# Extended to May 15, 2023

**Return of Organization Exempt From Income Tax** 

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

▶ Do not enter social security numbers on this form as it may be made public.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

A I	For the	e 2021 calendar year, or tax year beginning JUL	1, 2021 and	ending J	UN 30, 2022					
В	Check if	C Name of organization			D Employer identific	cation number				
_	¬Addre		_							
	chang Name	vanguard Classical School	Inc		27 15202	70				
	chang □ Initial		As about additional	D / it-	37-15323					
	return _Final _return	Number and street (or P.O. box if mail is not delivered 17101 East Ohio Drive	to street address)	Room/suite	E Telephone number 303-691-					
	termir ated	City or town, state or province, country, and ZIP or	foreign postal code		G Gross receipts \$	15,790,045.				
	Amen return	Aurora, Co 60017			H(a) Is this a group return					
	Application pendi	F Name and address of principal officer: Dallie i	le Tomwing		for subordinates					
		same as C above			<b>H(b)</b> Are all subordinates in					
		empt status: <b>X</b> 501(c)(3)		or 527	1 '	list. See instructions				
		https://www.vanguardclass			H(c) Group exemptio					
	orm of	organization: X Corporation Trust Associat  Summary	on Other	L Year	of formation: 2000  N	1 State of legal domicile: CO				
Г		<del>-</del>	COO.	Cahodu	10.0					
ė	1	Briefly describe the organization's mission or most signif	icant activities: See	scheau	ie O					
Governance	2	Check this box  if the organization discontinue	d its apprations or dispos	and of more	than 25% of its not ass	ooto				
veri	3	Number of voting members of the governing body (Part V	6							
Ĝ	4	Number of independent voting members of the governing			3	6				
<b>ფ</b>	1	Total number of individuals employed in calendar year 20			·····	170				
ij		Total number of volunteers (estimate if necessary)				6				
Activities &		Total unrelated business revenue from Part VIII, column (				0.				
_ ⋖		Net unrelated business taxable income from Form 990-T				0.				
					Prior Year	Current Year				
a)	8	Contributions and grants (Part VIII, line 1h)			2,334,037.	1,483,255.				
ž	9	Program service revenue (Part VIII, line 2g)			12,793,959.	13,856,449.				
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7	<sup>7</sup> d)		8,548.	16,738.				
<u> </u>	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 1	0c, and 11e)		0.	433,603.				
	12	Total revenue - add lines 8 through 11 (must equal Part \	/III, column (A), line 12)		15,136,544.	15,790,045.				
	13	Grants and similar amounts paid (Part IX, column (A), line	es 1-3)		0.	0.				
	14	Benefits paid to or for members (Part IX, column (A), line			0.	0.				
es	15	Salaries, other compensation, employee benefits (Part IX			8,332,040.	8,287,320.				
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11	00 4		0.	0.				
X	_b	Total fundraising expenses (Part IX, column (D), line 25)			1 7/0 150	1,919,743.				
	''	Other expenses (Part IX, column (A), lines 11a-11d, 11f-2			1,748,158. 10,080,198.	10,207,063.				
	1	Total expenses. Add lines 13-17 (must equal Part IX, colu	ımn (A), iine 25)		5,056,346.					
	19	Revenue less expenses. Subtract line 18 from line 12			ginning of Current Year	End of Year				
sts o	20	Total assets (Part X, line 16)			11,822,607.	12,495,926.				
ASS	21	Total liabilities (Part X, line 26)			24,336,859.	19,427,196.				
Net Assets or	22	Net assets or fund balances. Subtract line 21 from line 2	0		12,514,252.	-6,931,270.				
Pa	art II	Signature Block		<u>u</u>	•	•				
Und	er pena	Ities of perjury, I declare that I have examined this return, includ	ing accompanying schedules	s and stateme	ents, and to the best of my	knowledge and belief, it is				
true	, correc	t, and complete. Declaration of preparer (other than officer) is b	ased on all information of wh	nich preparer	has any knowledge.					
Sig	n	Signature of officer			Date					
Her	e	Danielle Tomwing, Board Cl	nair							
		Type or print name and title		l r	Date Check	PTIN				
De!			arer's signature		:, L					
Paid			mas G. Sistaı	Le  0	4/07/23 self-employ	ed <u>P00356968</u> 30-0514455				
	Only	Firm's name Hoelting & Company, Firm's address 31 East Platte Aven		)	Firm's EIN ▶	30-0314433				
use	Only	Colorado Springs, C		,	Phone no. (7	19) 630-1091				
May	, the II	RS discuss this return with the preparer shown above? So			[ PHONE NO. \ 7	Yes X No				

	Chack if Schodula O contains a response or note to any line in this Part III	
1	Check if Schedule O contains a response or note to any line in this Part III  Briefly describe the organization's mission:	
'	The mission of Vanguard Classical School is to facilitate individual	1
	academic achievement and character development through a rigorous,	<u> </u>
	content-rich, inclusive learning environment.	
	content fich, inclusive feathing environment:	
2	Did the organization undertake any significant program services during the year which were not listed on the	
2		s X No
	prior Form 990 or 990-EZ?  If "Yes," describe these new services on Schedule O.	5 21 110
3		s X No
3	<u> </u>	5 21 110
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses,	and
4-	revenue, if any, for each program service reported.	052 /
4a	(Code:) (Expenses \$8,701,769. including grants of \$) (Revenue \$14,290 Vanguard Classical School graduates will be literate in the classics	<u>, UJZ•</u> )
	and the ideals of Western Civilization, while valuing the diversity	
	ideas, abilities, and cultures in today's world, and will be prepare	
	to contribute meaningfully to their communities.	<u>=u</u>
	to contribute meaningfully to their communities.	
<b>4</b> b	/o	
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$	,
4c	(Code: ) (Expenses \$ including grants of \$ ) (Revenue \$	)
4d	Other program services (Describe on Schedule O.)	
	(Expenses \$ including grants of \$ ) (Revenue \$ )	
4e	Total program service expenses ► 8,701,769.	
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			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Х	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Х	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			,
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			,,
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			<sub>v</sub>
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			\ <del>v</del>
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			<sub>v</sub>
40	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			<sub>v</sub>
00	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			<sub>v</sub>
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21		X

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Pa	rt IV Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	I		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete		3.7	
	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	э		
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	04-		₩
	Schedule K. If "No," go to line 25a			X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		$\vdash$
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	040		
	any tax-exempt bonds?  Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c 24d		$\vdash$
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	240		
ZJa	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	<u>25a</u>		<del></del>
b	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			<del></del>
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% contro	lled		
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III.			x
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
	"Yes," complete Schedule L, Part IV	28a		x
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV			Х
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes." complete Schedule L. Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M			Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	Х	<u> </u>
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X	Щ
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			X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization	on?		
	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			l
	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?			
D-	Note: All Form 990 filers are required to complete Schedule 0	38	X	
Pa				
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>	 T	<u>L</u>
_		24	Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a	24		
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			

(gambling) winnings to prize winners?

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

			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.			
3а	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		—
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			۱
	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		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		-
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
	If "Yes," indicate the number of Forms 8282 filed during the year	_		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		$\vdash$
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g h	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7g 7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	711		
0		8		
9	sponsoring organization have excess business holdings at any time during the year?  Sponsoring organizations maintaining donor advised funds.	Ů		
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
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 10b			
	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans 13b			
	Enter the amount of reserves on hand	44-		Х
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		
р 15	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O  Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	14b		
IJ		15		X
	excess parachute payment(s) during the year?  If "Yes," see the instructions and file Form 4720, Schedule N.	13		Ë
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, any disqualified person, or mine operator 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.			

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Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

	to line ou, ob, or rob solom, accorded the encumbers, proceeded, or oranged on confedence.			
<u> </u>	Check if Schedule O contains a response or note to any line in this Part VI	<u></u>		X
Sec	tion A. Governing Body and Management		T.,	·
			Yes	No
па	Enter the number of voting members of the governing body at the end of the tax year 1a 1a 6	4		
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule 0.  Enter the number of voting members included on line 1a. above, who are independent			
b		4		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			Х
_	officer, director, trustee, or key employee?	2		
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?			х
4		4		X
4 5	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?  Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the approximation becomes the shadely all and	6		X
о 7а	Did the organization have members or stockholders, or other persons who had the power to elect or appoint one or	-		21
1 a		7a		x
h	more members of the governing body?  Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	1a		21
b	and the other than the annual and the decided	7b		x
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	75		
		8a	х	
b	The governing body?  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	05		
Ū	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)	, ,		
	(This Section B requests information about policies not required by the internal nevertide code.)		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe			
	on Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	X	
b	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		X
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 filed ▶ None			
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	ole
	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, an	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			
	Boos Financial Services, Inc 303-643-5642			
	10190 Bannock St Suite 104, Northglenn, CO 80260			

#### Form 990 (2021)

# 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, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organization	ation nor any related	orga	niza	tion	con	npen	sate	ed any current officer, d	irector, or trustee.		
(A)	(B)		(C)					(D)	(E)	(F)	
Name and title	Average	(do	Position (do not check more than one				one	Reportable	Reportable	Estimated	
	hours per	box	box, unless person is both an officer and a director/trustee)			s both	n an	compensation	compensation	amount of	
	week	-			l	1711 43		from	from related	other	
	(list any hours for	irecto						the	organizations (W-2/1099-MISC/	compensation from the	
	related	e or d	tee			sated		organization (W-2/1099-MISC/	1099-NEC)	organization	
	organizations	ruste	l trus		99/	n ben		1099-NEC)	1039-1420)	and related	
	below	dual t	rtiona	_	l old m	st col	-	10001120)		organizations	
	line)	Individual trustee or director	In stit utional trustee	Officer	Key employee	Highest compensated employee	Former			3	
(1) John Cerny	40.00										
Executive Director				Х				169,847.	0.	31,959.	
(2) Natalie Doxey	1.00										
Director		Х						0.	0.	0.	
(3) Kat Ling	1.00	1									
Director		Х			<u> </u>			0.	0.	0.	
(4) Danielle Tomwing	2.00	1							_	_	
Board Chair		Х		Х				0.	0.	0.	
(5) Dan Jorgensen	1.00	J									
Secretary		Х		Х				0.	0.	0.	
(6) Teresa Tate	1.00									•	
Director	1 00	Х						0.	0.	0.	
(7) Ousman Ba	1.00	٠,,								•	
Director		Х	_					0.	0.	0.	
		1									
		1									
		1									
		1									
		4									
		-									
		-									
		1									
		1									
		•	•	•	-	•	-		•	000	

Part VII Section A. Officers, Directors, Trus											313		age v
(A) Name and title	(B) Average hours per	(do box,	not cl	(C Posi neck r ss per d a di	ition	l than d s both	one n an	<b>(D)</b> Reportable compensation	<b>(E)</b> Reportable compensation		an	(F) stimate	
	week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer Officer		Highest compensated employee		from the organization (W-2/1099-MISC/ 1099-NEC)	from related organization (W-2/1099-MIS 1099-NEC)	is SC/	com fr org and	other pensatiom the anization d relation	e ion ed
1b Subtotal							<b></b>	169,847.		0.	3	1,9	
c Total from continuation sheets to Part VI d Total (add lines 1b and 1c)  Total number of individuals (including but n							<u> </u>	169,847.	000 of reportable	0.	3:	1,9	0. 59.
compensation from the organization	ot illilited to til		11316	u ab	ove	) WIII	0 16	scewed more than \$100,	000 of reportable			Yes	1 No
3 Did the organization list any <b>former</b> officer, line 1a? If "Yes," complete Schedule J for s	•	-	•	•	•		•	•	•		3		Х
4 For any individual listed on line 1a, is the su and related organizations greater than \$150	um of reportabl	e co	mpe	nsat	tion	and	oth	ner compensation from t	he organization		4	Х	
5 Did any person listed on line 1a receive or a rendered to the organization? If "Yes," com	•				,			•	dual for services		5		X
Complete this table for your five highest co the organization. Report compensation for										 oensa	tion fro	om	
(A) Name and business		oai C	iidii	ig wi	itire	71 VVI		(B)  Description of s			(C Compe		n
Gillem Speech Language Pa 4045 Sunset View, Paris,							(	SPED Service	S		10	1,0	59.
2 Total number of independent contractors (ii	ncluding but n	at lim	niter	l to t	thos	عاا ۵	ted.	ahove) who received mo	ore than				

\$100,000 of compensation from the organization

		Check if Schedule O contains a response of	or note to any line	e in this Part VIII			
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	( <b>D</b> ) Revenue excluded from tax under sections 512 - 514
S S	1 a	Federated campaigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts		Membership dues 1b					
2, 5		Fundraising events 1c					
ifts ar A		Related organizations 1d					
nik G		Government grants (contributions)	1,443,425.				
Sir		All other contributions, gifts, grants, and					
her		similar amounts not included above <b>1f</b>	39,830.				
텵		Noncash contributions included in lines 1a-1f					
Cor		Total. Add lines 1a-1f		1,483,255.			
			Business Code				
ø	2 8	Per Pupil Revenue	611110	10,807,917.	10807917.		
Program Service Revenue	- k	Mill Levy	611110	2,938,810.	2,938,810.		
Ser	(	Pupil Activities	611110	109,722.	109,722.		
am		1					
Be	•						
Pro	f	All other program service revenue					
		Total. Add lines 2a-2f		13,856,449.			
	3	Investment income (including dividends, intere	st, and				
		other similar amounts)		16,738.			16,738.
	4	Income from investment of tax-exempt bond p					
	5	Royalties					
		(i) Real	(ii) Personal				
	6 a	Gross rents 6a 615.					
	k	Less: rental expenses 6b 0.					
	(	Rental income or (loss) 6c 615.					
		Net rental income or (loss)		615.	615.		
	7 a	Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory 7a					
	k	Less: cost or other basis					
e		and sales expenses					
len/	(	Gain or (loss) 7c					
Re		Net gain or (loss)					
Other Revenue		Gross income from fundraising events (not including \$ of					
		contributions reported on line 1c). See					
		Part IV, line 188a					
	ŀ	Less: direct expenses 8b					
		Net income or (loss) from fundraising events	<b></b>				
		Gross income from gaming activities. See					
	٠.	Part IV, line 19 9a					
	ŀ	Less: direct expenses 9b					
		Net income or (loss) from gaming activities	<b>•</b>				
		Gross sales of inventory, less returns					
		and allowances 10a					
	ŀ	Less: cost of goods sold 10b					
		Net income or (loss) from sales of inventory	<b></b>				
			Business Code				
snc	11 a	Miscellaneous Revenue	611110	432,988.	432,988.		
Miscellaneous Revenue	k						
ella	(						
lsc Be	(	All other revenue					
2	6	Total. Add lines 11a-11d		432,988.			
	12	Total revenue. See instructions		15,790,045.	14290052.	0.	16,738.

### Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (**D**) Fundraising (B)
Program service
expenses (C) Management and general expenses Do not include amounts reported on lines 6b. Total expenses expenses 7b, 8b, 9b, and 10b of Part VIII. Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 ....... Benefits paid to or for members ..... Compensation of current officers, directors, 205,513. 154,135. 51,378. trustees, and key employees ..... Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages 6,337,243. 5,386,657. 950,586. 7 Pension plan accruals and contributions (include 1,117,390. 946,272. 171,118. section 401(k) and 403(b) employer contributions) 528,571. 447,625. 80,946. Other employee benefits 9 98,603. 83,503. 15,100. 10 Payroll taxes 11 Fees for services (nonemployees): Management 40,126. 40,126. Legal 9,650. 9,650. Accounting Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.) 144,988. 123,240. 21,748. Advertising and promotion 12 13 Office expenses 96,292. 81,848. 14,444. Information technology 14 Royalties 15 2,301,927. 345,289. 1,956,638. 16 Occupancy 63,961. 54,367. 9,594. 17 Travel Payments of travel or entertainment expenses 18 for any federal, state, or local public officials Conferences, conventions, and meetings 19 96,238. 81,802. 14,436. 20 Payments to affiliates 21 974,952. 828,709. 146,243. Depreciation, depletion, and amortization 22 98,499. 83,724. 14,775. 23 Other expenses. Itemize expenses not covered 24 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 O.) 1,011,458. 859,739. 151,719. Purchased Services Instructional Supplies 743,530. 743,530. 263,416. 223,904. 39,512. c Repairs & Maintenance 18,082. 120,549. d Other Expenses 102,467. -3.456,391. $-4,045,8\overline{43}$ . -609,951. 20,499. See Sch O e All other expenses 10,207,063. 8,701,769. 1,484,795. 20,499. Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.

Check here if following SOP 98-2 (ASC 958-720)

Pai	rt X	Balance Sneet					
		Check if Schedule O contains a response or n	ote to any l	ine in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			5,558,447.	1	6,552,197.
	2	Savings and temporary cash investments			35,000.	2	50,000.
	3	Pledges and grants receivable, net			524,064.	3	951,953.
	4	Accounts receivable, net			38,676.	4	166,418.
	5	Loans and other receivables from any current					
		trustee, key employee, creator or founder, sub					
		controlled entity or family member of any of th	ese person	ıs		5	
	6	Loans and other receivables from other disqua	alified perso				
		under section 4958(f)(1)), and persons describ	ed in section	on 4958(c)(3)(B)		6	
Ø	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use			8		
As	9	B			76,670.	9	85,869.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	. 10a	2,204,588.			
	b			996,341.	118,220.	10c	1,208,247.
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, line		12			
	13	Investments - program-related. See Part IV, lin			13		
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11			5,471,530.	15	3,481,242.
	16	Total assets. Add lines 1 through 15 (must ed	qual line 33)	)	11,822,607.	16	12,495,926.
	17	Accounts payable and accrued expenses			1,065,065.	17	907,446.
	18	Grants payable		18			
	19	Deferred revenue	161,183.	19	134,760.		
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complet	e Part IV of	Schedule D		21	
S	22	Loans and other payables to any current or fo	rmer officer	r, director,			
Liabilities		trustee, key employee, creator or founder, sub	stantial co	ntributor, or 35%			
iabi		controlled entity or family member of any of the	ese person	ıs		22	
_	23	Secured mortgages and notes payable to unre				23	
	24	Unsecured notes and loans payable to unrelate		T I		24	
	25	Other liabilities (including federal income tax, p	payables to	related third			
		parties, and other liabilities not included on lin	es 17-24). (	Complete Part X	00 440 644		40 004 000
		of Schedule D			23,110,611.		
	26				24,336,859.	26	19,427,196.
"		Organizations that follow FASB ASC 958, cl	neck here	► <u>X</u>			
ĕ		and complete lines 27, 28, 32, and 33.			10 006 050		F 444 0F0
alan	27				-12,976,252.	27	-7,444,270.
Ä	28	Net assets with donor restrictions			462,000.	28	513,000.
Ē		Organizations that do not follow FASB ASC	958, chec	k here 🕨 💹 📗			
F		and complete lines 29 through 33.					
ts c	29	Capital stock or trust principal, or current fund				29	
sse	30	Paid-in or capital surplus, or land, building, or		I I		30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated		Г	10 514 050	31	C 021 072
Š	32	Total net assets or fund balances			-12,514,252.	32	-6,931,270.
	33	Total liabilities and net assets/fund balances			11,822,607.	33	12,495,926.

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

or audits, explain why on Schedule O and describe any steps taken to undergo such audits

Act and OMB Circular A-133?

Form **990** (2021)

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#### **SCHEDULE A**

(Form 990)

Total

Department of the Treasury Internal Revenue Service

# **Public Charity Status and Public Support**

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2021

Open to Public Inspection

**Employer identification number** Name of the organization Vanguard Classical School Inc 37-1532379 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

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

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4.						
_	ction B. Total Support			L			
Cale	ndar year (or fiscal year beginning in)	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	Amounts from line 4		. ,	,			
	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
9	Net income from unrelated business						_
•	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
	Gross receipts from related activities, e	etc (see instruction	ne)			12	
	First 5 years. If the Form 990 is for the	· ·		fourth or fifth tax y		· ·	
	organization, check this box and <b>stop</b>					. , . ,	ightharpoonup
Sed	ction C. Computation of Public						
	Public support percentage for 2021 (lir			column (f))		14	%
15	Public support percentage from 2020	Schedule A, Part	II, line 14			15	%
	33 1/3% support test - 2021. If the or					nore, check this box	and
	stop here. The organization qualifies a	s a publicly supp	orted organizatior	١			
b	33 1/3% support test - 2020. If the or	rganization did no	t check a box on	line 13 or 16a, and	line 15 is 33 1/3%	or more, check thi	s box
	and stop here. The organization qualif						
17a	10% -facts-and-circumstances test	- 2021. If the org	anization did not				
	and if the organization meets the facts						
	meets the facts-and-circumstances tes	t. The organizatio	n qualifies as a pu	ublicly supported o	rganization		<b>&gt;</b>
b	10% -facts-and-circumstances test -	- <b>2020.</b> If the org	anization did not	check a box on line	e 13, 16a, 16b, or	17a, and line 15 is 1	0% or
	more, and if the organization meets the	e facts-and-circun	nstances test, che	ck this box and st	<b>top here.</b> Explain i	n Part VI how the	
	organization meets the facts-and-circuit	mstances 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	<b>&gt;</b>

# Schedule A (Form 990) 2021 Vanguard Classical School Inc Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
k	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
(	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9	Amounts from line 6						
	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties,						
	and income from similar sources						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
(	Add lines 10a and 10b						
	Net income from unrelated business						
	activities not included on line 10b, whether or not the business is						
	regularly carried on						
12	Other income. Do not include gain						
	or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for th	ne organization's fi	rst, second, third,	fourth, or fifth tax	year as a section 5	601(c)(3) organizati	on,
	check this box and stop here						<b>&gt;</b>
Se	ction C. Computation of Publi	c Support Per	centage				
15	Public support percentage for 2021 (I	ine 8, column (f), d	livided by line 13, o	column (f))		15	%
	Public support percentage from 2020	·				16	%
<u>Se</u>	ction D. Computation of Inves	tment Income	Percentage				
17	Investment income percentage for 20	<b>)21</b> (line 10c, colur	mn (f), divided by li	ne 13, column (f))		17	%
18	Investment income percentage from					18	%
19a	a 33 1/3% support tests - 2021. If the	organization did r	not check the box o	on line 14, and line	e 15 is more than 3	3 1/3%, and line 1	7 is not
	more than 33 1/3%, check this box ar	nd <b>stop here.</b> The	organization quali	fies as a publicly s	supported organiza	ition	<b>&gt;</b>
k	33 1/3% support tests - 2020. If the	organization did r	not check a box on	line 14 or line 19a	a, and line 16 is mo	ore than 33 1/3%, a	and
	line 18 is not more than 33 1/3%, che	ck this box and st	op here. The orga	nization qualifies a	as a publicly suppo	orted organization	
20	Private foundation. If the organization	n did not check a	box on line 14, 19a	a, or 19b, check th	nis box and see ins	structions	

### Part IV Supporting Organizations

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

### Section A. All Supporting Organizations

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

	Yes	No
1		
2		
3a		
3b		
3с		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
9b		
9с		
10a		
10b		

Pa	rt IV   Supporting Organizations <sub>(continued)</sub>			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide	2 2 2 2		
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations	_ 110		
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or		163	140
•	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
	, <del>.</del> <del>.</del>		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		100	110
•	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	4		
•	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	_		
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
_	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)			
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in	struction	<u>s).</u>	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
~	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
		2b		
2	these activities but for the organization's involvement.	ZD		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	•		
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Га	t V Type III Non-Functionally integrated 309(a)(3) Support	ng Organi	24110115	
1	Check here if the organization satisfied the Integral Part Test as a qualify	ing trust on N	ov. 20, 1970 ( <i>explain in</i>	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mu	st complete S	Sections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-function	ally integrated	Type III supporting orga	unization (see

Schedule A (Form 990) 2021

instructions).

SCHE		SICAL DCHOOL II			T IJJZJIJ Page I
Pa	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	nizations <sub>(continue</sub>	ed)	
Sect	ion D - Distributions		•		Current Year
1	Amounts paid to supported organizations to accomplish exe	empt purposes		1	
2	Amounts paid to perform activity that directly furthers exem	pt purposes of supported			
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpos	es of supported organizations	;	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - p	rovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which t	he organization is responsive			
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2021 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
		(i)	(ii)		(iii)

10	Line 8 amount divided by line 9 amount		10	
Sect	tion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2021	(iii) Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2021 (reason-			
	able cause required - explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2021			
а	From 2016			
b	From 2017			
С	From 2018			
d	From 2019			
е	From 2020			
f	Total of lines 3a through 3e			
g	Applied to underdistributions of prior years			
h	Applied to 2021 distributable amount			
i	Carryover from 2016 not applied (see instructions)			
<u>j</u>	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2021 from Section D,			
	line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2021 distributable amount			
С	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2021, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2021. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2022. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
а	Excess from 2017			
b	Excess from 2018			
с	Excess from 2019			
d	Excess from 2020			
	Excess from 2021			

Schedule A (Form 990) 2021

132028 01-04-22 Schedule A (Form 990) 2021

# **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

Vanguard Classical School Inc

**Employer identification number** 37-1532379

		(a) Donor advised	funds	(b) Funds and	d 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		d in donor advised fu	ınds	
_	are the organization's property, subject to the organization's	~			Yes N
6	Did the organization inform all grantees, donors, and donor ad				
_	for charitable purposes and not for the benefit of the donor or				
	impermissible private benefit?			ū	Yes N
Pai					
1	Purpose(s) of conservation easements held by the organization				
•	Preservation of land for public use (for example, recreat		Preservation of a hi	storically import	tant land area
	Protection of natural habitat		Preservation of a ce	• •	
	Preservation of open space		1 TOOGIVATION OF A OC	Timed motorio e	, ii dotai c
2	Complete lines 2a through 2d if the organization held a qualifi	ed conservation contribut	tion in the form of a	conservation ea	sement on the last
_	day of the tax year.	ca conscivation continua	don'in the form of a		at the End of the Tax Ye
а				-	
b					
C	Number of conservation easements on a certified historic stru			<del></del>	
	Number of conservation easements included in (c) acquired a			.   20	
u	listed in the National Register	·		2d	
3	Number of conservation easements modified, transferred, rele				the tay
3	year	eased, extiliguished, of te	illinated by the orga	anization during	tile tax
4	Number of states where property subject to conservation eas	ement is located			
5	Does the organization have a written policy regarding the peri		on handling of		
3	violations, and enforcement of the conservation easements it	• • •			Yes N
6	Staff and volunteer hours devoted to monitoring, inspecting, I	HUIU5 !			
•	Starr and volunteer riours devoted to monitoring, inspecting, i				
	<b>&gt;</b>	nandling of violations, and	l enforcing conserva	tion easements	during the year
7	Amount of expenses incurred in monitoring, inspecting, handle	nandling of violations, and	l enforcing conserva	tion easements	during the year
7	Amount of expenses incurred in monitoring, inspecting, handless \$	nandling of violations, and	d enforcing conserva	tion easements easements durir	during the year
	<ul> <li>►</li> <li>Amount of expenses incurred in monitoring, inspecting, handle</li> <li>► \$</li> <li>Does each conservation easement reported on line 2(d) above</li> </ul>	nandling of violations, and enfo	d enforcing conservation of section 170(h)(4)(	tion easements easements durir B)(i)	during the year
7	Amount of expenses incurred in monitoring, inspecting, handless \$\_\_\\$ Does each conservation easement reported on line 2(d) above and section 170(h)(4)(B)(ii)?	nandling of violations, and enfo	orcing conservation of section 170(h)(4)(	tion easements easements durir	during the year
7	Amount of expenses incurred in monitoring, inspecting, handle \$\_\$ Does each conservation easement reported on line 2(d) above and section 170(h)(4)(B)(ii)?	handling of violations, and enforms and enformations and enformations and enformations are satisfy the requirements and easements in its revenuence.	orcing conservation of section 170(h)(4)(	tion easements easements durin B)(i) ement and	during the year  g the year  Yes
7	Amount of expenses incurred in monitoring, inspecting, handlest the second process of th	handling of violations, and enforms and enformations and enformations and enformations are satisfy the requirements and easements in its revenuence.	orcing conservation of section 170(h)(4)(	tion easements easements durin B)(i) ement and	during the year  g the year  Yes
7 8 9	Amount of expenses incurred in monitoring, inspecting, handless \$\\  Does each conservation easement reported on line 2(d) above and section 170(h)(4)(B)(ii)?	handling of violations, and enfole satisfy the requirements on easements in its revenuote to the organization's formula in the content of the organization's formula in the content of the organization's formula in the	orcing conservation of section 170(h)(4)(	easements during  B)(i)  ement and that describes the	during the year  g the year  Yes  he
7 8 9	Amount of expenses incurred in monitoring, inspecting, handlest \$\$\_\$\$  Does each conservation easement reported on line 2(d) above and section 170(h)(4)(B)(ii)?  In Part XIII, describe how the organization reports conservation balance sheet, and include, if applicable, the text of the footnoorganization's accounting for conservation easements.  III Organizations Maintaining Collections of	handling of violations, and enforce satisfy the requirements on easements in its revenuote to the organization's fart, Historical Trea	orcing conservation of section 170(h)(4)(	easements during  B)(i)  ement and that describes the	during the year  g the year  Yes  he
7 8 9	Amount of expenses incurred in monitoring, inspecting, handless \$\_\$  Does each conservation easement reported on line 2(d) above and section 170(h)(4)(B)(ii)?  In Part XIII, describe how the organization reports conservation balance sheet, and include, if applicable, the text of the footnorganization's accounting for conservation easements.  TIII Organizations Maintaining Collections of Complete if the organization answered "Yes" on Form	handling of violations, and enfolding of violations of violations, and enfolding	orcing conservation of section 170(h)(4)(	easements during (B)(i) ement and that describes the Similar Ass	during the year  ng the year  Yes  the  ets.
7 8 9	Amount of expenses incurred in monitoring, inspecting, handle \$\ \]  Does each conservation easement reported on line 2(d) above and section 170(h)(4)(B)(ii)?  In Part XIII, describe how the organization reports conservation balance sheet, and include, if applicable, the text of the footnorganization's accounting for conservation easements.  TIII Organizations Maintaining Collections of Complete if the organization answered "Yes" on Form  If the organization elected, as permitted under FASB ASC 958	handling of violations, and enfolding of violations in its revenues of the organization's for the organization orga	orcing conservation of section 170(h)(4)(	easements during (B)(i) ement and that describes the Similar Asses	during the year  ng the year  Yes  the  ets.
7 8 9	Amount of expenses incurred in monitoring, inspecting, handle \$  Does each conservation easement reported on line 2(d) above and section 170(h)(4)(B)(ii)?  In Part XIII, describe how the organization reports conservation balance sheet, and include, if applicable, the text of the footnorganization's accounting for conservation easements.  **IIII** Organizations Maintaining Collections of Complete if the organization answered "Yes" on Form  If the organization elected, as permitted under FASB ASC 956 of art, historical treasures, or other similar assets held for publications.	handling of violations, and enfoling of violations, and enfole satisfy the requirements on easements in its revenuote to the organization's formula of the properties of the properties of the extension of the properties of the pr	orcing conservation of section 170(h)(4)(  ue and expense state inancial statements  sures, or Other  nue statement and bor research in further	easements during (B)(i) ement and that describes the Similar Asses	during the year  ng the year  Yes  the  ets.
7 8 9 Par	Amount of expenses incurred in monitoring, inspecting, handle \$  Does each conservation easement reported on line 2(d) above and section 170(h)(4)(B)(ii)?  In Part XIII, describe how the organization reports conservation balance sheet, and include, if applicable, the text of the footnorganization's accounting for conservation easements.  III Organizations Maintaining Collections of Complete if the organization answered "Yes" on Form  If the organization elected, as permitted under FASB ASC 958 of art, historical treasures, or other similar assets held for pub service, provide in Part XIII the text of the footnote to its finance.	handling of violations, and enforce satisfy the requirements on easements in its revenuence to the organization's force.  Art, Historical Treat 990, Part IV, line 8. B, not to report in its reversible exhibition, education, incial statements that descriptions.	or section 170(h)(4)(4)(4)(4)(4)(4)(4)(4)(4)(4)(4)(4)(4)	easements during B)(i)  ement and that describes the Similar Assemblance sheet we cance of public	during the year  ng the year  Yes  the  ets.  orks
7 8 9 Par	Amount of expenses incurred in monitoring, inspecting, handle \$  Does each conservation easement reported on line 2(d) above and section 170(h)(4)(B)(ii)?  In Part XIII, describe how the organization reports conservation balance sheet, and include, if applicable, the text of the footnorganization's accounting for conservation easements.  TIII Organizations Maintaining Collections of Complete if the organization answered "Yes" on Form  If the organization elected, as permitted under FASB ASC 956 of art, historical treasures, or other similar assets held for pub service, provide in Part XIII the text of the footnote to its finan If the organization elected, as permitted under FASB ASC 956	handling of violations, and enfolding of violations of easiers and enfolding of violations of violations, and enfolding of violations, and enfol	orcing conservation of section 170(h)(4)(4)(4)(4)(4)(4)(4)(4)(4)(4)(4)(4)(4)	easements during B)(i)  ement and that describes the similar Assemble alance sheet works are sheet works.	during the year  ng the year  Yes  the  ets.  orks
7 8 9 Par	Amount of expenses incurred in monitoring, inspecting, handle \$  Does each conservation easement reported on line 2(d) above and section 170(h)(4)(B)(ii)?  In Part XIII, describe how the organization reports conservation balance sheet, and include, if applicable, the text of the footner organization's accounting for conservation easements.  TIII Organizations Maintaining Collections of Complete if the organization answered "Yes" on Form  If the organization elected, as permitted under FASB ASC 956 of art, historical treasures, or other similar assets held for pub service, provide in Part XIII the text of the footnote to its finan If the organization elected, as permitted under FASB ASC 956 art, historical treasures, or other similar assets held for public	handling of violations, and enfolding of violations of easiers and enfolding of violations of violations, and enfolding of violations, and enfol	orcing conservation of section 170(h)(4)(4)(4)(4)(4)(4)(4)(4)(4)(4)(4)(4)(4)	easements during B)(i)  ement and that describes the similar Assemble alance sheet works are sheet works.	during the year  ng the year  Yes  the  ets.  orks
7 8 9 Par	Amount of expenses incurred in monitoring, inspecting, handle \$  Does each conservation easement reported on line 2(d) above and section 170(h)(4)(B)(ii)?  In Part XIII, describe how the organization reports conservation balance sheet, and include, if applicable, the text of the footner organization's accounting for conservation easements.  TIII Organizations Maintaining Collections of Complete if the organization answered "Yes" on Form  If the organization elected, as permitted under FASB ASC 956 of art, historical treasures, or other similar assets held for pub service, provide in Part XIII the text of the footnote to its finan If the organization elected, as permitted under FASB ASC 956 art, historical treasures, or other similar assets held for public provide the following amounts relating to these items:	handling of violations, and enfolding of violations of violations, and enfolding of violations of	or section 170(h)(4)(4)(4)(4)(4)(4)(4)(4)(4)(4)(4)(4)(4)	easements during (B)(i)  ement and that describes the control of public control of public service service of public service service of public service service of public service	during the year  ng the year  Yes   the  ets.  orks  of vice,
7 8 9 Par	Amount of expenses incurred in monitoring, inspecting, handle \$  Does each conservation easement reported on line 2(d) above and section 170(h)(4)(B)(ii)?  In Part XIII, describe how the organization reports conservation balance sheet, and include, if applicable, the text of the footnorganization's accounting for conservation easements.  TIII Organizations Maintaining Collections of Complete if the organization answered "Yes" on Form  If the organization elected, as permitted under FASB ASC 958 of art, historical treasures, or other similar assets held for pubservice, provide in Part XIII the text of the footnote to its finant if the organization elected, as permitted under FASB ASC 958 art, historical treasures, or other similar assets held for public provide the following amounts relating to these items:  (i) Revenue included on Form 990, Part VIII, line 1	handling of violations, and enfolding of violations in its revenue exhibition, education, or exhibition, education, or exhibition, education, or exhibition, education, or	d enforcing conservation of section 170(h)(4)(means) of se	easements during (B)(i)	during the year  ng the year  Yes  the  ets.  orks
7 8 9 Pai	Amount of expenses incurred in monitoring, inspecting, handle \$  Does each conservation easement reported on line 2(d) above and section 170(h)(4)(B)(ii)?  In Part XIII, describe how the organization reports conservation balance sheet, and include, if applicable, the text of the footnorganization's accounting for conservation easements.  TIII Organizations Maintaining Collections of Complete if the organization answered "Yes" on Form  If the organization elected, as permitted under FASB ASC 958 of art, historical treasures, or other similar assets held for pubservice, provide in Part XIII the text of the footnote to its finant if the organization elected, as permitted under FASB ASC 958 art, historical treasures, or other similar assets held for public provide the following amounts relating to these items:  (i) Revenue included on Form 990, Part VIII, line 1  (ii) Assets included in Form 990, Part X	handling of violations, and enfolding of violations in its revenue exhibition, education, or exhibition, education, or exhibition, education, or exhibition, education, or	d enforcing conservation of section 170(h)(4)(means and expense state inancial statements.  Sures, or Other the statement and bor research in further ribes these items, statement and balar research in furtherar	easements during (B)(i)	during the year  ng the year  Yes   the  ets.  orks  of vice,
7 8 9 Pai	Amount of expenses incurred in monitoring, inspecting, handle \$  Does each conservation easement reported on line 2(d) above and section 170(h)(4)(B)(ii)?  In Part XIII, describe how the organization reports conservation balance sheet, and include, if applicable, the text of the footnorganization's accounting for conservation easements.  TIII Organizations Maintaining Collections of Complete if the organization answered "Yes" on Form  If the organization elected, as permitted under FASB ASC 956 of art, historical treasures, or other similar assets held for pub service, provide in Part XIII the text of the footnote to its finan If the organization elected, as permitted under FASB ASC 956 art, historical treasures, or other similar assets held for public provide the following amounts relating to these items:  (i) Revenue included on Form 990, Part VIII, line 1  (ii) Assets included in Form 990, Part X  If the organization received or held works of art, historical treasures are assets and the provided treasures are assets and the provided the following amounts relating to these items:	handling of violations, and enforce satisfy the requirements on easements in its revenuence to the organization's fart, Historical Trea 990, Part IV, line 8.  3, not to report in its revenuelic exhibition, education, cial statements that describes a to report in its revenue exhibition, education, or exhibition, education, or assures, or other similar assures, or other similar assures.	d enforcing conservation of section 170(h)(4)(d) are and expense state inancial statements.  Sures, or Other  The estatement and bear research in further research resear	easements during (B)(i)	during the year  ng the year  Yes   the  ets.  orks  of vice,
7 8 9 Pai	Amount of expenses incurred in monitoring, inspecting, handle \$  Does each conservation easement reported on line 2(d) above and section 170(h)(4)(B)(ii)?  In Part XIII, describe how the organization reports conservation balance sheet, and include, if applicable, the text of the footnorganization's accounting for conservation easements.  TIII Organizations Maintaining Collections of Complete if the organization answered "Yes" on Form  If the organization elected, as permitted under FASB ASC 958 of art, historical treasures, or other similar assets held for pubservice, provide in Part XIII the text of the footnote to its finant if the organization elected, as permitted under FASB ASC 958 art, historical treasures, or other similar assets held for public provide the following amounts relating to these items:  (i) Revenue included on Form 990, Part VIII, line 1  (ii) Assets included in Form 990, Part X	handling of violations, and enforce satisfy the requirements on easements in its revenue to the organization's fact, Historical Trea 990, Part IV, line 8.  B, not to report in its revenue exhibition, education, or exhibition education, or exhibition education exhibition education, or exhibition education exhibition exhibition education exhibition exhibition exhibition education exhibition e	d enforcing conservation of section 170(h)(4)(d) are and expense state inancial statements.  Sures, or Other  The estatement and bor research in further research research research research research research	easements during B)(i)  ement and that describes the similar Assemble alance sheet works are of public are sheet works are of public serious public serious provide	during the year  ng the year  Yes   the  ets.  orks  of vice,

Description of property	(a) Cost or other basis (investment)			(d) Book value		
1a Land						
<b>b</b> Buildings		1,756,850.	852,004.	904,846.		
c Leasehold improvements						
<b>d</b> Equipment		343,552.	144,337.	199,215.		
e Other		104,186.		104,186.		
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)						

Schedule D (Form 990) 2021

Part VII Investments - Other Securities.	Farm 000 Bart N/ 15	44h O. Franz 000 Bart V Fra 40	·g-
Complete if the organization answered "Yes"			- <b>f</b>
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-	-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D) (E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11c. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-	of-year market value
(1)			•
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes"		e 11d. See Form 990, Part X, line 15.	
	Description		(b) Book value
(1) Deferred Outflows of Resou	ırces		3,446,242.
(2) Deposits			35,000.
(3)			
(4)			
(5)			
(6)			
(8)			
(9)	45 \		3,481,242.
Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.	9 15.)	<b>&gt;</b>	3,401,242.
Complete if the organization answered "Yes"	on Form 990 Part IV line	11e or 11f See Form 990 Part X line 25	
(1) 5	0111 01111 000,1 411 14, 11110	1 Tre or Tri. Gee Form 330, Tare X, line 23.	(b) Book value
1. (a) Description of liability  (1) Federal income taxes			(b) Book value
(2) Net Pension Liabilities			10,885,555.
(3) Deferred Inflows of Resour	rces		5,793,387.
(4) Net OPEB Liability	LCCB		526,647.
(5) Compensated Absences			106,816.
(6) Leases Payable			1,072,585.
(7)			2,0.2,000
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	25)	<b>b</b>	18,384,990.
<ol> <li>Liability for uncertain tax positions. In Part XIII, provide</li> </ol>	•		

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

Par	t XI Reconciliation of Revenue per Audited Financial Stat		n Revenue per Re	turn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, lin	ne 12a.			
1	Total revenue, gains, and other support per audited financial statements			1	17,015,060.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d	1,225,015.		
е	Add lines 2a through 2d			2e	1,225,015.
3	Subtract line 2e from line 1			3	15,790,045.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b			4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.	)		5	15,790,045.
Par	t XII Reconciliation of Expenses per Audited Financial Sta	atements Wi	th Expenses per F	Retur	n.
	Complete if the organization answered "Yes" on Form 990, Part IV, lin	ne 12a.			
1	Total expenses and losses per audited financial statements			1	11,841,923.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a			
b	Prior year adjustments				
С	Other losses				
d	Other (Describe in Part XIII.)		1,634,860.		
е	Add lines 2a through 2d	•		2e	1,634,860.
	Subtract line <b>2e</b> from line <b>1</b>			3	10,207,063.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				,
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
	Other (Describe in Part XIII.)				
	Add lines <b>4a</b> and <b>4b</b>	·		4c	0.
	Total expenses. Add lines 3 and 4c. (This must equal Form 990. Part I, line 18			5	10,207,063.
	t XIII Supplemental Information.	<i>0.,</i> 1			, , , , , , , , , , , , , , , , , , , ,
Provid	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4	1: Part IV. lines 1	b and 2b: Part V. line 4	: Part	X. line 2: Part XI.
	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide ar			,	· , · · · · · · · ,
		.,			
Par	rt XI, Line 2d - Other Adjustments:				
Bui	.lding Corporation Interest Income				4,671.
Bui	lding Corporation Rental Income				1,220,344.
	Taing outpointed mondar income				
Tot	al to Schedule D, Part XI, Line 2d				1,225,015.
	der to bonedure by rure mr, brine bu				1,223,0131
Par	rt XII, Line 2d - Other Adjustments:				
<u>- 4-</u>	e mii, mine za ocher najabemeneb.				
Bui	.lding Corporation Depreciation Expense				564,406.
Dui	dring corporation Depreciation Expense				301,100.
Bui	lding Corporation Bank Fees				110.
<u> </u>	Liaing Corporacion Dank rees				T T O •
Bui	.lding Corporation Interest Expense				1,070,344.
<u> </u>	Traing Corporation interest Expense				±,0,0,3±±•
то+	al to Schedule D, Part XII, Line 2d				1,634,860.
100	Lar co penedare D, rare Arr, mine 20				±,00±,000•

Schedule D (Form 990) 2021 Part XIII Supplemental Infor	Vanguard	Classical	School	Inc	37-1532379	Page 5
Part XIII   Supplemental Infor	mation (continue	ed)				

### **SCHEDULE E**

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

# **Schools**

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2021

Open to Public Inspection

Vanguard Classical School Inc

 $Employer\ identification\ number\\ 37-1532379$ 

Pa	rt I			
			YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter,			
	bylaws, other governing instrument, or in a resolution of its governing body?	1	Х	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures,			
	catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	Х	
3	Has the organization publicized its racially nondiscriminatory policy on its primary publicly accessible Internet			
	homepage at all times during its taxable year in a manner reasonably expected to be noticed by visitors to the			
	homepage, or through newspaper or broadcast media during the period of solicitation for students, or during the			
	registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general			
	community it serves? If "Yes," please describe. If "No," please explain. If you need more space, use Part II	3_	Х	
	The school informs and enforces Anti discriminatory Policy			
	and Procedures throughout its publications.			
4	Does the organization maintain the following?			
а	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	X	
	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	Х	
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing			
	with student admissions, programs, and scholarships?	4c	X	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	Х	
	If you answered "No" to any of the above, please explain. If you need more space, use Part II.			
5	Does the organization discriminate by race in any way with respect to:			
	Students' rights or privileges?	<u>5a</u>		<u>X</u>
	Admissions policies?	5b		<u>X</u>
	Employment of faculty or administrative staff?	5c		<u>X</u>
	Scholarships or other financial assistance?	5d		<u>X</u>
	Educational policies?	5e		<u>X</u>
	Use of facilities?	5f		<u>X</u>
	Athletic programs?	5g		X
h	Other extracurricular activities?	5h		<u>X</u>
	If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.			
				37
	Does the organization receive any financial aid or assistance from a governmental agency?	<u>6a</u>		<u>X</u>
b	Has the organization's right to such aid ever been revoked or suspended?	6b		<u>X</u>
	If you answered "Yes" on either line 6a or line 6b, explain on Part II.			
7	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through			
	4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Part II	7	X	

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

Schedule E (Form 990) 2021

## SCHEDULE J (Form 990)

**Compensation Information** 

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
 ► Attach to Form 990.
 ► Go to www.irs.gov/Form990 for instructions and the latest information.

2021

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

Vanguard Classical School Inc

 $\begin{array}{c} \textbf{Employer identification number} \\ 37-1532379 \end{array}$ 

Ds	rt I Questions Regarding Compensation	7451		
1 6	att   Questions negarating compensation		Yes	No
10	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,		163	NO
la				
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel  Housing allowance or residence for personal use			
	Travel for companions  Payments for business use of personal residence			
	Tax indemnification and gross-up payments  Health or social club dues or initiation fees			
	Discretionary spending account  Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		<u></u>
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		Х
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		Х
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
J	contingent on the revenues of:			
a	The organization?	5a		Х
h		5b		X
D	Any related organization?  If "Yes" on line 5a or 5b, describe in Part III.	30		
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
U	contingent on the net earnings of:			
а	The organization?	6a		х
	Any related organization?	6b		X
J	If "Yes" on line 6a or 6b, describe in Part III.	30		
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
'		7		Х
	not described on lines 5 and 6? If "Yes," describe in Part III	7		
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the	0		Х
Ω	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2021

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

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

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

(A) Name and Title		<b>(B)</b> Breakdown of W	I-2 and/or 1099-MISo compensation	C and/or 1099-NEC	other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) John Cerny	(i)	169,847.	0.	0.	31,959.	0.	201,806.	0.
Executive Director	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
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	(i)							
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	(i) (ii)							
	$\overline{}$							
	(i) (ii)							
	[ (II)							

# **SCHEDULE 0** (Form 990)

Supplemental Information to Form 990 or 990-EZ

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

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

OMB No. 1545-0047 Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Vanguard Classical School Inc

**Employer identification number** 37-1532379

Form 990, Part I, Line 1, Description of Organization Mission:
Provide education to children of all abilites K-12, at two sites, under
a charter from Aurora Public Schools.
Form 990, Part VI, Section B, line 11b:
Form 990 is prepared from audited financial statements and provided to the
governing board prior to being filed.
Form 990, Part VI, Section B, Line 12c:
All board members are required to disclose any time an issue is voted upon
for which they have a conflict of interest and abstain from voting on the
issue. Annually, board members sign a conflict of interest statement.
Form 990, Part VI, Section B, Line 15:
The school reviews salary surveys and other comparable salary information
for like positions. The finance committee discusses the salary and submits
a recommendation to the board. The board approves the authorized salary
for the Executive Director in executive session.
Form 990, Part VI, Section C, Line 19:
The organization provides these documents upon request from the public and
and publishes on their website.

Schedule O (Form 990) 2021 Page **2** 

Name of the organization  Vanguard Classical School Inc	Employer identification number 37-1532379
Form 990, Part IX, Line 24e, All Other Functional Expenses	:
Small Equipment:	_
Program service expenses	59,086.
Management and general expenses	10,427.
Fundraising expenses	0.
Total expenses	69,513.
Fundraising Expenses:	
Program service expenses	0.
Management and general expenses	0.
Fundraising expenses	20,499.
Total expenses	20,499.
Pension Accrual:	
Program service expenses	-3,515,477.
Management and general expenses	-620,378.
Fundraising expenses	0.
Total expenses	-4,135,855.
Total Other Expenses on Form 990, Part IX, line 24e, Col A	-4,045,843.
Form 990, Part XII, Line 2c	
The board of directors assumes responsibility for the over	sight of the
audit and selection of an independent accountant. This has	not changed
from prior years.	
Form 990, Part IX, Line 24E:	
The school is a participant in the State's public pension	plan (PERA)
and began reporting a portion of the State's unfunded net	pension

<u>Schedule O (Form 990) 2021</u> Page **2** 

Name of the organization **Employer identification number** Vanguard Classical School Inc 37-1532379 liability following Governmental Accounting Standards Board Statement (GASB) No. 68, Accounting and Financial Reporting for Pensions - an amendment of GASB Statement No. 27 in fiscal year 2015. The School also participates in the State's Postemployment Healthcare Benefit Plan per GASB Statement 75. As a result of these GASB statements, the School records an expense in its Government Wide financial reports each year that swings widely from year to year based on future investment return assumptions, participation, and other projections made by PERA's actuaries. Due to the unpredictable and uncontrollable nature of these swings, and that the liability is not a true liability of the school, these State driven accruals are reported as other in Part IX to allow the reader to track the impact of these accruals separately and to remain consistent with historical reporting.

### **SCHEDULE R** (Form 990)

Related Organizations and Unrelated Partnerships

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

Attach to Form 990.

Department of the Treasury Internal Revenue Service Name of the organization

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

	Vanguard Class	ical School Inc					37-15323	79	
Part I	Identification of Disregarded Entities. Complet	e if the organization answered "Yes"	on Form 990, Part IV, line 33	3.					
	(a) Name, address, and EIN (if applicable) of disregarded entity	<b>(b)</b> Primary activity	(c) Legal domicile (state o foreign country)	(d) Total inco	(e) me End-of-year			ontrolling	
Part II	Identification of Related Tax-Exempt Organizations during the tax year.	tions. Complete if the organization a	answered "Yes" on Form 990	l, Part IV, line 34, b	pecause it had one	or more	related tax-exer	npt	
	(a)  Name, address, and EIN  of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	charity Direct controllin entity		ent	rolled ity?
					301(0)(3))			Yes	No

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling	Predominant income (related, unrelated, excluded from tax under sections 512-514)	ncome Share of total Share of Dispressitionate Code V-I		ortionate Code V-UBI		General o	Percentage	
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes No	
	1										
	1										
	1										
	1										
	1										
	1										
	l	l	L	1			<u> </u>		l.	$\bot$	

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)	(	ti)
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	512(l contr ent	b)(13) rolled tity?
	_		_					Yes	No
Vanguard Classical School Building	Lease property and		Vanguard						
Corporation - 85-1487653, 17101 E. Ohio Dr.,	equipment to Vanguard		Classical						İ
Aurora, CO 80017	Classical School.	CO	School	C CORP	1,225,015.	24,073,610.	100%	Х	
									<u> </u>
	4								
	_								
									<u> </u>
	_								
	4								
									<u> </u>

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

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>b</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)				1d		X		
e Loans or loan guarantees by related organization(s)				1e		Х		
						37		
f Dividends from related organization(s)				1f		<u>X</u>		
g Sale of assets to related organization(s)				1g		X		
h Purchase of assets from related organization(s)				1h		X		
i Exchange of assets with related organization(s)				1i		<u>X</u>		
j Lease of facilities, equipment, or other assets to related organization(s)				<u>1j</u>		X		
k Lease of facilities, equipment, or other assets from related organization(s)				1k	х			
I Performance of services or membership or fundraising solicitations for related org				11		X		
m Performance of services or membership or fundraising solicitations by related org				1m		X		
n Sharing of facilities, equipment, mailing lists, or other assets with related organization				1n		X		
Sharing of paid employees with related organization(s)								
p Reimbursement paid to related organization(s) for expenses				1p		Х		
q Reimbursement paid by related organization(s) for expenses								
r Other transfer of cash or property to related organization(s)				1r		Х		
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	who must complete th	is line, including covered re	elationships and transaction thresholds.					
(a) Name of related organization	(b) Transaction type (a-s)	<b>(c)</b> Amount involved	(d) Method of determining amount in	volved				
(1) Vanguard Classical School	K	1,220,344.	Fair market value					
(2)								
(3)								
(4)								
(4)								
(5)								
(6)								
132163 11-17-21			Schedule	R (Forr	n 990)	2021		

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)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are all partners sec. 501(c)(3) orgs.?  Yes No	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproptionat allocatio	Code V-UBI amount in box of of Schedule K-	General managin partner	(k) Percentage ownership
	-									