			** PUBLIC DISCLOSURE COPY **	Incomo Tax	OMB No. 1545-0047
_	0	90	Return of Organization Exempt From		0000
For	m J	30	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (ex		
Depa	rtment	of the Treasury	Do not enter social security numbers on this form as it may b Go to www.irs.gov/Form990 for instructions and the latest	-	Open to Public Inspection
		enue Service	ar year, or tax year beginning JUL 1, 2023 and ending		Inspection
	Check if		forganization	D Employer identific	ation number
D (applicab	le:	organization		
	Addre	ess Monu	ment Academy		
	Name	pe Doing b	usiness as	27-001412	28
	Initial	Number	and street (or P.O. box if mail is not delivered to street address) Room/suite		
	Final		Village Ridge Point	719-481-1	
_	termi ated	City or t	own, state or province, country, and ZIP or foreign postal code	G Gross receipts \$	14,948,256.
	Amer returr Appli	n monu	ment, CO 80132	H(a) Is this a group re	
	tion pend		nd address of principal officer: Collin Vinchattle	for subordinates?	
			as C above	H(b) Are all subordinates inc	
		empt status:	X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 52 monumentacademy.net		ist. See instructions
	Nebs			H(c) Group exemption	State of legal domicile: CO
	art I	Summary			
	1		e the organization's mission or most significant activities: See Sched	ule O	
ce	.	Brieffy decorre			
Governance	2	Check this bo	x if the organization discontinued its operations or disposed of mor	e than 25% of its net ass	ets.
ver	3	Number of vot	ing members of the governing body (Part VI, line 1a)	1 1	7
	4		ependent voting members of the governing body (Part VI, line 1b)		7
8 8	5		of individuals employed in calendar year 2023 (Part V, line 2a)		241
Activities &	6	Total number	of volunteers (estimate if necessary)		133
Acti			d business revenue from Part VIII, column (C), line 12		0.
_	b	Net unrelated	business taxable income from Form 990-T, Part I, line 11		0.
				Prior Year	Current Year
an	8		and grants (Part VIII, line 1h)	1,437,141. 11,698,353.	$\frac{1,183,349}{12,774,396}$
Revenue	9	•	ce revenue (Part VIII, line 2g)	63,223.	212,086.
Re	10		come (Part VIII, column (A), lines 3, 4, and 7d)	442,240.	729,123.
	11		(Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	13,640,957.	14,898,954.
	13		- add lines 8 through 11 (must equal Part VIII, column (A), line 12) nilar amounts paid (Part IX, column (A), lines 1-3)	0.	0.
			nilar amounts paid (Part IX, column (A), lines 1-3)	0.	0.
	40	Salaries, other	compensation, employee benefits (Part IX, column (A), lines 5-10)	8,628,157.	9,346,616.
Expenses	16a		undraising fees (Part IX, column (A), line 11e)	0.	0.
per	b		ng expenses (Part IX, column (D), line 25) 0 .		
ŭ	17		es (Part IX, column (A), lines 11a-11d, 11f-24e)	5,661,782.	6,390,284.
	18	Total expense	s. Add lines 13-17 (must equal Part IX, column (A), line 25)	14,289,939.	15,736,900.
	19	Revenue less	expenses. Subtract line 18 from line 12	-648,982.	-837,946.
Net Assets or			В	eginning of Current Year	End of Year
sets	20	Total assets (F	Part X, line 16)	8,496,362.	10,397,518.
it As	21		(Part X, line 26)	15,462,962.	18,202,064.
ž.	22		fund balances. Subtract line 21 from line 20	-6,966,600.	-7,804,546.
	art II	•		anto and to the bast of mu	knowledge and halist it :-
			I declare that I have examined this return, including accompanying schedules and staten		knowledge and belief, it is
uue	, corre	T and complete	Declaration of preparer (other than officer) is based on all information of which prepare	n nas any knowledge.	
		1		1	

0	Signature of officer	Date				
Sign	0					
Here	<u>Collin Vinchattle, Princi</u>	pal and Executive D	irector			
	Type or print name and title					
	Print/Type preparer's name	Preparer's signature	Date	Check	PTIN	
Paid	Thomas G. Sistare	Thomas G. Sistare	11/12	/24 self-employed F	00356968	
Preparer	Firm's name Hoelting & Compan			Firm's EIN 30-0	514455	
Use Only	Firm's address 31 East Platte Av	enue, Suite 300				
	Colorado Springs,	CO 80903		Phone no. (719)	630-1091	
May the IF	RS discuss this return with the preparer shown abo	ve? See instructions		[Yes X No	
LHA For	Paperwork Reduction Act Notice, see the separ	ate instructions. 332001 12-21-23			Form 990 (2023)	

Form	1990 (2023) Monument Acad	lemy	27-001	L4128 Page 2
Pa	rt III Statement of Program Service Acc	omplishments		
	Check if Schedule O contains a response or n	ote to any line in this Part III		X
1	Briefly describe the organization's mission:			
	See Schedule O			
2	Did the organization undertake any significant progr	am sorvices during the year whi	ich woro not lictod on the	
2				Yes X No
	If "Yes," describe these new services on Schedule (
3	Did the organization cease conducting, or make sign	nificant changes in how it condu	ucts, any program services?	Yes X No
	If "Yes," describe these changes on Schedule O.			
4	Describe the organization's program service accom			
	Section 501(c)(3) and 501(c)(4) organizations are rec	uired to report the amount of g	rants and allocations to others, the total e	xpenses, and
	revenue, if any, for each program service reported.			
4a	(Code:) (Expenses \$13,280,62 Monument Academy provides	including grants of \$) (Revenue \$13	3,552,821.)
	Monument Academy provides	educational serv	vices for approximatel	y 1,165.
	preschool through 12th gra	de students.		
4b	(Code:) (Expenses \$	including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$	including grants of \$) (Revenue \$)
4d	Other program services (Describe on Schedule O.)			、 、
	(Expenses \$ including grar) (Revenue \$)
4e	Total program service expenses 13,	280,622.		000

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Form 990 (2023) Monument 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)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		x
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
-	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes." complete			
•	Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
5	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		x
10	It "Yes," complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			<u> </u>
10	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10		x
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
_				
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	44-	х	
	Part VI	<u>11a</u>	А	
D	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	441		x
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			v
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in		v	
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes, " complete			
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	X	<u> </u>
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Х	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			<u>-</u> -
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X X
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		X
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		X
b	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		X

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Form 990 (2023) Monument 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		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes, " complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
с	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		x
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes." complete Schedule L. Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties? (See 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		x
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		x
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? If "Yes," complete			
	Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		x
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	х	
Pa				
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>	<u></u>	
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 40			
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
-	Did the organization comply with backup withbolding rules for reportable payments to yandars and reportable gaming	1		

c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?

1c

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Par	rt V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	, , , , ,	41		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?			X
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	<u>3b</u>		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	<u>4a</u>		X
b	If "Yes," enter the name of the foreign country	-		
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	_		v
-	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			X X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	<u>5c</u>		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	6.		x
h	any contributions that were not tax deductible as charitable contributions?	<u>6a</u>		
a	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	66		
7	were not tax deductible?	<u>6b</u>		
7 a	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the pay	or? 7a	х	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?		X	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	10		
Ŭ	to file Form 8282?	7c		x
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-0			
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.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	10		
а	Is the organization licensed to issue qualified health plans in more than one state?	<u>13a</u>		
L	Note: See the instructions for additional information the organization must report on Schedule O.			
u	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
~				
с 14а	Did the organization receive any payments for indoor tanning services during the tax year?	14a		x
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O			<u> </u>
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		x
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		х
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes." complete Form 6069.			

Form	990 (2023) Monument Academy			-0014		Pa	age 6
Par	t VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 th	rough	7b below,	, and for a	"No" r	espon	se
	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O.						
	Check if Schedule O contains a response or note to any line in this Part VI						X
Sec	tion A. Governing Body and Management						
						Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		7			
	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.						
b	Enter the number of voting members included on line 1a, above, who are independent	1b		7			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with a	any other				
	officer, director, trustee, or key employee?				2		X
3	Did the organization delegate control over management duties customarily performed by or under the	direc	t supervisi	on			
					3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 99		s filed?		4		X
5	Did the organization become aware during the year of a significant diversion of the organization's asse	ets?			5	v	X
6	Did the organization have members or stockholders?				6	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap				_	v	
	more members of the governing body?				7a	X	
D	Are any governance decisions of the organization reserved to (or subject to approval by) members, sto				71.		х
•	persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year				7b		
8		-	-		8a	Х	
	The governing body? Each committee with authority to act on behalf of the governing body?				8b	- 11	x
9	Each committee with authority to act on behalf of the governing body?				00		
Ŭ	organization's mailing address? If "Yes," provide the names and addresses on Schedule O				9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Rev	/enue	Code)				
		renue	0000.			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?				10a		Х
	If "Yes," did the organization have written policies and procedures governing the activities of such cha						
					10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body				11a	Х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.						
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13				12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	to con	flicts?		12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	es," d	escribe				
	on Schedule O how this was done				12c	X	
13	Did the organization have a written whistleblower policy?				13		<u> </u>
14	Did the organization have a written document retention and destruction policy?				14	X	
15	Did the process for determining compensation of the following persons include a review and approval	by in	dependent	t			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?						v
	The organization's CEO, Executive Director, or top management official				15a	Х	X
a	Other officers or key employees of the organization				15b	Λ	
16-	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangem	ont w	ith a				
104					16a		х
h	taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate				104		
D	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organi	-					
	exempt status with respect to such arrangements?				16b		
Sec	tion C. Disclosure						
17	List the states with which a copy of this Form 990 is required to be filed None						
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, an	d 990	-T (section	501(c)(3)s	only)	availat	ole
	for public inspection. Indicate how you made these available. Check all that apply.						
	X Own website Another's website X Upon request Other (explain	on Sc	hedule O)				
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, con		,		financ	ial	
	statements available to the public during the tax year.						
20	State the name, address, and telephone number of the person who possesses the organization's boo	ks and	d records				
	The Organization - 719-481-1950						
	1150 Village Ridge Point, Monument, CO 80132					000	

27-0014128

Form 990 (2		27-0014128	Page 7
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highes	st 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		
● List a	ete this table for all persons required to be listed. Report compensation for the calendar year er all of the organization's current officers, directors, trustees (whether individuals or organization or an example (D) (D) and (D) if no compensation was noted.	°	
Enter -U- In	columns (D), (E), and (F) if no compensation was paid.		

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

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

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

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

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

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

(A) Name and title	(B) Average hours per week	box	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)				n 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	Institutional trustee	Offlicer	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) Collin Vinchattle Principal and Executive Director	50.00			x				84,639.	0.	31,846.
(2) Ryan Graham	20.00			~				04,039.	0.	51,040.
President	20.00	x		x				0.	0.	0.
(3) Lindsey Clinton	10.00								••	
Vice-President		x		x				0.	0.	0.
(4) Emily Belisle	5.00									
Secretary		х		х				0.	Ο.	0.
(5) Joseph Buczkowski	5.00									
Treasurer		Х		Х				0.	0.	0.
(6) Craig Carle	5.00									
Director	1.00	Х						0.	0.	0.
(7) Karen Hoida	5.00									
Director		Х						0.	0.	0.
(8) Matthew Ross	5.00									
Director		Х						0.	0.	0.
						-				
						-				
		I						1		

Form 990 (2023) Monument	Academy	,							27-00)141	L28	Page 8
Part VII Section A. Officers, Directors, Trus		oloy	ees,			ghes	st C		, ,	<u> </u>		
(A)	(B)			(C Posi	C) ition	h		(D)	(E)			=)
Name and title	Average hours per		not c	heck i	more	than o is both		Reportable compensation	Reportable compensatio			nated unt of
	week					or/trus		from	from related	I		her
	(list any	ctor						the	organizations	I		nsation
	hours for	In dividual trustee or director				ted		organization	(W-2/1099-MIS	;C/	fron	n the
	related	stee o	In stitutional trustee			Highest compensated employee		(W-2/1099-MISC/	1099-NEC)		0	zation
	organizations below	ial tru	onal t		Key employee	com l		1099-NEC)				elated
	line)	dividu	stituti	Officer	y em l	ghest	Former				organi	zations
		'n	드	Of	Ke	Ξə	요			-+		
						\vdash				\rightarrow		
										_		
1b Subtotal								84,639.		0.	31,	846.
c Total from continuation sheets to Part VI								0.		0.	21	0.
d Total (add lines 1b and 1c)								84,639.		0.	51,	846.
2 Total number of individuals (including but n	ot limited to th	ose	liste	d ab	ove	e) wh	o re	eceived more than \$100	,000 of reportable	1		0
compensation from the organization											Y	es No
3 Did the organization list any former officer,	director trust			mol	0.10		hia	shost componented omn		ſ	•	
c			•	•			•				3	x
line 1a? If "Yes," complete Schedule J for setFor any individual listed on line 1a, is the su											3	
and related organizations greater than \$150											4	x
5 Did any person listed on line 1a receive or a												
rendered to the organization? If "Yes," com	•				-			•			5	X
Section B. Independent Contractors	<u></u>											
1 Complete this table for your five highest con	mpensated ind	lepe	nder	nt co	ontra	acto	rs th	hat received more than S	\$100,000 of comp	ensat	ion from	
the organization. Report compensation for t	the calendar ye	ear e	ndir	ng w	ith c	or wi	thin	the organization's tax y	vear.			
(A)								(B)			(C)	
Name and business								Description of s	services	C	ompensa	ation
Charter Tech Services, 30		_	to	n				Technology				
<u>Street, #811, San Diego,</u>	CA 9210	3						Consulting &	Adminis		212	530.
2 Total number of independent contractors (ir	ncluding but no	ot lin	nited	tot	thos	se lis	ted	above) who received m	ore than			
\$100,000 of compensation from the organiz	•				1	1	2.	,				

	: VIII			ent A Je	.cuu	~my			27-0014	128 Pag
		Check if Schedule O o	conta	ins a res	oonse	or note to any line	e in this Part VIII (A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue exclud from tax unde sections 512 - {
ŝ	1 a	Federated campaigns		1a						
iun		Membership dues			,					
ğ		Fundraising events				186,403.				
and Other Similar Amounts		Related organizations								
mil		Government grants (contri				865,282.				
S	f	All other contributions, gifts,	grants	s, and						
the		similar amounts not included	abov	e 1f		131,664.				
Ó	g	Noncash contributions included in	lines 1a	a-1f 1 g	\$					
an	h	Total. Add lines 1a-1f					1,183,349.			
						Business Code				
	2 a	Per Pupil Revenue				611110	11,151,010.	11151010.		
đ	b	Charges for Services	3			611110	923,833.	923,833.		
Revenue	с	Mill Levy				611110	699,553.	699,553.		
eve	d									
f	е									
	f	All other program service	rever	ue						
	g	Total. Add lines 2a-2f					12,774,396.			
	3	Investment income (includ	ling c	lividends	, intere	est, and				
		other similar amounts)					212,086.			212,0
	4	Income from investment o	f tax-	exempt l	oond p	roceeds				
	5	Royalties		<u></u>						
				(i) Re	eal	(ii) Personal				
	6 a	Gross rents	6a							
	b	Less: rental expenses	6b							
	С	Rental income or (loss)	6c							
	d	Net rental income or (loss)								
	7 a	Gross amount from sales of		(i) Secu	rities	(ii) Other				
		assets other than inventory	7a							
	b	Less: cost or other basis								
		and sales expenses	7b							
	с	Gain or (loss)	7c							
		Net gain or (loss)			···· <u>····</u>					
	8 a	Gross income from fundraising								
5		including \$								
		contributions reported on								
		Part IV, line 18								
		Less: direct expenses				49,302.	10.005			
		Net income or (loss) from					-49,302.			-49,3
	9 a	Gross income from gamin								
	-	Part IV, line 19								
		Less: direct expenses				l				
		Net income or (loss) from			ies	·····				
1	iù a	Gross sales of inventory, I								
		and allowances								
		Less: cost of goods sold				9				
+	С	Net income or (loss) from	sales	ot inven	ory	Business Code				
		Misc. Revenue				Business Code 611110	717 460	717 160		
		Transfer From Founda	+ 1 ~			611110	717,460.	,		
en 1	b		ICT0	.1		011110	60,965.	60,965.		<u> </u>
venue										
Revenue	C									
Revenue	d	All other revenue Total. Add lines 11a-11d					778,425.			

Check if Schedule O contains a respon- Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic				
individuals. See Part IV, line 22				
3 Grants and other assistance to foreign				
organizations, foreign governments, and foreign				
individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors,				
trustees, and key employees	239,785.	179,839.	59,946.	
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	5,916,266.	5,028,826.	887,440.	
8 Pension plan accruals and contributions (include				
section 401(k) and 403(b) employer contributions)	2,371,069.	2,006,173.	364,896.	
9 Other employee benefits	688,705.	582,716.	105,989.	
IO Payroll taxes	130,791.	110,663.	20,128.	
11 Fees for services (nonemployees):				
a Management				
b Legal	89,346.		89,346.	
c Accounting	15,600.		15,600.	
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,				
column (A), amount, list line 11g expenses on Sch 0.)	3,000.	2,550.	450.	
12 Advertising and promotion	958.	814.	144.	
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy	3,481,750.	2,959,488.	522,262.	
17 Travel	3,222.	2,739.	483.	
18 Payments of travel or entertainment expenses				
for any federal, state, or local public officials \dots				
19 Conferences, conventions, and meetings	0.100	4 500		
20 Interest	2,109.	1,793.	316.	
21 Payments to affiliates	100 000	154 050		
22 Depreciation, depletion, and amortization	182,209.	154,878.	27,331.	
23 Insurance	91,525.	77,796.	13,729.	
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.)				
a Educational Services	851,522.	723,792.	127,730.	
b Authorizer Purchased Se	528,102.	448,887.	79,215.	
c General Supplies	526,015.	447,113.	78,902.	
d Instructional Supplies	199,115.	199,115.	. ,	
e All other expenses	415,811.	353,440.	62,371.	
25 Total functional expenses. Add lines 1 through 24e	15,736,900.	13,280,622.	2,456,278.	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)				

Form 990 (2023)

Monument Academy Part IX Statement of Functional Expenses

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

Monument Academy	
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	<u>1 990 (</u> rt X	2023) Monument Academy Balance Sheet		27-	0014128 Page 11
Га		Check if Schedule O contains a response or note to any line in this Part X			
			(A)		(B)
			Beginning of year		End of year
	1	Cash - non-interest-bearing	597,010.	1	347,203.
	2	Savings and temporary cash investments	3,378,935.	2	4,077,356.
	3	Pledges and grants receivable, net	398,050.	3	36,046.
	4	Accounts receivable, net	9,909.	4	11,256.
	5	Loans and other receivables from any current or former officer, director,	- /	-	,
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined		-	
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
6	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
As	9	Prepaid expenses and deferred charges		9	
		Land, buildings, and equipment: cost or other		_	
	b	basis. Complete Part VI of Schedule D10a1,992,732.Less: accumulated depreciation10b952,610.	1,135,538.	10c	1,040,122.
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	2,976,920.	15	4,885,535.
	16	Total assets. Add lines 1 through 15 (must equal line 33)	8,496,362.	16	10,397,518.
	17	Accounts payable and accrued expenses	1,282,142.	17	1,197,245.
	18	Grants payable		18	
	19	Deferred revenue	97,379.	19	39,706.
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
ŝ	22	Loans and other payables to any current or former officer, director,			
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%			
abil		controlled entity or family member of any of these persons		22	
1	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties	101,964.	24	27,678.
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D	13,981,477.		16,937,435. 18,202,064.
	26	Total liabilities. Add lines 17 through 25	15,462,962.	26	18,202,064.
		Organizations that follow FASB ASC 958, check here			
ces		and complete lines 27, 28, 32, and 33.	8 580 100		0 406 504
alan	27	Net assets without donor restrictions	-7,578,128. 611,528.	27	-8,426,594.
B	28	Net assets with donor restrictions	611,528.	28	622,048.
un		Organizations that do not follow FASB ASC 958, check here			
ц		and complete lines 29 through 33.			
Net Assets or Fund Balances	29	Capital stock or trust principal, or current funds		29	
SSe	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
άA	31	Retained earnings, endowment, accumulated income, or other funds		31	
Ne	32	Total net assets or fund balances	-6,966,600.	32	-7,804,546.
	33	Total liabilities and net assets/fund balances	8,496,362.	33	<u>10,397,518.</u>

10,397,518. Form **990** (2023)

	990 (2023) Monument Academy	27-	001412	8	Pag	_{je} 12
Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>			
1	Total revenue (must equal Part VIII, column (A), line 12)	1	14,8			
2	Total expenses (must equal Part IX, column (A), line 25)	2	15,7		·	
3	Revenue less expenses. Subtract line 2 from line 1	3				<u>46.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	-6,9	66	<u>,60</u>)0.
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	-7,8	804	,54	16.
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII		<u></u>			X
			_	Y	/es	No
1	Accounting method used to prepare the Form 990: Cash Cash Corual X Other See Sch	0				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	О.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2	2a		<u>X</u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?		2	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:					
	Separate basis Consolidated basis X Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,				
	review, or compilation of its financial statements and selection of an independent accountant?		2	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the					
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?			Ba		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audi	t			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3	b		

Form 990 (2023)

SCHEDULE A	١
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Department of the Treasury Internal Revenue Service

(Form 990)

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047
2023
Open to Public Inspection

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

Name	e of t	he organization							identification number
D			ment Acade						7-0014128
Par		Reason for Public (See instruction	IS.	
The o	rgan	ization is not a private found	ation because it is: (I	For lines 1 through 12, c	heck only	one box.)			
1		A church, convention of ch	•			on 170(b)('	1)(A)(i).		
2	Х	A school described in sect	ion 170(b)(1)(A)(ii).(Attach Schedule E (Forn	ו 990).)				
3		A hospital or a cooperative	hospital service orga	anization described in se	ection 170)(b)(1)(A)(i	ii).		
4		A medical research organiz	ation operated in co	njunction with a hospital	described	l in sectio	on 170(b)(1)(A	.)(iii). Enter	the hospital's name,
_		city, and state:							
5		An organization operated for	or the benefit of a co	llege or university owned	l or operat	ed by a go	overnmental u	nit describe	ed in
		section 170(b)(1)(A)(iv). (C	Complete Part II.)						
6		A federal, state, or local gov	vernment or governm	nental unit described in	section 17	70(b)(1)(A)	(v).		
7		An organization that norma	Ily receives a substa	ntial part of its support fi	om a gove	ernmental	unit or from t	ne general p	oublic described in
		section 170(b)(1)(A)(vi). (C	omplete Part II.)						
8 [A community trust describe	ed in section 170(b)	(1)(A)(vi). (Complete Par	t II.)				
9 [An agricultural research org	ganization described	in section 170(b)(1)(A)(ix) operate	ed in conju	unction with a	land-grant	college
		or university or a non-land-g	grant college of agric	ulture (see instructions).	Enter the	name, city	, and state of	the college	or
		university:							
10 [An organization that norma	Ily receives (1) more	than 33 1/3% of its supp	ort from c	ontributior	ns, membersh	nip fees, and	d gross receipts from
		activities related to its exem	npt functions, subjec	t to certain exceptions; a	and (2) no	more than	33 1/3% of it	s support fi	rom gross investment
		income and unrelated busir	ness taxable income	(less section 511 tax) fro	m busines	sses acqui	red by the org	ganization a	fter June 30, 1975.
		See section 509(a)(2). (Con	mplete Part III.)						
11 [An organization organized a	and operated exclusi	vely to test for public sa	fety. See	section 50	09(a)(4).		
12 [An organization organized a	and operated exclusi	vely for the benefit of, to	perform t	he functio	ns of, or to ca	rry out the	purposes of one or
		more publicly supported or	ganizations describe	d in section 509(a)(1) d	r section	509(a)(2).	See section	509(a)(3). (Check the box on
		lines 12a through 12d that	describes the type o	f supporting organizatior	n and com	plete lines	12e, 12f, and	l 12g.	
а		Type I. A supporting orga	anization operated, s	upervised, or controlled	by its supp	ported org	anization(s), t	ypically by	giving
		the supported organization	on(s) the power to reg	gularly appoint or elect a	majority c	of the direc	ctors or truste	es of the su	ipporting
		organization. You must o	complete Part IV, Se	ections A and B.					
b] Type II. A supporting org	anization supervised	or controlled in connect	ion with it	s supporte	ed organizatio	n(s), by hav	ring
		control or management o	f the supporting orga	anization vested in the sa	ame perso	ns that co	ntrol or mana	ge the supp	ported
		organization(s). You mus	t complete Part IV,	Sections A and C.					
с] Type III functionally inte	grated. A supportin	g organization operated	in connect	tion with, a	and functiona	lly integrate	d with,
		its supported organization	n(s) (see instructions). You must complete I	Part IV, Se	ections A,	D, and E.		
d		Type III non-functionally	/ integrated. A supp	orting organization oper	ated in co	nnection v	vith its suppo	rted organiz	zation(s)
		that is not functionally int	egrated. The organiz	ation generally must sat	isfy a distr	ibution red	quirement and	an attentiv	veness
		requirement (see instructi	ions). You must cor	nplete Part IV, Sections	A and D,	and Part	v .		
е		Check this box if the orga	anization received a v	written determination fro	m the IRS	that it is a	Туре I, Туре	II, Type III	
		functionally integrated, or	r Type III non-functio	nally integrated supportion	ng organiz	ation.			
f	Ente	er the number of supported o	organizations						
g		vide the following informatior	about the supporte	d organization(s).	_				
	(i) Name of supported	(ii) EIN	(iii) Type of organization (described on lines 1-10		anization listed ing document?	(v) Amount o		(vi) Amount of other
		organization		above (see instructions))	Yes	No	support (see i	nstructions)	support (see instructions)
Total									
LHA	For	Paperwork Reduction Act	Notice, see the Inst	ructions for Form 990 o	or 990-EZ	. 33202	1 12-21-23	Sche	dule A (Form 990) 2023

	000	0000
Schedule A	990	2023

Monument Academy

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

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

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 202	23 (f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support, Subtract line 5 from line 4.						
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 202	23 (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		etc. (see instruction	ns)			12	
	First 5 years. If the Form 990 is for th	•	,				
	organization, check this box and stop	•			•		
Sec	tion C. Computation of Publi						
14	Public support percentage for 2023 (I	ine 6, column (f), d	livided by line 11,	column (f))		14	%
	Public support percentage from 2022					15	%
	33 1/3% support test - 2023. If the o					nore, check t	this box and
	stop here. The organization qualifies						
b	33 1/3% support test - 2022. If the o	organization did no	ot check a box on				
	and stop here. The organization qual						
17a	10% -facts-and-circumstances test	- 2023. If the org	anization did not				
	and if the organization meets the fact						
	meets the facts-and-circumstances te			-			
b	10% -facts-and-circumstances test	-		• • • •			
	more, and if the organization meets th	-					
	organization meets the facts-and-circu				· ·		
18	Private foundation. If the organization						
-	J		, • -				

Schedule A (Form 990) 2023

Schedule A	Form 990) 2023

Monument 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.)

Se	ction A. Public Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and							
	membership fees received. (Do not							
	include any "unusual grants.")							
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose							
3	Gross receipts from activities that							
-	are not an unrelated trade or bus-							
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					1		
	Amounts included on lines 1, 2, and							
	3 received from disgualified persons							
t	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.)							
	ction B. Total Support		•	•	•	•		
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 6						•	
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources							
k	Unrelated business taxable income							
	(less section 511 taxes) from businesses							
	acquired after June 30, 1975							
c	Add lines 10a and 10b							
11	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on							
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)							
13	Total support. (Add lines 9, 10c, 11, and 12.)							
14	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	501(c)(3)	organizatio	on,
	check this box and stop here							
See	ction C. Computation of Publ	ic Support Per	rcentage					
15	Public support percentage for 2023 (line 8, column (f), d	livided by line 13,	column (f))		15		%
16	Public support percentage from 2022	Schedule A, Part	III, line 15			16		%
See	ction D. Computation of Inves	stment Income	e Percentage					
17	Investment income percentage for 20	023 (line 10c, colur	mn (f), divided by I	ine 13, column (f))		17		%
18	Investment income percentage from	2022 Schedule A,	Part III, line 17			18		%
	33 1/3% support tests - 2023. If the					33 1/3%	, and line 17	
	more than 33 1/3%, check this box a							
k	33 1/3% support tests - 2022. If the						33 1/3%, a	nd
	line 18 is not more than 33 1/3%, che							
20	Private foundation. If the organization							
-								

Monument Academy

Yes

No

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.)

1 2 3a 3b 3c 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a

	(Form 990) 2023	Monument	
Part IV	Supporting (Organizations (continu	ied)

Yes No

Yes No

1

11 Has the organization accepted a gift or contribution from any of the following persons? Yes No 11 Has the organization accepted a gift or contribution from any of the following persons? Image: Control in the second s

			Yes	No
1	the governing body, members of the governing body, officers acting in their official capacity, or membership of one or re supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, actors, or trustees at all times during the tax year? <i>If "No," describe in</i> Part VI how the supported organization(s) actively operated, supervised, or controlled the organization's activities. <i>If the organization had more than one supported</i> <i>anization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the</i>			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			

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)

Section D. All Type III Supporting Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		

Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the	e Integral Part Test during the year	(see instructions).
•			

- a The organization satisfied the Activities Test. *Complete* line 2 *below*.
- **b** The organization is the parent of each of its supported organizations. *Complete* **line 3** *below.*

с		The organization supported a g	governmental entity.	Describe in Part VI how	vou supported a governmenta	l entitv (see instructions).
---	--	--------------------------------	----------------------	-------------------------	-----------------------------	------------------------------

- 2 Activities Test. Answer lines 2a and 2b below.
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in **Part VI identify those supported organizations and explain** how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If* "Yes," *explain in* Part VI *the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.*
- 3 Parent of Supported Organizations. Answer lines 3a and 3b below.
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If* "Yes" or "*No*" *provide details in* **Part VI.**
- **b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in Part VI the role played by the organization in this regard.*

2a

2b

3a

_	dule A (Form 990) 2023 Monument Academy			27-0014128 Page 6
Pa				
1	Check here if the organization satisfied the Integral Part Test as a qualify			Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mu	ist complete S	ections A through E.	1
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
C	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-function	ally integrated	Type III supporting orga	anization (see

instructions).

Schedule A (Form 990) 2023

332026 12-21-23

Part VI. See instructions.

and 4c. 8 Breakdown of line 7: a Excess from 2019 b Excess from 2020 c Excess from 2021 d Excess from 2022 e Excess from 2023

7 Excess distributions carryover to 2024. Add lines 3j

_	dule A (Form 990) 2023 Monument Acade	emy	·		7-0014128 _{Ра}
Pa	t V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	nizations (continu	<u>ied)</u>	
Sect	ion D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exer	npt purposes		1	
2	Amounts paid to perform activity that directly furthers exempt	t purposes of supported			
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpose	s of supported organizations	8	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which th	e organization is responsive			
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2023 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount		1	10	
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2023	is	(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				
а	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				
h	Applied to 2023 distributable amount				
i	Carryover from 2018 not applied (see instructions)				
:	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
	Distributions for 2023 from Section D.				
4					
4					
	line 7: \$				
а	line 7: \$ Applied to underdistributions of prior years				
ab	line 7: \$ Applied to underdistributions of prior years Applied to 2023 distributable amount				
ab	line 7: \$ Applied to underdistributions of prior years Applied to 2023 distributable amount Remainder. Subtract lines 4a and 4b from line 4.				
a b c	line 7: \$ Applied to underdistributions of prior years Applied to 2023 distributable amount Remainder. Subtract lines 4a and 4b from line 4. Remaining underdistributions for years prior to 2023, if				
a b c	line 7: \$ Applied to underdistributions of prior years Applied to 2023 distributable amount Remainder. Subtract lines 4a and 4b from line 4. Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result greater				
a b c	line 7: \$ Applied to underdistributions of prior years Applied to 2023 distributable amount Remainder. Subtract lines 4a and 4b from line 4. Remaining underdistributions for years prior to 2023, if				

Schedule A (Form 990) 2023

Schedule A	(Form 990) 2023 Monument Academy	27-0014128 Page 8
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Pasetion D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this p (See instructions.)	art V, line 1; Part V, Section B, line 1e; Part V,

** PUBLIC DISCLOSURE COPY **

Schedule of Contributors

Attach to Form 990, 990-EZ, or 990-PF. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

2023

Employer identification number

27-0014128

Schedule	В
(Form 990)	

Department of the Treasury Internal Revenue Service

Name of the organization

Organization type (check one):

Monument Academy

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

Check if your organization is covered by the General Rule or a Special Rule.

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

General Rule

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

Special Rules

- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year for an *exclusively* set is contributions.

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

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

		\$ <u>15,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$8,020.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$8,385.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$7,360.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$6,610.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u></u>		\$ <u>5,550.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.) Schedule B (Form 990) (2023)

Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(b)

Name, address, and ZIP + 4

Employer identification number

Part I

(a)

No.

Schedule B (Form 990) (2023)

27 - 0014128

(d)

Type of contribution

(c)

Total contributions

Monument Academy

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

Employer identification number

27 - 0014128

Monument Academy

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

Schedule B (Form 990) (2023)

Name of organization

Name of o	rganization		Employer identification number				
Monum	ent Academy		27-0014128				
Part III	Exclusively religious, charitable, etc., contribution from any one contributor. Complete columns (a) completing Part III, enter the total of exclusively religious, of Use duplicate copies of Part III if additional s	through (e) and the following line entri- charitable, etc., contributions of \$1,000 or I	ection 501(c)(7), (8), or (10) that total more than \$1,000 for the year try. For organizations less for the year. (Enter this info. once.) \$				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
		(e) Transfer of gif	ft				
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
	(e) Transfer of gift						
·	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
		(e) Transfer of gif	ft				
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
	(e) Transfer of gift						
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee				

Department of the Treasury

(Form 99	0)
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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 **Open to Public** Inspection

Internal Revenue Service Name of the organization

Monument	Acade	emy
. Maintaining	Dener	Advies

Employer identification number

	Monument Academy			27-0014128
Pa		d Funds or Other Similar Funds	or Accour	
	organization answered "Yes" on Form 990, Part IV, lin			•
		(a) Donor advised funds	(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	writing that the assets held in donor advise	ed funds	
	are the organization's property, subject to the organization's	0		Yes No
6	Did the organization inform all grantees, donors, and donor a			
	for charitable purposes and not for the benefit of the donor o			
				Yes No
Pa				
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).		
	Preservation of land for public use (for example, recrea	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 contribution in the form of	of a conserva	tion easement on the last
	day of the tax year.			Held at the End of the Tax Year
а	Total number of conservation easements		2a	
b	Total acreage restricted by conservation easements		2b	
с	Number of conservation easements on a certified historic stru	ucture included on line 2a	2c	
d	Number of conservation easements included on line 2c acqu	ired after July 25, 2006, and not		
	on a historic structure listed in the National Register		2d	
3	Number of conservation easements modified, transferred, rel	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			
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing cons	ervation ease	ements during the year
_				
7	Amount of expenses incurred in monitoring, inspecting, hance	lling of violations, and enforcing conservat	ion easemen	ts during the year
•		esticity the requirements of eastion 170/h)		
8	Does each conservation easement reported on line 2d above			Yes No
0		an accomenta in ita revenue and evnence		
9	In Part XIII, describe how the organization reports conservation			
	balance sheet, and include, if applicable, the text of the footr organization's accounting for conservation easements.	iote to the organization's infancial stateme	ins that uest	
Pa	t III Organizations Maintaining Collections of	Art. Historical Treasures. or Ot	her Simila	r Assets.
	Complete if the organization answered "Yes" on Form			
	If the organization elected, as permitted under FASB ASC 95		nd balance s	heet works
	of art, historical treasures, or other similar assets held for put			
	service, provide in Part XIII the text of the footnote to its finar	, ,		
b	If the organization elected, as permitted under FASB ASC 95			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 treater			
	the following amounts required to be reported under FASB A			
а	Revenue included on Form 990, Part VIII, line 1	-		\$

b

Sche	dule D (Form 990) 2023 Monumen	t Academy						27-00		
Par	t III Organizations Maintaining C	ollections of Ar	t, Histo	orical Tre	asures, o	r Other	^r Simila	r Assets	(continu	ued)
3	Using the organization's acquisition, accessi	on, and other record	ls, check	any of the f	ollowing tha	t make si	gnificant	use of its		
	collection items (check all that apply).									
а	Public exhibition	c	d 🗌 l	Loan or exc	hange progra	am				
b	Scholarly research	e	e 🗌 (Other						
с	c Preservation for future generations									
4	Provide a description of the organization's co	ollections and explai	n how the	ey further th	ne organizatio	on's exen	npt purpo	se in Part	XIII.	
5	During the year, did the organization solicit of	r receive donations	of art, his	torical treas	sures, or othe	er similar	assets			
	to be sold to raise funds rather than to be ma								Yes	No
Par			ete if the o	organizatior	n answered "	Yes" on I	Form 990	, Part IV, li	ne 9, or	
	reported an amount on Form 990, Pa	rt X, line 21.								
1a	Is the organization an agent, trustee, custodi	ian, or other interme	diary for o	contribution	is or other as	sets not	included		_	
	on Form 990, Part X?							L	Yes	X No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing ta	able:						
									Amount	
С	Beginning balance						. <u>1c</u>			
	Additions during the year									
е	Distributions during the year						. 1e			
f	Ending balance						. 1 f		_	
	Did the organization include an amount on F						ity?	L	Yes	No
	If "Yes," explain the arrangement in Part XIII.							<u></u>	<u></u>	
Par	t V Endowment Funds Complete if								(-) [
		(a) Current year	(b) P	rior year	(c) Two yea	rs dack	(a) Three	years back	(e) Four	years back
1a	Beginning of year balance									
b	Contributions									
с	Net investment earnings, gains, and losses									
	Grants or scholarships									
е	Other expenditures for facilities									
-	and programs									
	Administrative expenses									
g	End of year balance				<u> </u>					
2	Provide the estimated percentage of the curr		e (line 1g	, column (a))) held as:					
a L	Board designated or quasi-endowment		%							
D	Permanent endowment	%								
C		, •								
20	The percentages on lines 2a, 2b, and 2c sho Are there endowment funds not in the posse		otion that	oro hold or	d administa	rad far th	•			
Ja	organization by:	ssion of the organiza	alion inal	are neiù ar			e		[Yes No
	(i) Unrelated organizations?								3a(i)	
									3a(ii)	
h	If "Yes" on line 3a(ii), are the related organization of the second seco								3b	
4	Describe in Part XIII the intended uses of the								00	
Par	t VI Land, Buildings, and Equipm									
	Complete if the organization answere		0, Part IV,	, line 11a. S	ee Form 990), Part X,	line 10.			
	Description of property	(a) Cost or o basis (investr		• •	or other (other)		ccumulate preciation		(d) Book	value
1a	Land									
	Buildings			72	8,135.	4	449,0	29.	279	,106.
	Leasehold improvements									
	Equipment			1,12	4,923.		503,5	81.	621	,342.
	Other				9,674.				139	,674.
Total	. Add lines 1a through 1e. (Column (d) must e	oual Form 990. Part	X. line 10)c. column	<i>(</i> B))					,122.

Schedule D (Form 990) 2023

Schedule D			Monument	
Part VII	Investr	nents	- Other Securities	i

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"		11c. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))			
Part IX Other Assets			
Complete if the organization answered "Yes"		11d. See Form 990, Part X, line 15.	
	Description		(b) Book value
(1) Deferred Outflows - Pensio	on		4,782,609.
(2) Deferred Outflows - OPEB			102,926.
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, line 15, col	. (B))		4,885,535.
Part X Other Liabilities			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 25.	
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2) Net Pension Liabilities			15,864,974.
(3) Deferred Inflows - Pension	1		494,403.
(4) Net OPEB Liability			383,074.
(5) Deferred Inflows - OPEB			119,134.
₍₆₎ Compensated Absences			75,850.
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, line 25, col	. <i>(</i> B))		16,937,435.

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

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

Sche	dule D (Form 990) 2023 Monument Academy				0014128 Page 4
Par	t XI Reconciliation of Revenue per Audited Financial Statemen	ts Wit	h Revenue per Re	turn	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1	Total revenue, gains, and other support per audited financial statements			1	17,802,627.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b			
с	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d	2,915,336.		
е	Add lines 2a through 2d			2e	2,915,336.
3	Subtract line 2e from line 1			3	14,887,291.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b	11,663.		
с	Add lines 4a and 4b			4c	11,663.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	14,898,954.
Pa	t XII Reconciliation of Expenses per Audited Financial Statemer	nts Wi	th Expenses per F	Retur	n
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1	Total expenses and losses per audited financial statements			1	18,600,664.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a		-	
b	Prior year adjustments	2b		-	
с	Other losses	2c			
d	Other (Describe in Part XIII.)	2d	2,814,462.		
е	Add lines 2a through 2d			2e	2,814,462.
3	Subtract line 2e from line 1			3	15,786,202.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b	-49,302.		
с	Add lines 4a and 4b			4c	-49,302.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	15,736,900.
Pa	t XIII Supplemental Information				

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

Part	XI.	Line	2đ	_	Other	Adjustments:
TUTC			20		OCHCI	na jabemeneb.

Net Building Corporation Revenue	1,002,544.
Net Foundation Revenue	1,912,792.
Total to Schedule D, Part XI, Line 2d	2,915,336.
Part XI, Line 4b - Other Adjustments:	
Fundraising Event Expenses (Schedule G)	-49,302.

Transfer to Charter from Foundation

Total to Schedule D, Part XI, Line 4b

Part XII, Line 2d - Other Adjustments:

60,965.

11,663.

Schedule D (Form 990) 2023 Monument Academy	27-0014128 Page 5
Part XIII Supplemental Information (continued)	
Net Building Corporation Expense	840,940.
Net Foundation Expense	1,973,522.
Total to Schedule D, Part XII, Line 2d	2,814,462.
Part XII, Line 4b - Other Adjustments:	
Fundraising Event Expenses (Schedule G)	-49,302.

SCHEDULE	Ε
(Form 990)	

Department of the Treasury

Internal Revenue Service

Schools

OMB No. 1545-0047

Open to Public

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

Attach to Form 990 or Form 990-EZ.

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

Inspection Employer identification number

Name of the organization		
	Monument	Academy

27-0014128

Pa	Int I			
			YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter,			
	bylaws, other governing instrument, or in a resolution of its governing body?	1	х	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures,			
	catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	х	
3	Has the organization publicized its racially nondiscriminatory policy on its primary publicly accessible Internet			
-	homepage at all times during its tax year in a manner reasonably expected to be noticed by visitors to the			
	homepage, or through newspaper or broadcast media during the period of solicitation for students, or during the			
	registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general			
	community it serves? If "Yes," please describe. If "No," please explain. If you need more space, use Part II	3	х	
	Monument Academy includes their nondiscrimination policy on			
	the enrollment page of their website.			
	<u></u>			
л	Does the organization maintain the following?			
4	Does the organization maintain the following? Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	х	
			X	<u> </u>
	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	Δ	
C	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing		х	
	with student admissions, programs, and scholarships?	4c	X	├──
c	I 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.	4d		
5	Does the organization discriminate by race in any way with respect to:			v
	Students' rights or privileges?	<u>5a</u>		X
	Admissions policies?	<u>5b</u>		X
	Employment of faculty or administrative staff?	<u>5c</u>		X
	Scholarships or other financial assistance?	<u>5d</u>		X
	Educational policies?	<u>5e</u>		X
	Use of facilities?	<u>5f</u>		X
	Athletic programs?	5g		X
h	Other extracurricular activities?	5h		X
	If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.			
	Does the organization receive any financial aid or assistance from a governmental agency?	<u>6a</u>	X	
b	Has the organization's right to such aid ever been revoked or suspended?	6b		X
	If you answered "Yes" on either line 6a or line 6b, explain on Part II.			
7	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through			
	4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, as modified by Rev. Proc. 2019-22, 2019-22 I.R.B. 1260, covering			
	racial nondiscrimination? If "No," explain on Part II	7	Х	

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

Schedule E (Form 990) 2023

Schedule E (Form 990) 2023 Monument Academy	27-0014128 Page 2
Part II Supplemental Information. Provide the explanations required by Part I, lines 3, 4d, 5h, 6b, a	and 7, as
applicable. Also provide any other additional information. See instructions.	
Line 6 - Explanation of Government Financial Aid:	
The school applies for grants each year and complies with	all state and
federal regulations regarding receipt and spending of gra	nts.

SCHEDULE G	Suppleme	ntal Information Regarding	, Func	Iraisi	ing or Gaming A	ctiv	ities	OMB No. 1545-0047	
(Form 990)	organization entered more than \$15,000 on Form 990-EZ, line 6a.							2023	
Department of the Treasury Internal Revenue Service		Attach to Form 990				_		Open to Public Inspection	
Name of the organization								•	
		t Academy					27-00		
	complete this part	Complete if the organization answ t.	ered "Y	'es" or	n Form 990, Part IV, I	ine 1	7. Form 990	-EZ filers are not	
 a Mail solicitat b X Internet and c Phone solici d X In-person so 2 a Did the organization key employees list 	b X Internet and email solicitations f Solicitation of government grants c Phone solicitations g Special fundraising events								
(i) Name and addres or entity (fund	s of individual	(ii) Activity	have c or cor	Did raiser ustody ntrol of utions?	(iv) Gross receipts from activity	tò (c	Amount pai or retained b fundraiser ted in col. (i	by) to (or retained by)	
			Yes	No	-				
Total									
3 List all states in whi or licensing.	ich the organizatio	n is registered or licensed to solicit	contrib	utions	or has been notified	ıt is e	exempt from	n registration	

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

Monument Academy

27-0014128 Page 2

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

			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
			Boot, Scoot		None	(add col. (a) through
			& Bid			col. (c)
a			(event type)	(event type)	(total number)	
Revenue	1	Gross receipts	186,403.			186,403.
	2	Less: Contributions	186,403.			186,403.
	3	Gross income (line 1 minus line 2)				
	4	Cash prizes	25,825.			25,825.
	5	Noncash prizes	18,452.			18,452.
penses	6	Rent/facility costs	1,000.			1,000.
Direct Expenses	7	Food and beverages	4,025.			4,025.
ā	8	Entertainment				
	9	Other direct expenses				
	10	Direct expense summary. Add lines 4 through	9 in column (d)			49,302.
	11	Net income summary. Subtract line 10 from li				-49,302.

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than

\$15,000 on Form 990-EZ, line 6a.

enue		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue				
S	2 Cash prizes				
Direct Expenses	3 Noncash prizes				
irect E>	4 Rent/facility costs				
ā	5 Other direct expenses				
	6 Volunteer labor	└── Yes % └── No	└── Yes % └── No	└── Yes % └── No	
	7 Direct expense summary. Add lines 2 through	5 in column (d)			
	8 Net gaming income summary. Subtract line 7	from line 1, column (d)			
9	Enter the state(s) in which the organization condu	cts gaming activities:			
	Is the organization licensed to conduct gaming ac If "No," explain:	tivities in each of these s	states?		Yes No
	Were any of the organization's gaming licenses re			year?	Yes No
D	If "Yes," explain:				

Sch	iedule G (Form 990) 2023	Monument	Academy	27-0014128	Page 3
11	Does the organization conduct ga	aming activities with	nonmembers?	Yes	No
			f a trust, or a member of a partnership or other entity formed		
				Yes	No
13	Indicate the percentage of gaming				
				13a	%
					%
			ares the organization's gaming/special events books and record		/0
••				0.	
	Name				
	Address				
15a	Does the organization have a con	tract with a third pa	rty from whom the organization receives gaming revenue?	Yes	No
	-				
I	If "Yes," enter the amount of gam	ing revenue receive	d by the organization \$ and the am	ount	
	of gaming revenue retained by the	e third party \$_			
	If "Yes," enter name and address				
	Name				
	Address				
16	Gaming manager information:				
	Name				
	Gaming manager compensation	\$			
	Description of services provided				
	Director/officer	Employee			
			Independent contractor		
17	Mandatory distributions:				
	•	estato law to make	charitable distributions from the gaming proceeds to		
•				Yes	No
,			e law to be distributed to other exempt organizations or spent i		
	organization's own exempt activit	-	· •	T the	
Pa	Int IV Supplemental Infor	mation. Provide	the explanations required by Part I, line 2b, columns (iii) and (v);	and Part III, lines 9, 9b	10b.
			rovide any additional information. See instructions.		,,
	, _, _, _,, w, we	P			

Part IV	Supplemental Information (continued)

SCHEDULE O (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.

Department of the Treasury Internal Revenue Service Name of the organization 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

Monument Academy

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

The mission of Monument Academy is to provide a challenging,

content-rich, academic program offered within an engaging, caring, and

positive learning environment. Established on a solid foundation of

knowledge, Monument Academy emphasizes academic excellence, respect,

responsibility, character and exemplary citizenship.

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

The mission of Monument Academy is to provide a challenging,

content-rich, academic program offered within an engaging, caring, and

positive learning environment. Established on a solid foundation of

knowledge, Monument Academy emphasizes academic excellence, respect,

responsibility, character and exemplary citizenship.

Form 990, Part XII, Line 1:

The School follows a modified accrual method of accounting as

prescribed by the Colorado Department of Education, the school-wide

financial statements are reported using the economic resources

measurements focus and the accrual basis of accounting. Grants and

similar items are recognized when all eligibility requirements imposed

by the provider have been met.

Form 990, Part VI, Section A, line 6:

The Organization has one class of members. Each employee and each parent of

a student currently enrolled at the Academy shall be considered a member.

Form 990, Part VI, Section A, line 7a:

The Organization's bylaws state that members shall have no rights or

privileges other than to elect the directors of the corporation.

Form 990, Part VI, Section A, line 8b:

The Organization did not have any committees with the authority to act on

behalf of the governing body.

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

The Form 990 is prepared by the Organization's Public Accounting Firm based on information provided by the management. Once a draft of the filing is available, copies of Form 990 are distributed to all Board Members for review via email, prior to filing. The CFO and Board of Directors, of the Organization, review the first draft of the Form 990 prior to its filing. The review conducted by the Board of Directors is a high level assessment for accuracy. The CFO conducts a more thorough review of the Form 990.

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

The Organization's conflict of interest policy as stated in the bylaws is as follows: If a responsible person is aware that the corporation is about to enter into any transaction or make any decision involving a conflict of interest, a "Conflicting Interest Transaction", such person: (1) Immediately inform those charged with approving the conflicting interest transaction on behalf of the corporation of the interest or position of such or any party related to such person; (II) Aid the persons charged with making the decision by disclosing any material facts within the responsible person's knowledge that bear on the advisability of the corporation entering into the conflicting interest transaction, and (III) not be 332212 11-14-23

Schedule O (Form 990) 2023	Page 2
Name of the organization	Employer identification number
Monument Academy	27-0014128

entitled to vote on the decision to enter into such transaction. Any

potential conflicts of interest are discussed at the board meetings and

documented in the board minutes.

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

Compensation of officers and key employees is discussed and determined by

the Board of Directors and documented in the meeting minutes of the

executive session. The most recent compensation review occurred in 2019.

Compensation review was not performed this year due to turnover at the

Executive Director position.

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

The Organization makes its governing documents, conflicts of interest

policy and financial statements available to the public through it's

website and upon request.

Form 990, Part XII, Line 1:

The school follows a modified accrual method of accounting as
prescrived by the Colorado Department of Education. The school-wide
financial statements are reported using the economic resources
measurement focus and the accrual basis of accounting. Grants and
similar items are recognized when all eligibility requirements imposed
by the provider have been met.
Form 990, Part XII, Line 2c:
The process for oversight and selection of an independent account has
not changed from the prior year.

332161 09-28-23 LHA

SCHEDULE R

Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

Attach to Form 990.

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

Name of the organization

Monument Academy

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt Part II organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity	cont	g) 512(b)(13) rolled :ity?
				501(c)(3))		Yes	No
Monument Academy Building Corporation -	Owns and Leases School						
26-1401850, 1150 Village Ridge Point,	Facilities to Monument						
Monument, CO 80132	Academy	Colorado	501(c)(3)	Line 12b, II	Monument Academy	X	
Monument Academy Foundation - 51-0506848							
1150 Village Ridge Point	Financial Support and						
Monument, CO 80132	Fundraising	Colorado	501(c)(3)	Line 12a, I	Monument Academy	х	

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

Schedule R (Form 990) 2023



Open to Public Inspection

Employer identification number

27-0014128

(Form 990)

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

									1			
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total income	Share of end-of-year assets	alloca	ortionate ations?	amount in box 20 of Schedule	Gene mana partr	ging her?	Percentage ownership
		country)		sections 512-514)		400010	Yes	No	K-1 (Form 1065)	Yes	No	
	-											
	-											
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Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

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

Schedule R (Form 990) 2023 Monument Academy

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

Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	s No
uring the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
eceipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a	I	X
ift, grant, or capital contribution to related organization(s)		,	X
ift, grant, or capital contribution from related organization(s)			X
oans or loan guarantees to or for related organization(s)		1	X
oans or loan guarantees by related organization(s)			X
ividends from related organization(s)	<u>1f</u>		X
ale of assets to related organization(s)	1g		2
urchase of assets from related organization(s)			2
xchange of assets with related organization(s)			2
ease of facilities, equipment, or other assets to related organization(s)		+-	2
ease of facilities, equipment, or other assets from related organization(s)	1k	X	
erformance of services or membership or fundraising solicitations for related organization(s)			2
erformance of services or membership or fundraising solicitations by related organization(s)	<u>1rr</u>	ı 📃	
haring of facilities, equipment, mailing lists, or other assets with related organization(s)	<u>1n</u>		
haring of paid employees with related organization(s)		_	2
eimbursement paid to related organization(s) for expenses	1 p		Σ
eimbursement paid by related organization(s) for expenses			Σ
ther transfer of cash or property to related organization(s)	<u>1r</u>		Σ
ther transfer of cash or property from related organization(s)			2
the answer to any of the above is "Yes." see the instructions for information on who must complete this line, including covered relationships and tran	nsaction thresholds.		

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) Monument Academy Building Corporation	K	932,088.	Fair Market Value
(2) Monument Academy Foundation	К	1,833,479.	Fair Market Value
(3)			
<u>(4)</u>			
<u>(5)</u>			
<u>(6)</u>			

Schedule R (Form 990) 2023 Monument Academy

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

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

(0)	<u> </u>	F	(d)	1-		(f)	(a)		•	(1)	(i)	(14)
(a)	(b)	(c)	(d)	(e Are partners 501(c orgs	all	(f)	(g) Share of		ר) החסיי-	(i) Code V UBI	(j)	(k)
Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign	Predominant income (related, unrelated, excluded from tax under sections 512-514)	partner: 501(c	s sec. ;)(3)	Share of total	end-of-year	tio	opor- nate	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	managin	
of entity		country)	excluded from tax under	orgs		income	assets		tions?	of Schedule K-1	partner?	
		country)	sections 512-514)	Yes	No	Income	asseis	Yes	No	(Form 1065)	Yes No	·
	-											
				$\left \right $								

Schedule R (Form 990) 2023

Schedule R (Form 990) 2023 Monu Part VII Supplemental Information

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

Return of Organization Exempt From Income Tax

Form Support Under section 501(c), 527, or 4947(a)(1) of the Intermal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public. Go to www.is.g.ou/Form990 for instructions and the latest information. 2023 Den to Public Den to Public Den to Public Den to Public Social Structures and the section south the latest information. 2023 Den to Public Den to Den to Public Den to Den to Den to Den to Den t		_		Return of Organization Exempt F	From li	ncome Tax	OMB No. 1545-0047
Description Conversion Description A For the 2022 calendar year, or tax year beginning JUL 1, 2023 and ending JUN 30, 2024 A For the 2022 calendar year, or tax year beginning JUL 1, 2023 and ending JUN 30, 2024 B Credit application Doing business as Doing business as 26-1401850 Doing business as Number and street (of P.0. box if mails not delivered to street address) Room/suite Telephone number 719-481-1950 Entry Number and street (of P.0. box if mails not delivered to street address) Room/suite Telephone number 719-481-1950 Entry Number and street (of P.0. box if mails not delivered to street address) Room/suite Telephone number 719-481-1950 Entry Number and street (of P.0. box if mails not delivered to street address) Room/suite Room/suite No02, 544. Monument , Co 80132 Hi(b) we all subordinates includes? Ves X No I Breity describe thatus: [X] 501(c)(1) (insert no.) 4947(a)(1) or Striety I Breity describe the organization's mission or most significant activities: The Building Coporation was Created to issue debt and build and support the school faccilties. 2 Check	Forr	9	90	•			2023
More the vector Inspection A Forthe 2022 calendar year, or tax year beginning JUL 1, 2023 and ending JUN 30, 2024 B Colspan="2">Colspan="2">Colspan="2">Inspection Monument Academy Building Corporation 26-1401850 Monument Academy Building Corporation 26-1401850 Monument, Colspan="2">Colspan="2"Colspan="2"Colspan="2"Colspan="2"Colspan="2"Colspan="2"Colspan="2"C	Depa						
B Charles C Name of organization D Employee identification number B Amount Monument Academy Building Corporation 26-1401850 B Daving business as Room/suite Enlephone number B Tisso Village Ridge Point 1050 Village Ridge Point 719-481-1950 B City or town, state or province, country, and ZIP or foreign postal code G Gross accepts 3 1,002,544. Monument , CO 80132 H(b) is a group return for subcodinates: number Yes No I Tax-exempt status: XI 501(c)(3) 501(c)() (insert no.) 4947(a)(1) or Size Y Website: Note or granization's mission or most significant activities: The Building Coporation was Texaeted to issue debt and build and support the school facilties. 2 Created to issue debt and build and support the school facilties. 7a 0. 3 Number of individuals enclosers (remover of members of the governing body (Part V, line ta) 3a 4 4 Number of individuals encloser form Part VIII, column (A), lines 5, 4, ad 7d) 41.3224. 70, 451. 5 Total numetar do individuals encloser form Part	Intern	al Reve	enue Service				Inspection
Monument Academy Building Corporation 26-1401850 Doing Dusiness as Doing Dusiness as 26-1401850 Interval Number and street (or P.0. box if mail is not delivered to street address) Room/suite E Telephone number Interval Tisto Village Ridge Point To 481-1950 G dross receipts \$ 1,002,544. Anemote Monument, CO 80132 Hail is this a group return For subordinates: ? Yes X No Amende Fame and atcress of principal officer: Collin Vinchattle For subordinates: ? Yes X No I Tax-exempt status: X 5010(x) 501(c)((insert no.) 4947(a)(t) or SUT Verset X Corporation Trust Association Other L Year of tormation; 2007 M State of legal domicile; CO Part1 Summary Summary Summary Summary Summary 2 Check this box If the organization's mission or most significant activities: The Building Coporation was Summary 3 Number of individuals employed in calendar year 2023 (Part V, line 1a) 3 4 4 Number of individuals employed in calendar year 2023 (Part V, line 1a) 3 <td< td=""><th></th><td></td><td></td><td></td><td>ل ending</td><td></td><td></td></td<>					ل ending		
Image: Control in the intermediate inte	В С ај	heck if oplicab	le: C Name of	organization		D Employer identificati	on number
Doing business as 26-1401850 Purpleter Number and street (or P.0. box if mail is not delivered to street address) Room/suite E Telephone number Tignet T150 Village Ridge Point City or town, state or province, country, and ZIP or foreign postal code G cross meeps * 1,002,544. Application F Name and address of principal officer: Collin Vinchattle F Name and address of principal officer: Collin Vinchattle H(a) Is this a group return for subordinates? Yes No J Website: https://www.lewispalmer.org/ H(b) Are all subordinates Yes No H(c) Group exemption number // State a list. See instructions H(c) Group exemption number Krom of organization: Xi Corporation Trust Association Other L year of formation: 2007 M State of legal domicle: CO Part I Summary I Briefly describe the organization's mission or most significant activities: The Building Coporation was 3 4 2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 0 3 Number of volung members of the governing body (Part V, line 1a) 4 4 4 4 I anumber of independent voting members of the governing body (Part V, line 2a) 5 <th></th> <td></td> <td>Monu</td> <td>ment Academy Building Corporation</td> <td></td> <td></td> <td></td>			Monu	ment Academy Building Corporation			
Instrument Number and street (or P.0. box if mail is not delivered to street address) Room/suite E Telephone number T150 V11lage Ridge Point C19 - 481-1950 Anonder City or town, state or province, country, and ZIP or foreign postal code G Gross reagins 1, 002, 544. Monument, CO 80132 H(a) Is this a group return For seas reagins 1, 002, 544. Monument, CO 80132 H(b) Arealis abordinates include? Yes X No I Tax-exempt status: X 501(C(3) 501(C) () (insert no.) 4947(a)(1) or For wall subordinates include? Yes No I Tax-exempt status: X 501(C(3) 501(C) () (insert no.) 4947(a)(1) or For wall subordinates include? Yes No I Tax-exempt status: X 501(C(3) 501(C) () (insert no.) 4947(a)(1) or For wall subordinates include? Yes No I Briefly describe the organization ission or most significant activities: The Building Coporation was created to issue debt and build and support the school facilties. 2 Check this box I the organization iscontinued its operations or disposed of more than 25% of its net assets. 3 3 Number of independent voting members of the governing body (Part V, line 1a) 4 4 4 4 Number of independent voting members of the governi		Name				26-1401850	
Image: Second		Initial			Room/suite		
Seguration City or town, state or province, country, and ZIP or foreign postal code Monument, CO 80132 G Gress receipts 1,002,544. Adjusted periodical periodi		_ Final	1150		nio onn, ounio		50
Monument, CO 80132 H(a) Is this a group return for subordinates of principal officer: Collin Vinchattle Browney F Name and address of principal officer: Collin Vinchattle for subordinates of the subordinates the subordinates of the subordinates of the subordina		termi	2			G Gross receipts \$	1,002,544.
Perform F Name and address of principal officer: Collin Vinchattle for subordinates? Yes No I Tax-exempt status: X 501(c)(3) 501(c)(1) (insert no.) 4947(a)(1) or 527 H(b) Are all subordinates? Yes No J Website: https://www.lewispalmer.org/ H(c) Group exemption number H(c) Group exemption number K Form of organization: X Corporation Trust Association Other L Year of formation: 2007 M State of legal domicile; CO Partil Summary I Briefly describe the organization's mission or most significant activities: The Building Coporation was Created to issue debt and build and support the school facilties. Check this box If the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) 3 4 4 Number of individuals employed in calendar year 2023 (Part V, line 2a) 5 0 6 Total number of volunteers (estimate if necessary) 7a 0. 0. 7a Total unrelated business taxable income from Form 990-T, Part I, line 11 7a 0. 0. 9 Program service revenue (Part VIII, column (A), lines 3, 4, and 7c) 11, other revenue (Part VIII, column (A),		Amer returr				H(a) Is this a group retur	n
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Prior Year Current Year 8 Contributions and grants (Part VIII, line 1h) 0. 0. 9 Program service revenue (Part VIII, line 2g) 930,438. 932,088. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 41,324. 70,451. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 0. 5. 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), lines 1-3) 0. 0. 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 0. 0. 14 Benefits paid to or for members (Part IX, column (A), line 4) 0. 0. 0. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 0. 0. 0. 16a Professional fundraising fees (Part IX, column (D), line 25) 0. 0. 0. 0. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 744,659. 840,940. 744,659. 840,940.	Act						
8 Contributions and grants (Part VIII, line 1h) 0. 0. 9 Program service revenue (Part VIII, line 2g) 930,438. 932,088. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 41,324. 70,451. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 0. 5. 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 971,762. 1,002,544. 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 0. 0. 14 Benefits paid to or for members (Part IX, column (A), line 4) 0. 0. 0. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 0. 0. 0. 16a Professional fundraising fees (Part IX, column (D), line 25) 0. 0. 0. 0. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 744, 659. 840, 940. 840, 940. 18 Total expenses Add lines 13.17 (must equal Part IX, column (A), line 25) 0. 744, 659. 840, 940.		b	Net unrelated	business taxable income from Form 990-T, Part I, line 11			
9 Program service revenue (Part VIII, line 2g) 930,438. 932,088. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 41,324. 70,451. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 0. 5. 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 971,762. 1,002,544. 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 0. 0. 14 Benefits paid to or for members (Part IX, column (A), line 4) 0. 0. 0. 15 Salaries, other compensation, employee benefits (Part IX, column (A), line 5-10) 0. 0. 0. 16a Professional fundraising fees (Part IX, column (A), line 25) 0. 0. 0. 0. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 744,659. 840,940. 840,940. 18 Total expenses Add lines 13 17 Column (A), lines 25) 0. 744,659. 840,940.			.				
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12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 971,762. 1,002,544. 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 0. 14 Benefits paid to or for members (Part IX, column (A), line 4) 0. 0. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 0. 0. 16a Professional fundraising fees (Part IX, column (A), line 11e) 0. 0. b Total fundraising expenses (Part IX, column (D), line 25) 0. 744,659. 840,940. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 744,659. 840,940.	Re						
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 0. 14 Benefits paid to or for members (Part IX, column (A), line 4) 0. 0. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 0. 0. 16a Professional fundraising fees (Part IX, column (A), line 11e) 0. 0. b Total fundraising expenses (Part IX, column (D), line 25) 0. 744,659. 840,940. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 744,659. 840,940.							
14 Benefits paid to or for members (Part IX, column (A), line 4) 0.000 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 0.000 16a Professional fundraising fees (Part IX, column (A), line 11e) 0.000 b Total fundraising expenses (Part IX, column (D), line 25) 0.000 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 744,659.840,940. 18 Total expenses Add lines 13.17 (must equal Part IX, column (A), line 25) 744,659.840,940.							
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 0. 0. 16a Professional fundraising fees (Part IX, column (A), line 11e) 0. 0. b Total fundraising expenses (Part IX, column (D), line 25) 0. 0. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 744,659. 840,940. 18 Total expenses Add lines 13.17 (must equal Part IX, column (A), line 25) 744,659. 840,940.						• •	
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18 Total expanses Add lines 13.17 (must equal Part IX column (A) line 25) 744.659 840.940.	Exp			•••••••••••••••••••••••••••••••••••••••		744.659.	840,940,
							840,940.

744,659. 227,103. 161,604. 19 Revenue less expenses. Subtract line 18 from line 12 **Beginning of Current Year** End of Year Pé sets 11,038,079. 10,703,141. Total assets (Part X, line 16) 20 11,578,604. Se a 11,082,062. **21** Total liabilities (Part X, line 26) Vet -540,525. -378,921 22 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. Т

Sign	Signature of officer			Date		
	Collin Vinchattle, Princi	pal and Executi	ve Director			
	Type or print name and title					
	Print/Type preparer's name	Preparer's signature	Date	Check	PTIN	
Paid	Thomas G. Sistare	Thomas G. Sista	are 11/12	/24 self-employed	P0035696	58
Preparer	Firm's name Hoelting & Compan	y, Inc.		Firm's EIN 30-	0514455	
Use Only	Firm's address 31 East Platte Av	enue, Suite 300)			
	Colorado Springs,	CO 80903		Phone no. (719) 630-10)91
May the IF	RS discuss this return with the preparer shown abo	ve? See instructions			X Yes	No
LHA For	Paperwork Reduction Act Notice, see the separation	rate instructions. 33200	1 12-21-23		Form 990	(2023)

	1990 (2023) Monument Academy Building Corporation 26-140 rt III Statement of Program Service Accomplishments	1850	Page 2
Fai			
	Check if Schedule O contains a response or note to any line in this Part III		
1	Briefly describe the organization's mission: The Monument Academy Building Corporation was created to issue	deht	
	build a facility and lease the facility to Monument Academy. Mo		
	Academy is a public school chartered through the Lewis-Palmer S		
	District in Colorado.	011001	
2	Did the organization undertake any significant program services during the year which were not listed on the		
2		Vec	XNo
	prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O.		21 NO
2		Yes	XNa
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?		
	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	-	-1
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total exponent if any family for each part of the section of the	penses, an	a
4-	revenue, if any, for each program service reported.	032 ()93.)
4a	(Code:) (Expenses \$840,940. including grants of \$) (Revenue \$))
		ment	
	Academy.		
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$))
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
			/
4d	Other program services (Describe on Schedule O.)		
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses 840,940.		
			AD (2022)

Form 990 (2				Building	Corporation
Part IV	Checklist of Required S	chedule	S		

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			<u></u>
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			37
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in		v	
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X	
	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			v
40-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	10-		x
Ŀ.	Schedule D, Parts XI and XII	12a		
a	Was the organization included in consolidated, independent audited financial statements for the tax year?	101	х	
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b 13		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If</i> " <i>Yes</i> ," <i>complete Schedule E</i>			X
14а ь	Did the organization maintain an office, employees, or agents outside of the United States?	14a		- 23
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		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
10	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		x
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II	21		X

Form 990 (2023)				Corporation
Part IV Checklist of	Required Scheo	lules _{(continue}	ed)	

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a	Х	37
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		x
с	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	~		v
	any tax-exempt bonds?	24c		X
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u> </u>
258	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	25a		x
h	transaction with a disqualified person during the year? <i>If</i> "Yes," <i>complete Schedule L, Part I</i> Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	258		
D	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	200		
20	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	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		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			37
	contributions? If "Yes," complete Schedule M	30		X X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			v
~~	Schedule N, Part II	32		<u> </u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	33		x
34	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		
U 4	Part V, line 1	34	х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		x
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
-	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
Pa	Note: All Form 990 filers are required to complete Schedule O Statements Regarding Other IRS Filings and Tax Compliance	38	Х	<u> </u>
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 0			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		

Form 990 (2023) Monument Academy Building Corporation 26-1401850 Page Part V Statements Regarding Other IRS Filings and Tax Compliance (continued) Page							
			Yes	No			
22	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		165	NO			
20	filed for the calendar year ending with or within the year covered by this return 2a 0						
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b					
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		x			
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b					
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a						
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		x			
b	If "Yes," enter the name of the foreign country						
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).						
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X			
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X			
с	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c					
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit						
	any contributions that were not tax deductible as charitable contributions?	<u>6a</u>		X			
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts						
	were not tax deductible?	6b					
7	Organizations that may receive deductible contributions under section 170(c).			37			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X			
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b					
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			v			
	to file Form 8282?	7c		X			
	If "Yes," indicate the number of Forms 8282 filed during the year 7d	7.					
e f	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e 7f		<u> </u>			
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7g					
g	If the organization received a contribution of qualified intellectual property, did the organization file of the organization file a Form 1098-C?	79 7h					
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the						
Ū	sponsoring organization have excess business holdings at any time during the year?	8					
9	Sponsoring organizations maintaining donor advised funds.						
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a					
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b					
10	Section 501(c)(7) organizations. Enter:						
а	Initiation fees and capital contributions included on Part VIII, line 12						
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b						
11	Section 501(c)(12) organizations. Enter:						
а	Gross income from members or shareholders 11a						
b	Gross income from other sources. (Do not net amounts due or paid to other sources against						
	amounts due or received from them.)						
	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	4					
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					
	Note: See the instructions for additional information the organization must report on Schedule O.						
b	Enter the amount of reserves the organization is required to maintain by the states in which the						
	organization is licensed to issue qualified health plans	-					
	Enter the amount of reserves on hand			X			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		<u> </u>			
	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i>	14b		<u> </u>			
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	45		x			
	excess parachute payment(s) during the year?	15		Δ			
16	If "Yes," see the instructions and file Form 4720, Schedule N.	16		x			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16					
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities						
.,	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17					
	If "Yes." complete Form 6069.	—					

Form 990 (2023

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

 Form 990 (2023)
 Monument Academy Building Corporation
 26-1401850
 Page

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

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

Sec	tion A. Governing Body and Management					-
		1 1			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		4		
	If there are material differences in voting rights among members of the governing body, or if the governing					
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.					
	Enter the number of voting members included on line 1a, above, who are independent	1b		4		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	o with any	other			
	officer, director, trustee, or key employee?			2		X
3	Did the organization delegate control over management duties customarily performed by or under the	e direct su	pervision			
						X
4	Did the organization make any significant changes to its governing documents since the prior Form 9		ed?			X
5	Did the organization become aware during the year of a significant diversion of the organization's ass	sets?				X
6	Did the organization have members or stockholders?			6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap	ppoint one	or			
	more members of the governing body?			<u>7a</u>		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, st					
	persons other than the governing body?			7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	-	-		37	
	The governing body?			<u>8a</u>	X	37
	Each committee with authority to act on behalf of the governing body?			<u>8b</u>		X
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be real					
<u> </u>	organization's mailing address? If "Yes," provide the names and addresses on Schedule O			9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	evenue Co	de.)			
40-				40	Yes	No X
	Did the organization have local chapters, branches, or affiliates?			10a		
D	If "Yes," did the organization have written policies and procedures governing the activities of such ch			10		
44.			ling the form?			
	Has the organization provided a complete copy of this Form 990 to all members of its governing body. Describe on Schedule O the process, if any, used by the organization to review this Form 990.	y belore ii	ing the lonn?	11a	Λ	
				12a	x	
12a						
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If</i> "y				21	
C				120	x	
13	on Schedule O how this was done Did the organization have a written whistleblower policy?			13		x
14					X	
15	Did the organization have a written document retention and destruction policy?			14		
10	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	a by much				
-	The organization's CEO, Executive Director, or top management official			15a		x
	Other officers or key employees of the organization			15a		X
	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 arranger	nent with	а			
	taxable entity during the year?			16a		x
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluat					
~	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	-				
	exempt status with respect to such arrangements?			16b		
Sec	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed None					
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024 A, if applicable), 990, and	nd 990-T (section 501(c)(B)s only) availa	ble
	for public inspection. Indicate how you made these available. Check all that apply.					
	X Own website Another's website X Upon request Other (explain	n on Schei	dule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co		,	nd finai	ncial	
	statements available to the public during the tax year.					
20	State the name, address, and telephone number of the person who possesses the organization's boo	oks and re	cords			
	The Organization - 719-481-1950					
	1150 Village Ridge Point, Monument, CO 80132					

Form 990 (2				Corporation	26-1401850	Page 1
Part VII	Compensation of Officers, D	irectors, Tru	ustees, Key Er	nployees, Highest Co	mpensated	
	Employees, and Independen	t Contracto	rs			
	Check if Schedule O contains a respo	onse or note to a	any line in this Parl	t VII		
Section A.	Officers, Directors, Trustees, Key	Employees, and	d Highest Compe	nsated Employees		
● List a	ete this table for all persons required to Il of the organization's current officers columns (D), (E), and (F) if no compens	s, directors, trus	tees (whether indiv	, ,		

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

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

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

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

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

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

(A) Name and title	(B) Average hours per week	box	not c , unle:	Pos heck i ss per	more rson i	than o s both r/trus	n 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	Institutional trustee	Officer	Key employee	Highest com pensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	(W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(1) Collin Vinchattle	0.50									21 016
Principal and Executive Director	50.50			X				0.	84,639.	31,846.
(2) Mark McWilliams President	0.50	x		x				0.	0.	0.
(3) Chris Dole	0.50									
Secretary	0.50	x		x				0.	0.	0.
(4) Melanie Strop	0.50									
Director	0.50	x						0.	0.	0.
(5) Craig Carle	0.50								•••	
Director	5.50	х						0.	0.	0.
						-				
		-								
		-								
		I		l			L	I		

Part VII Section A. Officers, Directors, Trus			200	and	l Hir		+ ^ ⁄		S (continue -1)	01850) Page
(A) Name and title	(B) Average hours per week	(do box,	 not cł unles	(C Posi neck i ss per	C) ition more rson is		one an	(D) Reportable compensation	(E) Reportable compensation		(F) Estimated mount of
	(list any hours for related organizations below line)	Individual trustee or director	In stitutional trustee	Officer	Key em ployee	Highest compensated employee	Former	from the organization (W-2/1099-MISC/ 1099-NEC)	from related organizations (W-2/1099-MIS 1099-NEC)	C/ OI	other mpensation from the ganization nd related ganizations
b Subtotal C Total from continuation sheets to Part VI d Total (add lines 1b and 1c) Total number of individuals (including but n	, Section A				·····			0. 0. 0.	84,63	0. 9. 3	81,846 0 81,846
compensation from the organization Did the organization list any former officer, line 1a? <i>If</i> "Yes," <i>complete Schedule J for su</i> For any individual listed on line 1a, is the su and related organizations greater than \$150 Did any person listed on line 1a receive or a rendered to the organization? <i>If</i> "Yes," <i>com</i> ection B. Independent Contractors	uch individual m of reportable ,000? If "Yes, ccrue compen	e co " <i>coi</i> satio	mpe mple	nsa ete S om	tion Sche any	and dule unre	oth J fo	er compensation from t or such individual d organization or individ	he organization dual for services	3	Yes No X X X X X
Complete this table for your five highest co the organization. Report compensation for t										ensation f	rom
(A) Name and business	address	NC	ONE	1				(B) Description of s	ervices		(C) ensation

	<u>1 990 (</u>			Acad	emy Buil	ding Corpor	ration	26-1401	850 Page 9
Pa	rt VII	Statement of Re	venue						
		Check if Schedule O	contains a re	esponse	or note to any lir		(D)	(0)	
						(A) Total revenue	(B) Related or exempt	(C) Unrelated	(D) Revenue excluded
								business revenue	from tax under
									sections 512 - 514
nts nts	1 a	Federated campaigns		<u>1a</u>		-			
Gra	b			1b		-			
ts, (Am	С	Fundraising events		1c		-			
Contributions, Gifts, Grants and Other Similar Amounts	d	Related organizations		1d		-			
ns, Sim	е	5 (<u>1e</u>		-			
er S	f	All other contributions, gifts,							
Cibr Oth		similar amounts not included		1f		-			
ont nd (g	Noncash contributions included in		1g \$					
<u>o</u> e	h	Total. Add lines 1a-1f							
	-	Dontol Incomo			Business Code	022 000	022 000		
ice	2 a	Rental Income			518210	932,088.	932,088.		
erv	b								
n S /en	с								
graı Rev	d								
Program Service Revenue	e	All other presson convice							
-	•	All other program service Total. Add lines 2a-2f				932,088.			
	9 3	Investment income (includ				552,000.			
	3					70,451.			70,451.
	4	Income from investment of			roceeds	/0/1010			,,,,,,,,,,,
	5	Royalties	-	-					
	J		(i)	Real	(ii) Personal				
	6 a	Gross rents	6a		(.,				
			6b						
		- · · · · // // · · · ·	6c						
		Net rental income or (loss							
		Gross amount from sales of		curities	(ii) Other				
		assets other than inventory	7a						
	b	Less: cost or other basis							
ne		and sales expenses	7b						
venue	с	Gain or (loss)	7c						
0	d	Net gain or (loss)							
Other Ro	8 a	Gross income from fundraisi	ng events (no	ot					
Œ		including \$		of					
		contributions reported on	line 1c). Se	e					
		Part IV, line 18				-			
		Less: direct expenses							
		Net income or (loss) from							
	9 a	Gross income from gamin							
		Part IV, line 19				-			
		Less: direct expenses							
		Net income or (loss) from			1				
	10 a	Gross sales of inventory,							
		and allowances				-			
		Less: cost of goods sold			•				
	С	Net income or (loss) from	sales of inve	entory	Business Code				
sn	11 a	Miscellaneous	Reven	110	611110	5.	5.		
Miscellaneous Revenue	iia ۲				01110	<u> </u>	J•		
∳llar ven	b c								
Be	ט ה	All other revenue							
Σ	e u	Total. Add lines 11a-11d				5.			
	12	Total revenue. See instruction	ons	<u></u>		1,002,544.	932,093.	0.	70,451.

Secti	on 501(c)(3) and 501(c)(4) organizations must comp				
	Check if Schedule O contains a response				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
Ū	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
	E E E E E E E E E E E E E E E E E E E				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
-	trustees, and key employees				
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				
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (nonemployees):				
а	Management				
b	Legal				
с	Accounting				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A), amount, list line 11g expenses on Sch 0.)				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	544,950.	544,950.		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	295,990.	295,990.		
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.)				
a h					
b					
c d					
d	All other expenses				
	All other expenses	840,940.	840,940.	0.	0.
<u>25</u> 26	Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization	040,940•	010,940.	• •	0.
20	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				
					- 000 (2000)

 Form 990 (2023)
 Monument Academy Building Corporation

 Part IX
 Statement of Functional Expenses

26-1401850 Page 10

Form 9	990 (2	2023)	Monument	Academy	Building C
Part	X	Balance Sheet			
		Check if Schedule (O contains a respo	onse or note to a	any line in this Part X
	1	Cash - non-interest-	bearing		
	2	Savings and tempo	rary cash investm	ents	

	1	Cash - non-interest-bearing		1	5.
	2	Savings and temporary cash investments	1,613,198.	2	1,694,199.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
ŝ	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
Ř	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 12,424,809.			
	b	Less: accumulated depreciation	8,035,902.	10c	7,739,912.
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets	1 200 000	14	1 0 0 0 0 0
	15	Other assets. See Part IV, line 11	1,388,979.	15	1,269,025.
	16	Total assets. Add lines 1 through 15 (must equal line 33)	11,038,079.	16	10,703,141.
	17	Accounts payable and accrued expenses	115,234.	17	110,534.
	18	Grants payable		18	
	19	Deferred revenue	11,463,370.	19	10 071 529
	20	Tax-exempt bond liabilities	11,403,370.	20	10,971,528.
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
ies	22	Loans and other payables to any current or former officer, director,			
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%		22	
Lial	23	controlled entity or family member of any of these persons		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	25	Other liabilities (including federal income tax, payables to related third		27	
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	11,578,604.	26	11,082,062.
		Organizations that follow FASB ASC 958, check here			
ces		and complete lines 27, 28, 32, and 33.			
	27	Net assets without donor restrictions	-2,038,489.	27	-1,962,591.
Bal	28	Net assets with donor restrictions	1,497,964.	28	1,583,670.
pu		Organizations that do not follow FASB ASC 958, check here			
ц.		and complete lines 29 through 33.			
Net Assets or Fund Balan	29	Capital stock or trust principal, or current funds		29	
set	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
t As	31	Retained earnings, endowment, accumulated income, or other funds		31	
Ne	32	Total net assets or fund balances	-540,525.	32	-378,921.
	33	Total liabilities and net assets/fund balances	11,038,079.	33	<u>10,703,141.</u>

(B) End of year

(A) Beginning of year

Form **990** (2023)

uilding Corporation

Form 99 Part

Form	990 (2023) Monument Academy Building Corporation	26-14	01850	Pag	_{ge} 12
Pa	rt XI	Reconciliation of Net Assets				
		Check if Schedule O contains a response or note to any line in this Part XI				
1	Total	revenue (must equal Part VIII, column (A), line 12)	1	1,002		
2	Total	expenses (must equal Part IX, column (A), line 25)	2	840		
3	Reve	nue less expenses. Subtract line 2 from line 1	3	161		
4	Net a	ssets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	-540	, 52	25.
5	Net u	nrealized gains (losses) on investments	5			
6	Dona	ted services and use of facilities	6			
7	Inves	tment expenses	7			
8		period adjustments	8			
9	Othe	r changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net a	ssets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
		nn (B))	10	-378	,9:	21.
Pa	rt XII	Financial Statements and Reporting				
		Check if Schedule O contains a response or note to any line in this Part XII				X
			_		Yes	No
1	Acco	unting method used to prepare the Form 990: $\hfill ext{Delta}$ Cash $\hfill ext{Delta}$ Accrual $\hfill extbf{X}$ Other $\hfill ext{See Sch}$	0			
	If the	organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	0.			
2a	Were	the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	lf "Y∈	es," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	sepa	rate basis, consolidated basis, or both:				
		Separate basis Consolidated basis Both consolidated and separate basis				
b		the organization's financial statements audited by an independent accountant?		2b	Х	<u> </u>
	lf "Y∈	es," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	cons	olidated basis, or both:				
		Separate basis X Consolidated basis Both consolidated and separate basis				
С		es" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the				
	revie	<i>w</i> , or compilation of its financial statements and selection of an independent accountant?		2c	Х	<u> </u>
		organization changed either its oversight process or selection process during the tax year, explain on Sche	edule O.			
3a	As a	result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
		rm Guidance, 2 C.F.R. Part 200, Subpart F?		. <u>3a</u>		X
b		s," did the organization undergo the required audit or audits? If the organization did not undergo the requi				
	or au	dits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		L

Form 990 (2023)

SCHEDULE A (Form 990) Department of the Treasury Internal Revenue Service	Complete if the orgar 49 A	rity Status an nization is a section 501 47(a)(1) nonexempt cha ttach to Form 990 or Fo /Form990 for instruction	l(c)(3) organizatio ritable trust. orm 990-EZ.	n or a section		OMB No. 1545-0047
Name of the organizati	on					identification number
	Monument Acade					6-1401850
Part I Reason	for Public Charity Status.	(All organizations must o	complete this part.)	See instruction	ıs.	
The organization is not a	a private foundation because it is: (For lines 1 through 12, c	heck only one box	.)		
1 🔄 A church, co	nvention of churches, or associatio	on of churches described	l in section 170(b)(1)(A)(i).		
2 A school des	cribed in section 170(b)(1)(A)(ii). ((Attach Schedule E (Forn	n 990).)			
3 A hospital or	a cooperative hospital service orga	anization described in s e	ection 170(b)(1)(A	(iii).		
4 A medical res	search organization operated in co	njunction with a hospital	described in sec	ion 170(b)(1)(A)(iii). Enter	the hospital's name,
city, and stat						
5 An organizat	ion operated for the benefit of a co	llege or university owned	l or operated by a	governmental u	nit describe	d in
section 170	(b)(1)(A)(iv). (Complete Part II.)					
	te, or local government or governn					
-	ion that normally receives a substa	ntial part of its support fi	rom a governmenta	al unit or from t	he general p	oublic described in
	b)(1)(A)(vi). (Complete Part II.)					
·	r trust described in section 170(b)					
-	al research organization described			-	-	•
	or a non-land-grant college of agric	culture (see instructions).	Enter the name, c	ty, and state of	the college	or
university:						
-	ion that normally receives (1) more				-	-
	ted to its exempt functions, subject	-				-
	unrelated business taxable income	(less section 511 tax) inc	on businesses acq	ulled by the org	Janization a	iter Julie 30, 1975.
	509(a)(2). (Complete Part III.)	ively to test for public or	fatu Caa castier	500(a)(4)		
	ion organized and operated exclus ion organized and operated exclus	•	•		rry out the	ourposes of one or
	/ supported organizations describe	-	-		-	-
	bugh 12d that describes the type o			-		fleck the box off
	upporting organization operated, s		-		-	nivina
	ted organization(s) the power to re-	-				
	n. You must complete Part IV, Se					pporting
T T T	supporting organization supervised		tion with its suppo	ted organizatio	n(s) by hav	ina
	management of the supporting orga			•		•
	n(s). You must complete Part IV,				90 00.pp	
	nctionally integrated. A supportin		in connection with	. and functiona	llv integrate	d with.
	ed organization(s) (see instructions				, ,	,
	n-functionally integrated. A supp		-		rted organiz	ation(s)
	functionally integrated. The organiz				-	
requiremer	nt (see instructions). You must cor	mplete Part IV, Sections	A and D, and Pa	rt V.		
e 🗌 Check this	box if the organization received a	written determination fro	m the IRS that it is	а Туре I, Туре	II, Type III	
functionally	/ integrated, or Type III non-functio	nally integrated supporti	ng organization.			
f Enter the number	of supported organizations					1
	ing information about the supporte					
(i) Name of supp		(iii) Type of organization (described on lines 1-10	(iv) Is the organization liste in your governing document	?	-	(vi) Amount of other
organizatior	l	above (see instructions))	Yes No	support (see i	Instructions)	support (see instructions)
Monument Aca	dmey 27-0014128	2	X	840),940.	

Total

840,940.

0.

Schedule A	A (Form 990) 2023	Monument	Academy	Building	Corporation	26-1401850	Page 2
Part II	Support Schedule	for Organization	ons Describe	d in Sections	170(b)(1)(A)(iv) and 1	70(b)(1)(A)(vi)	
	(Complete only if you ch	ecked the box on lir	ne 5, 7, or 8 of P	art I or if the orgar	nization failed to qualify und	er Part III. If the organiza	tion
	fails to qualify under the	tests listed below,	olease complete	Part III.)			
Section /	A. Public Support						

Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4.						
Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources \dots						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities,	etc. (see instructio	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	01(c)(3)	
	organization, check this box and stop	p here					
Se	ction C. Computation of Publi	ic Support Per	centage				
14	Public support percentage for 2023 (line 6, column (f), d	ivided by line 11, o	column (f))		14	%
15	Public support percentage from 2022	Schedule A, Part	II, line 14			15	%
16 a	6a 33 1/3% support test - 2023. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and						
	stop here. The organization qualifies	as a publicly supp	orted organization				
k	33 1/3% support test - 2022. If the	organization did no	ot check a box on I	ine 13 or 16a, and	l line 15 is 33 1/3%	or more, check	<pre>< this box</pre>
	and stop here. The organization qua	lifies as a publicly s	supported organiza	ation			
17a	10% -facts-and-circumstances test	t - 2023. If the org	anization did not o	check a box on line	e 13, 16a, or 16b, a	and line 14 is 10	0% or more,
	and if the organization meets the facts and circumstances test, check this box and stop here. Explain in Part VI how the organization						
	meets the facts-and-circumstances te	est. The organizatio	on qualifies as a pu	blicly supported o	rganization		
k	10% -facts-and-circumstances test	t - 2022. If the org	anization did not o	check a box on line	e 13, 16a, 16b, or 1	17a, and line 15	5 is 10% or
	more, and if the organization meets the	he facts-and-circun	nstances test, che	ck this box and s	top here. Explain i	n Part VI how t	he _
	organization meets the facts-and-circ	umstances test. Th	ne organization qua	alifies as a publicly	supported organiz	zation	
18	Private foundation. If the organization	on did not check a	box on line 13, 16	a, 16b, 17a, or 17t	o, check this box a		
							A (Farma 000) 0000

Schedule A (Form 990) 2023

Schedule A (Form 990) 2023 MC Part III Support Schedule for O		cademy Bu Described in S			26-140	1850 Page 3
	-				out II. If the exception	ation fails to
(Complete only if you checked t qualify under the tests listed be			organization failed	to quality under P	art II. If the organiz	ation fails to
Section A. Public Support	low, please comp	nete Fart II.)				
Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 	(4) 2010	(5) 2020	(0) 2021	(4) 2022	(0) 2020	
2 Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or bus- iness under section 513						
4 Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						
Section B. Total Support			1	1	1	
Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from businesses						
acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is						

- regularly carried on12 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 organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

Se	ction C. Computation of Public Support Percentage		
15	Public support percentage for 2023 (line 8, column (f), divided by line 13, column (f))	15	%
16	Public support percentage from 2022 Schedule A, Part III, line 15	16	%
Se	ction D. Computation of Investment Income Percentage		
17	Investment income percentage for 2023 (line 10c, column (f), divided by line 13, column (f))	17	%
18	Investment income percentage from 2022 Schedule A, Part III, line 17	18	%
19	a 33 1/3% support tests - 2023. If the organization did not check the box on line 14, and line 15 is more than 3	3 1/39	%, and line 17 is not
	more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization	tion	
I	b 33 1/3% support tests - 2022. If the organization did not check a box on line 14 or line 19a, and line 16 is mo	re tha	n 33 1/3%, and
	line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly support	orted c	organization
20	Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see ins	tructio	ons

Monument Academy Building Corporation 26-1401850 Page 4

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.)

Х 1 Х 2 Х 3a 3b 3c Х 4a 4b 4c Х 5a 5b 5c х 6 Х 7 х 8 х 9a Х 9b Х 9c Х 10a

10b

Schedule A (Form 990) 2023

Yes

No

Schedule A (Form 990) 2023

Monument Academy Building Corporation 26-1401850 Page 5 Schedule A (Form 990) 2023 Part IV Supporting Organizations (continued) Yes No 11 Has the organization accepted a gift or contribution from any of the following persons? a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and х 11c below, the governing body of a supported organization? 11a Х **b** A family member of a person described on line 11a above? 11b c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide Х <u>detail in P</u>art VI 11c Section B. Type I Supporting Organizations Yes No Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or 1 more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the 1 supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.

2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,

rait vi now providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization

Section C. Type II Supporting Organizations

 1
 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed
 Image: Control organization was vested in the same persons that controlled or managed

 1
 X

Section D	. All Type III	Supporting	Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		

Section E. Type III Functionally Integrated Supporting Organizations

- 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
- a The organization satisfied the Activities Test. Complete line 2 below.
- **b** The organization is the parent of each of its supported organizations. *Complete* **line 3** *below.*
- c The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).
- 2 Activities Test. Answer lines 2a and 2b below.
- **a** Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in **Part VI identify those supported organizations and explain** how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in* Part VI *the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.*
- 3 Parent of Supported Organizations. Answer lines 3a and 3b below.
- **a** Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If* "Yes" or "No" provide details in **Part VI.**
- **b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in* **Part VI** *the role played by the organization in this regard.*

2a

2b

3a

Yes No

2

Sche	dule A (Form 990) 2023 Monument Academy Build			26-1401850 Page 6
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporti	ng Organi	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualify	ing trust on N	lov. 20, 1970 (<i>explain in</i>	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mu	st complete S	Sections A through E.	_
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
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 integrated	d Type III supporting orga	anization (see

instructions).

Schedule A (Form 990) 2023

8 Breakdown of line 7: a Excess from 2019 b Excess from 2020 c Excess from 2021 d Excess from 2022 e Excess from 2023

	rt V Type III Non-Functionally Integrated 509(emy Building Co (a)(3) Supporting Orga	nizations (continu		5-1401850 _{Pa}
ecti	ion D - Distributions		loontain		Current Year
1	Amounts paid to supported organizations to accomplish exer	mpt purposes		1	
2	Amounts paid to perform activity that directly furthers exemp				
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	6	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	ne organization is responsive			
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2023 from Section C, line 6			9	
0	Line 8 amount divided by line 9 amount			10	
ecti	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution 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				
а	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				
h	Applied to 2023 distributable amount				
i	Carryover from 2018 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2023 from Section D,				
	line 7: \$				
а	Applied to underdistributions of prior years				
b	Applied to 2023 distributable amount				
С	Remainder. Subtract lines 4a and 4b from line 4.				
	Remaining underdistributions for years prior to 2023, if				
5	any. Subtract lines 3g and 4a from line 2. For result greater				
5			1		
5	than zero, explain in Part VI. See instructions.			_	
5	than zero, <i>explain in</i> Part VI. See instructions. Remaining underdistributions for 2023. Subtract lines 3h				
	than zero, explain in Part VI. See instructions.				

Schedule A (Form 990) 2023

	(Form 990) 2023	Monument	Academy	Building	Corporation	26-1401850 Page 8
Part VI	Supplemental Information Part IV, Section A, lines 1	mation. Provide 1 , 2, 3b, 3c, 4b, 4c, 5 lines 2 and 3; Part I	the explanations 5a, 6, 9a, 9b, 9c, V, Section E, line	required by Part 11a, 11b, and 11 es 1c, 2a, 2b, 3a,	II, line 10; Part II, line 17a c; Part IV, Section B, line and 3b; Part V, line 1; Pa	a or 17b; Part III, line 12; ss 1 and 2; Part IV, Section C, ırt V, Section B, line 1e; Part V,

Department of the Treasury Internal Revenue Service

(Form	990)
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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.



Name of the organization

Monument Academy Building Corporation

Employer identification number 26-1401850

Pa	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds	or Accounts. Complete if the			
	organization answered "Yes" on Form 990, Part IV, lin	e 6.				
		(a) Donor advised funds				
1	Total number at end of year					
2	Aggregate value of contributions to (during year)					
3	Aggregate value of grants from (during year)					
4	Aggregate value at end of year					
5	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor advis	ed funds			
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No			
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can be	used only			
	for charitable purposes and not for the benefit of the donor o	r donor advisor, or for any other purpose	conferring			
De						
Pa			Part IV, line 7.			
1	Purpose(s) of conservation easements held by the organization					
	Preservation of land for public use (for example, recrea		f a historically important land area			
	Protection of natural habitat	Preservation o	f a certified historic structure			
•	Preservation of open space					
2	Complete lines 2a through 2d if the organization held a qualif day of the tax year.	ried conservation contribution in the form	Held at the End of the Tax Year			
_						
a L						
b	Total acreage restricted by conservation easements	uatura included on line 2a				
с С			<u>2</u> c			
d	Number of conservation easements included on line 2c acqu on a historic structure listed in the National Register		2d			
3	Number of conservation easements modified, transferred, rel					
U	year	cased, extinguished, or terminated by the				
4	Number of states where property subject to conservation eas	sement is located				
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,					
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and enforcing conserva	tion easements during the year			
8	Does each conservation easement reported on line 2d above	satisfy the requirements of section 170(h	n)(4)(B)(i)			
	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 financial statem	ents that describes the			
-	organization's accounting for conservation easements.					
Pa	t III Organizations Maintaining Collections of		ther Similar Assets.			
	Complete if the organization answered "Yes" on Form					
1a	If the organization elected, as permitted under FASB ASC 95					
	of art, historical treasures, or other similar assets held for pub					
	service, provide in Part XIII the text of the footnote to its finar					
b	If the organization elected, as permitted under FASB ASC 95					
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in furt	nerance of public service,			
	provide the following amounts relating to these items.		^			
	(i) Revenue included on Form 990, Part VIII, line 1					
~						
2	If the organization received or held works of art, historical treater the following th		li gain, provide			
_	the following amounts required to be reported under FASB A		¢			
a h	Revenue included on Form 990, Part VIII, line 1					
	Assets included in Form 990, Part X		·····			
∟⊓А	For Paperwork Reduction Act Notice, see the Instructions		Schedule D (Form 990) 2023			

				orporation			26-14			_{ge} 2
Par	t III Organizations Maintaining C	ollections of Ar	t, Historical Tr	easures, or Othe	er Si	mila	r Assets	(continu	ied)	
3	Using the organization's acquisition, accessi	on, and other record	s, check any of the	following that make	signifi	cant ι	use of its			
	collection items (check all that apply).									
а	Public exhibition	c	🗴 📃 Loan or ex	change program						
b	Scholarly research	e	e 🗌 Other							
с	Preservation for future generations									
4	Provide a description of the organization's co	pllections and explain	n how they further t	the organization's exe	empt p	ourpo	se in Part	XIII.		
5	During the year, did the organization solicit o	r receive donations (of art, historical trea	asures, or other simila	ar ass	ets				
	to be sold to raise funds rather than to be ma	aintained as part of t	he organization's c	ollection?				Yes		No
Par	t IV Escrow and Custodial Arran	gements Comple	te if the organizatio	on answered "Yes" or	n Forn	n 990,	Part IV, li	ne 9, or		
	reported an amount on Form 990, Pa	rt X, line 21.								
1a	Is the organization an agent, trustee, custodi	an, or other intermed	diary for contributio	ns or other assets no	t inclu	uded				
	on Form 990, Part X?							Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing table:		_					
								Amount		
с	Beginning balance					1c				
d	Additions during the year					1d				
е	Distributions during the year					1e				
f	Ending balance				L	1f				
2a	Did the organization include an amount on F	orm 990, Part X, line	21, for escrow or c	custodial account liab	ility?		L	Yes		No
	If "Yes," explain the arrangement in Part XIII.									
Par	t V Endowment Funds Complete if	the organization and		orm 990, Part IV, line						
		(a) Current year	(b) Prior year	(c) Two years back	(d)	Three y	ears back	(e) Four y	/ears b	ack
1a	Beginning of year balance									
b	Contributions									
С	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the curr	ent year end balanc	e (line 1g, column (a	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%.								
3a	Are there endowment funds not in the posse	ssion of the organiza	ation that are held a	and administered for t	he					
	organization by:							`	Yes	No
	(i) Unrelated organizations?							3a(i)		
	(ii) Related organizations?							3a(ii)		
b	If "Yes" on line 3a(ii), are the related organiza	tions listed as requir	red on Schedule R?)				3b		
4	Describe in Part XIII the intended uses of the									
Par	t VI Land, Buildings, and Equipm	ent								
	Complete if the organization answere	d "Yes" on Form 990), Part IV, line 11a.	See Form 990, Part X	(, line	10.				
	Description of property	(a) Cost or c basis (investr	• • •			nulate iation	ed	(d) Book	value	
1a	Land		7:	18,527.				718	,52	7.
	Buildings				684	1,89	97.	7,021		
	Leasehold improvements			/ ′		-		-		
	Equipment									
	Other									
	Add lines 1a through 1e. (Column (d) must e		X line 10c colum	n <i>(</i> B))				7,739	, 91	2.
		you'r onn 000, i dil						,		<u> </u>

Schedule D (Form 990) 2023

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 (neuding rame of security) (b) Book value (c) Method of valuation: Cost or end-of-year market value (b) Financial deviatives (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (d) (c) (c) (c) (c) (c) (c) (c) (a) (c) (c) (c) (c) (c) (c) (c) (c) (c) (d) (c) (c) (c) (c) (c) (c) (c) (c) (d) (c) (c) (c) (c) (c)			ademy Buildin	g Corporation	26-1401850 Page 3
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(1) Financial derivatives	(a) Descrip				
(2) Closely held equily interests			(
(a)	. ,				
(A) (B) (B) (C) (C) (C) (D) (C) (E) (C) (E) (C) (G)		······································			
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(G) (H) (H) (H) Part VIII Investments - Program Related. Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13. (e) Method of valuation: Cost or end-of-year market value (1) (e) Description of investment (b) Book value (e) Method of valuation: Cost or end-of-year market value (1) (a) (b) Book value (c) Method of valuation: Cost or end-of-year market value (1) (a) (b) Book value (c) Method of valuation: Cost or end-of-year market value (1) (a) (b) Book value (c) Method of valuation: Cost or end-of-year market value (1) (c) (c) (c) (c) (a) (c) (c) (c) (c) (a) (c) (c) (c) (c) (c) (a) (c) (c) (c) (c) (c) (c) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) <t< td=""><td></td><td></td><td></td><td></td><td></td></t<>					
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(7)					
(8) (9)					
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					ments 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

Sche	dule D (Form 990) 2023 Monument Academy Building		26-1401850 _{Page} 4
Par	t XI Reconciliation of Revenue per Audited Financial Stater	ments With Revenue pe	er Return
	Complete if the organization answered "Yes" on Form 990, Part IV, line ⁻	12a.	
1	Total revenue, gains, and other support per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 1	
а	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities	2b	
с	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
С	Add lines 4a and 4b		4c
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)		5
Pa	t XII Reconciliation of Expenses per Audited Financial State		per Return
	Complete if the organization answered "Yes" on Form 990, Part IV, line "	12a.	
1	Total expenses and losses per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
С	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
с	Add lines 4a and 4b		4c
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5
Pa	t XIII Supplemental Information		

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

(Forn Depart	EDULE K n 990) ment of the Treasury Revenue Service	ormation on Ta "Yes" on Form 990 any additional info ov/Form990 for ins	, Part IV, li mation in	ne 24a. P Part VI.	Provide descrip				c	20	1545-00)23 o Publ tion				
Name	ne of the organization Monument Academy Building Corp											identif 401		n num	lber
Part	I Bond Issue	es Se	e Part VI	for Column	ns (a) and	(f) C	ontir	nuations							
	(a)	ssuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issu	e price	(f) Descrip	tion of purpose	(g) De	feased	(h) On of is		(i) Po	
												L		financing	
	lalamada '	Educational and						Advondo	refunding		No	Yes	No	Yes	No
		Facilities Auth	01 0006727	106450707	12/10/14	1165	0162		es 2007A a		x		x		x
<u>A</u>	uiturai .	Facilities Auth	04-0090121	19045RZQ7	12/19/14	14050	5103.	OL SELL	es 2007A d						
в															
с															
D															
Part	II Proceeds														
					Α			В	С				D		
1	Amount of bond	s retired				,000.									
2	Amount of bond	s legally defeased													
3	Total proceeds of	of issue			. 14,658										
_4	Gross proceeds	in reserve funds			932	,137.									
_5	Capitalized inter	est from proceeds													
6	Proceeds in refu	nding escrows			. 13,351										
_7	Issuance costs f	rom proceeds				,239.									
8	Credit enhancen	nent from proceeds													
9	Working capital	expenditures from proceeds													
10	Capital expendit	ures from proceeds													
<u>11</u>	Other spent proc	ceeds													
12	Other unspent p	roceeds													
13	Year of substant	tial completion			20	14									
					Yes	No	Yes	No	Yes	No		Yes		No	
14	Were the bonds	issued as part of a refunding is	ssue of tax-exempt b	onds (or,											
	if issued prior to	2018, a current refunding issu	ıe)?		X										
15	Were the bonds	issued as part of a refunding is	ssue of taxable bond	ls (or, if											
	issued prior to 2	018, an advance refunding iss	ue)?			X									
16	Has the final allo	ocation of proceeds been made	ə?		X										
17	Design the second second	zation maintain adequate book	a and records to our					1	1				1		

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

Schedule K (Form 990) 2023

Schedule K (Form 990) 2023 Monument Academy Building Corporation

26-1401850

Page **2**

Par	III Private Business Use								
			A		В		С		D
1	Was the organization a partner in a partnership, or a member of an LLC,	Yes	No	Yes	No	Yes	No	Yes	No
	which owned property financed by tax-exempt bonds?		X						
2	Are there any lease arrangements that may result in private business use of								
	bond-financed property?		x						
3a	Are there any management or service contracts that may result in private								
	business use of bond-financed property?		x						
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside								
	counsel to review any management or service contracts relating to the financed property?								
с	Are there any research agreements that may result in private business use of								
	bond-financed property?		X						
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other								
	outside counsel to review any research agreements relating to the financed property?								
4	Enter the percentage of financed property used in a private business use by entities								
	other than a section 501(c)(3) organization or a state or local government		%		%		%		%
5	Enter the percentage of financed property used in a private business use as a								
	result of unrelated trade or business activity carried on by your organization,								
	another section 501(c)(3) organization, or a state or local government		%		%		%		%
6	Total of lines 4 and 5		%		%		%		%
7	Does the bond issue meet the private security or payment test?		X						
8a	Has there been a sale or disposition of any of the bond-financed property to a non-								
	governmental person other than a 501(c)(3) organization since the bonds were issued?		X						
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or								
	disposed of		%		%		%		%
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations								
	sections 1.141-12 and 1.145-2?								
9	Has the organization established written procedures to ensure that all								
	nonqualified bonds of the issue are remediated in accordance with the								
	requirements under Regulations sections 1.141-12 and 1.145-2?	Х							
Par	IV Arbitrage								
			<u> </u>		B		ç		<u>p</u>
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and	Yes	No	Yes	No	Yes	No	Yes	No
	Penalty in Lieu of Arbitrage Rebate?		X						
2	If "No" to line 1, did the following apply?		-						
	Rebate not due yet?	X							
b	Exception to rebate?		X						
C	No rebate due?		X						
	If "Yes" to line 2c, provide in Part VI the date the rebate computation was								
	performed		-				1		1
3	Is the bond issue a variable rate issue?		X						

Schedule K (Form 990) 2023 Monument Academy Building Corporation

26-1401850

Page 3

Part IV Arbitrage (continued)			•					
	Ą		В		С		D	
4a Has the organization or the governmental issuer entered into a qualified	Yes	No	Yes	No	Yes	No	Yes	No
hedge with respect to the bond issue?		X						
b Name of provider								
c Term of hedge								
d Was the hedge superintegrated?								
e Was the hedge terminated?								
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		Х						
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6 Were any gross proceeds invested beyond an available temporary period?		Х						
7 Has the organization established written procedures to monitor the								
requirements of section 148?		X						
Part V Procedures To Undertake Corrective Action			-					
	Α		В		С		D	
Has the organization established written procedures to ensure that violations	Yes	No	Yes	No	Yes	No	Yes	No
of federal tax requirements are timely identified and corrected through the								
voluntary closing agreement program if self-remediation isn't available under								
applicable regulations?		x						
Part VI Supplemental Information. Provide additional information for responses to questions	s on Schedule	e K. See instru	uctions.					
Schedule K, Part I, Bond Issues:								
(a) Issuer Name: Colorado Educational and Cultura	al Faci	lities	Authori	ity				
(f) Description of Purpose:								
Advance refunding of series 2007A and 2008A and t	o fund	bond r	eserve					

SCHEDULE O (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.



26-1401850

Form 990, Part VI, Section A, line 8b:

The organization had no committees with authority to act on behalf of the

Monument Academy Building Corporation

governing body.

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

The Form 990 is prepared by the Organization's public accounting firm based

on information provided by the management. Once a draft of the filing is

available, the Form 990 is provided to all board members for review.

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

The bylaws state that any responsible person shall immediarely inform the

board of any potential conflicts of interest. The Board then has the right

to approve or deny the transaction. If the conflict of interest involved a

board member the finance team and the Board of Directors at Monument

Academy, a supported organization, shall support the building corporation

with financial oversight, potential conflicts of interest are discussed at

the board meetings and documented in the meeting minutes.

Form 990, Part VI, Section C, Line 19:
The Organization makes its governing documents, conflict of interest
policy, and financial statements available to the public through its
website.

Form 990, Part XII, Line 1:

The school follows a modified accrual method of accounting as

prescribed by the Colorado Department of Education. The school-wide

Schedule O (Form 990) 2023	Page 2
Name of the organization Monument Academy Building Corporation	Employer identification number $26 - 1401850$
financial statements are reported using the economic resou	rces
measurement focus and the accrual basis of accounting, gra	nts and
similar items are recognized when all eligibility requirem	ents imposed
by the provider have been met.	
Form 990, Part XII, Line 2c:	
The process for oversight and selection of an independent	accountant
has not changed from the prior year.	
Form 990, Part VI, Section A, Line 8B:	
The Organization had no comittees with authority to act on	behalf of
the governing body.	

SCHEDULE	R
(Form 990)	

(

Related Organizations and Unrelated Partnerships

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

Attach to Form 990.

OMB No. 1545-0047

2023 Open to Public Inspection

Employer identification number

26-1401850

Department of the Treasury Internal Revenue Service

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

Name of the organization

Monument Academy Building Corporation

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity	cont	g) 512(b)(13) rolled tity?
				501(c)(3))		Yes	No
Monument Academy Charter School - 27-0014128							
1150 Village Ridge Point							
Monument, CO 80132	School	Colorado	501(c)(3)	Line 2	N/A		х
Monument Academy Foundation - 51-0506848							
1150 Village Ridge Point	7						
Monument, CO 80132	School Support	Colorado	501(c)(3)	Line 12a, I	Monument Academy		х
	-						
	-						
	-						
	-						

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

Schedule R (Form 990) 2023

26-1401850 Page 2

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

		-								-			
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(I	h)	(i)	(j)	(k)	
Name, address, and EIN of related organization	Primary activity	Legal domicile	Direct controlling	Predominant income	Share of total	Share of	Disprop	ortionate	Code V-UBI	Gene	eral or	Percentage ownership	
of related organization		(state or foreign	entity	(related, unrelated, excluded from tax under sections 512-514)	income	end-of-year assets		tions?	Code V-UBI amount in box 20 of Schedule	part	ner?	ownership	
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes	No		
										-			
										-			

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

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

Schedule R (Form 990) 2023 Monument Academy Building Corporation

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

Not	e: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	No
1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		Х
	Gift, grant, or capital contribution to related organization(s)	1b		Х
	Gift, grant, or capital contribution from related organization(s)	1c		X
	Loans or loan guarantees to or for related organization(s)	1d		X
	Loans or loan guarantees by related organization(s)	1e		X
f	Dividends from related organization(s)	1f		X
g		1g		X
h	Purchase of assets from related organization(s)	1h		X
i	Exchange of assets with related organization(s)	1i		X
j	Lease of facilities, equipment, or other assets to related organization(s)	1j	X	
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		X
	Performance of services or membership or fundraising solicitations for related organization(s)	11		X
m	Performance of services or membership or fundraising solicitations by related organization(s)	1m		X
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		X
o	Sharing of paid employees with related organization(s)	10		X
р	Reimbursement paid to related organization(s) for expenses	1p		X
	Reimbursement paid by related organization(s) for expenses	1q		X
r	Other transfer of cash or property to related organization(s)	1r		X
s	Other transfer of cash or property from related organization(s)	1s		Х
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.			

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) Monument Academy Charter School	J	932,088.	Fair Market Value
<u>(2)</u>			
(3)			
<u>(4)</u>			
<u>(5)</u>			
_(6)			

Monument Academy Building Corporation Schedule R (Form 990) 2023

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

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

(a)	(b)	(c)		10	<u>م</u>	(f)	(g)		h)	(i)	(j)	(k)					
(a) Name, address, and EIN	Primary activity	Legal domicile	Predominant income	(e Are partners 501(c orgs	all	Share of	Share of		ropor-	Code V-LIBI	(J) General (
of entity	Fininary activity	(state or foreign	Predominant income (related, unrelated, excluded from tax under sections 512-514)	501(c	s sec. (3)	total	end-of-year	tio	ropor- nate tions?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	managin						
or onary		country)	excluded from tax under	orgs		income	assets		uons?	of Schedule K-1	partner						
		country)	Sections 512-514)	Yes	No			Yes	No	(FUTIL 1003)	Yes No	<u>)</u>					
												+					
					_			-									
								-	\vdash			+					
	4																

Schedule R (Form 990) 2023

Schedule F	R (Form 990) 2023	Monument	Academy	Building	Corporation	26-1401850	Page 5
Part VII	Supplemental Infor Provide additional inform		to questions or	Schedule B. See	instructions		

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. . . . **^** . . . *.*___



Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information.									
				r year, or tax year beginning JUL 1, 2023			JUN 30,	2024	Inspection
	Check		T	organization		Inanig			tion number
5	applic	cable:		organization					
Address Monument Academy Foundation									
F		ange		siness as				050684	8
F	Init	tial		and street (or P.O. box if mail is not delivered to street address)	F	Room/suit		one number	-
Image: InstructionNumber and street (or P.O. box if mail is not delivered to street address)Room/suiteETelephone numImage: Instruction1150VillageRidgePoint719-481									950
	ter	min- ed		wn, state or province, country, and ZIP or foreign postal coo	de		G Gross rec		1,912,792.
Amended Monument, CO 80132							H(a) Is this	s a group retu	
		plica-		d address of principal officer: Collin Vinchatt	le			ubordinates?	
	pe	nding		as C above					uded? Yes No
Ι	Tax-	exem	pt status:	☑ 501(c)(3)	47(a)(1) o	r 📃 52	27 If "No	o," attach a lis	st. See instructions
J	Web	osite:	www.	nonumentacademy.net			H(c) Grou	p exemption i	number
ĸ	Form			Corporation Trust Association Other		L Yea	ar of formation:	2004 м	State of legal domicile: CO
Ρ	art		Summary						
	1	Br	iefly describ	e the organization's mission or most significant activities: $\ {f S}$	<u>Jee S</u>	<u>ched</u>	ule O		
ů,									
Activities & Governance	2	Ch	neck this bo	if the organization discontinued its operations or	r dispose	ed of mor	re than 25% o	f its net asset	ts.
eve ove	3 3	NL	umber of vot	ng members of the governing body (Part VI, line 1a)					4
Č	2 4	Nu	umber of ind	ependent voting members of the governing body (Part VI, lin	1b)				4
	6 5	і То	tal number	f individuals employed in calendar year 2023 (Part V, line 2a	a)				0
vitik	6	то	tal number	f volunteers (estimate if necessary)				6	5
\c ti	7	'a To	otal unrelated	business revenue from Part VIII, column (C), line 12					0.
_	·	b Ne	et unrelated	ousiness taxable income from Form 990-T, Part I, line 11	<u></u>				0.
							Prior Y		Current Year
٩	8 8	Co	ontributions	Ind grants (Part VIII, line 1h)				0.	0.
BDI	9		•	e revenue (Part VIII, line 2g)				,609.	1,833,479.
Revenue	10			ome (Part VIII, column (A), lines 3, 4, and 7d)			57	,246.	79,313.
	11	1 Ot	her revenue	(Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)				0.	0.
	12			add lines 8 through 11 (must equal Part VIII, column (A), line			1,888	,855.	1,912,792.
	13			ilar amounts paid (Part IX, column (A), lines 1-3)				0.	0.
	14			o or for members (Part IX, column (A), line 4)				0.	0.
U,	8 15			compensation, employee benefits (Part IX, column (A), lines				0.	0.
SUS	2 16			ndraising fees (Part IX, column (A), line 11e)				0.	0.
Exnenses				ng expenses (Part IX, column (D), line 25)		0.		404	
ш	' 17			s (Part IX, column (A), lines 11a-11d, 11f-24e)				,494.	2,034,487.
	18		-	. Add lines 13-17 (must equal Part IX, column (A), line 25) \dots				,494.	2,034,487.
	19	9 Re	evenue less	xpenses. Subtract line 18 from line 12	<u></u>			,639.	-121,695.
Net Assets or	i Ce						Beginning of Cu		End of Year
sset	P 20			art X, line 16)			22,781		22,252,981.
3t A	21			(Part X, line 26)			28,689	,042.	28,282,354.
				und balances. Subtract line 21 from line 20	<u></u>		-5,907	,678.	-6,029,373.
	art		Signature						
Und	aer po	enaltie	es of periury,	declare that I have examined this return, including accompanying so	cnedules	and stater	ments, and to th	ie best of mv ki	nowledge 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.

Sign	Signature of officer		Date						
Here	Collin Vinchattle, Princi	pal and Executive D:	rector						
	Type or print name and title								
	Print/Type preparer's name	Preparer's signature	Date Check PTIN						
Paid	Thomas G. Sistare	Thomas G. Sistare	11/12/24 self-employed P00356968						
Preparer	Firm's name Hoelting & Compan	y, Inc.	Firm's EIN 30-0514455						
Use Only	Firm's address 31 East Platte Av	enue, Suite 300							
	Colorado Springs,	CO 80903	Phone no. (719) 630-1091						
May the I	May the IRS discuss this return with the preparer shown above? See instructions Yes X No								
LHA For	Paperwork Reduction Act Notice, see the separ	ate instructions. 332001 12-21-23	Form 990 (2023)						

Form	Monument Academy Foundation	51-0506848 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:	
	See Schedule O	
2	Did the organization undertake any significant program services during the year which were not listed on the	
2		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	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other	rs, the total expenses, and
	revenue, if any, for each program service reported.	
4a		ue\$ 1,833,479.)
	Provided financial support for the day to day operations	of the
	Monument Academy.	
4b	(Code:) (Expenses \$ including grants of \$) (Reven	ue \$)
4c	(Code:) (Expenses \$ including grants of \$) (Reven	ue\$)
70		ues)
_		
4d	Other program services (Describe on Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses 2,034,487.	/

Form 990 (demy	Foundation
Part IV	Ch	ecklist of Required Sche	edules		

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

Form **990** (2023)

 Form 990 (2023)
 Monument
 Academy
 Foundation

 Part IV
 Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a	Х	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		X
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		X
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		X
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties? (See 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			37
	"Yes," complete Schedule L, Part IV	28a		X X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			v
~~	"Yes," complete Schedule L, Part IV	28c		X X
29 20	Did the organization receive more than \$25,000 in noncash contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	29		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	0		х
0 4	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If</i> "Yes," <i>complete Schedule N, Part I</i>	31		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	0		х
22	Schedule N, Part II	32		
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	22		х
24	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		<u></u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	34	х	
25.2	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	- 23	x
	Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	554		
D	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	000		
00	If "Yes," complete Schedule R, Part V, line 2	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
0.	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	х	
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 0			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b			
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		

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Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2a	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	0		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?			_X_
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	. 3 b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			37
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	. <u>4a</u>		X
b	If "Yes," enter the name of the foreign country	-		
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	-		v
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			<u> </u>
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	<u>5c</u>		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			v
	any contributions that were not tax deductible as charitable contributions?	<u>6a</u>		<u> </u>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
-	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	0 7.		Х
a L	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor			
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	. 7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7.		x
А		7c		<u></u>
d	, , , , , , , , , , , , , , , , , , , ,	7e		
e f	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			
g	If the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7g		
9 h	If the organization received a contribution of qualified intellectual property, did the organization mer of the organization file a Form 1098-C?			
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
U	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders 11a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
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			
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		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans 13b	_		
с	Enter the amount of reserves on hand 13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?			_X_
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	. 14b		<u> </u>
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			v
	excess parachute payment(s) during the year?	15		X
	If "Yes," see the instructions and file Form 4720, Schedule N.			v
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	. 16		X
47	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities	47		
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	. 17		

Monument Academy Foundation

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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

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

					Yes	No				
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	4		162	NO				
iu	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.									
b	Enter the number of voting members included on line 1a, above, who are independent	1b	4							
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	o with a	any other							
	officer, director, trustee, or key employee?									
3	3 Did the organization delegate control over management duties customarily performed by or under the direct supervision									
	of officers, directors, trustees, or key employees to a management company or other person?									
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?									
5	Did the organization become aware during the year of a significant diversion of the organization's assets?									
6	Did the organization have members or stockholders?									
7a										
	more members of the governing body?									
b	b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or									
	persons other than the governing body?			7b		X				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	-	-		37					
a	The governing body?			8a	X	37				
b	Each committee with authority to act on behalf of the governing body?			8b		<u> </u>				
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea					x				
Sec	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	<u></u>	0	9		Δ				
	ter and a section B requests information about policies not required by the internal Re	venue	<u>Code.)</u>		Yes	No				
10a	Did the organization have local chapters, branches, or affiliates?			10a		X				
	If "Yes," did the organization have written policies and procedures governing the activities of such ch									
	and branches to ensure their operations are consistent with the organization's exempt purposes?									
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing bod	y befor	e filing the form?	11a	Х					
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.									
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	Х					
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	e to cont	licts?	12b	Х					
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? // "	Yes," d	escribe							
	on Schedule O how this was done			12c	X					
13	Did the organization have a written whistleblower policy?			13		X				
14	Did the organization have a written document retention and destruction policy?			14	Х					
15	Did the process for determining compensation of the following persons include a review and approva	al by ine	dependent							
-	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			45-		v				
	The organization's CEO, Executive Director, or top management official			15a		X X				
a	Other officers or key employees of the organization			15b						
16-2	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 5a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a									
104				16a		х				
b	taxable entity during the year? b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation									
2	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ									
	exempt status with respect to such arrangements?			16b						
Sec	tion C. Disclosure									
17	List the states with which a copy of this Form 990 is required to be filed None									
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and	nd 990	-T (section 501(c)(3)s	only)	availat	ble				
	for public inspection. Indicate how you made these available. Check all that apply.									
	Own website Another's website X Upon request Other <i>(explain</i>)		,							
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co	onflict c	f interest policy, and	l financ	cial					
	statements available to the public during the tax year.									
00	Distantian pagana and shara and salang an ang ang ang ang ang ang ang ang a		l un n n un l n							

20	State the name, address, and telephone number of the person who possesses the organization's books and records
	The Organization - 719-481-1950

Part VII	Col	mpensation of (Officers,	Directors,	Trustees,	Key Employees,	Highest	Compensa	ated
	Em	ployees, and In	ndepende	ent Contra	ctors				

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
 List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.
 Enter -0- in columns (D), (E), and (F) if no compensation was paid.

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

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee)

who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

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

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

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

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

(A)	(B)			((C)	1		(D)	(E)	(F)
Name and title	Average	(10		Pos	itior) than .		Reportable	Reportable	Estimated
	hours per	box	o not check more x, unless person ficer and a direct			s both	n an	compensation	compensation	amount of
	week		cer ar I	nd a d	irecto	or/trus T	tee)	from	from related	other
	(list any	rector						the	organizations	compensation
	hours for related	e or di	ee			sated		organization (W-2/1099-MISC/	(W-2/1099-MISC/	from the
	organizations	rustee	trust		ee	npens		1099-NEC)	1099-NEC)	organization and related
	below	dual ti	itiona		nploy	st cor	-	1000 1120)		organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizationo
(1) Collin Vinchattle	0.50	_	-	-						
Principal and Executive Director	50.50	1		x				0.	84,639.	31,846.
(2) Chris Dole	0.50									
President	0.50	х		X				0.	0.	0.
(3) Marc McWilliams	0.50									
Secretary	0.50	Х		Х				0.	0.	0.
(4) Craig Carle	0.50									
Director	5.50	Х						0.	0.	0.
(5) Melanie Strop	0.50									
Director	0.50	Х						0.	0.	0.
		1								
		1								
						-				
		1								
	1									
		1								

Form 990 (2023) Monument	Academy	' F	ou	nd	at	io	n		51-050)6848	Page 8
Part VII Section A. Officers, Directors, Trus	tees, Key Emp	oloye	ees,	and	l Hig	hes	t Co	ompensated Employee	s (continued)		
(A)	(B)			(0				(D)	(E)	((F)
Name and title	Average		F		ition			Reportable	Reportable		nated
Name and the	hours per		not ch					compensation	compensation		unt of
	week		unles: cer and					from	from related		her
	(list any	or						the	organizations		ensation
	hours for	director						organization	(W-2/1099-MISC		n the
	related	e or c	tee			sated		(W-2/1099-MISC/			
	organizations	ustee	trus		e	npen		1099-NEC)	1099-NEC)	, v	nization related
	below	ual tr	ional		ploye	t con ee		1099-INEC)			
	line)	Individual trustee or	Institutional trustee	Officer	Key employee	ghes	Former			organ	izations
		Ē	Ë	Of	¥.	e H	ß			_	
					\square						
1b Subtotal								0.	84,639	3. 31	,846.
1b Subtotal								0.).	0.
c Total from continuation sheets to Part VI											
d Total (add lines 1b and 1c)								0.	84,639	1. 31	,846.
2 Total number of individuals (including but n	ot limited to the	ose	listec	d ab	ove)) wh	o re	ceived more than \$100,	000 of reportable		
compensation from the organization											0
										Y	'es No
3 Did the organization list any former officer,	director, truste	e. k	ev er	mol	ovee	e. or	hia	hest compensated emp	ovee on		
c	,			•		<i>.</i>	0		,	3	X
line 1a? If "Yes," complete Schedule J for s										. 3	
4 For any individual listed on line 1a, is the su											
and related organizations greater than \$150										4	X
5 Did any person listed on line 1a receive or a	accrue compen	satio	on fro	om :	any ι	unre	late	ed organization or individ	lual for services		
rendered to the organization? If "Yes." com	plete Schedule	e J fo	or su	ch r	bersc	on.				5	X
Section B. Independent Contractors											
1 Complete this table for your five highest co	mpensated ind	ene	nden	t co	ontra	ictor	s th	at received more than \$	100.000 of compe	nsation from	1
the organization. Report compensation for	•	•								Sation non	•
	ine calendar ye	ar e	nung	y w		u wii	1111 I. 		.		
(A) Name and business	address		` ***					(B) Description of s	onvicos	(C) Compens	ation
	address	NC	ONE				_	Description of s	ervices	Compens	ation
							T				
							+				
							-				
							Τ				
2 Total number of independent contractors (ii		nt lin	nitad	to t	those	مانم		above) who received m	re than		
	TOTAL THE DULL FILL	л ШТ	uren	101	11056	כוו ס	.cu	above who received me	/ Culail		
\$100.000 of compensation from the organiz					0						

	<u>1 990</u> rt V					cad	emy Found	dation		51-0506	848 Page 9
Pa	rt V										
			Check if Schedule O	conta	ains a resp	onse	or note to any lin	e in this Part VIII	(B)	(C)	
								Total revenue	Related or exempt	Unrelated	Revenue excluded
									function revenue	business revenue	from tax under sections 512 - 514
s s	1	2	Federated campaigns		1a						
Contributions, Gifts, Grants and Other Similar Amounts			Membership dues								
ي ق			Fundraising events								
ífts, r Ai			Related organizations								
nila,			Government grants (conti								
Sin			All other contributions, gifts,								
her		•	similar amounts not included								
ot Ot		a	Noncash contributions included in			\$					
noc		-									
0.0		<u></u>					Business Code				
a	2	а	Lease Income					1,833,479.	1,833,479.		
vice	~	b									
Ser		õ									
E a		d									
Program Service Revenue		e									
Pro		f	All other program service	rever	nue						
			Total. Add lines 2a-2f					1,833,479.			
	3	3	Investment income (inclue					, ,			
								79,313.			79,313.
	4		Income from investment of					,			
	5		Royalties		-						
			···· j -·····		(i) Rea	al	(ii) Personal				
	6	а	Gross rents	6a							
		b	Less: rental expenses	6b							
		с	Rental income or (loss)	6c							
			Net rental income or (loss								
			Gross amount from sales of	/	(i) Securi		(ii) Other				
			assets other than inventory	7a							
		b	Less: cost or other basis								
e			and sales expenses	7b							
venue		с	Gain or (loss)					1			
Rev			Net gain or (loss)								
Other	8	а	Gross income from fundraisi	ing ev	ents (not						
₹			including \$		of						
			contributions reported on								
			Part IV, line 18			8a					
		b	Less: direct expenses								
		с	Net income or (loss) from	fund	raising eve	nts					
	9	а	Gross income from gamir	ng act	tivities. See	e					
			Part IV, line 19			9a					
		b	Less: direct expenses			9b					
		С	Net income or (loss) from	gami	ing activitie	es					
	10	а	Gross sales of inventory,	less r	returns						
			and allowances			10a	1				
	I	b	Less: cost of goods sold			10k					
		С	Net income or (loss) from	sales	s of invento	ory					
s							Business Code				
Miscellaneous Revenue	11	а									
an€		b					L	ļ			
cell leve		с					L	ļ			
Mis			All other revenue								
_		e	Total. Add lines 11a-11d						1 000 170		
	12		Total revenue. See instruction	ons				ц,912,792.	ц,833,479.	0.	79,313.

Monument Academy Foundation Part IX Statement of Functional Expenses

o n	Check if Schedule O contains a respons ot include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D)
	b, 9b, and 10b of Part VIII.	l otal expenses	expenses	general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
1	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
	Other salaries and wages				
	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions				
	Other employee benefits				
, 1	Payroll taxes				
	Management				
	Legal				
	Lobbying				
	Professional fundraising services. See Part IV, line 17				
	Investment management fees				
-	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A), amount, list line 11g expenses on Sch 0.)				
2	Advertising and promotion				
3	Office expenses				
4	Information technology				
5	Royalties				
3	Occupancy				
7	Travel				
3	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
	Conferences, conventions, and meetings				
)	Interest	1,426,812.	1,426,812.		
	Payments to affiliates	. ,	. ,		
	Depreciation, depletion, and amortization	543,306.	543,306.		
3	Insurance	, ~ ~ ~ ~	,		
	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.)	60,965.	60,965.		
	Other Purchased Service	3,404.	3,404.		
	other furchased service	5,404.	5,404.		
с					
d					
	All other expenses	0 0 0 0 4 0 5	0.004.405		
	Total functional expenses. Add lines 1 through 24e	2,034,487.	2,034,487.	0.	
	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				

lonument A	Academy	Foundation	
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		Check if Schedule O contains a response or not	e to any	line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			1,758.	1	1,775.
	2	Savings and temporary cash investments			1,130,639.	2	1,145,545.
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net				4	
	5	Loans and other receivables from any current or					
		trustee, key employee, creator or founder, subst					
		controlled entity or family member of any of the				5	
	6	Loans and other receivables from other disquali		l l			
		under section 4958(f)(1)), and persons described				6	
S	7	Notes and loans receivable, net		r		7	
Assets	8	Inventories for sale or use				8	
As	9	–				9	
		Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	23,278,884.			
	b	Less: accumulated depreciation		2,173,223.	21,648,967.	10c	21,105,661.
	11	Investments - publicly traded securities			• •	11	
	12	Investments - other securities. See Part IV, line 1				12	
	13	Investments - program-related. See Part IV, line		ſ		13	
	14	Intangible assets		ſ		14	
	15	Other assets. See Part IV, line 11				15	
	16	Total assets. Add lines 1 through 15 (must equ			22,781,364.	16	22,252,981.
	17	Accounts payable and accrued expenses			119,042.	17	117,354.
	18	Grants payable				18	-
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities			28,570,000.	20	28,165,000.
	21	Escrow or custodial account liability. Complete				21	
6	22	Loans and other payables to any current or form					
Liabilities		trustee, key employee, creator or founder, subst					
llide		controlled entity or family member of any of the				22	
Lie	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelated	third p			24	
	25	Other liabilities (including federal income tax, pa		ſ			
		parties, and other liabilities not included on lines					
		of Schedule D		· · · · · · · · · · · · · · · · · · ·		25	
	26	Total liabilities. Add lines 17 through 25			28,689,042.	26	28,282,354.
		Organizations that follow FASB ASC 958, che	ck here	X			
ses		and complete lines 27, 28, 32, and 33.					
anc	27	Net assets without donor restrictions			-6,921,033.	27	-7,059,339.
Bal	28	Net assets with donor restrictions			1,013,355.	28	1,029,966.
pd		Organizations that do not follow FASB ASC 9					
Ρu		and complete lines 29 through 33.					
č	29	Capital stock or trust principal, or current funds				29	
sets	30	Paid-in or capital surplus, or land, building, or ec				30	
As	31	Retained earnings, endowment, accumulated in				31	
Net Assets or Fund Balances	32	Total net assets or fund balances		r	-5,907,678.	32	-6,029,373.
~	33	Total liabilities and net assets/fund balances			22,781,364.	33	22,252,981.

Form **990** (2023)

Form 990 (2023) Monument Part X Balance Sheet

Form	m 990 (2023) Monument Academy Foundation	51-	0506848	Pag	_{ge} 12
Pa	art XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI	<u></u>			
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,912	2,79	92.
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,034	1,48	87.
3	Revenue less expenses. Subtract line 2 from line 1	3	-121	<u> </u>	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	-5,907	7,6'	78.
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)				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	-6,029), <u>3</u> '	<u>73.</u>
Pa	art XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual X Other See	Sch O			
	If the organization changed its method of accounting from a prior year or checked "Other," explain on So	chedule O.			
2a	a 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 re	viewed on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	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 s	eparate basis,			
	consolidated basis, or both:				
	Separate basis X Consolidated basis Both consolidated and separate basis				
С	, 5				
	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				
3a	a 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	b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		

Form 990 (2023)

Department of the Treasury Internal Revenue Service

(Form 990)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

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

	OMB No. 1545-0047
	2023
	Open to Public Inspection
Employer	identification number

Name of the organization

			my Foundation				5	1-0506848
Part I	Reason for Public (Charity Status.	All organizations must c	omplete th	nis part.) S	ee instructions.		
The organ	ization is not a private found	lation because it is: (F	For lines 1 through 12, cl	heck only	one box.)			
1	A church, convention of ch	urches, or associatio	n of churches described	l in sectio	n 170(b)(1	I)(A)(i).		
2	A school described in sect	ion 170(b)(1)(A)(ii). (/	Attach Schedule E (Form	า 990).)				
3	A hospital or a cooperative	hospital service orga	nization described in se	ection 170	(b)(1)(A)(ii	ii).		
4	A medical research organiz	ation operated in cor	njunction with a hospital	described	in sectio	n 170(b)(1)(A)(ii	ii). Enter	the hospital's name,
	city, and state:							
5	An organization operated for	or the benefit of a col	lege or university owned	l or operat	ed by a go	overnmental unit	describe	ed in
	section 170(b)(1)(A)(iv). (0	Complete Part II.)						
6	A federal, state, or local go	vernment or governm	nental unit described in	section 17	70(b)(1)(A)	(v).		
7	An organization that norma	-					general p	oublic described in
	section 170(b)(1)(A)(vi). (C	•		Ū			•	
8	A community trust describe		1)(A)(vi). (Complete Par	t II.)				
9	An agricultural research org				ed in coniu	inction with a la	nd-arant	college
	or university or a non-land-	-			-		-	-
	university:		· · · · · · · · · · · · · · · · · · ·		, ,	,	Ũ	
10	An organization that norma	Illv receives (1) more t	than 33 1/3% of its supp	ort from c	ontributior	ns. membership	fees. and	d aross receipts from
	activities related to its exen							
	income and unrelated busir							-
	See section 509(a)(2). (Co		(,
11	An organization organized		velv to test for public sat	fetv. See	section 50)9(a)(4).		
12 X	An organization organized		•	•			out the	purposes of one or
	more publicly supported or	•	•	•				
	lines 12a through 12d that	-						
a X							-	nivina
u <u></u>	the supported organization	-	-	• • • •	-			
	organization. You must of			indjointy c				pporting
b	Type II. A supporting org	-		tion with it	s sunnorte	d organization(s) by bay	ina
	control or management of	-				•		-
	organization(s). You mus			anic perso		introl of manage	the supp	bited
c	Type III functionally inte	-		in connect	tion with	and functionally	intograto	d with
	its supported organizatio					-	Integrate	a with,
d	Type III non-functionally		-				d organia	vation(c)
u	that is not functionally int	• • •				••	-	
	-	•	• •	•		-	n allenin	611655
• [requirement (see instruct	-	-					
e	Check this box if the orga					турет, турет,	туре ш	
f Ent	functionally integrated, or er the number of supported of			ng organiz	ation.			1
	vide the following information	•	d organization(a)					L
	i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga	anization listed	(v) Amount of m	onetarv	(vi) Amount of other
	organization	()	(described on lines 1-10	in your governi	1	support (see inst		support (see instructions)
	-		above (see instructions))	Yes	No			
Monum	ent Academy	27-0014128	2	x		2,034,	197	
Monum	ent Academy	27-0014120	4			2,034,	407.	
						2,034,	197	0.
Total						_ 2,034,	±0/•	0.

Schedule	A (Form 990)) 2023
Part II	Suppor	t Scł

Monument Academy Foundation

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

15 Public support percentage from 2022 Schedule A, Part II, line 14 15 16a 33 1/3% support test - 2023. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	Sec	tion A. Public Support						
membership fees received. (Dr not include any "unusual grants.") Image: Construction of the organization's benefit and either paid to or expended on its behalt 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalt Image: Construction of the organization's benefit and either paid to or expended on its behalt 3 The value of services or facilities furnished by a governmental unit to the organization without charge Image: Construction of the construction of the organization without charge 4 Total. Add lines 1 through 3 Image: Construction of that constructions 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) Image: Construction of the construction of the paid to support. Calendar year (or ficial year beginning in) (a) 2019 (b) 2020 (c) 2021 (a) 2023 (f) Total 7 Amounts from line 4 Image: Construction of the support. Image: Construction of the support. Image: Construction of the support. 2 Another from intreest, dividends, payments received on securities loans, rents, royatiles, and income from intreest, dividends, support or the support organization of the sale or capital areasets (Explain in Part VI). Image: Construction of the sale or capital areasets (Explain in Part VI). 11 Total support. Add lines 7 through 10 Image: Construction of Public Support Percentage from organization, check this box and stop here. Imagee: Construction of Public Support Percentage: C	Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
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business is regularly carried on	9	Net income from unrelated business						
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13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f)) 15 Public support percentage from 2022 Schedule A, Part II, line 14 16a 33 1/3% support test - 2023. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2022. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization	11	Total support. Add lines 7 through 10						
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 stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2022. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization 								%
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and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		$\ensuremath{\operatorname{stop}}$ here. The organization qualifies	as a publicly supp	orted organizatior	۱			
17a 10% -facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization	b	33 1/3% support test - 2022. If the c	organization did no	ot check a box on	line 13 or 16a, and	d line 15 is 33 1/3%	6 or more, check	this box
and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		and stop here. The organization qual	ifies as a publicly s	supported organiz	ation			
meets the facts and circumstances test. The organization qualifies as a publicly supported organization	17a	10% -facts-and-circumstances test	- 2023. If the org	ganization did not	check a box on lin	ne 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	ere. Explain in Part	VI how the orga	nization
h 10% fasts and size unstances test 2000. If the experimetion did not shock a her on line 12, 16s, 16h, at 17s, and line 15 is 10% at		meets the facts-and-circumstances te	st. The organizatio	on qualifies as a p	ublicly supported of	organization		
b 10% -facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or	b	10% -facts-and-circumstances test	- 2022. If the orc	anization did not	check a box on lin	ne 13, 16a, 16b, or	17a, and line 15	is 10% or
more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the		more, and if the organization meets th	e facts-and-circun	nstances test, che	ck this box and s	stop here. Explain	in Part VI how th	е
organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		organization meets the facts-and-circu	umstances test. Th	ne organization qu	alifies as a publicl	y 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	18	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 16b, 17a, or 17	'b, check this box a	and see instructio	ons

Schedule A (Form 990) 2023

Schedule A (Form 9

Schedule A (Form 990) 2023 Monument Academy Foundation Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

Section A. Public Support							
Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e)	2023	(f) Total
1 Gifts, grants, contributions, and							
membership fees received. (Do not							
include any "unusual grants.")							
2 Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose							
3 Gross receipts from activities that							
are not an unrelated trade or bus-							
iness under section 513							
4 Tax revenues levied for the organ-							
ization's benefit and either paid to							
or expended on its behalf							
5 The value of services or facilities							
furnished by a governmental unit to							
the organization without charge							
o							
6 Total. Add lines 1 through 5							
7a Amounts included on lines 1, 2, and							
3 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the							
amount on line 13 for the year							
c Add lines 7a and 7b							
8 Public support. (Subtract line 7c from line 6.) Section B. Total Support							
	(-) 0010	(1-) 0000	(-) 0001	(.)) 0000	(-)		(f) T + + +
Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e)	2023	(f) Total
 9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources 							
b Unrelated business taxable income							
(less section 511 taxes) from businesses							
acquired after June 30, 1975							
c Add lines 10a and 10b							
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on							
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)							
13 Total support. (Add lines 9, 10c, 11, and 12.)							
14 First 5 years. If the Form 990 is for t	he organization's fi	rst, second, third,	fourth, or fifth tax	year as a section s	501(c)(3) c	organizatic	on,
check this box and stop here	-			-		-	
Section C. Computation of Publ	ic Support Per	rcentage					
15 Public support percentage for 2023 (line 8. column (f). d	livided by line 13.	column (f))		15		%
16 Public support percentage from 2022	, , ,,	, ,	(//		16		%
Section D. Computation of Inve					1		,,,
17 Investment income percentage for 2			ine 13 column (f))		17		%
18 Investment income percentage from					18		%
19a 33 1/3% support tests - 2023. If the						and line 1	
more than 33 1/3%, check this box a							
b 33 1/3% support tests - 2022. If the						33 1/3% 2	L
line 18 is not more than 33 1/3%, che							
20 Private foundation. If the organization							
zo rivate iounuation. Il the organizatio	on did not check a	JUX UIT IIITE 14, 19	a, ur ren, check ti	This box and see In	SURCIOUS	<u> </u>	·····

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.)

Monument Academy Foundation

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.)

Х 2 Х 3a 3b 3c Х 4a 4b 4c Х 5a 5b 5c х 6 Х 7 х 8 х 9a Х 9b Х 9c Х 10a 10b

Schedule A (Form 990) 2023

Yes

Х

No

1

ule A (FOIII) 990) 2023 MOII dilletic Academy Foundactor	ule A (Form 990) 2023	Monument	Academy	Foundation
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Х

2

х

No

Yes

		Yes	No
Has the organization accepted a gift or contribution from any of the following persons?			
a 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		Х
b A family member of a person described on line 11a above?	11b		Х
c 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		Х
ection B. Type I Supporting Organizations			
		Yes	No

1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>If</i> " <i>No</i> ," <i>describe in</i> Part VI <i>how the supported organization(s) 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</i>		
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1	
2	Did the organization operate for the benefit of any supported organization other than the supported		
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in		

Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,

supervised	l. or controlled the support	ting organization.
Section C. T	ype II Supporting Or	rganizations

Part IV Supporting Organizations (continued)

Sched

			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 arganization(s)	1		

Section D	. All Type III	Supporting	Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		

Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method	I that the organization used to sati	sty the Integral Part Test duri	ng the year (see instructions).
•	Check the box heat to the method			

- a The organization satisfied the Activities Test. Complete line 2 below.
- **b** The organization is the parent of each of its supported organizations. *Complete* **line 3** *below.*

c		The organization supported a governmental entity.	Describe in Part VI how	you supported a	governmental entity	(see instructions).
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- 2 Activities Test. Answer lines 2a and 2b below.
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in **Part VI identify those supported organizations and explain** how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in* Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. Answer lines 3a and 3b below.
- **a** Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If* "Yes" or "*No*" *provide details in* **Part VI.**
- **b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in* **Part VI** *the role played by the organization in this regard.*

2a

2b

3a

332026 12-21-23

	All other Type III non-functionally integrated supporting organizations mus	t complete :	Sections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
C	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
_	emergency temporary reduction (see instructions).	6		
	emergency temporary reduction (see instructions).	0		

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

Schedule A (Form 990) 2023

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions.

Monument Academy Foundation Schedule A (Form 990) 2023 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

All other Type III non-functionally integrated supporting organizations must complete Sections A through E

	edule A (Form 990) 2023 Monument Academy Foundation rt V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (contin	nued
Sec	tion D - Distributions	
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported	
	organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)	5
6	Other distributions (<i>describe in Part VI</i>). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive	
	(provide details in Part VI). See instructions.	8
9	Distributable amount for 2023 from Section C, line 6	9
		<u> </u>

Current Year

3	Administrative expenses paid to accomplish exempt purpose	3			
4	Amounts paid to acquire exempt-use assets		4		
5	Qualified set-aside amounts (prior IRS approval required - pro		5		
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	ne organization is responsive			
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2023 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount	1		10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2023	s	(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				
а	From 2018				
b	From 2019				
C	From 2020				
d	From 2021				
e	From 2022				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2023 distributable amount				
i	Carryover from 2018 not applied (see instructions)				
i	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				
C	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.				
	Breakdown of line 7:				
	Excess from 2019				
	Excess from 2020				
	Excess from 2021				
	Excess from 2022				
е	Excess from 2023				

Schedule A (Form 990) 2023

Schedule 4	(Form 990) 2023	Monument	Academv	Foundation		51-0506848	Page 8
Part VI	Part IV, Section A, lines 1 line 1; Part IV, Section D, Section D, lines 5, 6, and (See instructions.)	mation. Provide , 2, 3b, 3c, 4b, 4c, lines 2 and 3; Part	the explanations 5a, 6, 9a, 9b, 9c IV, Section E, lin	s required by Part II, lin , 11a, 11b, and 11c; Pa es 1c, 2a, 2b, 3a, and	art IV, Section B, lines 1 3b; Part V, line 1; Part V	17b; Part III, line 12; and 2; Part IV, Section , Section B, line 1e; Par	C,

Department of the Treasury

Internal Revenue Service

(Form	990))
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Part I

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 3 **Open to Public** Inspection

Employer identification number

51 - 0506848

Name	of the	organization
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Monument Academy Foundation Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the

	organization answered "Yes" on Form 990, Part IV, line 6.			
		(a) Donor adv	vised funds	(b) Funds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in writin	ng that the assets	held in donor advised fur	nds
	are the organization's property, subject to the organization's excl	usive legal contro	l?	Yes 📃 No
6	Did the organization inform all grantees, donors, and donor advis			
	for charitable purposes and not for the benefit of the donor or do	nor advisor, or for	any other purpose confer	ring
	impermissible private benefit?			
Par	Tt II Conservation Easements. Complete if the organized	zation answered "	Yes" on Form 990, Part IV	/, line 7.
1	Purpose(s) of conservation easements held by the organization (c	check all that appl	y)	
	Preservation of land for public use (for example, recreation	or education)	Preservation of a hist	torically important land area
	Protection of natural habitat		Preservation of a cer	tified historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualified of	conservation cont	ribution in the form of a co	
	day of the tax year.			Held at the End of the Tax Year
а	Total number of conservation easements			2a
b				2b
С	Number of conservation easements on a certified historic structu	re included on line	e 2a	2c
d	Number of conservation easements included on line 2c acquired	-		
	on a historic structure listed in the National Register			_2d
3	Number of conservation easements modified, transferred, release	ed, extinguished,	or terminated by the orgar	nization during the tax
	year			
4	Number of states where property subject to conservation easeme			
5	Does the organization have a written policy regarding the periodic		ection, handling of	
	violations, and enforcement of the conservation easements it hole			
6	Staff and volunteer hours devoted to monitoring, inspecting, hand	dling of violations	, and enforcing conservati	on easements during the year
-		- for the last terms are set		
7	Amount of expenses incurred in monitoring, inspecting, handling	of violations, and	enforcing conservation ea	asements during the year
Q	Does each conservation easement reported on line 2d above sati	icfu the requireme	nts of soction $170(h)(A)(P)$	(1)
8		•		
9	and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation e			
9	balance sheet, and include, if applicable, the text of the footnote		•	
	organization's accounting for conservation easements.	to the organizatio		lat describes the
Par	t III Organizations Maintaining Collections of Ar	t, Historical T	reasures, or Other S	Similar Assets.
	Complete if the organization answered "Yes" on Form 990), Part IV, line 8.	-	
1 a	If the organization elected, as permitted under FASB ASC 958, no	ot to report in its i	revenue statement and ba	lance sheet works
	of art, historical treasures, or other similar assets held for public e	•		
	service, provide in Part XIII the text of the footnote to its financial	statements that of	describes these items.	
b	If the organization elected, as permitted under FASB ASC 958, to	o report in its reve	nue statement and balanc	e sheet works of
	art, historical treasures, or other similar assets held for public exh	nibition, education	, or research in furtheranc	e of public service,
	provide the following amounts relating to these items.			
	(i) Revenue included on Form 990, Part VIII, line 1			\$
2	If the organization received or held works of art, historical treasur			
	the following amounts required to be reported under FASB ASC s	958 relating to the	ese items:	
а	Revenue included on Form 990, Part VIII, line 1	-		\$
	Assets included in Form 990, Part X			
LHA	For Paperwork Reduction Act Notice, see the Instructions for	Form 990.		Schedule D (Form 990) 2023
332051	09-28-23			

Sche		t Academy I				51-05	06848) Ра	age 2
Par	t III Organizations Maintaining C	ollections of Ar	t, Historical Tr	easures, or Oth	er Simila	r Assets	(contin	ued)	
3	Using the organization's acquisition, accessi	on, and other record	s, check any of the	following that make	significant	use of its			
	collection items (check all that apply).								
а	Public exhibition	c	l 📃 Loan or ex	change program					
b	Scholarly research	e	e 🗌 Other						
с	Preservation for future generations								
4	Provide a description of the organization's co	ollections and explai	n how they further t	he organization's ex	empt purpo	se in Part	XIII.		
5	During the year, did the organization solicit of	or receive donations of	of art, historical trea	asures, or other simil	ar assets		_		_
	to be sold to raise funds rather than to be ma					<u> </u>	Yes		No
Par	t IV Escrow and Custodial Arran reported an amount on Form 990, Pa		te if the organizatio	on answered "Yes" o	n Form 990	, Part IV, li	ne 9, or		
1a	Is the organization an agent, trustee, custod	ian, or other intermed	diary for contributio	ns or other assets no	ot included				
	on Form 990, Part X?						Yes		No
b	If "Yes," explain the arrangement in Part XIII								
							Amount		
с	Beginning balance				1c				
	Additions during the year								
е	Distributions during the year				1e				
f	Ending balance				1f		_		
2a	Did the organization include an amount on F	orm 990, Part X, line	21, for escrow or c	sustodial account liab	oility?	L	Yes		No
	If "Yes," explain the arrangement in Part XIII.								
Par	t V Endowment Funds Complete it					<u> </u>	() =		
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three	years back	(e) Four	years	back
1 a	Beginning of year balance				_				
b	Contributions				_				
С	Net investment earnings, gains, and losses								
d	Grants or scholarships				_				
е	Other expenditures for facilities								
	and programs								
f	Administrative expenses								
g	End of year balance								
2	Provide the estimated percentage of the cur	•	e (líne 1g, column (a	a)) held as:					
a	Board designated or quasi-endowment		_%						
b	Permanent endowment	%							
с	Term endowment	_%							
•	The percentages on lines 2a, 2b, and 2c sho								
3a	Are there endowment funds not in the posse	ession of the organiza	ation that are held a	and administered for	the		Г	Yes	No
	organization by:						20(1)	103	
	(i) Unrelated organizations?(ii) Related organizations?						3a(i)		
h	If "Yes" on line 3a(ii), are the related organizations?	tions listod as roquir					3a(ii) 3b		
1	Describe in Part XIII the intended uses of the						30		
Par	t VI Land, Buildings, and Equipm		whient funds.						
	Complete if the organization answere). Part IV. line 11a.	See Form 990. Part 3	X. line 10.				
	Description of property	(a) Cost or c			Accumulate	ed	(d) Bool	value	
	Description of property	basis (investr	• • •		depreciation		(4) 500	value	2
1a	Land			46,660.			1,540	5,60	60.
	Buildings				,173,2		9,559		
	Leasehold improvements		,,,	<u> </u>	,_:-,_		_ , =	, .	
	Equipment								
	Other								
	. Add lines 1a through 1e. (Column (d) must e		X line 10c column	יייי (B)) און א		2	1,105	5,60	61.
		igauri onni 030, i all				<u></u>			

Schedule D (Form 990) 2023

		ademy Foundat:	ion	51-0506848 Page 3
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) Descrip	tion of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost of	or end-of-year market value
(1) Financi	al derivatives			
	held equity interests			
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
	b) must equal Form 990, Part X, line 12, col. (B))			
Part VIII	Investments - Program Related.			
	Complete if the organization answered "Yes"	on Form 990, Part IV, line	11c. See Form 990, Part X, line 13.	
	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost	or end-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	b) must equal Form 990, Part X, line 13, col. (B))			
Part IX	Other Assets			
	Complete if the organization answered "Yes"	on Form 990, Part IV, line	11d. See Form 990, Part X, line 15.	
	(a)	Description		(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	ımn (b) must equal Form 990, Part X, line 15, cc	ol (B))		
Part X	Other Liabilities	, (D))		
	Complete if the organization answered "Yes"	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, lii	ne 25.
1.	(a) Description of liability	· ·		(b) Book value
	deral income taxes			
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9) Total (Option				
Total. (Colu	ımn (b) must equal Form 990, Part X, line 25, co	<u>), (B))</u>		

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

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Sche	dule D (Form 990) 2023 Monument Academy Foundat		51-0506848 _{Page} 4
Par	t XI Reconciliation of Revenue per Audited Financial Stat	ements With Reven	ue per Return
	Complete if the organization answered "Yes" on Form 990, Part IV, lin	e 12a.	
1	Total revenue, gains, and other support per audited financial statements		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	
с	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
с	Add lines 4a and 4b		
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		
Pa	t XII Reconciliation of Expenses per Audited Financial Sta	tements With Exper	nses per Return
	Complete if the organization answered "Yes" on Form 990, Part IV, lin	e 12a.	
1	Total expenses and losses per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
с	Other losses	2c	
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
с	Add lines 4a and 4b		4c
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18	<u>}_)</u>	
Pa	t XIII Supplemental Information		

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

CHEDULE K Form 990) epartment of the Treasury errnal Revenue Service Ser									C	OMB No. 1545-0047 2023 Open to Public Inspection			
Name of the organization Monumen	ame of the organization Employer identification 51-050684										n num	ber	
Part I Bond Issues													
(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issu	le price	(f) Descript	on of purpose	(g) De	efeased	(h) On	behalf	(i) Po	oled
										of iss	suer	finan	cing
								Yes	No	Yes	No	Yes	No
						Construc	tion of						
A Public Finance Autho	rity 27-386612	474442EEK2	07/09/19	2872	5000.	High Sch	001		X		X		Х
В													
С													
D													
Part II Proceeds			•	•		•					·		
			Α			В	С				D		
1 Amount of bonds retired			56	0,000.									
2 Amount of bonds legally defeased													
3 Total proceeds of issue				5,000.									
4 Gross proceeds in reserve funds				909,625.									
5 Capitalized interest from proceeds													
			57	570,140.									
8 Credit enhancement from proceeds				-									
9 Working capital expenditures from pro	oceeds												
10 Capital expenditures from proceeds			27,24	5,235.									
11 Other spent proceeds													
12 Other unspent proceeds													
			Yes	No	Yes	No	Yes	No		Yes		No	
14 Were the bonds issued as part of a ret	funding issue of tax-exempt	bonds (or,											
if issued prior to 2018, a current refun				Х									
15 Were the bonds issued as part of a ref	funding issue of taxable bo	nds (or, if											
issued prior to 2018, an advance refur	nding issue)?	<u>.</u>		Х									
16 Has the final allocation of proceeds be			Х										
17 Does the organization maintain adequ	ate books and records to s	upport the											
final allocation of proceeds?			Х										

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

Schedule K (Form 990) 2023

Schedule K (Form 990) 2023 Monument Academy Foundation

51-0506848

Page 2

Part III Private Business Use									
			۹.	E	3	С		[0
1 Was the organization a partner in a part	nership, or a member of an LLC,	Yes	No	Yes	No	Yes	No	Yes	No
which owned property financed by tax-	exempt bonds?								
2 Are there any lease arrangements that r	nay result in private business use of								
bond-financed property?									
3a Are there any management or service c									
business use of bond-financed property	?								
	n routinely engage bond counsel or other outside								
counsel to review any management or s	service contracts relating to the financed property?								
c Are there any research agreements that	may result in private business use of								
bond-financed property?	· · ·								
d If "Yes" to line 3c, does the organization									
· •	agreements relating to the financed property?								
	rty used in a private business use by entities		•				•		
• •	on or a state or local government		%		%		%		%
5 Enter the percentage of financed prope	52		,,,		,,,		,,,		,,,
result of unrelated trade or business ac									
	or a state or local government		%		%		%		%
	s a state of local government	%			%	%			<u> </u>
	ecurity or payment test?		/0		<i>,</i> ,,		//		<u>,,,</u>
8a Has there been a sale or disposition of a									
	c)(3) organization since the bonds were issued?								
b If "Yes" to line 8a, enter the percentage									
			%		%		%		%
c If "Yes" to line 8a, was any remedial act			/0		/0		/0		/0
· ·									
 9 Has the organization established writter 									
nonqualified bonds of the issue are rem									
•	is 1.141-12 and 1.145-2?								
Part IV Arbitrage	IS 1.141-12 and 1.145-2?								I
Faitly Aiblidge			4		3		0	r)
1 Has the issuer filed Form 8038-T, Arbitr	age Pehate, Vield Peduction and	Yes	No	Yes	No	Yes	No	Yes	No
Penalty in Lieu of Arbitrage Rebate?		165	X	162	NO	165	INO I	165	NO
2 If "No" to line 1, did the following apply	2		21						
		x							
			X						
			X						
			Λ		I				l
If "Yes" to line 2c, provide in Part VI the	·								
· ·			X						
3 Is the bond issue a variable rate issue?			Δ						

Schedule K (Form 990) 2023 Monument Academy Foundation

51-0506848

Page 3

Part IV Arbitrage (continued)								
	A		E	3	(0)
4a Has the organization or the governmental issuer entered into a qualified	Yes	No	Yes	No	Yes	No	Yes	No
hedge with respect to the bond issue?		X						
b Name of provider								
c Term of hedge				_				
d Was the hedge superintegrated?								
e Was the hedge terminated?								
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		Х						
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6 Were any gross proceeds invested beyond an available temporary period?		X						
7 Has the organization established written procedures to monitor the								
requirements of section 148?	X							
Part V Procedures To Undertake Corrective Action								
		4	E	3	(0	C)
Has the organization established written procedures to ensure that violations	Yes	No	Yes	No	Yes	No	Yes	No
of federal tax requirements are timely identified and corrected through the						1		
voluntary closing agreement program if self-remediation isn't available under						1		
applicable regulations?		X						
Part VI Supplemental Information. Provide additional information for responses to questions	on Schedule	e K. See instru	uctions.					

SCHEDULE O (Form 990)

Name of the organization

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

Monument Academy Foundation

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

The Corporation is organized and shall be operated exclusively for

educational and charitable purposes within the meaning of section 501

(c)(3) of the Internal Revenue Service Code, and specifically for the

purpose of leasing or holding title to real and/or personal property.

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

The Corporation is organized and shall be operated exclusively for

educational and charitable purposes within the meaning of section 501

(c)(3) of the Internal Revenue Service Code, and specifically for the

purpose of leasing or holding title to real and/or personal property.

Form 990, Part VI, Section A, line 8b:

The organization had no committees with authority to act on behalf of the governing body.

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

The form 990 is prepared by the organization's public accounting firm based on information provided by the management. Once a draft of the filing is available, copies of form 990 are duistributed to all board members for

review via email. proior to filing.

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

The bylaws state that any responsible person shall immediately inform the

board of any potential conflicts of interest. The board then has the right

to approve or deny the transaction. If the conflict of interest involved aFor Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.LHA332211 11-14-23

Schedule O (Form 990) 2023	Page 2
Name of the organization Monument Academy Foundation	Employer identification number $51 - 0506848$
board member the finance team and board of directors at more	nument academy, a
supported organization, shall support the building corporate	tion with
financial oversight. Potential conflicts of interest are d	iscussed at the
board meetings and documented in the meeting minutes.	
Form 990, Part VI, Section C, Line 19:	
The Organization makes its governing documents, conflicts of	of interest
policy and financial statements available to the public the	rough its website
and upon request.	
Form 990, Part XII, Line 1:	
The school follows a modified accrual method of accounting	as
prescribed by the Colorado Department of Education. The so	chool-wide
financial statements are reported using the economic resour	rces
measurement focus and the accrual basis of accounting. Gra	ants and
similar items are recognized when all eligibility requireme	ents imposed
by the provider have been met.	
Form 990, Part XII, Line 2c:	
The process for oversight and selection of an independent a	accountant
has not change from the prior year.	

SCH	IEDULE R
	1

(Form 990)

Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

Attach to Form 990.

OMB No. 1545-0047

2023 Open to Public Inspection

Employer identification number

51-0506848

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

Name of the organization

Monument Academy Foundation

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
	-				
	-				

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity	contr	g) 512(b)(13) rolled ity?
				501(c)(3))		Yes	No
Monument Academy Charter School - 27-0014128							
1150 Village Ridge Point							
Monument, CO 80132	School	Colorado	501(c)(3)	Line 2	N/A		х
Monument Academy Building Corporation -	Owns and leases school						
26-1401850, 1150 Village Ridge Point,	facilities to Monument						
Monument, CO 80132	Academy	Colorado	501(c)(3)	Line 12b, II	Monument Academy		X
	-						
	_						
	-						

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

Schedule R (Form 990) 2023

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

	· · · · · · · · · · · · · · · · · · ·	,										
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)		
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under	Share of total income	Share of end-of-year assets		ortionate tions?	Code V-UBI amount in box 20 of Schedule	Genera manaç partn	^{Il or} Percenta ^{ing} ownersh er?	age hip
		country)		sections 512-514)		455615	Yes	No	K-1 (Form 1065)	Yes	10	
]											
	1											
	-											
	-											
	-											
	4											
	4											
	4											

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(C) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	Sec 512(I contr ent	tion b)(13) rolled tity?
		country)		0				Yes	No

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

e: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	No
During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		Х
	1b		Х
	1c		Х
	1d		Х
Loans or loan guarantees by related organization(s)	1e		Х
Dividends from related organization(s)	1f		X
Sale of assets to related organization(s)	1g		Х
Purchase of assets from related organization(s)	1h		X
	1i		Х
Lease of facilities, equipment, or other assets to related organization(s)	1j	X	
Lease of facilities, equipment, or other assets from related organization(s)	1k		X
Performance of services or membership or fundraising solicitations for related organization(s)	11		X
	1m		Х
	1n		Х
Sharing of paid employees with related organization(s)	10		Х
Reimbursement paid to related organization(s) for expenses	1p		X
Reimbursement paid by related organization(s) for expenses	1q		Х
Other transfer of cash or property to related organization(s)	1r		X
Other transfer of cash or property from related organization(s)	1s		Х
	Receipt of (i) interest, (ii) annuities, (iii) royalities, or (iv) rent from a controlled entity Gift, grant, or capital contribution to related organization(s) Cans or loan guarantees to or for related organization(s) Loans or loan guarantees by related organization(s) Sale of assets to related organization(s) Sale of assets from related organization(s) Exchange of assets with related organization(s) Lease of facilities, equipment, or other assets to related organization(s) Lease of facilities, equipment, or other assets from related organization(s) Performance of services or membership or fundraising solicitations by related organization(s) Performance of services or membership or fundraising solicitations by related organization(s) Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) Performance of services or membership or fundraising solicitations by related organization(s) Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) Performance of services or membership or fundraising solicitations by related organization(s) Sharing of paid employees with related organization(s) Membursement paid to related organization(s) Reimbursement paid to related organization(s) Reimbursement paid to related organization(s) for expenses Reimbursement paid by related organization(s) for expenses Reimbursement paid by related organization(s) for expenses	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity 1a Gift, grant, or capital contribution to related organization(s) 1b Gift, grant, or capital contribution from related organization(s) 1c Loans or loan guarantees to or for related organization(s) 1d Loans or loan guarantees by related organization(s) 1d Dividends from related organization(s) 1e Dividends from related organization(s) 1f Sale of assets to related organization(s) 1g Purchase of assets from related organization(s) 1g Lease of facilities, equipment, or other assets from related organization(s) 11 Lease of facilities, equipment, or other assets from related organization(s) 1i Performance of services or membership or fundraising solicitations by related organization(s) 1k Performance of services or membership or fundraising solicitations by related organization(s) 1m Sharing of paid employees with related organization(s) 1n Reimbursement paid to related organization(s) 1n Chter transfer of cash or property to related organization(s) 1m Gift, grant, or cashets with related organization(s) 1n Performance of services or or membership or fundraising solicitation	Receipt of (i) interest, (ii) anuities, (iii) royalties, or (iv) rent from a controlled entity 1a Gift, grant, or capital contribution to related organization(s) 1b Gift, grant, or capital contribution from related organization(s) 1d Loans or loan guarantees to or for related organization(s) 1d Loans or loan guarantees by related organization(s) 1d Dividends from related organization(s) 1f Sale of assets to related organization(s) 1f Purchase of assets from related organization(s) 1g Lease of facilities, equipment, or other assets to related organization(s) 1i Lease of facilities, equipment, or other assets for related organization(s) 1i Performance of services or membership or fundraising solicitations by related organization(s) 1m Performance of services or membership or fundraising solicitations by related organization(s) 1m Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) 1m Sharing of paid employees with related organization(s) 1m Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) 1m Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) 1m Sharing of paid employees with related org

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) Monument Academy Charter School	J	1,833,479.	Fair Market Value
(2)			
(3)			
(4)			
(5)			
<u>(6)</u>			

Schedule R (Form 990) 2023 Monument Academy Foundation

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

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

(-)	(1-)	(-)	(-1)	10		(4)	()		- \	(1)	(1)	(1.)		
(a)	(b)	(c)	(d)	(e) Are a	i ll	(f)	(g)		h)	(i)	(j)	(k)		
Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign	Predominant income (related, unrelated, excluded from tax under sections 512-514)	partners 501(c) orgs.	s sec. (3)	Share of total	Share of end-of-year	tio	ropor- nate tions?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	managin			
of entity		country)	excluded from tax under	orgs.		income			tions?	of Schedule K-1	partner?			
		country)	sections 512-514)	Yes I	No	Income	255615	Yes	No	(Form 1065)	Yes No	<u>'</u>		
				+	-+							+		
												L		
												 		

Schedule R (Form 990) 2023

Schedule R (Form 990) 2023 Monu Part VII Supplemental Information

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