accor	unt liabil	ity?	C	Yes		No
	If "Yes," explain the arrangement in Part XIII.										
Par	t V Endowment Funds. Complete		swered	"Yes" on Fo							
		(a) Current year	(b) F	Prior year	(c) Two year	rs back	(d) Three	years bac	k (e) Fou	r years	back
1 a	Beginning of year balance										
b	Contributions										
С	Net investment earnings, gains, and losses										
d	Grants or scholarships										
е	Other expenditures for facilities										
	and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the cur	•	-	g, column (a)) held as:						
а	Board designated or quasi-endowment		_%								
b	Permanent endowment										
с		_%									
-	The percentages on lines 2a, 2b, and 2c sho										
За	Are there endowment funds not in the posse	ession of the organiza	ation the	at are held ar	nd administer	ed for th	ie organiz	ation		Yes	No
	by:									Tes	NO
	(i) Unrelated organizations										
	(ii) Related organizations										
D		•							3b		L
Par	t VI Land, Buildings, and Equipm		wment	iunas.							
	Complete if the organization answere). Part IV	V. line 11a. S	See Form 990	Part X	line 10.				
	Description of property	(a) Cost or c	-	1	t or other		ccumulat	od l	(d) Boo	k volu	
	Description of property	basis (investr		• • •	(other)	• • •	preciation		(u) 600	r valu	e
19	Land	· · · · · ·		240.0							
	LandBuildings			17 94	6,817.	-	873,9	13.	17,07	2.9	04.
	Leasehold improvements				- , • ± , •		,		_ , , , , , ,	_,_	•
	Equipment			11	7,447.		89,4	11.	2	8,0	36.
	Other				, , •		,1			.,.	
	. Add lines 1a through 1e. (Column (d) must e		X colur	nn (R) line 1	0c)				17,10	0.9	40.
		iguari unii 330, r'all			vv.j				<u> </u>		

Schedule D (Form 990) 2021

	forming Arts S	chool	47-2141843 Page 3
Part VII Investments - Other Securities.			
Complete if the organization answered "Yes"			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of Valuati	ion: Cost or end-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ► Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	on Form 990 Part IV line	11c See Form 990 Part X	(line 13
(a) Description of investment	(b) Book value		ion: Cost or end-of-year market value
			ion. Cost of end-of-year market value
(1)			
(2)			
(3)			
<u>(4)</u>			
(5)			
(6)			
(7)			
(8)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ► Part IX Other Assets.			
Complete if the organization answered "Yes"	on Form 000 Dart IV line	11d Soc Form 000 Dart)	V line 15
	Description	Fill. See Follin 990, Fall 7	(b) Book value
(1) Pensions - Deferred Outfl			
	OWS		<u> 1,679,657</u> . <u> 48,029</u> .
(2) OPEB - Deferred Outflows			48,029.
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) lin	ne 15.)		▶ 1,727,686.
Part X Other Liabilities.		44 446 5 000	
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11e or 11f. See Form 990,	
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			C 151 420
(2) Net Pension Liability			6,151,438.
(3) Net OPEB Liability			297,608.
(4) Pensions - Deferred Inflo	WS		3,257,896.
(5) OPEB - Deferred Inflows			127,469.
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) lin			
2. Liability for uncertain tax positions. In Part XIII, provide	e the text of the footnote to	o the organization's financia	al 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

11200426 151129 PAR5100

Sche	dule D (Form 990) 2021 Parker Performing Arts School	47-	2141843 Page 4				
Par	t XI Reconciliation of Revenue per Audited Financial Statements With Revenue per	Return.					
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.						
1	Total revenue, gains, and other support per audited financial statements	1	7,485,285.				
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:						
а	Net unrealized gains (losses) on investments 2a						
b	Donated services and use of facilities 2b						
с	Recoveries of prior year grants 2c						
d	Other (Describe in Part XIII.) 2d 36,97	2.					
е	Add lines 2a through 2d	2e	<u>36,972.</u> 7,448,313.				
3	Subtract line 2e from line 1		7,448,313.				
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 3,417,07	3.					
с	Add lines 4a and 4b	4c	3,417,073.				
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	10,865,386.				
Par	rt XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	er Retur	n.				
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.						
1	Total expenses and losses per audited financial statements	1	4,536,211.				
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:						
а	Donated services and use of facilities						
b	Prior year adjustments 2b						
с	Other losses 2c						
d	Other (Describe in Part XIII.) 2d -3,380,10	1.					
е	Add lines 2a through 2d	2e	-3,380,101.				
3	Subtract line 2e from line 1		7,916,312.				
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:						
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a						
b	Other (Describe in Part XIII.) 4b						
с	Add lines 4a and 4b	4c	0.				
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990. Part I. line 18.)	5	7,916,312.				
Par	Part XIII Supplemental Information.						
Provi	ide 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, li	ne 4; Part	X, line 2; Part XI,				
lines	lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.						

Part XI, Line 2d - Other Adjustments:

Direct Fundraising Expenses	36,972.
Part XI, Line 4b - Other Adjustments:	
Pension Accrual Adjustments	3,417,073.
Part XII, Line 2d - Other Adjustments:	
Pension Accrual Adjustments	-3,417,073.
Direct Fundraising Expenses	36,972.
Total to Schedule D, Part XII, Line 2d	-3,380,101.

25

132054 10-28-21

Part Am Supplemental mormation (continued)		
		Schedule D (Form 990) 2021

(г U)

132055 10-28-21

SCHEDULE E		Schools		OMB No.	1545-004	47
(Form 990) Complete if the organization answered "Yes" on Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.		Complete if the organization answered "Yes" on Form 990,		20	21	
	ment of the Treasury I Revenue Service	 Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information. 		Open to Inspect		ic
Name	e of the organizatio		Employer ic	-		mher
Nam	on the organizatio	Parker Performing Arts School		-2141		mber
Pa	rt I	Turker reriorming Ares benoor		2747	045	
					YES	NO
1	Does the organiza	tion have a racially nondiscriminatory policy toward students by statement in its charter,				
	•	erning instrument, or in a resolution of its governing body?		1	х	
2		tion include a statement of its racially nondiscriminatory policy toward students in all its broc				
		ther written communications with the public dealing with student admissions, programs, and		? 2	Х	
3	Has the organizati	on publicized its racially nondiscriminatory policy on its primary publicly accessible Internet				
	homepage at all ti	mes during its taxable year in a manner reasonably expected to be noticed by visitors to the				
	homepage, or thro	bugh newspaper or broadcast media during the period of solicitation for students, or during the	ne			
	registration period	if it has no solicitation program, in a way that makes the policy known to all parts of the gen	eral			
	community it serve	es? If "Yes," please describe. If "No," please explain. If you need more space, use Part II \dots		3	X	
				_		
				_		
				_		
				_		
				_		
4	-	tion maintain the following?				
		g the racial composition of the student body, faculty, and administrative staff?			X	
		ting that scholarships and other financial assistance are awarded on a racially nondiscrimina	tory basis?	4b	X	
с		ogues, brochures, announcements, and other written communications to the public dealing			v	
		ssions, programs, and scholarships?			X X	
d		rial used by the organization or on its behalf to solicit contributions?		4d		
	If you answered "I	No" to any of the above, please explain. If you need more space, use Part II.				
				-		
				-		
				-		
5	Does the organiza	tion discriminate by race in any way with respect to:		-		
-		r privileges?		5a		x
h	Admissions policie	privileges:				x
c	Employment of fai	culty or administrative staff?		50 50		x
		her financial assistance?				x
						x
	Use of facilities?					x
		?			1	x
	Other extracurricu				1	x
		/es" to any of the above, please explain. If you need more space, use Part II.				
	,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
				_		
6a	Does the organiza	tion receive any financial aid or assistance from a governmental agency?		6a	х	
		on's right to such aid ever been revoked or suspended?				X
		/es" on either line 6a or line 6b, explain on Part II.				
7	-	tion certify that it has complied with the applicable requirements of sections 4.01 through				
				7	Х	
LHA		eduction Act Notice, see the Instructions for Form 990 or 990-EZ.		dule E (Fo	rm 990) 202

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

Line 6 - Explanation of Government Financial Aid:

The School receives financial assistance from the Colorado Department of

Education from per-pupil revenue through its school district, in addition

to district mill levies, and other government grants.

11200426 151129 PAR5100

SCHEDULE G	Suppleme	ties	OMB No. 1545-0047					
(Form 990)	Complete if the	or if the	2021					
Department of the Treasury			Open to Public					
Internal Revenue Service		o to www.irs.gov/Form990 for inst	ruction	s and	the latest informati		F	Inspection
							47-2141	
	complete this par	 Complete if the organization answ t. 	ered "Y	es" or	n Form 990, Part IV, I	ine 17	. Form 990-E	Z filers are not
		sed funds through any of the followi	ng activ	ities. (Check all that apply.			
a 📃 Mail solicitat	ions			•	overnment grants			
	email solicitations				nment grants			
c Phone solici		g X Specia	al fundra	lising	events			
d In-person so		or oral agreement with any individua	l (incluc	lina of	ficers directors trus	tees	r	
•		art VII) or entity in connection with p	•	Ū		1003, 1	X Ye	s 🗌 No
	highest paid indiv	viduals or entities (fundraisers) pursu			•	ne fun		
			(iii)	Did		(v) /	Amount paid	
(i) Name and addres		(ii) Activity	fundr have c	aiser ustody	(iv) Gross receipts	tò (o	r retained by) undraiser	(vi) Amount paid to (or retained by)
or entity (func	iraiser)		or control of contributions?		from activity		ed in col. (i)	organization
Booster Enterprises			Yes	No	-			
Triangle Parkway, S	Suite 100,	Boosterthon	X		76,077.		34,972	. 41,105.
		I						44.495
		n is registered or licensed to solicit	contrib		76,077.	it is e	34,972	,
or licensing.	on the organizatio		Contrails				Nonipe nonin	sgiotration
CO								
LHA For Paperwork Re	eduction Act Not	ice, see the Instructions for Form	990 or	990-E	Ζ.		Schedul	e G (Form 990) 2021
132081 10-21-21	Part IV	for continuations						

 Schedule G (Form 990) 2021
 Parker
 Performing
 Arts
 School
 47-2141843
 Page 2

 Part II
 Fundraising Events.
 Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000
 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

 of fundraising event contributio

		of fundraising event contributions and gro	oss income on Form 990.	EZ, línes i and ob. List e	events with gross receipt	s greater than \$5,000.
			(a) Event #1	(b) Event #2	(c) Other events None	(d) Total events (add col. (a) through
			Boosterthon	(averate trans)	(totol www.mah.au)	col. (c))
Revenue			(event type)	(event type)	(total number)	
	1	Gross receipts	76,077.			76,077.
	2	Less: Contributions	76,077.			76,077.
	3	Gross income (line 1 minus line 2)				
		<i>,</i>				
	4	Cash prizes				
se	5	Noncash prizes				
xpense	6	Rent/facility costs				
Direct Expenses	7	Food and beverages				
Δ	8	Entertainment				
	9	Other direct expenses				36,972.
	10	Direct expense summary. Add lines 4 through			•	36,972.
	11	Net income summary. Subtract line 10 from li			•	-36,972.
Pa	rt I		answered "Yes" on Form	990, Part IV, line 19, or i	reported more than	
		\$15,000 on Form 990-EZ, line 6a.	1			
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Rev						
	1	Gross revenue				
ses	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
	5	Other direct expenses				
	<u> </u>		Yes %	Yes %	Yes %	
	6	Volunteer labor	No	No	No	
	7	Direct expense summary. Add lines 2 through	5 in column (d)		►	
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)		····· •	
~	5 -22	ter the state(s) is which the experimetion condu	unto appring aptivition.			
		ter the state(s) in which the organization condu the organization licensed to conduct gaming ac				Yes No
		No," explain:				
10a	We	ere any of the organization's gaming licenses re	evoked, suspended, or te	rminated during the tax y	/ear?	Yes No
b	lf "	Yes," explain:				
10000	12 10)-21-21			Sche	dule G (Form 990) 2021

Schedule G (Form 9	90) 2021	Parker	Perform	ing Art	s Scho	ol	47-2	214184	3 Page 3
11 Does the organ									
12 Is the organizat									
to administer c	haritable gaming?							Yes	No No
13 Indicate the pe	rcentage of gaming	activity condu	ucted in:						
	n's facility							13a	%
	lity							13b	%
14 Enter the name	and address of the	person who p	prepares the or	ganization's g	gaming/specia	al events books a	and records:		
Name 🕨									
Address 🕨 _									
15a Does the organ	ization have a contr	act with a thir	d party from w	hom the orga	nization recei	ives gaming reve	nue?	🗌 Yes	No
b If "Yes," enter t	he amount of gamir	ng revenue rec	eived by the o	rganization	► \$	an	d the amount		
of gaming reve	nue retained by the	third party 🕨	\$						
c If "Yes," enter r	name and address o	of the third par	ty:						
Name 🕨									
Address 🕨 _									
16 Gaming manag	er information:								
ie dannig hanag									
Name 🕨									
Gaming manag	er compensation 🕨	▶ \$							
Description of s	services provided	•							
Director	/officer	Employe	e l		dent contract	or			
17 Mandatory dist	ributions:								
a Is the organizat	ion required under s	state law to m	ake charitable	distributions	from the gami	ing proceeds to			
retain the state	gaming license?							Yes	No No
	nt of distributions re	•		e distributed 1	o other exem	pt organizations	or spent in the		
	own exempt activitie								
	lemental Inform						iii) and (v); and Pa	rt III, lines 9	, 9b, 10b,
150, 13	5c, 16, and 17b, as a	applicable. Als	so provide any	additional int	ormation. See	e instructions.			
Schedule G	. Part I.	Line 2b	. List	of Ten	Highest	. Paid Fu	Indraisers	5:	
<u></u>	<u>,</u> ,		/~~						
<u>(i) Name o</u>	f Fundrais	er: Boo	ster En	terpris	es				
(a _ a								
(i) Addres	s of Fundr	aiser:							
E200 mmiam		a	- 100	Deeehte			20002		
<u>5300 Trian</u>	<u>jie Parkwa</u>	y, Suit	e 100,	Peachtr	ee Corr	hers, GA	30092		
Part I, Li	ne 2b, Col	umn (v)	:						
		X · 7							
Profession	<u>al fundra</u> i	<u>sing f</u> e	<u>es wer</u> e	<u>paid</u> t	<u>o Boos</u> t	<u>terthon</u> E	Interprise	es.	
132083 10-21-21							Sched	ule G (Forr	n 990) 2021
				31					

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Schedule G	
Dout IV	0

Part IV Supplemental Information (continued)	
	Schedule G (Form 990)

SCHEDULE O (Form 990) Department of the Treasury Internal Revenue Service	Treasury ► Attach to Form 990 or Form 990 -EZ.							
Name of the organizationEmployer identification numParker Performing Arts School47-2141843								
Form 990, Part I, Line 1, Description of Organization Mission:								
Parker Perfo	rming Arts School equips students to become in	dependent						
creative this	nkers, critical problem solvers, and successfu	1						
<u>collaborator</u>	s. In our safe learning environment, students	engage in						
rich and inn	ovative instruction in academics and the perfo	rming arts in						
preparation :	for their roles as citizens of a diverse and i	ncreasingly						
globalized c	ommunity.							
Form 990, Pa:	rt III, Line 1, Description of Organization Mi	ssion:						
Parker Perfo	rming Arts School equips students to become in	dependent						
creative this	nkers, critical problem solvers, and successfu	1						
<u>collaborator</u>	s. In our safe learning environment, students	engage in						
rich and innovative instruction in academics and the performing arts in								
preparation for their roles as citizens of a diverse and increasingly								
globalized community.								

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

Line 11b Explanation - Form 990 and supporting schedules are presented to

the Board annually prior to submission.

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

The School Board regularly evaluates Board relationships with related

parties which may affect independence, and takes proper action to ensure

independence in fact and appearance.

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

Schedule O (Form 990) 2021

Schedule O (Form 990) 2021 Page							
Ç (Employer identification number						
Parker Performing Arts School	47-2141843						

The Board of Directors performs a salary analysis of similar schools in the

same District and compensation is set according to this review.

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

No other documents available to the public.

Form 990, Part XII, Line 2c

The process established by the committee responsible for oversight of

the audit has not changed.

(Rev. January 2022)

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

Department of the Treasury Internal Revenue Service

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.

Type or					Taxpayer identification number (TIN)			
print								
File by the due date for filing your	Number, street, and room or suite no. If a P.O. box, s		ions.					
instruction								
Enter th	e Return Code for the return that this application is for (file	e a separa	e application for each return)			01		
Applica	tion	Return	Application			Return		
ls For		Code	Is For	Code				
Form 99	00 or Form 990-EZ	01	Form 1041-A			08		
Form 47	720 (individual)	03	Form 4720 (other than individual)			09		
Form 99	90-PF	04	Form 5227			10		
Form 99	90-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11		
Form 99	90-T (trust other than above)	06	Form 8870			12		
Form 99	00-T (corporation) Parker Performi	07						
• If the • If this box 1 II th 2 If [request an automatic 6-month extension of time until e organization named above. The extension is for the orga	Group Exe and atta <u>May</u> anization's , an heck reaso	mption Number (GEN), <u>ch a list with the names and TINs of</u> <u>γ 15, 2023</u> , to file return for: d ending <u>JUN 30, 2022</u> on: Initial return	f this is fo all membe	r the whole (ers the exter npt organiza 	group, check this		
	this application is for Forms 990-PF, 990-T, 4720, or 6069 ny nonrefundable credits. See instructions.	, enter the	tentative tax, less	3a	\$	0.		
	b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and 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 pay			n this form, if required, by					
u	sing EFTPS (Electronic Federal Tax Payment System). See	instructio	ns.	3c	\$	0.		
Caution instruct	n: If you are going to make an electronic funds withdrawal ions.	(direct det	bit) with this Form 8868, see Form 84	153-TE and	d Form 8879	-TE for payment		
LHA	For Privacy Act and Paperwork Reduction Act Notice,	see instru	ctions.		Form 8	8868 (Rev. 1-2022)		