PUBLIC DISCLOSURE COPY \*\*

#### Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

OMB No. 1545-0047

Department of the Treasury Go to www.irs.gov/Form990 for instructions and the latest information. 2024 A For the 2023 calendar year, or tax year beginning JUL 1, 2023 and ending JUN Check if applicable: C Name of organization D Employer identification number The Girls Athletic Leadership School Address change of Denver Name change 27-0736802 Doing business as Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final return/ termin-ated 750 Galapago Street 303-282-6437 5,997,392. City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ Amended return 80204 Denver, CO H(a) Is this a group return Applica-tion pending F Name and address of principal officer: Margaret-Ann Burness Yes X No for subordinates? same as C above Yes **H(b)** Are all subordinates included? Tax-exempt status: X 501(c)(3) 501(c) ( 527 (insert no.) 4947(a)(1) or If "No," attach a list. See instructions J Website: www.galsdenver.org H(c) Group exemption number **K** Form of organization: **X** Corporation Association Other L Year of formation: 2010 M State of legal domicile: CO Part I Summary Briefly describe the organization's mission or most significant activities: See Schedule O Activities & Governance 2 if the organization discontinued its operations or disposed of more than 25% of its net assets. 16 3 Number of voting members of the governing body (Part VI, line 1a) 16 Number of independent voting members of the governing body (Part VI, line 1b) 4 Total number of individuals employed in calendar year 2023 (Part V, line 2a) 5 Total number of volunteers (estimate if necessary) 6 7 a Total unrelated business revenue from Part VIII, column (C), line 12 **b** Net unrelated business taxable income from Form 990-T, Part I, line 11 0. 7h Prior Year **Current Year** 1,785,325. 1,140,926. Contributions and grants (Part VIII, line 1h) 8 3,488,251. 4,767,078. Program service revenue (Part VIII, line 2g) 28,396. 42,703. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 8,838. 4,535. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 5,310,810. 5,955,242. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 0. 0. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 0. 14 Benefits paid to or for members (Part IX, column (A), line 4) 3,784,481. 3,875,357. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 52,587. 23,099. 16a Professional fundraising fees (Part IX, column (A), line 11e) **b** Total fundraising expenses (Part IX, column (D), line 25) 1,411,549. 1,725,640. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 5,248,617. 5,624,096. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 62,193. 331,146. Revenue less expenses. Subtract line 18 from line 12 **Beginning of Current Year End of Year** 5 2,965,527. 3,344,951 Total assets (Part X, line 16) 2,855,019. 2,903,297 21 Total liabilities (Part X, line 26) 三年 110,508. 441,654 Net assets or fund balances. Subtract line 21 from line 20 ..... Part II | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Signature of officer Date Sign Margaret-Ann Burness, Board Chair Here Type or print name and title Date PTIN Preparer's signature Print/Type preparer's name 05/06/25 self-employed P00356968 Thomas G. Sistare Paid Thomas G. Sistare Firm's name Hoelting & Company, Inc. Firm's EIN 30-0514455 Preparer Firm's address 31 East Platte Avenue, Suite 300 Use Only

May the IRS discuss this return with the preparer shown above? See instructions

Colorado Springs, CO 80903

Phone no. (719) 630-1091

The Girls Athletic Leadership School of Denver 27-0736802 Page 2 Form 990 (2023) Part III Statement of Program Service Accomplishments X Check if Schedule O contains a response or note to any line in this Part III Briefly describe the organization's mission: See Schedule O Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services? \_\_\_\_\_\_\_ Yes X No If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported. (Code: \_\_\_\_\_) (Expenses \$ 4,863,751. including grants of \$ \_\_\_\_\_\_) (Revenue \$ 4,796,274. See Schedule O. ) (Revenue \$ (Code: ) (Expenses \$ including grants of \$ (Code: \_\_\_\_\_\_) (Expenses \$ \_\_\_\_\_\_\_ including grants of \$ \_\_\_\_\_\_\_) (Revenue \$ \_\_\_\_\_\_\_)

Other program services (Describe on Schedule O.)

(Expenses \$ including grants of \$ ) (Revenue \$ )

Total program service expenses 4,863,751.

# Form 990 (2023) of Denver Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1_	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 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		<u>X</u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		<u> X</u>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		<u>X</u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		<u> X</u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7_		<u>X</u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		_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?			37
	If "Yes," complete Schedule D, Part IV	9		<u> X</u>
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			77
	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				
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		<u>X</u>
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			37
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<u>X</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		v	
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X	
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			v
	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		v	
	Schedule D, Parts XI and XII	12a	X	
a	Was the organization included in consolidated, independent audited financial statements for the tax year?	405	Х	
10	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional  Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b	X	<u> </u>
13	• •	13		X
14a h	Did the organization maintain an office, employees, or agents outside of the United States?  Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	14a		
D	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	- 15		
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17	х	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes."			
	complete Schedule G, Part III	19		Х
20a	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?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I. Parts I and II	21		Х

Form 990 (2023) of Denver

Part IV Checklist of Required Schedules (continued) 27-0736802 Page **4** 

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete	23	х	
24 a	Schedule J  Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	20	- 21	
<b>2</b> 40	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		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			77
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,	21		
20	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
_	"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
	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		Х
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			v
24	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	24		X
350	Part V, line 1  Did the organization have a controlled entity within the meaning of section 512(b)(13)?	34 35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	000		
~	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		Х
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		Х
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	X	
Pai	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V	<del></del>		
_			Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable  Ia 41  Enter the number of Forms W-2G included on line 1a Enter -0- if not applicable			
b	Enter the flumber of Forms with a finite rate in the applicable.			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	10		
	(gambling) withings to prize withers?	1c	000	

of Denver
Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V

					Yes	No
<b>2</b> a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,					
	filed for the calendar year ending with or within the year covered by this return	2a	70		7.7	
	If at least one is reported on line 2a, did the organization file all required federal employment tax return	าร?		2b	X	37
	-			3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a		•	10		x
h	financial account in a foreign country (such as a bank account, securities account, or other financial a If "Yes," enter the name of the foreign country	ccour	14)?	4a		
b	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Ad	coun	te (FRAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		is (i baily.	5a		х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction.			5b		X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the					
	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					
	were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	vices p	rovided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	ıs requ	uired			
	to file Form 8282?	 i	 I	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co		t?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra			7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo			7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, airplanes, airplane			7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	by the	9			
9	sponsoring organizations maintaining depart adviced funds			8		
a	Sponsoring organizations maintaining donor advised funds.  Did the sponsoring organization make any taxable distributions under section 4966?			9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter:			OD.		
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	10b				
11	Section 501(c)(12) organizations. Enter:					
а	Gross income from members or shareholders	11a				
b	Gross income from other sources. (Do not net amounts due or paid to other sources against					
	amounts due or received from them.)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	10411	?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
а	Is the organization licensed to issue qualified health plans in more than one state?			13a		
	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.					
b	Enter the amount of reserves the organization is required to maintain by the states in which the	امد ا	I			
_	organization is licensed to issue qualified health plans	13b				
	Enter the amount of reserves on hand  Did the organization receive any payments for indoor tanning services during the tax year?	13c	•	14a		х
				14b		
15	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedul Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner			1-10		
	excess parachute payment(s) during the year?			15		X
	If "Yes," see the instructions and file Form 4720, Schedule N.					
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	incon	ne?	16		х
-	If "Yes," complete Form 4720, Schedule O.	571				
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any actions.	tivities	;			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?			17		
	If "Yes," complete Form 6069.					

Form 990 (2023)

of Denver

27-0736802

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

State the name, address, and telephone number of the person who possesses the organization's books and records

80204

The Organization - 303-282-6437

750 Galapago Street, Denver,

of Denver

#### 27-0736802 Form 990 (2023) Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. • List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.
- Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See 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, box 6 of 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 ne	or any related	orga	niza	tion	con	nper	sate	ed any current officer, d	irector, or trustee.	
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average	(do		Pos	ition		one	Reportable	Reportable	Estimated
	hours per	box	box, unless pe		eck more than one s person is both an a director/trustee)			compensation	compensation	amount of
	week		cer an	u a u	recto	r/trus	iee)	from	from related	other
	(list any hours for	lirecto						the organization	organizations (W-2/1099-MISC/	compensation from the
	related	eord	stee			sated		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	truste	al trus		yee	mper		1099-NEC)	1000 (420)	and related
	below	ndividual trustee or director	Institutional trustee	er	Key employee	est co loyee	Je.	,		organizations
	line)	Indiv	Instii	Officer	Key	Highest compensated employee	Former			
(1) Carol Bowar	40.00									
Executive Director				X				125,190.	0.	31,873.
(2) Timeri Tolnay	40.00								_	_
Executive Director				X				0.	0.	0.
(3) Jen Holladay	2.00								_	_
Chair		Х		Х				0.	0.	0.
(4) Margaret-Ann Burness	2.00	ļ								
Vice Chair		Х		X				0.	0.	0.
(5) Shannon Saviers	2.00	ļ								•
Secretary	0.00	Х		Х		_		0.	0.	0.
(6) Pam Horizsny	2.00	.,		7.7						0
Treasurer	2 00	Х		X				0.	0.	0.
(7) Jamaica Burke	2.00	3,7							0	0
Member	2 00	X						0.	0.	0.
(8) Michelle Hurt	2.00	v							0	0
Member (9) Rebecca Leatherman	2.00	Х						0.	0.	0.
Member	2.00	Х						0.	0.	0.
(10) Stephanie Monge	2.00	Λ						0.	0.	<u></u>
Member	2.00	х						0.	0.	0.
(11) Kukis Moran	2.00							•	•	<u>.</u>
Member		х						0.	0.	0.
(12) Stefanie Mason	2.00								•	
Member		Х						0.	0.	0.
(13) Collinus Newsome	2.00								-	
Member		Х						0.	0.	0.
(14) Allison Ramagnoli	2.00									
Member		Х						0.	0.	0.
(15) Kerry Lander	2.00									
Member		Х						0.	0.	0.
(16) Angie McPhaul	2.00									
Member		Х						0.	0.	0.
(17) Vivian Morales	2.00									
Member		Х						0.	0.	0.

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Par	rt VII Section A. Officers, Directors, Trus	stees, Key Em	oloy	ees,	and	Hig	ghes	t C	ompensated Employee	s (continued)				
	(A) Name and title	(B) Average hours per week	box	not cl , unles	ss per	ition more son i	than o s both or/trust	an	( <b>D)</b> Reportable compensation from	(E)  Reportable  compensatio  from related	n	l	(F) stimate nount other	
		(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organization: (W-2/1099-MIS 1099-NEC)	s	fr org an	pensa om the anizat d relate anization	e ion ed
(18) Memb	) Allison Ramagnoli per	2.00	х						0.		0.			0.
	Subtotal								125,190.		0.	3	1,8	73.
С	Total from continuation sheets to Part V Total (add lines 1b and 1c)	II, Section A							125,190.		0.		1,8	0.
2	Total number of individuals (including but r									000 of reportable			<u> </u>	
	compensation from the organization												Yes	No
3	Did the organization list any <b>former</b> officer line 1a? <i>If</i> "Yes," <i>complete Schedule J for s</i>								hest compensated emp			3		Х
4	For any individual listed on line 1a, is the sand related organizations greater than \$15	•		•					•	· ·		4	Х	
5	Did any person listed on line 1a receive or rendered to the organization? If "Yes." con	accrue comper	sati	on fr	om a	any	unre	elate	ed organization or individ	dual for services		5		Х
Sec	ction B. Independent Contractors	ipiete Schedule	<i>5</i>	JI SU	CIT	<i>)</i> C/3	<i>OII</i> .							
1	Complete this table for your five highest conthe organization. Report compensation for										ensa	tion fro	om	
	(A) Name and business			ONE					(B) Description of s		C	(Compe		n
								1						
2	Total number of independent contractors ( \$100,000 of compensation from the organ	•	ot lin	nitec	l to t	thos		ted	above) who received mo	ore than				

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		Check if Schedule O contains a response	or note to any lin	e in this Part VIII			
				(A)	(B)	(C)	(D)
				Total revenue	Related or exempt function revenue	Unrelated	Revenue excluded from tax under
					Tunction revenue	business revenue	sections 512 - 514
S S	1	a Federated campaigns 1a					
ant		b Membership dues 1b					
يَ ق		c Fundraising events 1c	79,453.				
ifts		d Related organizations 1d					
n ii G		e Government grants (contributions) 1e	687,928.				
Sign		f All other contributions, gifts, grants, and	•				
k či		similar amounts not included above <b>1f</b>	373,545.				
草口		g Noncash contributions included in lines 1a-1f	,				
Contributions, Gifts, Grants and Other Similar Amounts		h Total. Add lines 1a-1f		1,140,926.			
<u> </u>			Business Code	,			
Ф	2	a Per Pupil Revenue	611110	3,108,244.	3,108,244.		
Š		b Other Program Revenue	611110	862,367.			
Ser		c Mill Levy Override	611110	796,467.			
E S		d		,	,		
Program Service Revenue		е					
Prc		f All other program service revenue					
		g Total. Add lines 2a-2f		4,767,078.			
	3						
		other similar amounts)		42,703.			42,703.
	4						-
	5	•					
		(i) Real	(ii) Personal				
	6	a Gross rents 6a					
		b Less: rental expenses 6b					
		c Rental income or (loss) 6c					
		d Net rental income or (loss)					
	7	a Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory 7a					
		<b>b</b> Less: cost or other basis					
ē		and sales expenses <b>7b</b>					
len		c Gain or (loss) 7c					
Be		d Net gain or (loss)					
her Revenue	8	a Gross income from fundraising events (not					
퉏		including \$ 79,453. of					
		contributions reported on line 1c). See					
		Part IV, line 18	17,489.				
		b Less: direct expenses 8	42,150.				
		c Net income or (loss) from fundraising events		-24,661.			-24,661.
	9	a Gross income from gaming activities. See					
		Part IV, line 19	1				
		b Less: direct expenses 9					
		c Net income or (loss) from gaming activities					
	10	a Gross sales of inventory, less returns					
		and allowances10	а				
		b Less: cost of goods sold10	b				
		c Net income or (loss) from sales of inventory					
<sub>ω</sub>			Business Code				
Miscellaneous Revenue	11	a <u>Miscellaneous Revenue</u>	611110	29,196.	29,196.		
ane		b					
eve		c					
Ais		d All other revenue					
_		e Total. Add lines 11a-11d		29,196.	4 506 55:		10.11
	12	Total revenue See instructions		5.955.242.	и 796 274.	0.1	18 042.

# Form 990 (2023) of Denver Part IX Statement of Functional Expenses

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

Secti	on 501(c)(3) and 501(c)(4) organizations must comp Check if Schedule O contains a respon		-	ipiete coluttiti (A).	
	•		(B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	165 000	110 000	15 262	25 544
	trustees, and key employees	167,909.	112,838.	17,360.	37,711.
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	2 221 242	2 222 614	50.055	
7	Other salaries and wages	3,091,942.	3,032,614.	59,265.	63.
8	Pension plan accruals and contributions (include	040 640	104 615	E4 006	
	section 401(k) and 403(b) employer contributions)	248,643.	194,617.	54,026.	0.040
9	Other employee benefits	316,389.	280,799.	33,541.	2,049. 501.
10	Payroll taxes	50,474.	44,279.	5,694.	501.
11	Fees for services (nonemployees):				
а	Management	E 412		F 412	
b	Legal	7,413.		7,413.	
	Accounting	135,333.		135,333.	
d	Lobbying	22 000			22 000
е	Professional fundraising services. See Part IV, line 17	23,099.			23,099.
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,	102 672	00 610	22 052	
	column (A), amount, list line 11g expenses on Sch O.)	103,672.	80,619.	23,053.	
12	Advertising and promotion	13,532.		13,532.	260
13	Office expenses	21,191.		20,931.	260.
14	Information technology	59,493.		59,493.	
15	Royalties	297,798.	206 020	1 750	
16	Occupancy		296,039.	1,759.	
17	Travel	35,555.	24,185.	11,370.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates	5,923.	5,860.	63.	
22	Depreciation, depletion, and amortization	47,387.	9,139.	38,248.	
23	Other expanses, Itamiza expanses not severed	41,301.	9,139.	30,240.	
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.)	F.C.4. 4.0.4	440 440	111 505	4 4 4 4
а	Purchased Services	561,184.	448,148.	111,595.	1,441.
b	Instructional Supplies	108,585.	108,585.	1 600	
С	Non-Capital Equipment	108,547.	106,945.	1,602.	
d	Educational Services	75,060.	75,060.	00 000	7 044
е	All other expenses	144,967.	44,024.	92,999.	7,944.
25	Total functional expenses. Add lines 1 through 24e	5,624,096.	4,863,751.	687,277.	73,068.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				Form <b>990</b> (2022)

# Form 990 (2023) Part X Balance Sheet

	LA			Bar to Hele Dark V			
		Check if Schedule O contains a response or	note to any	line in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			355,222.	1	889,632.
	2	Savings and temporary cash investments			1,251,996.	2	1,094,502.
	3				360,102.	3	62,269.
	4	Pledges and grants receivable, net  Accounts receivable, net			5,627.	4	5,804.
	5	Loans and other receivables from any current			3,027.	4	3,001.
	3	trustee, key employee, creator or founder, su					
		controlled entity or family member of any of t				5	
	6	Loans and other receivables from other disqu		<u> </u>			
	"	under section 4958(f)(1)), and persons descril		6			
	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
Ass	9				6,436.	9	19,225.
		Land, buildings, and equipment: cost or othe			· / = · · ·		
	100	basis. Complete Part VI of Schedule D		63.676.			
	b	Less: accumulated depreciation	10b	63,676.	17,482.	10c	18,558.
	11	Investments - publicly traded securities			, -	11	15,188.
	12	Investments - other securities. See Part IV, lin			12	•	
	13	Investments - program-related. See Part IV, lin		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11		968,662.	15	1,239,773.	
	16	<b>Total assets.</b> Add lines 1 through 15 (must e			2,965,527.	16	3,344,951.
	17	Accounts payable and accrued expenses			317,119.	17	380,672.
	18	Grants payable			18		
	19	Deferred revenue	99,825.	19	140,089.		
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Comple	te Part IV o	f Schedule D		21	
S	22	Loans and other payables to any current or for	ormer office	r, director,			
ij		trustee, key employee, creator or founder, su	bstantial co	ontributor, or 35%			
Liabilities		controlled entity or family member of any of t	hese persor	ns		22	
_	23	Secured mortgages and notes payable to uni				23	
	24	Unsecured notes and loans payable to unrela				24	
	25	Other liabilities (including federal income tax,					
		parties, and other liabilities not included on li	nes 17-24).	Complete Part X	0 420 005		0 200 526
		of Schedule D			2,438,075.		2,382,536.
	26	Total liabilities. Add lines 17 through 25		v	2,855,019.	26	2,903,297.
S		Organizations that follow FASB ASC 958, o	heck here	X			
JCe		and complete lines 27, 28, 32, and 33.			_63 916	07	228 025
<u>a</u>	27				-63,816. 174,324.	27	228,925. 212,729.
d B	28	Net assets with donor restrictions	1/4,324.	28	212,129.		
Ë		Organizations that do not follow FASB ASC					
٩	200	and complete lines 29 through 33.	do			20	
əts	29	Capital stock or trust principal, or current fun Paid-in or capital surplus, or land, building, or				29 30	
\ss(	30 31	Retained earnings, endowment, accumulated				31	
Net Assets or Fund Balances	32	Total net assets or fund balances			110,508.	32	441,654.
Ž	33	Total liabilities and net assets/fund balances			2,965,527.	33	3,344,951.
	JJ	TOTAL HADIILLES AND HEL ASSELS/TUTIO DAIANCES			2,505,527.	აა	3,344,3310

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Part XI Reconciliation of Net Assets

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

1 Total revenue (must equal Part VIII, column (A), line 12) 1 5,955,242.
2 Total expenses (must equal Part IX, column (A), line 25) 2 5,624,096.
3 Revenue less expenses. Subtract line 2 from line 1 3 331,146.
4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 4 110,508.
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)) 10 441,654.

	<b>5 7 7 7 7 7 7 7 7 7 7</b>					
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		44	1,6	54.
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					X
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		Х
	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?			<b>2</b> b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate					
	consolidated basis, or both:					
	Separate basis Consolidated basis X Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,	,			
	review, or compilation of its financial statements and selection of an independent accountant?			2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Scho	edule (	O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the					
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?			За		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required					
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b		

#### **SCHEDULE A**

(Form 990)

Total

Department of the Treasury Internal Revenue Service

Name of the organization

#### **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.

The Girls Athletic Leadership School

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

**Employer identification number** 

27-0736802 of Denver Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from 10 activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other in your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes above (see instructions))

of Denver

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#### Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						_
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						_
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4.						
Sec	tion B. Total Support		_	_	_		
	ndar year (or fiscal year beginning in)	<b>(a)</b> 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
	<b>Total support.</b> Add lines 7 through 10						
	Gross receipts from related activities,	· ·				12	
13	First 5 years. If the Form 990 is for the	ne organization's fi	rst, second, third,	fourth, or fifth tax	year as a section 5	601(c)(3)	
800	organization, check this box and stor				<u></u>	<u></u>	
	etion C. Computation of Publi			L (A)			
	Public support percentage for 2023 (li					15	<u>%</u>
	Public support percentage from 2022 33 1/3% support test - 2023. If the contract of the contra			n line 10 and line			<u>%</u>
IOa	stop here. The organization qualifies	-					
h	33 1/3% support test - 2022. If the o		~		N line 15 is 33 1/3%		
b	and <b>stop here.</b> The organization qual						
172	10% -facts-and-circumstances test				e 13 16a or 16b a		
., a	and if the organization meets the facts						
	meets the facts-and-circumstances te		•	-	•	now the organiz	
h	10% -facts-and-circumstances test	_			-	 17a_and line 15 is :	10% or
J	more, and if the organization meets the	-					10/0 01
	organization meets the facts-and-circu				-		
12	Private foundation. If the organization						
	ato toanaution it the organizatio	did not officer a	~3/ 3/1 mile 10, 10	a, 100, 174, 01 171	-, 5.155K till5 50X a		· ·····

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

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

Se	ction A. Public Support		,				
Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
78	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
k	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						
(	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
Se	ction B. Total Support		,	T	_		
	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included on line 10b,						
	whether or not the business is						
	regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital						
	assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the	-			•		
0-	check this box and stop here						
	ction C. Computation of Publi			. (5)		T .= T	
	Public support percentage for 2023 (I	, (,,		(//		15	%
	Public support percentage from 2022 ction D. Computation of Inves					16	%
				10 l (f)		47	
	Investment income percentage for 20					17	<u>%</u>
	Investment income percentage from					18	%
198	a 33 1/3% support tests - 2023. If the						
	more than 33 1/3%, check this box ar						
k	33 1/3% support tests - 2022. If the						
00	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization	ni dia not check a	box on line 14, 19a	a, or 190, check th	iis box and see ins	structions	

#### Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of 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.)

		3.5	
		Yes	No
	1		
	2		
	За		
	3b		
	3c		
	4a		
	4b		
	4c		
	5a		
	<b></b>		
-	5b 5c		
	30		
	6		
	7		
	8		
	J		
	9a		
	Ok		
	9b		
	9с		
	10a		
	10b		
lule <i>l</i>	\ (Forn	n 990)	2023

Pa	t IV Supporting Organizations (continued)			J
			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? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described 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.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)	•		
а	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.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in	struction	l ' I	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	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.	2a		
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.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	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.	3a		
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 <b>Part VI</b> the role played by the organization in this regard	3b		

### The Girls Athletic Leadership School

Schedule A (Form 990) 2023 of Denver 27-0736802 Page 6

Pai	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	Organ	izations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	trust on I	Nov. 20, 1970 ( <i>explain in</i> <b>F</b>	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations must of		•	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
_4	Add lines 1 through 3.	4		
_5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
_5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
_6	Multiply line 5 by 0.035.	6		
_7_	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functionally	integrate	ed Type III supporting organ	nization (see

Schedule A (Form 990) 2023

instructions).

Par	t V Type III Non-Functionally Integrated 509(	(a)(3) Supporting Orga	nizations (continue	ed)			
Section D - Distributions Current Year							
1	Amounts paid to supported organizations to accomplish exe		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	es of supported organizations	S	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	ne organization is responsive					
	(provide details in Part VI). See instructions.			8			
9	Distributable amount for 2023 from Section C, line 6			9			
10	Line 8 amount divided by line 9 amount			10			
		(i)	(ii)		(iii)		
Secti	on E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2023	\$	Distributable Amount for 2023		
_1_	Distributable amount for 2023 from Section C, line 6						
2	Underdistributions, if any, for years prior to 2023 (reason-						
	able cause required - explain in Part VI). See instructions.						
3	Excess distributions carryover, if any, to 2023						
a	From 2018						
b	From 2019						
<u> </u>	From 2020						
d	From 2021						
е	From 2022						
f	Total of lines 3a through 3e						
g	Applied to underdistributions of prior years						
<u>h</u>	Applied to 2023 distributable amount						
i_	Carryover from 2018 not applied (see instructions)						
<u>_i</u>	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.						
4	Distributions for 2023 from Section D,						
	line 7: \$						
<u>a</u>	Applied to underdistributions of prior years						
<u>b</u>	Applied to 2023 distributable amount						
<u> </u>	Remainder. Subtract lines 4a and 4b from line 4.						
5	Remaining underdistributions for years prior to 2023, 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 2023. Subtract lines 3h						
	and 4b from line 1. For result greater than zero, explain in						
	Part VI. See instructions.						
7	Excess distributions carryover to 2024. Add lines 3j						
	and 4c.						
_8_	Breakdown of line 7:						
	Excess from 2019						
	Excess from 2020						
	Excess from 2021						
<u>d</u>	Excess from 2022						
6	Evenes from 2023						

Schedule A (Form 990) 2023

## The Girls Athletic Leadership School of Denver

27-073<u>6802 Page 8</u> of Denver Schedule A (Form 990) 2023 Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. Part VI (See instructions.)

332028 12-21-23 Schedule A (Form 990) 2023

#### Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Organization type (check one):

#### **Schedule of Contributors**

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

OMB No. 1545-0047

2023

Name of the organization
The Girls Athletic Leadership School
of Denver

The Girls Athletic Leadership School
27-0736802

Filers of	i.	Section:							
Form 99	0 or 990-EZ	X 501(c)( 3 ) (enter number) organization							
		4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation							
		527 political organization							
Form 99	0-PF	501(c)(3) exempt private foundation							
		4947(a)(1) nonexempt charitable trust treated as a private foundation							
		501(c)(3) taxable private foundation							
	Check if your organization is covered by the <b>General Rule</b> or a <b>Special Rule.</b> Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.								
General	Rule								
X	•	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.							
Special	Rules								
	For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.								
	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.								
	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year\$								
answer "	No" on Part IV, line 2	It isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it <b>must</b> 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify requirements of Schedule B (Form 990).							

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

Schedule B (Form 990) (2023)

Name of organization
The Girls Athletic Leadership School

Employer identification number

27-0736802 of Denver Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (d) (c) Name, address, and ZIP + 4 No. **Total contributions** Type of contribution 1 X Person **Payroll** 75,000. Noncash (Complete Part II for noncash contributions.) (a) (c) (d) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution 2 X Person **Payroll** 99,825. Noncash (Complete Part II for noncash contributions.) (a) (c) (d) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. 3 X Person **Payroll** 20,000. Noncash (Complete Part II for noncash contributions.) (d) (a) (b) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 4 Person Payroll 10,000. Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 5 Person **Payroll** 33,818. Noncash (Complete Part II for noncash contributions.) (b) (c) (d) (a) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. X 6 Person **Payroll** 5,000. Noncash (Complete Part II for

Name of organization
The Girls Athletic Leadership School
of Denver

Employer identification number

27-0736802

Part I	Contributors (see instructions). Use duplicate copies of Part I if additiona	I space is needed.	
(a)	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
No. 7	Name, audress, and ZIF + 4	\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No. 8	Name, address, and ZIP + 4	* 24,705.	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9		\$13,936.	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No. 10	Name, address, and ZIP + 4	\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
11	Name, audiess, and Zir + 4	\$10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
12	Name, address, and ZIP + 4	\$6,500.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

of Denver

Name of organization **Employer identification number** The Girls Athletic Leadership School 27-0736802

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (d) Name, address, and ZIP + 4 No. **Total contributions** Type of contribution 13 X Person **Payroll** 10,000. Noncash (Complete Part II for noncash contributions.) (a) (c) (d) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution 14 X Person **Payroll** <u>5,02</u>3. Noncash (Complete Part II for noncash contributions.) (a) (c) (d) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. 15 Person X **Payroll** 10,000. Noncash (Complete Part II for noncash contributions.) (d) (a) (b) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 16 Person **Payroll** 15,000. Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 17 Person **Payroll** 5,000. Noncash (Complete Part II for noncash contributions.) (b) (c) (d) (a) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. Person **Payroll** Noncash (Complete Part II for noncash contributions.)

Name of organization
The Girls Athletic Leadership School
of Denver

Employer identification number
27-0736802

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

Name of organization **Employer identification number** The Girls Athletic Leadership School 27-0736802 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) \$ Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

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

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

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

OMB No. 1545-0047 Inspection

Name of the organization

The Girls Athletic Leadership School of Denver

**Employer identification number** 27-0736802

Pa	organizations waintaining bonor Advised organization answered "Yes" on Form 990, Part IV, line		iiiiiai i uiius (	or Accounts. Complete if the
		(a) Donor advised	d funds	(b) Funds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in v	writing that the assets hel	d in donor advise	ed funds
	are the organization's property, subject to the organization's	exclusive legal control?		Yes No
6	Did the organization inform all grantees, donors, and donor ad	dvisors in writing that gra	nt funds can be ι	used only
	for charitable purposes and not for the benefit of the donor or	r donor advisor, or for any	y other purpose c	onferring
	impermissible private benefit?			
Pa	rt II Conservation Easements. Complete if the org	ganization answered "Yes	" on Form 990, P	art 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 qualifi	ied conservation contribu	ition in the form o	f 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 on line 2a	ι	2c
d	Number of conservation easements included on line 2c acqui	red after July 25, 2006, a	ind not	
	on a historic structure listed in the National Register			2d
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or te	erminated by the	organization during the tax
	year			
4	Number of states where property subject to conservation eas	ement is located		
5	Does the organization have a written policy regarding the peri	iodic monitoring, inspecti	on, handling of	
	violations, and enforcement of the conservation easements it	holds?		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, I	handling of violations, an	d enforcing conse	ervation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, hand	ling of violations, and enf	orcing conservati	on easements during the year
8	Does each conservation easement reported on line 2d above			
	and section 170(h)(4)(B)(ii)?			
9	In Part XIII, describe how the organization reports conservation		·	
	balance sheet, and include, if applicable, the text of the footn	ote to the organization's	financial stateme	nts that describes the
Da	organization's accounting for conservation easements.	Aut Historical Tree		an Cimilar Assats
Ра	rt III Organizations Maintaining Collections of Complete if the organization answered "Yes" on Form	•	asures, or Ou	ier Similar Assets.
10	If the organization elected, as permitted under FASB ASC 958		nuo statamant an	ad balance about works
ıa	of art, historical treasures, or other similar assets held for pub			
	service, provide in Part XIII the text of the footnote to its finan			·
h	If the organization elected, as permitted under FASB ASC 958			
b		•		
	art, historical treasures, or other similar assets held for public	exhibition, education, or	research in lutthe	erance of public service,
	provide the following amounts relating to these items.			<b>c</b>
	(i) Revenue included on Form 990, Part VIII, line 1			
_	(ii) Assets included in Form 990, Part X			
2	If the organization received or held works of art, historical trea			gain, provide
_	the following amounts required to be reported under FASB AS			Φ.
	Revenue included on Form 990, Part VIII, line 1			\$
h				

Par	t III Organizations Maintaining C	ollections of Ar	t, Histo	orical Tre	asures, or	Other	Similar	Assets	(contir	nued)	J
3	Using the organization's acquisition, accession	on, and other record	s, check	any of the t	ollowing that	make sigi	nificant us	e of its			
	collection items (check all that apply).										
а	Public exhibition	c	i 🔲 1	Loan or exc	hange progra	ım					
b	Scholarly research	e	, 🔲	Other							
С	Preservation for future generations										
4	Provide a description of the organization's co	ollections and explain	n how th	ey further th	ne organizatio	n's exemp	t purpose	in Part	XIII.		
5	During the year, did the organization solicit o	r receive donations	of art, his	storical treas	sures, or othe	r similar a	ssets				
	to be sold to raise funds rather than to be ma								Yes		No
Par	t IV Escrow and Custodial Arran		te if the	organizatior	answered "\	es" on Fo	rm 990, F	Part IV, li	ne 9, or		
	reported an amount on Form 990, Par	t X, line 21.									
1a	Is the organization an agent, trustee, custodi	an, or other intermed	diary for	contribution	s or other as	sets not in	cluded		_		_
	on Form 990, Part X?							L	Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	llowing ta	able:							
									Amoun	t	
С	Beginning balance						1c				
d	Additions during the year						1d				
е	Distributions during the year						1e				
f	Ending balance						1f				
	Did the organization include an amount on Fo					•	·?	L	Yes		No
	If "Yes," explain the arrangement in Part XIII.										
Pai	t V   Endowment Funds Complete if						I) Thuas	ana baali	(-) [		h a alı
		(a) Current year	(b) P	rior year	(c) Two year	s back (c	d) Three yea	ars back	(e) Four	years	раск
1a	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 curr			ı, 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	ssion of the organiza	ation that	t are held ar	nd administer	ed for the			ſ	Yes	Na
	organization by:								0 0	162	No
	(i) Unrelated organizations?								3a(i)		
									3a(ii)		
	If "Yes" on line 3a(ii), are the related organiza								3b		
Par	Describe in Part XIII the intended uses of the tVI Land, Buildings, and Equipm		wment it	unas.							
	Complete if the organization answere		) Part IV	line 11a S	ee Form 990	Part X lir	ne 10				
		(a) Cost or o			or other				(d) Poo	k volu	
	Description of property	basis (investr		` '	(other)		cumulated eciation		( <b>d</b> ) Boo	k value	Е
10	Land	,		54010	ν- π.σ./	сері					
b	Land Buildings										
C	Leasehold improvements										
d	Equipment			6	3,676.		45,11	8.	1	8,5	58-
	Other				.,		-,			.,	
	. Add lines 1a through 1e. (Column (d) must e		X line 1/	o column	(R))				1	8,5	58.
. 5.0		<u>quai i Oilli 330, Fail</u>	<u> </u>	oc, coluitili	براب					. ,	

Schedule D (Form 990) 2023 of Denver			27-0736802 Page <b>3</b>
Part VII Investments - Other Securities			
Complete if the organization answered "Ye			
(a) Description of security or category (including name of security		(c) Method of valuation: Cost or	end-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A) (B)		1	
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))			
Part VIII Investments - Program Related.			
Complete if the organization answered "Ye	s" on Form 990, Part IV, line	11c. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or	end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))			
Part IX Other Assets	"	44 LO E 200 B LV II 45	
Complete if the organization answered "Ye		11d. See Form 990, Part X, line 15.	(IA) De aleccaleca
	(a) Description		(b) Book value
(1) Deferred Outflows of Res	ources		1,225,540.
(2) Net OPEB Asset			14,233.
(3)			
(4)			
(5) (6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, line 15,	col (R))		1,239,773.
Part X Other Liabilities	ooi. (D))		
Complete if the organization answered "Ye	s" on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line	25.
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2) Deferred Inflows of Reso	urces		372,022.
(3) Net Pension Liabilities			2,010,514.
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, line 25,	col. (B))		2,382,536.

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

of Denver Schedule D (Form 990) 2023

27-0736802 Page 4

ıu	rt XI Reconciliation of Revenue per Audited Financial Sta  Complete if the organization answered "Yes" on Form 990, Part IV, lir		revenue per ne	turn	
1				1	5,997,392.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				3,337,332.
a		2a			
b					
c					
d			42,150.		
e				2e	42,150.
3	Subtract line <b>2e</b> from line <b>1</b>			3	42,150. 5,955,242.
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					
С				4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.	)		5	5,955,242.
Pa	rt XII Reconciliation of Expenses per Audited Financial St	atements With	Expenses per F	Returr	1
	Complete if the organization answered "Yes" on Form 990, Part IV, lin	ne 12a.			
1	Total expenses and losses per audited financial statements			1	5,666,246.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
С	Other losses	2c			
d	,		42,150.		40 450
е	J			2e	42,150. 5,624,096.
3	Subtract line 2e from line 1			3	5,624,096.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 . 1			
a	, , , , , , , , , , , , , , , , , , , ,				
b	, , , , , , , , , , , , , , , , , , , ,	4b			0
	Add lines 4a and 4b			4c 5	5,624,096.
5 Pa	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1 rt XIII Supplemental Information	8.)		5	3,024,090.
	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	1: Part IV lines 1h a	nd 2h: Part V. line 4	· Dort \	/ line 2: Part VI
	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a			, rait /	X, IIIIe Z, Fait XI,
		, additional inform	<b>4.1.5</b>		
Pa:	rt XI, Line 2d - Other Adjustments:				
$\mathbf{E}\mathbf{x}$	penditures related to the Luncheon fund	raising ev	ent.		42,150.
Do:	nt VII Iina 2d Othan Adiustmants.				
Pa.	rt XII, Line 2d - Other Adjustments:				
E ser	oonditures related to the Tuncheen fund	raiding ou	ont		42 150
لحمت	penditures related to the Luncheon fund:	raising ev	enc.		42,150.

## SCHEDULE E (Form 990)

Department of the Treasury

#### **Schools**

Complete if the organization answered "Yes" on Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.

Attach to Form 990 or Form 990-EZ.

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

2023

Open to Public Inspection

Internal Revenue Service

Name of the organization

The Girls Athletic Leadership School of Denver

 $Employer\ identification\ number \\ 27-0736802$ 

	of Deliver	27-07	130	004	
Part I					
		Г		YES	_
	bes the organization have a racially nondiscriminatory policy toward students by statement in its charter,		_	77	
	laws, other governing instrument, or in a resolution of its governing body?		1	X	
	ses the organization include a statement of its racially nondiscriminatory policy toward students in all its brock			v	
	talogues, and other written communications with the public dealing with student admissions, programs, and	scholarships?	2	X	
	as the organization publicized its racially nondiscriminatory policy on its primary publicly accessible Internet				
	mepage at all times during its tax year in a manner reasonably expected to be noticed by visitors to the				
	mepage, or through newspaper or broadcast media during the period of solicitation for students, or during th gistration period if it has no solicitation program, in a way that makes the policy known to all parts of the gene				
	mmunity it serves? If "Yes," please describe. If "No," please explain. If you need more space, use Part II		3	х	
	hese policies are available on the school website.		3	21	
_					
 Do	pes the organization maintain the following?	——I			
<b>a</b> Re	ecords indicating the racial composition of the student body, faculty, and administrative staff?		4a	X	
	ecords documenting that scholarships and other financial assistance are awarded on a racially nondiscriminat opies of all catalogues, brochures, announcements, and other written communications to the public dealing	ory basis?	4b	Х	
	th student admissions, programs, and scholarships?		4c	Х	
	opies of all material used by the organization or on its behalf to solicit contributions?	1	4d	Х	
_					
Do	es the organization discriminate by race in any way with respect to:				
	udents' rights or privileges?		5a		
	Imissions policies?		5b		
	nployment of faculty or administrative staff?		5c		
	cholarships or other financial assistance?		5d		L
	lucational policies?		5e		
	se of facilities?		5f		
	hletic programs?		5g		
	her extracurricular activities?  /ou answered "Yes" to any of the above, please explain. If you need more space, use Part II.		5h		
	ou answered Tes to any of the above, please explain. If you need more space, use Fait in	——			
_					
a Do	bes the organization receive any financial aid or assistance from a governmental agency?		6a	X	
<b>h</b> Ha					
	s the organization's right to such aid ever been revoked or suspended?	L	6b		
	as the organization's right to such aid ever been revoked or suspended?  you answered "Yes" on either line 6a or line 6b, explain on Part II.		6b		
lf y			6b		
lf y Do	ou answered "Yes" on either line 6a or line 6b, explain on Part II.		6b	Х	

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

Schedule E (Form 990) 2023

# The Girls Athletic Leadership School of Denver

27-0736802 Page 2 Schedule E (Form 990) 2023 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. See instructions. Line 6 - Explanation of Government Financial Aid: The school receives grant funding from the Colorado Department of Education.

332062 10-25-23 Schedule E (Form 990) 2023

#### SCHEDULE G (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

#### **Supplemental Information Regarding Fundraising or Gaming Activities**

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

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

The Girls Athletic Leadership School

OMB No. 1545-0047

2023

Open to Public Inspection

**Employer identification number** 

of Denv	er				27-0736	802
Part I Fundraising Activities. required to complete this par	<ul> <li>Complete if the organization answert.</li> </ul>	red "Y	es" or	n Form 990, Part IV, I	ine 17. Form 990-EZ	filers are not
<ul> <li>1 Indicate whether the organization rais</li> <li>a Mail solicitations</li> <li>b X Internet and email solicitations</li> <li>c Phone solicitations</li> <li>d In-person solicitations</li> <li>2 a Did the organization have a written of key employees listed in Form 990, P</li> <li>b If "Yes," list the 10 highest paid individual compensated at least \$5,000 by the</li> </ul>	ed funds through any of the following Solicita  f Solicita g X Special  or oral agreement with any individual lart VII) or entity in connection with positions or entities (fundraisers) pursu	tion of tion of fundra (includ	non-g gover aising ding of onal fu	overnment grants nment grants events fficers, directors, trus undraising services?	X Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	fundr have con contribu	ustodv	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
Philanthropy Experts, LLC -	Luncheon and Contributions	Yes	No			
PO Box 100644, Denver, CO	Support		Х	293,447.	33,270.	260,177.
Total				293,447.	33,270.	260,177.
List all states in which the organization or licensing.	on is registered or licensed to solicit o	contrib	utions	or has been notified	it is exempt from re	

### The Girls Athletic Leadership School

Schedule G (Form 990) 2023

of Denver

27-0736802 Page 2

Pa	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 gro		· ·	<del></del>	ts greater than \$5,000.			
			(a) Event #1	<b>(b)</b> Event #2	(c) Other events None	(d) Total events (add col. (a) through			
			Luncheon			col. <b>(c)</b> )			
ā			(event type)	(event type)	(total number)				
Revenue	1	Gross receipts	96,942.			96,942.			
	2	Less: Contributions	79,453.			79,453.			
	3	Gross income (line 1 minus line 2)	17,489.			17,489.			
		·							
	4	Cash prizes							
S		Noncash prizes				_			
Direct Expenses	6	Rent/facility costs	16,990.			16,990.			
ect Ex	7	Food and beverages							
ä		Entortainment							
	9	Entertainment Other direct expenses				25,160.			
	10				1	42,150.			
		Net income summary. Subtract line 10 from li				-24,661.			
Pa	ırt I		answered "Yes" on Form	990, Part IV, line 19, o	or reported more than				
		\$15,000 on Form 990-EZ, line 6a.	T	I	<u> </u>	T			
e			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))			
Revenue				billigo/progressive billige	,	coi. (a) through coi. (c)			
Be	1	Gross revenue							
	2	Cash prizes							
nses									
Direct Expenses	3	Noncash prizes				-			
Direct	4	Rent/facility costs							
	5	Other direct expenses							
	6	Volunteer labor	Yes %  No	Yes 9	%				
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)						
			, =====================================			•			
9 Enter the state(s) in which the organization conducts gaming activities:									
a Is the organization licensed to conduct gaming activities in each of these states?									
b	lf "	No," explain:							
		ere any of the organization's gaming licenses re Yes," explain:			x year?	Yes No			

### The Girls Athletic Leadership School of Donyon

Sch	edule G (Form 990) 2023 of Denver 2	7-07	36	802	Page 3
11	Does the organization conduct gaming activities with nonmembers?			Yes	No No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed				
	to administer charitable gaming?	Г		Yes	No
13	Indicate the percentage of gaming activity conducted in:				
	a The organization's facility		13a	l	%
			13b		<del></del>
	An outside facility	L	IJU		70
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:				
	News				
	Name				
	Address				
	Address				
4	Described to the second of the state of the state of the state of the second of the se	ſ		Vaa	No
15a	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	L		Yes	NO
b	o If "Yes," enter the amount of gaming revenue received by the organization \$ and the amount of gaming revenue received by the organization	nt			
	of gaming revenue retained by the third party \$				
C	If "Yes," enter name and address of the third party:				
	Name				
	Address				
16	Gaming manager information:				
	Name				
	Gaming manager compensation \$				
	Description of services provided				
	Director/officer Employee Independent contractor				
17	Mandatory distributions:				
а	a Is the organization required under state law to make charitable distributions from the gaming proceeds to				
	retain the state gaming license?	[		Yes	L No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the	ne			
	organization's own exempt activities during the tax year \$				
Pa	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and	d Part I	II, lin	es 9, 9	9b, 10b,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.				
<u>Sc</u>	hedule G, Part I, Line 2b, List of Ten Highest Paid Fundrais	ers:			
<u>(i</u>	) Name of Fundraiser: Philanthropy Experts, LLC				
<u>(i</u>	) Address of Fundraiser: PO Box 100644, Denver, CO 80250				

### The Girls Athletic Leadership School

Schedule G	G(Form 990) of Denver	27-0736802 Page 4
Part IV	G (Form 990) of Denver Supplemental Information (continued)	<u> </u>
	(continued)	

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

**Compensation Information** 

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

**Open to Public** Attach to Form 990.

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

Department of the Treasury Internal Revenue Service Name of the organization

The Girls Athletic Leadership School of Denver

Inspection Employer identification number

27-0736802

OMB No. 1545-0047

**Questions Regarding Compensation** Part I

			Yes	No
<b>1</b> a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments  Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations    X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
	Receive a severance payment or change-of-control payment?	<u>4a</u>		_X_
	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		X
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Out			
_	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
_	contingent on the revenues of:	E		X
	The organization?	<u>5a</u> 5b		X
D	Any related organization?  If "Yes" on line 5a or 5b, describe in Part III.	30		21
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
U	contingent on the net earnings of:			
a	The organization?	6a		Х
		6b		X
J	Any related organization?  If "Yes" on line 6a or 6b, describe in Part III.			
7				
•	not described on lines 5 and 6? If "Yes," describe in Part III	7		Х
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the	<b></b>		
•	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		Х
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in	٠		
•	Regulations section 53 4958.6/c/2	٩		

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

Schedule J (Form 990) 2023

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			other deferred	other deferred benefits	(E) Total of columns (B)(i)-(D)	in column (B)
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) Carol Bowar	(i)	125,190.	0.	0.	31,873.	0.	157,063.	0.
Executive Director	(ii)		0.	0.	0.	0.		0.
	(i)							
	(ii)							
	(i)							
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	(ii)							
	(i)							
	(ii)							

# The Girls Athletic Leadership School of Denver

Schedule J (Form 990) 2023 of Denver	27-0736802	Page 3
Part III Supplemental Information		
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, ar	d 8, and for Part II. Also complete this part for any additional information	٦.

#### SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service

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

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

Attach to Form 990 or Form 990-EZ.

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

2023
Open to Public Inspection

OMB No. 1545-0047

Name of the organization

The Girls Athletic Leadership School of Denver

Employer identification number 27-0736802

Form 990, Part I, Line I

The mission of Girls Athletic Leadership Schools of Denver (GALS) is to empower students to succeed academically, lead confidently, live boldly and thrive physically.

Form 990, Part III, Line I:

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

Girls Athletic Leadership Schools of Denver empowers all students to

succeed academically, lead confidently, live boldly and thrive

physically.

Form 990, Part III, Line 4a:

GALS Denver is Colorado's only public girls school serving middle and high school students. Our broad based curriculum provides an innovative and necessary educational option which engages health and wellness as a key contributing factor in optimizing academic achievement and self-development. There is particular emphasis on the development of leadership skills (both inside and outside the classroom) to equip our students with the confidence and capability to make a positive difference in our world. Founded in 2010, GALS Middle School serves 6-8th grade students. Enrollment FYE 6/30/24 totaled 203 students. The GALS Denver High School, founded in 2014, serves 9-12th grade students. Enrollment FYE 6/30/24 totaled 93 students. The expansive educational goals of GALS Denver require that we focus our financial priorities around our classroom teachers and student support specialists. Salaries and benefits comprise 73% of the annual budget,

Name of the organization The Girls Athletic Leadership School **Employer identification number** 27-0736802 of Denver which supports a very favorable teacher to pupil ratio of 12:1. Six of our seven grade levels reached or far exceeded their reading and math targets, with details below: 6th graders were 41% over their reading growth goals and, 60% over their math growth goals 7th graders were 36% over math goals 8th graders were 90% over their math goals 9th graders were 89% over their reading goals 10th graders were 13% over their reading goals 10th and 11th graders both exceeded their math goals by 5% 96% of students say they work hard in school 93% say they will go to college 90% believe they are smart Over 80% say they have all the supports they need from teachers Over 70% say they have the mental health support they need to focus on learning Form 990, Part VI, Section B, line 11b: The 990 is reviewed by the Finance Committee, the Board and Executive Director before it is filed. Form 990, Part VI, Section B, Line 12c: Prospective board members disclose any potential conflicts of interest during the vetting process. If the board deems them significant, then board members will not be approved. Once a board member is confirmed, if a potential conflict arises, the board will discuss and vote on whether the amount in question is above a threshold, and if so, will ask the board

member to step down or withdraw from the bidding process. All board members

Schedule O (Form 990) 2023 Page **2** 

	ne Girls Athletic Leadership School f Denver	Employer identification number 27-0736802
sign conflict of	interest forms annually, and are as	ked to disclose any
conflicts.		
Form 990, Part V	II, Section B, Line 15a:	
Annually, an ad	hoc committee of the board performs a	an evaluation of the
Executive Direct	or, comparing data and outcomes with	the agreed upon
executive direct	cor's goals for that particular school	l year. The committee
shares its findi	ngs with the full board in executive	session, resulting in
the determination	on of a performance based salary leve	l or the executive
director for the	e subsequent school year.	
Form 990, Part V	/I, Section C, Line 19:	
Governing docume	ents and policies are available upon	request. Financial
statements are a	available on the School's website.	
Form 990, Part X	KII, Line 2c	
The finance comm	nittee oversees audit services and se	lection of the
independent audi	tor. This has not changed from the p	rior year.