### Form **990**

### 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.

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

2023
Open to Public

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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 Address change URBAN ACADEMY Name change 41-1977516 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 1668 MONTREAL AVENUE 651-215-9419 7,790,890. City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ Amended return 55116 ST. PAUL, MN H(a) Is this a group return Applica-tion pending F Name and address of principal officer: MONGSHER LY for subordinates? ..... Yes X No SAME AS C ABOVE \_\_Yes **H(b)** Are all subordinates included? Tax-exempt status:  $\mathbf{X}$  501(c)(3)  $\mathbf{\Box}$  501(c) ( 527 (insert no.) 4947(a)(1) or If "No," attach a list. See instructions URBANACADEMYMN.ORG H(c) Group exemption number **K** Form of organization: **X** Corporation Association Other L Year of formation: 2000 M State of legal domicile: MN Trust Part I Summary Briefly describe the organization's mission or most significant activities: INSPIRING, CHALLENGING, **Activities & Governance** ENHANCING EVERY STUDENT'S INNATE ABILITY TO SUCCEED. 2 if the organization discontinued its operations or disposed of more than 25% of its net assets. 8 3 Number of voting members of the governing body (Part VI, line 1a) 5 Number of independent voting members of the governing body (Part VI, line 1b) 4 76 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 7a **b** Net unrelated business taxable income from Form 990-T, Part I, line 11 7h **Prior Year Current Year** 8,183,605. 7,719,151. Contributions and grants (Part VIII, line 1h) 8 9,439. 0. Program service revenue (Part VIII, line 2g) 17,325. 71.739. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 9,939. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 7.790,890 8,220,308. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 0. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 14 Benefits paid to or for members (Part IX, column (A), line 4) 4,509,400. 4,527,463. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 15 16a Professional fundraising fees (Part IX, column (A), line 11e) **b** Total fundraising expenses (Part IX, column (D), line 25) 3,789,492. 3,960,294. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 8,487,757. 8,298,892. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) -78,584. -696,867. Revenue less expenses. Subtract line 18 from line 12 **Beginning of Current Year End of Year** 5 16,752,783. 16,014,647 Total assets (Part X, line 16) 14,768,238. 14,836,035 21 Total liabilities (Part X, line 26) 三年 984,545. 1,178,612 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 MONGSHER LY, EXECUTIVE DIRECTOR Here Type or print name and title Date PTIN Print/Type preparer's name Preparer's signature CATHY A. LYDON, CPA CATHY A. LYDON, CPA 05/08/25 self-employed P03217215 Paid REDPATH AND COMPANY, LLC Firm's name Firm's EIN 92-0370318 Preparer Firm's address 400 ROBERT ST. N, SUITE 1600 Use Only Phone no. (651) 426-7000ST. PAUL, MN 55101

X Yes

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

Form	n 990 (2023) URBAN ACADEMY	41-1977516	Page 2
Pa	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		X
1	Briefly describe the organization's mission:		
	OUR MISSION IS TO WORK IN PARTNERSHIP WITH URBAN PARENT	'S TO PROVIDE A	AN
	OPPORTUNITY FOR EVERY CHILD TO MEET OR EXCEED THEIR IND	IVIDUAL	
	POTENTIAL IN BASIC ACADEMIC AND LIFE SKILLS BY UTILIZIN	īG	
	RESEARCH-PROVEN METHODS IN A SAFE, STRUCTURED, AND RESE	ECTFUL	
2	Did the organization undertake any significant program services during the year which were not listed on the		
	prior Form 990 or 990-EZ?	Yes	X No
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services	?Yes	X No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services,	as measured by expenses.	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to ot	hers, the total expenses, ar	nd
	revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$ 7 , 436 , 881 • including grants of \$ 0 • ) (Re	venue \$	0.
	HONESTY, PERSONAL RESPONSIBILITY, SELF-DISCIPLINE, COOF		
	RESPECT FOR OTHERS.		
	URBAN ACADEMY PROVIDES A QUALITY EDUCATION FOR URBAN ST	UDENTS IN GRA	DES
	PREK-8. WE BELIEVE THAT EDUCATION PLAYS A CRITICAL ROL		
	CREATIVE AND RESPONSIBLE HUMAN BEINGS. CHILDREN HAVE A		
	TO LEARN. WHEN NURTURED AND TAUGHT IN AN ENVIRONMENT T		
	THEIR UNIQUE CULTURE, ABILITIES, RESILIENCY, AND EFFORT		
	THE DESIRE TO LEARN. READY AND WILLING TO BE TAUGHT, O		AND
	FLOURISH AS CREATIVE CITIZENS, ABLE TO MAKE THEIR OWN I		
	CONTRIBUTION TO SOCIETY.		
	CONTRIBUTION TO BOOTETT		
4b	(Code:) (Expenses \$ including grants of \$) (Re	venue \$	,
	/ Code: / Expenses v / Industry grand of v		
_			
4c	(Code:) (Expenses \$	venue \$	
	-		
4d			
-14	Other program services (Describe on Schedule O.)		
	Other program services (Describe on Schedule O.)  (Expenses \$ including grants of \$ ) (Revenue \$  Total program service expenses 7 , 436 , 881.	)	

# Form 990 (2023) URBAN ACADEMY 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)?		х	
_	If "Yes," complete Schedule A	1		Х
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2		
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			Х
	public office? If "Yes," complete Schedule C, Part I	3		
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	١.		Х
_	during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_		Х
6	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		Λ
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	_		Х
7	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		- 21
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		Х
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Λ
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			Х
•	Schedule D, Part III	8		Λ
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?	_		Х
40	If "Yes," complete Schedule D, Part IV	9		Λ
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	40		Х
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10		Λ
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,		х	
	Part VI	11a	-	
D	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	446		Х
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Λ
C	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	110		Х
ч	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII  Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in	11c		- 21
u		11d	х	
_	Part X, line 16? If "Yes," complete Schedule D, Part IX  Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	110		
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
124	, ,	12a	х	
h	Schedule D, Parts XI and XII  Was the organization included in consolidated, independent audited financial statements for the tax year?	124		
b	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Х	
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	u		
~	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. 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		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х

Form 990 (2023) URBAN ACADEMY
Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
		24a		x
h	Schedule K. If "No," go to line 25a	24b		
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	240		
C		040		
	any tax-exempt bonds?	24c		
	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			x
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			,,,
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		Х
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		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," <i>complete</i>			
	Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	<u> </u>		
00	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	<del></del>		
<b>5</b> 7		34		x
35.0	Part V, line 1  Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	33a		<u> </u>
b		256		
26	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2  Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	35b		
36		36		x
27	If "Yes," complete Schedule R, Part V, line 2  Did the organization conduct more than 5% of its activities through an entity that is not a related organization	30		122
37		0.7		x
20	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		<u> </u>
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	00	Х	
Par	Note: All Form 990 filers are required to complete Schedule O  † V   Statements Regarding Other IRS Filings and Tax Compliance	38	Λ	<u> </u>
ı aı				
	Check if Schedule O contains a response or note to any line in this Part V			<u> </u>
_			Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 9			
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		77	
	(gambling) winnings to prize winners?	1c	Х	

Form 990 (2023) URBAN ACADEMY

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued) 41-1977516 Page **5** Yes No

			_	162	140				
<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 76							
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns	ns?	2b 3a	Х	Х				
	a Did the organization have unrelated business gross income of \$1,000 or more during the year?								
	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				,,				
	financial account in a foreign country (such as a bank account, securities account, or other financial a	ccount)?	4a		X				
b	If "Yes," enter the name of the foreign country	(FDAD)							
E-	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A		Ea		Х				
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	2tion?	5a 5b		X				
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction that it was or is a party to a prohibited tax shelter transaction file Form 8996 T2		5c						
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		30						
va	and a state of the		6a		х				
b	If "Yes," did the organization include with every solicitation an express statement that such contributi	ons or gifts	- Ju						
~	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 provided to the payor?	7a		х				
b			7b						
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was								
	to file Form 8282?	,	7с		Х				
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 or	ontract?	7e		X				
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit control	act?	7f		X				
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo	rm 8899 as required?	7g						
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		7h						
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	by the							
_	sponsoring organization have excess business holdings at any time during the year?		8						
9	Sponsoring organizations maintaining donor advised funds.		0-						
a			9a						
b 10	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter:		9b						
	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:	100							
	Gross income from members or shareholders	11a							
	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	1041?	12a						
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b							
13	Section 501(c)(29) qualified nonprofit health insurance issuers.								
а	Is the organization licensed to issue qualified health plans in more than one state?		13a						
	<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	l l							
	organization is licensed to issue qualified health plans	13b	-						
	Enter the amount of reserves on hand	13c	4.4		₩				
			14a		X				
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedules the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune		14b						
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune excess parachute payment(s) during the year?		15		х				
	If "Yes," see the instructions and file Form 4720, Schedule N.		13						
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	income?	16		Х				
	If "Yes," complete Form 4720, Schedule O.	income?	10						
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any ac	tivities							
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		17						
	If "Yes," complete Form 6069.								
				200					

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Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management No Yes 8 **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. 5 **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 X officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 of officers, directors, trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 6 Х 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? Х 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or 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 **b** Each committee with authority to act on behalf of the governing body? 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? Х 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? Х The organization's CEO, Executive Director, or top management official 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 X 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 MN 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. Own website X Upon request 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

55116

THE ORGANIZATION - 651-215-9419 1668 MONTREAL AVENUE, ST PAUL, MN Form 990 (2023) URBAN ACADEMY 41-1977516 Page 7

### 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.

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

- 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.

(A) Name and title	(B) Average hours per week	box	Position (do not check more than one box, unless person is both an officer and a director/trustee)				an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	In stitutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(1) MONGSHER LY	40.00							000 055	•	
EXECUTIVE DIRECTOR	40.00		_	Х				208,057.	0.	0.
(2) RONSOIE XIONG	40.00							02.000		
TEACHER MEMBER	40.00	Х	_			_		83,282.	0.	0.
(3) CHAO YANG	40.00							F0 050		
TEACHER MEMBER	40.00	Х						79,859.	0.	0.
(4) YUYIN LIAO	40.00	Х						77 266	0.	_
TEACHER MEMBER (5) MELISSA JENSON	1.00	A						77,266.	0.	0.
BOARD CHAIR	1.00	Х		х				0.	0.	0.
(6) FONG LOR	1.00	77							0.	<del>-</del>
VICE CHAIR	1.00	х		Х				0.	0.	0.
(7) DR. TAMARA MATTISON	1.00	-25						•	•	•
FINANCE CHAIR		х		x				0.	0.	0.
(8) CALEY LONG	1.00							<u> </u>	<u> </u>	
SECRETARY		Х		х				0.	0.	0.
(9) NANCY SMITH	1.00									
BOARD MEMBER		Х						0.	0.	0.

Part VII Section A. Officers, Directors, Trus	tees, Key Emp	oloye	es,	and	l Hig	<u>jhe</u> s	t C	ompensated Employee	s (continued)	
(A)	(B)					(D)	(E)	(F)		
Name and title	Average hours per week	box,	(do not check more that box, unless person is b officer and a director/to		ss person is both an			Reportable compensation from	Reportable compensation from related	Estimated amount of 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)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
1b Subtotal	1							448,464.	0.	0.
c Total from continuation sheets to Part VI								0.	0.	0.
d Total (add lines 1b and 1c)								448,464.	0.	0.
2 Total number of individuals (including but n	ot limited to th	ose	liste	d ah	ove	) wh	o re	ceived more than \$100	000 of reportable	<u> </u>

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

Per No

3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

5 X

#### **Section B. Independent Contractors**

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(B) (C)
ress Description of services Compensation
STUDENT
STINGS, MN 55033 TRANSPORTATION 560,172.
STUDENT FOOD
HTS, MN 55421 SERVICES 447,326.
UNIVERSITY AVE ACCOUNTING, SPECIAL
EDUCATION SERVICES 190,533.
SPEECH/LANGUAGE
LLE, MN 55044 SERVICES 110,863.
PARAPROFESSIONAL &
7, MN 55125 JANITORIAL SERVICES 105,420.
ding but not limited to those listed above) who received more than
n 5
STUDENT FOOD SHTS, MN 55421 SERVICES 447,3 UNIVERSITY AVE ACCOUNTING, SPECIAL EDUCATION SERVICES 190,5 SPEECH/LANGUAGE SERVICES 110,8 PARAPROFESSIONAL & PARAPROFESSIONAL & JANITORIAL SERVICES 105,4 ding but not limited to those listed above) who received more than

41-1977516

Form 990 (2023) URBAN A
Part VIII Statement of Revenue

			Check if Schedule O	onta	ains a r	esponse	or note to any lin	ne in this Part VIII			
						•	•	(A)	(B)	(C)	(D)
								Total revenue	Related or exempt function revenue	Unrelated	Revenue excluded from tax under
									l unction revenue	business revenue	sections 512 - 514
ωω	1	l a	Federated campaigns			1a					
ant			Membership dues		ĺ	1b					
يَ وَا			Fundraising events			1c					
ffs, r A			Related organizations			1d					
Contributions, Gifts, Grants and Other Similar Amounts			Government grants (contri		ľ		644,384.				
Sir			All other contributions, gifts,		ı	10 1	, ,				
et ju		•	similar amounts not included			1f	74,767.				
흡		g	Noncash contributions included in I			1g \$	,	-			
Νg		-				<b>19</b>  Ψ		7,719,151.			
<u> </u>			Total: Add lines la 11				Business Code	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
	2	2 a									
Şi.	_	b.									
iue iue		c									
Z N		d									
gra Re		e	-								
Program Service Revenue			All other program service i	rovor	nua						
_			Total. Add lines 2a-2f								
	3										
		•	Investment income (including dividends, interest other similar amounts)					71,739.			71,739.
	4		Income from investment o					7277331			7 2 7 7 3 3 4
	5		Royalties								
	_	•	noyanies			Real	(ii) Personal				
	6	` a	Gross rents	6a	(1)		(.,,	-			
			Less: rental expenses	6b				-			
			Rental income or (loss)	6c				-			
			Net rental income or (loss)								
	7		Gross amount from sales of			ecurities	(ii) Other				
	•	u	assets other than inventory	7a			(-,	-			
		h	Less: cost or other basis	74				-			
Ð			and sales expenses	7b							
her Revenue		_		7c				-			
ě			Net gain or (loss)		•						
P.	g		Gross income from fundraisir								
Ğ.	_	,	including \$	-	-						
			contributions reported on								
			Part IV, line 18				,				
		b	Less: direct expenses				1				
			Net income or (loss) from								
	g		Gross income from gamin								
	_	-	Part IV, line 19	_							
		b	Less: direct expenses				1				
			Net income or (loss) from								
	10		Gross sales of inventory, le								
		_	and allowances				a				
		b	Less: cost of goods sold				1				
			Net income or (loss) from								
		_	<u>(</u> )			<u> </u>	Business Code				
snc	11	l a									
nec		b									
Miscellaneous Revenue		С									
isc B		d	All other revenue								
2			Total. Add lines 11a-11d								
	12		Total revenue. See instruction					7,790,890.	0.	0.	71,739.

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

Secti	on 501(c)(3) and 501(c)(4) organizations must comp	lete all columns. All othe	er organizations must con	nplete column (A).	
	Check if Schedule O contains a respon			p - 2	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations			g	
•	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	432,088.	233,168.	198,920.	
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	3,180,487.	2,874,064.	306,423.	
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	301,458.	260,713.	40,745.	
9	Other employee benefits	334,027.	296,242.	37,785.	
10	Payroll taxes	279,403.	235,611.	43,792.	
11	Fees for services (nonemployees):				
а	Management				
b	Legal				
	Accounting				
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,	640,674.	422,126.	218,548.	
40	column (A), amount, list line 11g expenses on Sch 0.)	040,074.	422,120.	210,340.	
12	Advertising and promotion	267,061.	221,020.	46,041.	
13 14	Office expenses	104,760.	61,489.	43,271.	
15	Royalties	101,700.	01,103.	45,271.	
16	Occupancy	356,292.	295,438.	60,854.	
17	Travel	33,612.	18,831.	14,781.	
18	Payments of travel or entertainment expenses	00,011			
.0	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	480,345.	480,345.		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	543,807.	543,200.	607.	
23	Insurance				
24	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25. column (A).				
	amount, list line 24e expenses on Schedule 0.)				
а	TRANSPORTATION	624,937.	624,937.		
b	FOOD	570,069.	570,069.		
С	INSTRUCTION MATERIALS	285,589.	285,589.		
d		F2 140	14 020	20 100	
	All other expenses	53,148.	14,039. 7,436,881.	39,109.	0
<u>25</u>	Total functional expenses. Add lines 1 through 24e	8,487,757.	/,430,881.	Ι, υου, δ/δ.	0.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				
	11 10110WING 30F 30-2 (M30 300-720)				

Pal	rt X	Balance Sneet					
		Check if Schedule O contains a response or note	e to any	y line in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			225,008.	1	244,774.
	2	Savings and temporary cash investments			3,268,804.	2	3,499,407.
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net		1,205,466.	4	540,716.	
	5	Loans and other receivables from any current or					
		trustee, key employee, creator or founder, substa	ontributor, or 35%				
		controlled entity or family member of any of thes	e perso	ons		5	
	6	Loans and other receivables from other disqualif					
		under section 4958(f)(1)), and persons described	in sect	tion 4958(c)(3)(B)		6	
ι	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
ğ	9	Prepaid expenses and deferred charges			6,304.	9	9,197.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D Less: accumulated depreciation	10a	1,160,733.			
	b			474,197.	10c	493,738.	
	11	Investments - publicly traded securities		11			
	12	Investments - other securities. See Part IV, line 1		12			
	13	Investments - program-related. See Part IV, line 1		13			
	14	Intangible assets	11 550 004	14	11 006 015		
	15	Other assets. See Part IV, line 11	11,573,004.	15	11,226,815.		
	16	Total assets. Add lines 1 through 15 (must equa			16,752,783.	16	16,014,647.
	17	Accounts payable and accrued expenses	577,611.	17	1,021,853.		
	18	Grants payable			18		
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities		of Coloradula D		20	
	21 22	Escrow or custodial account liability. Complete F				21	
Liabilities	22	Loans and other payables to any current or form trustee, key employee, creator or founder, substantial					
Ĭ		controlled entity or family member of any of thes				22	
Lia	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelated		· · · · · · · · · · · · · · · · · · ·		24	
	25	Other liabilities (including federal income tax, pay	•				
		parties, and other liabilities not included on lines					
		of Schodulo D	•		14,190,627.	25	13,814,182.
	26				14,768,238.	26	14,836,035.
		Organizations that follow FASB ASC 958, che					
es		and complete lines 27, 28, 32, and 33.		_			
anc	27	Net assets without donor restrictions				27	
Bal	28	Net assets with donor restrictions				28	
пd		Organizations that do not follow FASB ASC 95					
Ţ		and complete lines 29 through 33.					
S	29	Capital stock or trust principal, or current funds			927,423.	29	684,874.
set	30	Paid-in or capital surplus, or land, building, or eq	uipmer	nt fund	1,057,122.	30	493,738.
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated inc			0.	31	0.
<b>Se</b>	32	Total net assets or fund balances		1,984,545.	32	1,178,612.	
	33	Total liabilities and net assets/fund balances			16,752,783.	33	16,014,647.

Form **990** (2023)

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Pa	rt XI │ Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	7,79		
2	Total expenses (must equal Part IX, column (A), line 25)	2	8,48		
3	Revenue less expenses. Subtract line 2 from line 1	3	-69	6,8	<u>67.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,98	4,5	<u>45.</u>
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9	-10	9,0	66.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	1,17	8,6	12.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	_X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	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		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits	<u></u>			
			Form	990	(2023)

#### **SCHEDULE A**

(Form 990)

Total

Department of the Treasury Internal Revenue Service

### **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.

Attach to Form 990 or Form 990-EZ.

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

**2023** 

OMB No. 1545-0047

Open to Public Inspection

**Employer identification number** Name of the organization URBAN ACADEMY 41-1977516 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))

Schedule A (Form 990) 2023 URBAN ACADEMY 41-1977516 Page 2

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

٠. د	(Complete only if you checked fails to qualify under the tests	d the box on line 5	, 7, or 8 of Part I o	or if the organization			•
Sec	ction A. Public Support	ilsted below, plea	se complete Part				
	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Gifts, grants, contributions, and	(4) 2010	(6) 2020	(0) 2021	(a) EGEE	(6) 2020	(i) rotar
·	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.						
	ction B. Total Support			•	•	•	•
Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7	Amounts from line 4						
	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	
13	First 5 years. If the Form 990 is for the	ne organization's fi	rst, second, third,	fourth, or fifth tax	year as a section 5	601(c)(3)	
	organization, check this box and stop						
Se	ction C. Computation of Publi	c Support Per	centage				
14	Public support percentage for 2023 (I		•	* * * *		14	9
15	Public support percentage from 2022					15	9
16a	33 1/3% support test - 2023. If the	organization did no	ot check the box o	n line 13, and line	14 is 33 1/3% or m	nore, check this bo	x and
	<b>stop here.</b> The organization qualifies		~				
k	33 1/3% support test - 2022. If the	organization did no	ot check a box on	line 13 or 16a, and	d line 15 is 33 1/3%	or more, check th	is box
	and stop here. The organization qual	ifies as a publicly	supported organiz	ation			L
17a	10% -facts-and-circumstances test	- 2023. If the org	ganization did not	check a box on lin	e 13, 16a, or 16b,	and line 14 is 10%	or more,
	and if the organization meets the fact	s-and-circumstanc	es test, check this	box and stop he	<b>ere.</b> Explain in Part	VI how the organiz	zation
	meets the facts-and-circumstances te	st. The organization	on qualifies as a pu	ublicly supported o	organization		L
k	10% -facts-and-circumstances test	_					10% or
	more, and if the organization meets the						_
	organization meets the facts-and-circu	umstances test. Th	ne organization qu	alifies as a publich	v supported organi	zation	

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

## Schedule A (Form 990) 2023 URBAN ACADEMY Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

Sec	etion A. Public Support	siow, picase comp	oloto i dit ii.j				
Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, 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 business under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
		(a) 2013	(6) 2020	(6) 2021	(d) ZOZZ	(6) 2020	(i) rotai
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b  Net income from unrelated business activities not included on line 10b, whether or not the business is						
12	regularly carried on  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the	e organization's fi	rst, second, third,	fourth, or fifth tax	year as a section s	501(c)(3) organization	on,
	check this box and stop here						
Sec	ction C. Computation of Publi	c Support Per	rcentage				
15	Public support percentage for 2023 (li	ne 8, column (f), c	divided by line 13,	column (f))		15	%
	Public support percentage from 2022					16	%
Sec	ction D. Computation of Inves	tment Income	e Percentage				
17	Investment income percentage for 20	23 (line 10c, colur	mn (f), divided by I	ine 13, column (f))		17	%
18	Investment income percentage from 2	<b>2022</b> Schedule A,	Part III, line 17			18	%
19a	33 1/3% support tests - 2023. If the	organization did r	not check the box	on line 14, and line	e 15 is more than 3	33 1/3%, and line 1	7 is not
	more than 33 1/3%, check this box ar	nd <b>stop here.</b> The	organization qual	ifies as a publicly s	supported organiza	ation	
b	<b>33 1/3% support tests - 2022.</b> If the line 18 is not more than 33 1/3%, che	•			•	•	
20	Private foundation. If the organization						

#### 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.)

Yes No  1 2 3a 3b 3c 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c			
2 3a 3b 3c 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b		Yes	No
2 3a 3b 3c 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b			
2 3a 3b 3c 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b	1		
3a  3b  3c  4a  4b  4c  5a  5b  5c  6  7  8  9a  9b  9c			
3b 3c 4a 4b 4b 5a 5b 5c 6 7 8 9a 9b	2		
3c	3a		
3c	2h		
4a 4b 4c 5a 5b 5c 6 7 8 9a 9b	30		
4b 4c 5a 5b 5c 6 7 8 9a 9b	Зс		
4c 5a 5b 5c 6 7 8 9a 9b	4a		
4c 5a 5b 5c 6 7 8 9a 9b			
5a 5b 5c 6 7 8 9a 9b	4b		
5a 5b 5c 6 7 8 9a 9b			
5b 5c 6 7 8 9a 9b	4c		
5b 5c 6 7 8 9a 9b			
5c  6  7  8  9a  9b  9c	5a		
5c  6  7  8  9a  9b  9c			
6 7 8 9a 9b			
7 8 9a 9b	<b>5</b> C		
9a 9b 9c	6		
9a 9b 9c			
9a 9b 9c	7		
9a 9b 9c	8		
9b 9c			
9c	9a		
9c			
	9b		
	9c		
10a			
	10a		
10b   ule A (Form 990) 2023		n 990\	5053

Par	t IV   Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
	A family member of a person described on line 11a above?	11b		
	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		
Sect	tion B. Type I Supporting Organizations	, 110		
	<u>,</u>		Yes	No
4	Did the severing body, members of the severing body, officers esting in their official conseits, or membership of one or		162	NO
	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		
	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		
Sect	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		
Sect	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		
	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 <b>Part VI</b> the role the organization's			
	· · · · · · · · · · · · · · · · · · ·	3		
Sect	supported organizations played in this regard. tion E. Type III Functionally Integrated Supporting Organizations			
	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions	١.		
а	The organization satisfied the Activities Test. Complete line 2 below.	,-		
b	The organization is the parent of each of its supported organizations. <i>Complete</i> <b>line 3</b> <i>below.</i>			
c	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in	etruction	ic)	
	Activities Test. Answer lines 2a and 2b below.	Struction	Yes	No
	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		100	110
	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		
	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,	u		
	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	2b		
	these activities but for the organization's involvement.  Parent of Supported Organizations. Answer lines 3a and 3b below.	20		
	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 <b>Part VI.</b>	3a		
	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	Ja		
		3b		
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	JU		

Pai	t V Type III Non-Functionally Integrated 509(a)(3) Support	ing Organ	izations	
1	Check here if the organization satisfied the Integral Part Test as a qualify	ing trust on I	Nov. 20, 1970 ( explain in l	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mu		·	•
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
_5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
_7_	Other expenses (see instructions)	7		
8_	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
_3_	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
_5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
_6_	Multiply line 5 by 0.035.	6		
_7_	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-function	ally integrate	ed Type III supporting orga	nization (see

Schedule A (Form 990) 2023

instructions).

	t V Type III Non-Functionally Integrated 509	(a)(2) Supporting Orga	nizationa / w		1-19//516 Page 7
		(a)(3) Supporting Orga	nizations (continu	ued)	Oursent Value
	ion D - Distributions			_	Current Year
1	Amounts paid to supported organizations to accomplish exer	<u> </u>		1	
2	Amounts paid to perform activity that directly furthers exemp organizations, in excess of income from activity	or purposes or supported		2	
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	,	3	
<del></del>	Amounts paid to acquire exempt-use assets	es or supported organizations	<u> </u>	4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovido dotaile in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.	Ovide details iii i dit vi)		6	
7	Total annual distributions. Add lines 1 through 6.			7	
<del>.</del> 8	Distributions to attentive supported organizations to which the	ne organization is responsive		<u> </u>	
Ū	(provide details in <b>Part VI</b> ). See instructions.	to organization to respondive		8	
9	Distributable amount for 2023 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2023	าร	(iii) 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				
С	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>j_</u>	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2023 from Section D,				
	line 7: \$				
a	Applied to underdistributions of prior years				
b	Applied to 2023 distributable amount				
С	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				
d	Excess from 2022				

Schedule A (Form 990) 2023

e Excess from 2023

#### **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

URBAN ACADEMY

**Employer identification number** 41-1977516

Par	t I Organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, lin.		Similar Funds	or Accour	nts. Complete if the
	organization answered Tes Sitt Offi 550,1 art iv, iiii	(a) Donor advis	ed funds	<b>(b)</b> Fur	nds 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		eld in donor advis	ed funds	
	are the organization's property, subject to the organization's	~			Yes No
6	Did the organization inform all grantees, donors, and donor a				
	for charitable purposes and not for the benefit of the donor or				
	impermissible private benefit?				
Par	t II Conservation Easements. Complete if the org	ganization answered "Ye	es" on Form 990, F	Part IV, line 7	
1	Purpose(s) of conservation easements held by the organization	on (check all that apply)			
	Preservation of land for public use (for example, recreated	tion or education)	Preservation of	a historically	important land area
	Protection of natural habitat		Preservation of	a certified hi	storic structure
	Preservation of open space				
2	Complete lines 2a through 2d if the organization held a qualif	fied conservation contrib	oution in the form	of a conserva	
	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 2	2a	2c	
d	Number of conservation easements included on line 2c acqui				
	on a historic structure listed in the National Register				
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or	terminated by the	organization	during the tax
	year				
4	Number of states where property subject to conservation eas				
5	Does the organization have a written policy regarding the per				
	violations, and enforcement of the conservation easements it				Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, a	nd enforcing cons	ervation ease	ements during the year
_	<del></del>				
7	Amount of expenses incurred in monitoring, inspecting, hand	iling of violations, and e	nforcing conservat	tion easemen	its during the year
•	Door and a company time and a co		ftion 170/h	\(4\(\D\(;\	
8	Does each conservation easement reported on line 2d above				□ vaa □ Na
•	and section 170(h)(4)(B)(ii)?				Yes No
9	In Part XIII, describe how the organization reports conservation				
	balance sheet, and include, if applicable, the text of the footn	note to the organization	s financiai stateme	ents that desc	cribes the
Par	organization's accounting for conservation easements.  † III Organizations Maintaining Collections of	Art. Historical Tre	easures, or Ot	her Simila	r Assets.
	Complete if the organization answered "Yes" on Form	-	,		
1a	If the organization elected, as permitted under FASB ASC 95		venue statement a	nd balance sl	heet works
	of art, historical treasures, or other similar assets held for pub	•			
	service, provide in Part XIII the text of the footnote to its finan	•	•		•
b	If the organization elected, as permitted under FASB ASC 95				t works of
	art, historical treasures, or other similar assets held for public				
	provide the following amounts relating to these items.				
	(i) Revenue included on Form 990, Part VIII, line 1				\$
					\$
2	If the organization received or held works of art, historical treat			gain, provide	 e
	the following amounts required to be reported under FASB A			- •	
а	Revenue included on Form 990, Part VIII, line 1				\$
b	Assets included in Form 990, Part X				\$

Sche	dule D (Form 990) 2023 URBAN A	CADEMY					4	11-19	7751	6 р	<sub>age</sub> 2
Pai	t III Organizations Maintaining C		t, Hist	orical Tre	asures, or	Other	Similar	Assets	(contin	nued)	ugo
3	Using the organization's acquisition, accessi								(		
	collection items (check all that apply).	,	•	•	Ü	J					
а	Public exhibition	c	ı 🗆	Loan or excl	nange progra	m					
b	Scholarly research	-			iai.igo pi ogia						
c	Preservation for future generations	•	, <u> </u>								
4	Provide a description of the organization's co	ollections and explain	n how th	ev further th	e organizatio	n's evemr	nt nurnos	e in Part	XIII		
5	During the year, did the organization solicit of							oc iii i ait.	ZIII.		
J	to be sold to raise funds rather than to be m								Yes		No
Pai	t IV Escrow and Custodial Arran										
	reported an amount on Form 990, Pa			organization	anoworda	00 01110	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		10 0, 01		
1a	Is the organization an agent, trustee, custod	ian, or other intermed	diary for	contribution	s or other as	sets not in	cluded				
	on Form 990, Part X?								Yes		No
h	If "Yes," explain the arrangement in Part XIII										
	Too, explain the arrangement in rate xiii	and complete the lo	nowing (	abio.					Amoun	t	
С	Beginning balance						1c				
							1d				
	Additions during the year						1e				
e	Distributions during the year										
f O-	Ending balance								Yes	$\overline{}$	7 N/2
	Did the organization include an amount on F					-	//		_ Yes		∐ No
Pai	If "Yes," explain the arrangement in Part XIII.  To Complete in the interval of the complete in the complete i										
ı uı	Zildowillent i dildo Complete i	(a) Current year		Prior year	(c) Two year		1) Three v	ears back	(e) Four	· voare	hack
	5	(a) Current year	(6)	Tioi yeai	(C) TWO year	S Dack (C	<b>и)</b> ППес у	cais back	( <b>e</b> ) i oui	years	Dack
	Beginning of year balance										
b	Contributions										
С	Net investment earnings, gains, and losses										
d	Grants or scholarships										
е	Other expenditures for facilities										
	and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the cur	•	e (line 1	g, column (a)	) held as:						
а	Board designated or quasi-endowment		%								
b	Permanent endowment	%									
С	Term endowment	_%									
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.									
3а	Are there endowment funds not in the posse	ession of the organiza	ation tha	t are held an	d administer	ed for the			1		
	organization by:									Yes	No
	(i) Unrelated organizations?								3a(i)		
	(ii) Related organizations?								3a(ii)		
b	If "Yes" on line 3a(ii), are the related organization	ations listed as requir	ed on S	chedule R?					3b		
4	Describe in Part XIII the intended uses of the		wment f	unds.							
Pai	t VI Land, Buildings, and Equipm	nent									
	Complete if the organization answere	d "Yes" on Form 990	), Part I\	/, line 11a. S	ee Form 990,	Part X, lir	ne 10.				
	Description of property	(a) Cost or o	ther	(b) Cost	or other	(c) Acc	cumulate	d	(d) Boo	k valu	е
		basis (investr	ment)	basis (	other)	depr	eciation				
1a	Land										
	Buildings										
	Leasehold improvements			47	0,522.	1:	95,64	15.	27	4,8	77.
d	Equipment			46	8,947.	3	64,77	77.	10	4,1	70.
					1 0 5 4		^ <u></u>		4 4	4 6	^ 4

221,264.

106,573. 114,691. 493,738.

Schedule D (Form 990) 2023

e Other.

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))

Schedule D (Form 990) 2023 URBAN ACADE	MY	41	-1977516 Page <b>3</b>
Part VII Investments - Other Securities			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11b. See Form 990, Part X, line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	d-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"			
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	d-of-year market value
<u>(1)</u>			
(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			
Complete if the organization answered "Yes"		11d. See Form 990, Part X, line 15.	
	Description		(b) Book value
(1) DEFERRED OUTFLOWS OF RESO			2,095,171.
(2) RIGHT OF USE LEASED ASSET			8,820,439.
(3) CONSTRUCTION IN PROGRESS			311,205.
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			11 226 015
Total. (Column (b) must equal Form 990, Part X, line 15, cc Part X Other Liabilities	ol. (B))		11,226,815.
Complete if the organization answered "Yes"	on Form 990 Part IV line	11e or 11f See Form 990 Part Y line 25	
(a) Description of lightity.	OITT OITH 990, T AITTV, IIIIe	The of Thi. See Form 930, Fait A, line 23	(b) Book value
1. (7			(b) DOOK value
(1) Federal income taxes (2) PENSION LIABILITY			3,960,163.
THE PROPERTY OF THE PROPERTY O	RCES -		3,300,103.
DELIGION	TOED -		383,687.
			9,470,332.
			J,=10,334•
<u>(6)</u>			
(©)			

Total. (Column (b) must equal Form 990, Part X, line 25, col. (B)) 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

13,814,182.

(9)

	edule D (Form 990) 2023 URBAN ACADEMY				L977516 Page
Pai	T XI Reconciliation of Revenue per Audited Financial Stater		Revenue per Re	turn	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 1	12a.		Ι	7 001 400
1				1	7,821,432.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	اما			
a	Net unrealized gains (losses) on investments			-	
b	Donated services and use of facilities	1 1		-	
C	Recoveries of prior year grants		30,542.	-	
d	Other (Describe in Part XIII.)	•	·	-	30,542
_	Add lines 2a through 2d			2e 3	7,790,890
3	Subtract line 2e from line 1			3	1,130,030
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	امدا			
a	Investment expenses not included on Form 990, Part VIII, line 7b			-	
b	Other (Describe in Part XIII.)			1	0
C	Add lines 4a and 4b			4c 5	7,790,890
Pai	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)  rt XII   Reconciliation of Expenses per Audited Financial State	ments With	Expenses per l		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 1		. Expended per .	iotaii	•
_				1	8,627,365
1 2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			-	0,021,505
	· · · · · ·	2a			
a	Donated services and use of facilities			-	
b	Prior year adjustments Other Jacob			-	
	Other losses Other (Describe in Part XIII.)	1 1	139,608.	-	
	Add lines 2a through 2d			2e	139,608.
3	Subtract line 2e from line 1			3	8,487,757
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				0,10,,,0,
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
	Other (Describe in Part XIII.)			-	
	Add lines <b>4a</b> and <b>4b</b>			4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990. Part I. line 18.)			5	8,487,757
	rt XIII Supplemental Information			, • ,	0 / 20 / / / 0 / /
	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; P	Part IV. lines 1b	and 2b: Part V. line 4	l: Part X	(, line 2: Part XI.
	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any a			i, i ait i	, 1110 2, 1 411 711,
PAF	RT X, LINE 2:				
	·				
A :	TAX EXPENSE OR BENEFIT FROM AN UNCERTAIN	INCOME '	TAX POSITIO	N (	INCLUDING
TAX	K-EXEMPT STATUS) MAY BE RECOGNIZED ONLY W	HEN IT	IS MORE LIK	ELY	THAN NOT
TH2	AT THE POSITION WILL BE SUSTAINED UPON EX	AMINATI	ON BY TAXIN	IG .	
AU'	THORITIES. MANAGEMENT BELIEVES THE SCHOO	L HAS N	O UNCERTAIN	INC	COME TAX
POS	SITIONS THAT WOULD RESULT IN AN ACCRUAL,	EXPENSE	OR BENEFIT	' UNI	DER THE
MOI	RE LIKELY THAN NOT STANDARD.				
<b>-</b> -	OR W. L. T. T. O.				
PAF	RT XI, LINE 2D - OTHER ADJUSTMENTS:				

108.

30,434.

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CHANGE IN TRA

#### **SCHEDULE E** (Form 990)

Department of the Treasury

Part I

#### **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.

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization Go to www.irs.gov/Form990 for the latest information.

Employer identification number URBAN ACADEMY 41-1977516

1 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? 2 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? 3 Has the organization publicized its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? 3 Has the organization publicized its racially nondiscriminatory policy on its primary publicly accessible internet homepage, or through newspaper or broadcast media during the period of solicitation for students, or during the registration pried if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please officially in the period of solicitation for students, or during the registration pried if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain. If you need more space, use Part II.  4 Does the organization maintain the following?  a Records indicating the racial composition of the student body, faculty, and administrative staff?  4 Describe organization maintain the following?  a Records documenting that scholarships and other financial assistance written communications to the public dealing with student admissions, programs, and scholarships?  4 Copies of all material used by the organization or on its behalf to solicit contributions?  If you answered "No" to any of the above, please explain. If you need more space, use Part II.  5 Does the organization functions assistance?  5 C Employment of faculty or administrative staff?  5 Describe programs?  6 Does the organiz	га				
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A Does the organization maintain the following?  a Records indicating the racial composition of the student body, faculty, and administrative staff?  b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?  c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?  d Copies of all material used by the organization or on its behalf to solicit contributions?  If you answered "No" to any of the above, please explain. If you need more space, use Part II.  5 Does the organization discriminate by race in any way with respect to:  a Students' rights or privileges?  5 Admissions policies?  c Employment of faculty or administrative staff?  d Scholarships or other financial assistance?  Educational policies?  f Use of facilities?  g Athletic programs?  h Other extracurricular activities?  If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.  6a Does the organization receive any financial aid or assistance from a governmental agency?  b Has the organization receive any financial aid or assistance from a governmental agency?  b Has the organization receive any financial aid or assistance from a governmental agency?  b Has the organization receive any financial aid or assistance from a governmental agency?  b Has the organization or entity that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75.50, 1975-2 C.B. 587, as modified by Rev. Proc. 2019-22, 2019-22 I.R.B. 1260, covering					
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If you answered "Yes" on either line 6a or line 6b, explain on Part II.  7 Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, as modified by Rev. Proc. 2019-22, 2019-22 I.R.B. 1260, covering	b	Has the organization's right to such aid ever been revoked or suspended?	6b		X
4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, as modified by Rev. Proc. 2019-22, 2019-22 I.R.B. 1260, covering					
_ V	7	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through			
racial nondiscrimination? If "No," explain on Part II		4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, as modified by Rev. Proc. 2019-22, 2019-22 I.R.B. 1260, covering			
		racial nondiscrimination? If "No," explain on Part II	7	X	

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

Schedule E (Form 990) 2023

#### 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.

Attach to Form 990.

2023

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Department of the Treasury

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

URBAN ACADEMY

Employer identification number 41-1977516

**Questions Regarding Compensation** Yes No 1a 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 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 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. X Compensation committee Written employment contract X Compensation survey or study Independent compensation consultant Form 990 of other organizations X Approval by the board or compensation committee 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: X a Receive a severance payment or change-of-control payment? 4a Х **b** Participate in or receive payment from a supplemental nonqualified retirement plan? 4b X c Participate in or receive payment from an equity-based compensation arrangement? 4c If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation 5 contingent on the revenues of: Х a The organization? 5a Х Any related organization? If "Yes" on line 5a or 5b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: X a The organization? 6a X b Any related organization? 6b If "Yes" on line 6a or 6b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III X 7 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III 8 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

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

Schedule J (Form 990) 2023

<u>Schedule</u> J (Form 990) 2023 URBAN ACADEMY 41-1977516 Page 2

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	I-2 and/or 1099-MISo compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable 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) MONGSHER LY	(i)	208,057.	0.	0.	0.	0.		0.
EXECUTIVE DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
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	(i)							
	(ii)							
	(i)							
	(ii)							

Schedule J (Form 990) 2023	URBAN ACADEMY	41-1977516	Page <b>3</b>
Part III Supplemental Informa	tion		
Provide the information, explanat	on, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7,	and 8, and for Part II. Also complete this part for any additional information	n.

#### **SCHEDULE 0** (Form 990)

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.

OMB No. 1545-0047 Inspection

Department of the Treasury Internal Revenue Service Name of the organization

URBAN ACADEMY

**Employer identification number** 41-1977516

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
COMMUNITY.
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:
URBAN ACADEMY BELIEVES IN A STRONG PARTNERSHIP WITH THE STUDENT'S HOME
AND COMMUNITY IN WHICH THEY RESIDE. EVERY STUDENT IS TO BE UNDERSTOOD
HOLISTICALLY, BY UNDERSTANDING THE STUDENT'S ACADEMIC ABILITIES, SOCIAL
AND PERSONAL LIFE, WHICH IMPACTS THEIR ACADEMICS AND BEHAVIOR. OUR
FAMILY SPECIALIST IS A RESOURCE TO THE PARENTS BY PROVIDING THEM
RESOURCES THAT THEY NEED SO THAT THEY CAN SUPPORT THEIR CHILDREN AT
HOME.
TO CREATE A SCHOOL IMPROVEMENT PROCESS AND PLAN THAT IS COLLABORATIVE,
FOCUSES ON STUDENT LEARNING, AND IS MEASURED BY MULTIPLE SOURCES OF
DATA.
FORM 990, PART VI, SECTION A, LINE 6:
SCHOOL STAFF AND PARENTS ARE MEMBERS.
FORM 990, PART VI, SECTION A, LINE 7A:
SCHOOL STAFF AND PARENTS ELECT BOARD MEMBERS.
FORM 990, PART VI, SECTION A, LINE 8B:
THERE ARE NO COMMITTEES WITH AUTHORITY TO ACT ON BEHALF OF THE BOARD.

FORM 990, PART VI, SECTION B, LINE 11B:

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

Name of the organization  URBAN ACADEMY	Employer identification number 41–1977516
ONCE THE 990 FORM IS COMPLETED BY THE SCHOOL ADMINISTRATOR	, FINANCE
MANAGER, AND CPA FIRM, IT GOES TO THE URBAN ACADEMY BOARD	FOR APPROVAL.
FORM 990, PART VI, SECTION B, LINE 12C:	
THE SCHOOL BOARD POLICY COMMITTEE REVIEWS AND MONITORS COM	PLIANCE.
FORM 990, PART VI, SECTION B, LINE 15:	
THE URBAN ACADEMY BOARD DETERMINES COMPENSATION FOR THE EX	ECUTIVE DIRECTOR
AND OTHER EMPLOYEES ANNUALLY. INDIVIDUAL BOARD MEMBERS DO	NOT PARTICIPATE IN
COMPENSATION REVIEWS THAT DIRECTLY AFFECT THEM (FOR EXAMPL	E, TEACHER BOARD
MEMBERS DO NOT PARTICIPATE IN SETTING TEACHER PAY SCALES).	THE BOARD
CONSIDERS COMPARABILITY DATA WHEN REVIEWING COMPENSATION,	AS WELL AS URBAN
ACADEMY'S OVERALL GOALS, STAFFING NEEDS, AND BUDGET.	
FORM 990, PART VI, SECTION C, LINE 19:	
OUR AUDITED FINANCIAL STATEMENTS ARE POSTED ON OUR WEBSITE	, UNDER "BOARD
INFORMATION." ALL OTHER PUBLIC DOCUMENTS ARE MADE AVAILAB	LE UPON REQUEST.
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
CHANGE IN PERA & TRA	-109,066.

#### Form **8868**

(Rev. January 2024)

### Application for Extension of Time To File an Exempt Organization Return or Excise Taxes Related to Employee Benefit Plans

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

File a separate application for each return.

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

	ronic filing (e-file). You can electronically file Form 8868 to			•			
	below except for Form 8870, Information Return for Transfer						
reque	st for Form 8870 must be sent to the IRS in a paper format (	see instrud	ctions). For more details on the elect	ronic filing	of Form		
8868,	visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-providers/e-file-for-charities-a	orofits.					
Cautio	on: If you are going to make an electronic funds withdrawal (	direct deb	it) with this Form 8868, see Form 84	53-TE and	Form 8879-TE for p	oayment	
instru	ctions.						
All co	rporations required to file an income tax return other than Fo	rm 990-T	(including 1120-C filers), partnerships	s, REMICs	, and trusts		
must	use Form 7004 to request an extension of time to file income	e tax returi	ns.				
Part I	- Identification						
Type	or Name of exempt organization, employer, or other filer,	, see instru	uctions.	Taxpayer	identification numb	er (TIN)	
Print							
File by t	URBAN ACADEMY 41-19775				41-197751	. 6	
due dat							
filing yo return. S							
instruct		reign addr	ress, see instructions.				
	ST. PAUL, MN 55116						
Enter	the Return Code for the return that this application is for (file	a separat	e application for each return)			. 01	
Application Is For		Return	Application Is For			Return	
		Code				Code	
Form	Form 990 or Form 990-EZ 01 Form 4720 (other than individual)				09		
Form	4720 (individual)	03	Form 5227			10	
Form	990-PF	04	Form 6069			11	
Form	990-T (sec. 401(a) or 408(a) trust)	05	Form 8870			12	
Form	990-T (trust other than above)	06	Form 5330 (individual)			13	
Form	990-T (corporation)	07	Form 5330 (other than individual)		14		
Form	1041-A	08					
• Afte	er you enter your Return Code, complete either Part II or Part	: III. Part III	l, including signature, is applicable o	nly for an	extension of		
time t	o file Form 5330.						
• If th	is application is for an extension of time to file Form 5330, ye	ou must ei	nter the following information.				
	Plan Name						
	Plan Number						
	Plan Year Ending (MM/DD/YYYY)						
Part II	- Automatic Extension of Time To File for Exempt Organi	zations (s	ee instructions)				
Th	e books are in the care of THE ORGANIZATION						
		INUE -	ST PAUL, MN 55116				
Te	lephone No. 651-215-9419		Fax No.				
• If t	he organization does not have an office or place of business	in the Uni	ted States, check this box				
• If t	his is for a Group Return, enter the organization's four-digit C	Group Exe	mption Number (GEN) I	f this is fo	r the whole group, o	check this	
box	If it is for part of the group, check this box	and atta	ch a list with the names and TINs of	all membe	ers the extension is	for.	
1	I request an automatic 6-month extension of time until	AY 15		the exem	ıpt organization retu	ırn for	
	the organization named above. The extension is for the organization's return for:						
	calendar year 20 or						
		, 20 2	23 , and ending	JUN 3	0 . , 20	2 <u>4                                    </u>	
		, 20 2	23 , and ending	JUN 3	0 . , 20	24	
2				JUN 3 Final retur	_	24	
	X tax year beginning JUL 1				_	24	
2	X tax year beginning JUL 1  If the tax year entered in line 1 is for less than 12 months, ch	neck reasc	on: Initial return I		_	24	
2 3a	If the tax year entered in line 1 is for less than 12 months, check Change in accounting period	neck reasc	on: Initial return I		_	0.	
2 3a	tax year beginning  JUL 1  If the tax year entered in line 1 is for less than 12 months, check the control of t	neck reasc	on: Initial return I	Final retur	n		
2 3a	If the tax year entered in line 1 is for less than 12 months, change in accounting period  If this application is for Forms 990-PF, 990-T, 4720, or 6069, any nonrefundable credits. See instructions.	neck reason, enter the	tentative tax, less	Final retur	n		
2 3a b	If the tax year entered in line 1 is for less than 12 months, change in accounting period  If this application is for Forms 990-PF, 990-T, 4720, or 6069 any nonrefundable credits. See instructions.  If this application is for Forms 990-PF, 990-T, 4720, or 6069	neck reason, enter the enter any ayment all	tentative tax, less refundable credits and owed as a credit.	Final retur	s	0.	