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.

nterna	ai Revei	lue Service as to the service as the				moposiion
4 F	or the	e 2022 calendar year, or tax year beginning JUL 1, 2022	and ending	<u>JUN 30, 20</u>	23	
	heck if	C Name of organization		D Employer ide	entific	cation number
	plicabl					
	Addre: chang Name	Monument Academy Bullding Corporation	n			- 0
	chang Initial	Doing business as	<u> </u>	26-140		
	return	Number and street (or P.O. box if mail is not delivered to street address)	Room/s			
	Final return/ termin			719-48	3 L – .	
	ated 1Amen	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$		971,762.
	return Applic	Monument, CO 80132		H(a) Is this a gro		
	tion pendir	F Name and address of principal officer: KIMDELLY MCCLELLS	ana	for subordi		·····= =
		same as c above				cluded? Yes No
		empt status: $X = 501(c)(3) = 501(c)(0)$ (insert no.) $= 4947(a)$ te: https://www.lewispalmer.org/)(1) or			list. See instructions
	ebsit	organization: X Corporation Trust Association Other	1. \	H(c) Group exer		n number 1 State of legal domicile: CO
	rt I	Summary	L \	ear of formation: 200) / N	State of legal domicile; CO
<u>. u</u>		Briefly describe the organization's mission or most significant activities: Th	a Ruil	ding Copora	+ i c	าก พลต
8		created to issue debt and build and sup				
Activities & Governance		Check this box if the organization discontinued its operations or discontinued.	_			
Je l					3	4
ĝ		Number of independent voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1			4	4
∞ (Total number of individuals employed in calendar year 2022 (Part V, line 2a)			5	0
Ĕ.		Total number of volunteers (estimate if necessary)			6	4
흕		Total unrelated business revenue from Part VIII, column (C), line 12			7a	0.
۲		Net unrelated business taxable income from Form 990-T, Part I, line 11			7b	0.
				Prior Year		Current Year
	8	Contributions and grants (Part VIII, line 1h)			0.	0.
ğΙ	9	Program service revenue (Part VIII, line 2g)		929,53	38.	930,438.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		30	7.	41,324.
œ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			0.	0.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 1:		929,84	ŀ5.	971,762.
	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.
ဖွ	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-	0)		0.	0.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)			0.	0.
ă Š		Total fundraising expenses (Part IX, column (D), line 25)	0.			
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		963,03		744,659.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		963,03		744,659.
	19	Revenue less expenses. Subtract line 18 from line 12		-33,18		227,103.
SOR				Beginning of Current	_	End of Year
Sset		Total assets (Part X, line 16)		11,414,73		11,038,079.
Net Assets or und Balances		Total liabilities (Part X, line 26)		12,364,49 -949,76		11,578,604. -540,525.
	22 rt II	Net assets or fund balances. Subtract line 21 from line 20		-343,/0) <u>/</u> •	-540,525.
		Ities of perjury, I declare that I have examined this return, including accompanying sche	dules and eta	tements, and to the heet	of my	knowledge and helief it is
		et, and complete. Declaration of preparer (other than officer) is based on all information of			-	knowledge and belief, it is
iuo,	COITCC		n willon prop	arci nas any knowicuge.		
Sign		Signature of officer		Date		
Here		Kimberly McClelland, Interim COO / Exec	utive	Director		
1016	•	Type or print name and title				
		Print/Type preparer's name Preparer's signature		Date Che	eck	PTIN
aid		Thomas G. Sistare Thomas G. Sist	are	04/03/24 if seli	∟ f-emplovi	
	arer	Firm's name Hoelting & Company, Inc.	_			0-0514455
	Only	Firm's address 31 East Platte Avenue, Suite 30	0	7 11111 3 E1		
	•	Colorado Springs, CO 80903		Phone no	. (7	19) 630-1091
Mav	the IF	RS discuss this return with the preparer shown above? See instructions		1		X Yes No

	990 (2022) Monument Academy Building Corporation	26-1401850	Page 2
Par	t III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		🖂
1	Briefly describe the organization's mission:		
	The Monument Academy Building Corporation was created to	issue debt.	
	build a facility and lease the facility to Monument Acade		
	Academy is a public school chartered through the Lewis-Pa		
	District in Colorado.	ATMCT DC11001	-
_			
2	Did the organization undertake any significant program services during the year which were not listed on the		₹
	prior Form 990 or 990-EZ?	Yes	X No
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes	S 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 it	measured by expenses	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other	s, the total expenses, a	and
	revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$	ue \$ 930,	438.)
	Issuance of debt and lease of the school facility built		
	Academy.		
	110 adomy 1		
4b	(Code:) (Expenses \$ including grants of \$) (Revenue	¢	١
710	(Code	με ψ	,
4c	(Code:) (Expenses \$	ue \$)
4d	Other program services (Describe on Schedule O.)		
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses 744,659.		

			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		Х
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		Х
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		Х
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		Х
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, VIII, 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		37	
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Х	37
e	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)? 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			x
	Schedule D, Parts XI and XII	12a		Α.
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	406	x	
10	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b 13	1	Х
13 14a		14a		X
		144		
D	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		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
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
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

Pai	rt IV Checklist of Required Schedules (continued)	1030		age ¬
· u	Continued)		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		100	110
	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		X
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			l
	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		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%			X
07	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		<u> </u>
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	27		X
28	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	21		1
20	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
u	"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
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		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		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	X	
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			3,7
	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?	000	х	
Pa	Note: All Form 990 filers are required to complete Schedule O rt V Statements Regarding Other IRS Filings and Tax Compliance	38	Λ	
. u	Check if Schedule O contains a response or note to any line in this Part V			
	STOCK II CONTOURS CONTRAINS & TOOPONGS OF HOLE to drift into II this I dit V		Yes	No
12	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	0	163	1,40
b		ö		
C	Enter the number of terms with a state of the terms of th			
,	(gambling) winnings to prize winners?	1c		

Form 990 (2022) Monument Academy Building Corporation
Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

			Yes	No
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 0	01.		
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		х
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		^
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	4a		х
h	financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country	44		-25
D	See instructions for filling requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
52		5a		Х
b	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
-	any contributions that were not tax deductible as charitable contributions?	6a		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).			
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		Х
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?	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	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?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
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			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
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			
40-	amounts due or received from them.) Continue (1007/c)(d) many appropriate to the control of the	40-		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12a		
13	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
u	Note: See the instructions for additional information the organization must report on Schedule O.	100		
h	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	Enter the amount of reserves on hand 13c			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		Х
	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 (2022) 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 lines 2 through 7b below, and for a "No" response to lines 2 through 7b below, and for a "No" response to lines 2 through 7b below, and for a "No" response to lines 2 through 7b below, and for a "No" response to lines 2 through 7b below, and for a "No" response to lines 2 through 7b below, and for a "No" response to lines 2 through 7b below, and for a "No" response to lines 2 through 7b below, and for a "No" response to lines 2 through 7b below, and for a "No" response to lines 2 through 7b below, and for a "No" response to lines 2 through 7b below, and for a "No" response to lines 2 through 7b below, and for a "No" response to lines 2 through 7b below, and for a "No" response to lines 2 through 7b below, and for a "No" response to lines 2 through 7b below, and for a "No" response to lines 2 through 7b below, and for a "No" response to lines 2 through 7b below, and for a "No" response to lines 2 through 7b below, and for a "No" response to lines 2 through 7b below, and for a "No" response to lines 2 through 7b below, and for a "No" response to lines 2 through 7b below, and for a "No" response to lines 2 through 7b below, and for a "No" response to lines 2 through 7b below, and for a "No" response to lines 2 through 7b below, and for a "No" response to lines 2 through 7b below, and for a "No" response to lines 2 through 7b below, and for a "No" response to lines 2 through 7b below, and for a "No" response to lines 2 through 7b below 8b be Page 6 to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1		
	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	1		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, 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 by the following:			
а	The governing body?	8a	X	<u> </u>
b	Each committee with authority to act on behalf of the governing body?	8b		X
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			,,
<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 Revenue Code.)		T	Γ
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 chapters, affiliates,	406		
44-	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Х	
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.	12a	х	
12a	, , , , , , , , , , , , , , , , , , ,	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe	120	- 25	
С		12c	х	
13	on Schedule O how this was done Did the organization have a written whistleblower policy?	13	- 21	х
14	Did the organization have a written whistleblower policy? 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 approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		х
	Other officers or key employees of the organization	15b		Х
_	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filedNone			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3	s only)	availal	ble
	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, are	d finan	cial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	The Organization - 719-481-1950			
	1150 Village Ridge Point Monument CO 80132			

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

X Check this box if neither the organization ne	or any related	orga	niza	tion	con	nper	sate		rector, or trustee.	
(A)	(B)			_ ((C)			(D)	(E)	(F)
Name and title	Average	(do	not c	Pos heck	itior more) than d	one	Reportable	Reportable	Estimated
	hours per	box	, unle:	ss pei	rson i	s both	n an	compensation	compensation	amount of
	week		T			T	l	from the	from related	other
	(list any hours for	direct				_		organization	organizations (W-2/1099-MISC/	compensation from the
	related	9e or	stee			nsate		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	Individual trustee or director	In stit utio nal tru stee		oyee	om pe		1099-NEC)	,	and related
	below	/idual	tution	Ja Ja	Key employee	loyee	Jer.			organizations
	line)	Indi	Insti	Officer	Key	Highest compensated employee	Forn			
(1) Mark McWilliams	0.50									
President	0.50	Х		Х				0.	0.	0.
(2) Chris Dole	0.50							_	_	_
Secretary	0.50	Х		Х				0.	0.	0.
(3) Joe Buczkowski	0.50							_	_	_
Director		Х						0.	0.	0.
(4) Melanie Strop	0.50									
Director	0.50	Х						0.	0.	0.
		-								
			_							
		-								
						_				
										000

hours per week (list any hours for related organizations organizations)	(F) Estimated amount of other ompensation from the organization and related ganizations
Name and title Average hours per week (list any hours for list any hours for list and list any hours for list and list any hours for list and list	Estimated amount of other ompensation from the organization and related
hours per week (list any hours for	amount of other ompensation from the organization and related
nours per box, unless person is both an officer and a director/trustee) from from related (list any bours for	other ompensation from the rganization and related
(list any bours for series and the organizations cor	ompensation from the organization and related
(list any hours for related organizations below line) Ine) (list any hours for related organizations below line)	from the rganization and related
hours for related organizations below line) Simple control of the properties of t	rganization and related
related organizations below line) Individual transport organizations Individual t	and related
organizations below line) State Description Descrip	
pelow line) Officer Highest C Officer	ganizations
line) high high high high high high high hig	
1b Subtotal 0.	0.
c Total from continuation sheets to Part VII, Section A	0.
0	0.
2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable	0
compensation from the organization	0
	Yes No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on	
line 1a? If "Yes," complete Schedule J for such individual	X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization	
and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services	
rendered to the organization? If "Yes," complete Schedule J for such person 5	X
Section B. Independent Contractors	
1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation f	from
the organization. Report compensation for the calendar year ending with or within the organization's tax year.	
	(C)
	pensation
Name and pushios address INONE Description of services Comp	

0

\$100,000 of compensation from the organization

		Check if Schedule O contains a response	or note to any line	e in this Part VIII			
		oricon il correguie o corregino a response v	I TOLO LO GITY III L	(A)	(B)	(C)	(D)
				Total revenue	Related or exempt		Revenue excluded
					function revenue	business revenue	from tax under sections 512 - 514
S S	1 a	Federated campaigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts		Membership dues 1b					
		Fundraising events 1c					
		Related organizations 1d					
		Government grants (contributions) 1e					
		All other contributions, gifts, grants, and					
	•	similar amounts not included above					
흥		Noncash contributions included in lines 1a-1f					
S E		Total. Add lines 1a-1f					
<u> </u>		Totali / Ida iii lee Ta Ti	Business Code				
4	2 a	Rental Income	518210	930,438.	930,438.		
Nice	2 u b		323223	300,1000	300,1000		
Program Service Revenue	c						
E S	d						
gra Re	e						
Pro		All other program service revenue					
		Total. Add lines 2a-2f		930,438.			
	3	Investment income (including dividends, intere		300,1000			
	Ū	other similar amounts)		41,324.			41,324.
	4	Income from investment of tax-exempt bond p		11,0210			11,311
	5	Royalties	Г				
	J	(i) Real	(ii) Personal				
	6 a	Gross rents 6a	(-)				
		Less: rental expenses 6b					
		Rental income or (loss) 6c					
		Net rental income or (loss)					
		Gross amount from sales of (i) Securities	(ii) Other				
	ı a	assets other than inventory 7a	(11) 5 11 101				
	h	Less: cost or other basis					
Φ	b	and sales expenses 7b					
ž	_	Gain or (loss) 7c					
eve		Net gain or (loss)					
her Revenue		Gross income from fundraising events (not					
Othe	0 a						
٥		contributions reported on line 1c). See					
		Part IV, line 18					
	h	Less: direct expenses 8b					
		Net income or (loss) from fundraising events					
		Gross income from gaming activities. See					
	Эа	Part IV, line 19 9a					
	h	Less: direct expenses 9b					
		Nick to a construction of the color of the c					
		Gross sales of inventory, less returns					
	и а						
	h						
	C	Net income or (loss) from sales of inventory	Business Code				
ns	11 a						
ee Tue	ii a						
Miscellaneous Revenue	C						
Sce	ى ،	All other revenue					
Ξ	u ^	Total. Add lines 11a-11d					
	12			971 762.	930 438.	0.	41 324.

Form 990 (2022) Monument Academy Building Corporation Part IX Statement of Functional Expenses

Secti	on 501(c)(3) and 501(c)(4) organizations must comp			nplete column (A).	
	Check if Schedule O contains a respons	se or note to any line in t	(B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	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				
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 O.)				
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	448,669.	448,669.		
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					
b					
q					
d	All other expenses				
	All other expenses Add lines 1 through 24a	744,659.	744,659.	0.	0.
<u>25</u> 26	Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization	144,000.	1 = 4 , 0 3 3 •	J •	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)				

Form 990 (2022)
Part X Balance Sheet

Par	t A	Balance Sneet					
		Check if Schedule O contains a response or note	to any	/ line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing				1	
	2	Savings and temporary cash investments			1,561,374.	2	1,613,198
	3	Pledges and grants receivable, net		3			
	4	Accounts receivable, net		4			
	5	Loans and other receivables from any current or for	ormer	officer, director,			
		trustee, key employee, creator or founder, substar	ntial c	ontributor, or 35%			
		controlled entity or family member of any of these	perso	ons		5	
	6	Loans and other receivables from other disqualifie					
		under section 4958(f)(1)), and persons described in	n sect	tion 4958(c)(3)(B)		6	
ا ي	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
ĕ	9	B ::				9	
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	12,424,809.			
	b	Less: accumulated depreciation	10b	4,388,907.	8,344,425.	10c	8,035,902
	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			1,508,933.	15	1,388,979
	16	Total assets. Add lines 1 through 15 (must equal	line 3	3)	11,414,732.	16	11,038,079
	17	Accounts payable and accrued expenses			234,615.	17	115,234
	18	Grants payable		18			
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities			12,129,879.	20	11,463,370
	21	Escrow or custodial account liability. Complete Pa	art IV (of Schedule D		21	
ا ي	22	Loans and other payables to any current or former	r offic	er, director,			
≝		trustee, key employee, creator or founder, substar	ntial c	ontributor, or 35%			
Liabilities		controlled entity or family member of any of these	perso	ons		22	
-	23	Secured mortgages and notes payable to unrelate	d thir	d parties		23	
	24	Unsecured notes and loans payable to unrelated t	hird p	parties		24	
	25	Other liabilities (including federal income tax, paya	bles t	to related third			
		parties, and other liabilities not included on lines 1	7-24)	. Complete Part X			
		of Schedule D				25	
	26	Total liabilities. Add lines 17 through 25			12,364,494.	26	11,578,604
		Organizations that follow FASB ASC 958, check	c here	e X			
Se		and complete lines 27, 28, 32, and 33.					
<u>a</u>	27				-949,762.	27	-2,038,489
<u> </u>	28	Net assets with donor restrictions		<u></u>		28	1,497,964
		Organizations that do not follow FASB ASC 958	3, che	ck here			
[and complete lines 29 through 33.					
0	29	Capital stock or trust principal, or current funds				29	
Se	30	Paid-in or capital surplus, or land, building, or equi				30	
¥	31	Retained earnings, endowment, accumulated inco				31	
Net Assets or Fund Balances	32	Total net assets or fund balances			-949,762.	32	-540,525
	33	Total liabilities and net assets/fund balances			11,414,732.	33	11,038,079

Pa	rt XI Reconciliation of Net Assets						
	Check if Schedule O contains a response or note to any line in this Part XI				X		
1	Total revenue (must equal Part VIII, column (A), line 12)	1		L,7			
2	Total expenses (must equal Part IX, column (A), line 25)	2		1,6	<u>59.</u> 03.		
3							
4							
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	182	2,1	34.		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,						
	column (B))	10	-54(),5	25.		
Pa	rt XII Financial Statements and Reporting						
	Check if Schedule O contains a response or note to any line in this Part XII				X		
				Yes	No		
1	Accounting method used to prepare the Form 990: Cash Cash Other See Sch	0					
-	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule						
2a			2a		Х		
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed						
	separate basis, consolidated basis, or both:	ona					
	Separate basis Consolidated basis Both consolidated and separate basis						
h			2b	х			
b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate		. 20				
	consolidated basis, or both:	Dasis,					
	Separate basis X Consolidated basis Both consolidated and separate basis						
_		ou dit					
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the		2c	х			
	review, or compilation of its financial statements and selection of an independent accountant?		<u>20</u>	^			
٥.	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule O.					
за	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				х		
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		. 3a				
р	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits? If the organization did not undergo the required audit or audits? If the organization did not undergo the required audit or audits? If the organization did not undergo the required audit or audits? If the organization did not undergo the required audit or audits? If the organization did not undergo the required audit or audits? If the organization did not undergo the required audit or audits? If the organization did not undergo the required audit or audits? If the organization did not undergo the required audit or audits? If the organization did not undergo the required audit or audits?	ea audit					
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3h	- 1	1		

SCHEDULE A

(Form 990)

<u>Total</u>

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2022
Open to Public

Inspection

Employer identification number

		Monu	ment Acade:	my Building (Corpor	ration	ı		6-1401850				
Pa	art I	Reason for Public (Charity Status.	(All organizations must c	omplete th	nis part.) S	ee instructions	S.					
The	organ	ization is not a private found											
1		A church, convention of ch					I)(A)(i).						
2		A school described in sect				` ` ` ` `	<i>x x</i> ,						
3	同	A hospital or a cooperative				/b)(1)(A)(ii	ii).						
4	Ħ	A medical research organiz					•	'iii) Enter	the hospital's name				
7	ш	city, and state:	acion operated in co	njanotion with a noophal	GCCCTIDGG	000110	((,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	inj. Lino	ino noopital o name,				
_		An organization operated for	or the benefit of a co	llege or university owned	l or operate	ed by a go	vernmental un	it describe	ad in				
5				nege or university owned	or operati	ed by a go	veriinentai un	it describe	tu III				
_		section 170(b)(1)(A)(iv). (0											
6	\mathbb{H}	A federal, state, or local go	-										
7		An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in											
		section 170(b)(1)(A)(vi). (C											
8	Щ	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	ınction with a l	and-grant	college				
		or university or a non-land-o	grant college of agric	ulture (see instructions).	Enter the I	name, city	, and state of t	he college	or				
		university:											
10		An organization that norma	ally receives (1) more	than 33 1/3% of its supp	ort from c	ontributior	ns, membershi _l	o fees, and	d gross receipts from				
		activities related to its exen	npt functions, subjec	t to certain exceptions; a	and (2) no	more than	33 1/3% of its	support fr	om gross investment	t			
		income and unrelated busin	ness taxable income	(less section 511 tax) fro	m busines	ses acqui	red by the orga	anization a	fter June 30, 1975.				
		See section 509(a)(2). (Co	mplete Part III.)										
11		An organization organized	and operated exclusi	ively to test for public sat	fety. See	section 50	09(a)(4).						
12	X	An organization organized	and operated exclusi	ively for the benefit of, to	perform tl	he function	ns of, or to car	ry out the	purposes of one or				
		more publicly supported or	· ·	•	-			•	•				
		lines 12a through 12d that	-										
а	. [Type I. A supporting orga	* *					-	giving				
_		the supported organization	•	·	•	_			-				
		organization. You must o			majority o	in the direc	nors or trustee	0 01 1110 00	pporting				
b	. X	Type II. A supporting org	-		ion with its	e eunnorte	nd organization	(c) by bay	ina				
	,												
		control or management o			arrie persor	iis iiiai coi	Titioi or manay	e trie supp	orted				
_		organization(s). You mus	-		:	م ملائد، ما ما		. :	ما د نام				
C	;							y integrate	a with,				
	. —	its supported organizatio		•									
C	ı						= =	-					
		that is not functionally int	•	• ,	•		•	an attentiv	reness				
	_	requirement (see instruct	•	•									
e	•						Type I, Type II	, Type III					
		functionally integrated, or	r Type III non-functio	nally integrated supporting	ng organiz	ation.							
		er the number of supported o	•						1				
ç		vide the following information			(iv) Is the orga	nization listed			(-2) A				
	(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10	in your governi	ng document?	(v) Amount of support (see ins	•	(vi) Amount of other support (see instruction				
		organization		above (see instructions))	Yes	No	support (see in	structions)	support (see instruction				
		_		_									
Mο	num	ent Acadmey	27-0014128	2	X		744	<u>,659.</u>					

0.

744,659.

$_{(Form\ 990)\ 2022}$ Monument Academy Building Corporation 26-1401 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						_
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						_
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
	Public support. Subtract line 5 from line 4.						
Sec	ction B. Total Support		1	<u> </u>			
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
	Total support. Add lines 7 through 10						
	Gross receipts from related activities,	· ·				12	
13	First 5 years. If the Form 990 is for the				•	. , . ,	
Sec	organization, check this box and stop ction C. Computation of Publi					<u></u>	
	Public support percentage for 2022 (I			column (f))		14	%
	Public support percentage from 2021					15	/ 6
	33 1/3% support test - 2022. If the o						
	stop here. The organization qualifies	-					
b	33 1/3% support test - 2021. If the o		~				
	and stop here. The organization qual					,	
17a	10% -facts-and-circumstances test						
	and if the organization meets the fact						
	meets the facts-and-circumstances te	st. The organization	on qualifies as a pu	ublicly supported o	rganization		
b	10% -facts-and-circumstances test	- 2021. If the org	anization did not	check a box on line	e 13, 16a, 16b, or	17a, and line 15 is	10% or
	more, and if the organization meets the	ne facts-and-circun	nstances test, che	ck this box and s	top here. Explain i	n Part VI how the	
	organization meets the facts-and-circu	umstances test. Th	ne organization qu	alifies as a publicly	supported organi	zation	
18	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 16b, 17a, or 17b	o, check this box a	nd see instructions	·

Schedule A (Form 990) 2022 Monument Academy Building Corporation
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.)	
A. Public Support	

Section A	A. Public Support						
Calendar yea	r (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1 Gifts, g	grants, contributions, and						
membe	ership fees received. (Do not						
include	e any "unusual grants.")						
mercha formed any act	receipts from admissions, andise sold or services per- I, or facilities furnished in tivity that is related to the zation's tax-exempt purpose						
3 Gross	receipts from activities that						
are not	t an unrelated trade or bus- under section 513						
	venues levied for the organ-						
	's benefit and either paid to						
	ended on its behalf						
	lue of services or facilities						
furnish	ed by a governmental unit to ganization without charge						
6 Total.	Add lines 1 through 5						
7a Amoun	nts included on lines 1, 2, and						
3 recei	ved from disqualified persons						
from othe exceed th	included on lines 2 and 3 received er than disqualified persons that ne greater of \$5,000 or 1% of the on line 13 for the year						
	nes 7a and 7b					+	+
	support. (Subtract line 7c from line 6.)						
Section E	3. Total Support						
	r (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	nts from line 6	(4) 2010	(6) 2013	(6) 2020	(4) 2021	(6) 2022	(i) Total
I0a Gross i dividen securiti	income from interest, Ids, payments received on Ies loans, rents, royalties, Come from similar sources						
b Unrelate	ed business taxable income						
•	ction 511 taxes) from businesses d after June 30, 1975						
c Add lin	es 10a and 10b						
activitie whethe	come from unrelated business es not included on line 10b, er or not the business is rly carried on						
Other in or loss	ncome. Do not include gain from the sale of capital (Explain in Part VI.)						
	IPPORT. (Add lines 9, 10c, 11, and 12.)						
	years. If the Form 990 is for th	e organization's fi	rst, second, third.	fourth, or fifth tax	year as a section (501(c)(3) organizatio	on,
	this box and stop here	o .		,	•	()()	<i>'</i>
ection C	C. Computation of Public	c Support Per	rcentage				
	support percentage for 2022 (li			column (f))		15	
	support percentage from 2021					16	
	D. Computation of Inves						
	ment income percentage for 20			ne 13, column (f))		17	
	nent income percentage from 2					18	
	% support tests - 2022. If the						7 is not
	han 33 1/3%, check this box an						
b 33 1/39	% support tests - 2021. If the	organization did r	not check a box on	line 14 or line 19a	a, and line 16 is m	ore than 33 1/3%, a	
	is not more than 33 1/3%, chece foundation. If the organization		-	•		-	·····
∠v rivate	z rounuation. II the organization	л ото пог спеск а	DOX OF THE 14, 19	a. OF 180. CHECK II	na dox ado see in:	SHUGHOUS	I

Schedule A (Form 990) 2022 Mont Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

		Yes	No
	1	Х	
	2		Х
	За		Х
	3b		
	3с		
	4a		Х
	-iu		
	4b		
	4c		
	5a		_X_
	5b		
	5с		
	6		X
	7		Х
	8		Х
	9a		X
	9b		Х
	9с		Х
	10a		X
	10b		
_			

26-1401850 Page 4

	dule A (Form 990)	2022 Monument Academy Building Corporation 26-1	40185	0 P	age 5
Pa	rt IV Support	ting Organizations _(continued)			
				Yes	No
11	Has the organizat	tion accepted a gift or contribution from any of the following persons?			
а	A person who dire	ectly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the go	overning body of a supported organization?	11a		X
	•	of a person described on line 11a above?	11b		X
С	A 35% controlled	entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.		11c		X
Sec	tion B. Type I S	Supporting Organizations			
				Yes	No
1		body, members of the governing body, officers acting in their official capacity, or membership of one or			
		organizations have the power to regularly appoint or elect at least a majority of the organization's officers, ees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
		ees at all times during the tax year? If "No," describe in Fat VI now the supported organization(s) eed, supervised, or controlled the organization's activities. If the organization had more than one supported			
		cribe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
		zations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2		ion operate for the benefit of any supported organization other than the supported			
	organization(s) tha	at operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how provide	iding such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or cor	ntrolled the supporting organization.	2		
Sec	tion C. Type II	Supporting Organizations			
				Yes	No
1	Were a majority of	f the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of eacl	h of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of	f the supporting organization was vested in the same persons that controlled or managed			
	the supported org	nanization(s).	1	X	
Sec	tion D. All Type	e III Supporting Organizations			
				Yes	No
1	Did the organization	ion 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 gov	verning documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the o	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 m	naintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the r	relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in	n 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 organiz	zations played in this regard.	3		
Sec	tion E. Type III	Functionally Integrated Supporting Organizations			
1	Check the box nex	xt to the method that the organization used to satisfy the Integral Part Test during the year (see instruction	ıs).		
а		zation satisfied the Activities Test. Complete line 2 below.			
b		zation is the parent of each of its supported organizations. Complete line 3 below.			
С	The organiz	zation supported a governmental entity. Describe in Part VI how you supported a governmental entity (see	instruction	1 <u>s).</u>	
2	Activities Test. Ar	nswer lines 2a and 2b below.		Yes	No
а	Did substantially a	all of the organization's activities during the tax year directly further the exempt purposes of			
		ganization(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 organizati	tion was responsive to those supported organizations, and how the organization determined			
	that these activitie	es constituted substantially all of its activities.	2a		
b	Did the activities of	described on line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the	e organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reason	ns for the organization's position that its supported organization(s) would have engaged in			
		it for the organization's involvement.	2b		
3	Parent of Support	ted Organizations. Answer lines 3a and 3b below.			
а	Did the organization	ion have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each o	of the supported organizations? If "Yes" or "No" provide details in Part VI.	За		
b		ion exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported o	organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3b		

Sche	dule A (Form 990) 2022 Monument Academy Buildi			26-1401850 Page 6
Par	<u> </u>			
1	Check here if the organization satisfied the Integral Part Test as a qualifying		·	in Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mus	t complete I	Sections A through E.	
Sect	on 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		
Secti	on 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		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	on 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		

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

5

6

Schedule A (Form 990) 2022

4 Enter greater of line 2 or line 3.

instructions).

5 Income tax imposed in prior year

6 Distributable Amount. Subtract line 5 from line 4, unless subject to

emergency temporary reduction (see instructions).

Schedule A (Form 990) 2022

c Excess from 2020d Excess from 2021e Excess from 2022

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047 Inspection

Name of the organization

Monument Academy Building Corporation

Employer identification number 26-1401850

		(a) Donor advised	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 w	riting that the assets held	l in donor advised fu	nds
	are the organization's property, subject to the organization's e	-		
6	Did the organization inform all grantees, donors, and donor ac			
	for charitable purposes and not for the benefit of the donor or			
	impermissible private benefit?	•	• •	
Pa	t II Conservation Easements. Complete if the org			
1	Purpose(s) of conservation easements held by the organization		·	
	Preservation of land for public use (for example, recreat		Preservation of a his	torically important land area
	Protection of natural habitat	· —		tified historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualification	ed conservation contribut	ion in the form of a c	onservation easement on the last
	day of the tax year.			Held at the End of the Tax Yea
а	Total number of conservation easements			2a
b				2b
С	Number of conservation easements on a certified historic stru			2c
d	Number of conservation easements included in (c) acquired at			
	historic structure listed in the National Register	•		2d
3	Number of conservation easements modified, transferred, rele			nization during the tax
	year	· ·		-
4	Number of states where property subject to conservation ease	ement is located		
5	Does the organization have a written policy regarding the peri	odic monitoring, inspectio	n, handling of	
	violations, and enforcement of the conservation easements it	holds?		Yes N
6	Staff and volunteer hours devoted to monitoring, inspecting, h			
7	Amount of expenses incurred in monitoring, inspecting, handl	ing of violations, and enfo	rcing conservation e	asements during the year
8	Does each conservation easement reported on line 2(d) above	satisfy the requirements	of section 170(h)(4)(E	3)(i)
	and section 170(h)(4)(B)(ii)?			Yes N
9	In Part XIII, describe how the organization reports conservation	n easements in its revenu	e and expense state	ment and
	balance sheet, and include, if applicable, the text of the footnote	ote to the organization's fi	nancial statements t	hat describes the
	organization's accounting for conservation easements.			
Pa	t III Organizations Maintaining Collections of		sures, or Other	Similar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.		
1a	If the organization elected, as permitted under FASB ASC 958	3, not to report in its reven	ue statement and ba	alance sheet works
	of art, historical treasures, or other similar assets held for public	lic exhibition, education, c	or research in further	ance of public
	service, provide in Part XIII the text of the footnote to its finance	cial statements that descr	ibes these items.	
b	If the organization elected, as permitted under FASB ASC 958	3, to report in its revenue s	statement and baland	ce sheet works of
	art, historical treasures, or other similar assets held for public $% \left(1\right) =\left(1\right) \left(1\right) $	exhibition, education, or r	esearch in furtherand	ce 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 trea	sures, or other similar ass	ets for financial gain	, provide
	the following amounts required to be reported under FASB AS	SC 958 relating to these it	ems:	
а	Revenue included on Form 990, Part VIII, line 1			\$

	t III Organizations Maintaining C	c Academy ollections of A							S (continu	
3	Using the organization's acquisition, accession								COMM	<i>eu)</i>
Ū	collection items (check all that apply):	on, and other record	10, 011001	carry or the i	ollowing that	. make or	grimoarie	300 01 110		
а	Public exhibition	,	d \square	Loan or exc	hange progra	am				
b	Scholarly research				riange progre					
C	Preservation for future generations	`		Oti lei						
4	Provide a description of the organization's co	allections and explai	n how th	ov further th	o organizatio	n'e avan	not nurno	ca in Dart	YIII	
5	During the year, did the organization solicit or							se iiii ait	AIII.	
3	to be sold to raise funds rather than to be ma				•				Yes	☐ No
Par	t IV Escrow and Custodial Arrang									NO
	reported an amount on Form 990, Par		iete ii tiit	organizatio	ii alisweled	163 011	1 01111 330	, raitiv,	iii le 3, 0i	
12	Is the organization an agent, trustee, custodia		diany for a	contribution	s or other ass	eats not i	ncluded			-
ıu	on Form 990, Part X?								Yes	No
h	If "Yes," explain the arrangement in Part XIII								_ 103	110
D	ii res, explain the arrangement iii art xiii a	and complete the le	mownig t	abic.					Amount	-
_	Beginning balance						1c			-
	Additions during the year									
	Distributions during the year									-
f	Ending balance									-
	Did the organization include an amount on Fo								Yes	No
	If "Yes," explain the arrangement in Part XIII.						•			
Par										
	· I	(a) Current year		Prior year	(c) Two year			ears back	(e) Four y	ears back
1a	Beginning of year balance	•								
	Contributions									
	Net investment earnings, gains, and losses									
	Grants or scholarships									
	Other expenditures for facilities									
_	and programs									
f	Administrative expenses									
	End of year balance									
2	Provide the estimated percentage of the curre		e (line 1	a. column (a))) held as:					
	Board designated or quasi-endowment	•	%	, , , , , , , , , , , , , , , , , , , ,	,					
b	Permanent endowment									
С		<u></u> - %								
	The percentages on lines 2a, 2b, and 2c show	uld equal 100%.								
За	Are there endowment funds not in the posses	•	ation tha	t are held ar	nd administer	ed for the	е			
	organization by:	· ·							Y	'es No
	(i) Unrelated organizations								3a(i)	
	(ii) Related organizations								3a(ii)	
b	If "Yes" on line 3a(ii), are the related organizar	tions listed as requi	red on S	chedule R?					3b	
4	Describe in Part XIII the intended uses of the									
Par	t VI Land, Buildings, and Equipm									
	Complete if the organization answered	d "Yes" on Form 99	0, Part I\	/, line 11a. S	See Form 990	, Part X,	line 10.			
	Description of property	(a) Cost or o	other	(b) Cost	or other	(c) A	ccumulate	ed	(d) Book	value
		basis (invest	ment)	basis	(other)	der	oreciation			
1a	Land			71	8,527.				718	,527.
	Buildings	I		11,70	6,282.	4,3	388,9	07.	7,317	
	Leasehold improvements									
	Equipment									
	Other									

Schedule D (Form 990) 2022

8,035,902.

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

(5) (6)(7)(8)(9)Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

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

232054 09-01-22

SCHEDULE K (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information on Tax-Exempt Bonds

Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.

Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.

2022 Open to Public Inspection

Name of the organization

Monument Academy Building Corporation

Employer identification number 26-1401850

			aing corpo							<u> </u>	4 O T (
Part	I Bond Issues Se	e Part VI	for Column	ns (a) an	<u>ıd (f) (</u>	Contin	uations							
	(a) Issuer name	(b) Issuer EIN (c) CUSIP #		(d) Date issue	d (e) Issu	ue price	(f) Descripti	ription of purpose		feased	(h) On			
											of iss	suer	finan	ıcin
									Yes	No	Yes	No	Yes	No
	Colorado Educational and							refunding						
_A C	Cultural Facilities Auth	84-0896727	19645RZQ7	12/19/1	4 1465	8163.	of serie	s 2007A a	1	Х		Х		X
<u>B</u>														<u> </u>
<u>_C</u>														<u> </u>
D														
Part	II Proceeds					T								
					Α		В	С				D		
1	Amount of bonds retired				55,000.									
2	Amount of bonds legally defeased													
3	Total proceeds of issue				58,163.									
4	Gross proceeds in reserve funds			9	<u>32,137.</u>									
5	Capitalized interest from proceeds													
6	Proceeds in refunding escrows				51,786.									
7	Issuance costs from proceeds			3	74,239.									
8	•													
9_	Working capital expenditures from proceeds													
10	Capital expenditures from proceeds													
<u>11</u>	Other spent proceeds													
<u>12</u>														
<u>13</u>	Year of substantial completion				2014									
				Yes	No	Yes	No	Yes	No		Yes		No	
14	Were the bonds issued as part of a refunding i	ssue of tax-exempt b	oonds (or,											
	if issued prior to 2018, a current refunding issu			X										
15	Were the bonds issued as part of a refunding i					1								
	issued prior to 2018, an advance refunding iss	ue)?			X									
	Has the final allocation of proceeds been made			X										
17	Does the organization maintain adequate book													
	final allocation of proceeds?			X	1	1	1	ı I		1		- 1		

Par	t III Private Business Use								
			A		В)	Γ)
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		%		%		<u>%</u>		%
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		%		%		<u>%</u>		<u>%</u>
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?	X							
Par	t IV Arbitrage		_				_	_	
			A 		В) 		i
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and	Yes	No X	Yes	No	Yes	No	Yes	No
_	Penalty in Lieu of Arbitrage Rebate?								
2	7 3 11 7	X	T				<u> </u>		1
	Rebate not due yet?	Α	37						
	Exception to rebate?		X						
<u> </u>	No rebate due?		X						
	If "Yes" to line 2c, provide in Part VI the date the rebate computation was								
	performed		Х				I		1
3	Is the bond issue a variable rate issue?		Δ.						

26-1401850

Part IV Arbitrage (continued)								
		4	l	В		Ç	Γ)
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)?		X						
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	I	В		Ç		<u> </u>
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?								
Part VI Supplemental Information. Provide additional information for responses to questions	on Schedule	K. See instru	uctions.					
Schedule K, Part I, Bond Issues:								
(a) Issuer Name: Colorado Educational and Cultura	l 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)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

2022 Open to Public Inspection

OMB No. 1545-0047

Name of the organization

Monument Academy Building Corporation

Employer identification number 26-1401850

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, 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.

From 900, Part VI, Section A, Line 8B:

The Organization had no comittees with authority to act on behalf of

the governing body.

Schedule O (Form 990) 2022 Page **2**

Name of the organization Monument Academy Building Corporation	Employer identification number 26-1401850
Form 990, Part XI, line 9, Changes in Net Assets:	
Prior Period Adjustment - Capital Assets	-12,533.
Prior Period Adjustment - Leases	20,576.
Prior Period Adjustment - Compensated Absessses	174,091.
Total to Form 990, Part XI, Line 9	182,134.
Form 990, Part XII, Line 1:	
The school follows a modified accrual method of accounting	ıg as
prescribed by the Colorado Department of Education. The s	chool-wide
financial statements are reported using the economic reso	ources
measurement focus and the accrual basis of accounting, gr	ants and
similar items are recongnized when all eligibility requir	ements 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 since the prior year.	

SCHEDULE R (Form 990)

Part I

Related Organizations and Unrelated Partnerships

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

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

Attach to Form 990.

OMB No. 1545-0047
2022

Open to Public Inspection

Name of the organization

Department of the Treasury Internal Revenue Service

Monument Academy Building Corporation

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

Employer identification number 26-1401850

		T	T	1							
(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	conti	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		X
Monument Academy Foundation - 51-0506848							
1150 Village Ridge Point							
Monument, CO 80132	School Support	Colorado	501(c)(3)	Line 12a, I	Monument Academy		X
	_						
	-						
]						

For Paperwork Reduction Act Notice, see the Instructions for 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.

		,	ı	•							
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	(k)
Name, address, and EIN	Primary activity	Legal domicile	Direct controlling	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total	Share of	1	ortionate	Code V-UBI	General	Percentage ownership
of related organization		(state or foreign	entity	excluded from tax under	income	end-of-year assets	allocations?		amount in box 20 of Schedule K-1 (Form 1065)	partner	ownership
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes N	0
	1										
	1										
	1										
	1										
	1										
	1										
	1										
	1										
		l .					l				

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)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	Sec.	i) ction	
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Direct controlling entity	Type of entity (C corp, S corp, or trust)	Share of total income	Share of end-of-year assets	Percentage ownership		(i) Section 12(b)(13) ontrolled entity?	
		Couriery)						Yes	No	
	-									
								Ь	<u> </u>	
								↓	<u> </u>	

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1a

Yes No

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

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?

a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity

b Gift, grant, or capital contribution to related organization(s)				1b		X				
c Gift, grant, or capital contribution from related organization(s)				1c		X				
d Loans or loan guarantees to or for related organization(s)										
e Loans or loan guarantees by related organization(s)				1e		X				
f Dividends from related organization(s)				1f		X				
g Sale of assets to related organization(s)				1g		X				
				1h		X				
h Purchase of assets from related organization(s) i Exchange of assets with related organization(s)										
j Lease of facilities, equipment, or other assets to related organization(s)										
L. Lease of facilities any impact or other secret from related againsticn(a)				1k		Х				
k Lease of facilities, equipment, or other assets from related organization(s)										
Performance of services or membership or fundraising solicitations for related organ				11 1m		X				
m Performance of services or membership or fundraising solicitations by related organ				1m		X				
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)										
Sharing of paid employees with related organization(s)				10		Х				
p Reimbursement paid to related organization(s) for expenses										
q Reimbursement paid by related organization(s) for expenses										
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		X				
2 If the answer to any of the above is "Yes," see the instructions for information on w	ho must complete th	is line, including covered r	elationships and transaction thresholds.							
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount in	volved						
(1) Monument Academy Charter School	J	930,438.	Fair Market Value							
(2)										
(3)										
(4)										
(4)										
(5)										
(6)										
232163 09-14-22			Schedule	R (Forn	n 990)	2022				

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	Are all partners sec 501(c)(3) orgs.?	(g) Share of end-of-year assets	Disprition allocat	opor- late tions?	General manage partner	(k) Percentage ownership
								000) 0000

Schedule R	(Form 990) 2022 Supplemental Infori	Monument	Academy	Building	Corporation	26-1401850	Page 5
				Oakada D Oa	to also all and		
	Provide additional informa	ation for responses	to questions on	Schedule R. See	instructions.		