

Finance Committee Report

The finance committee is responsible for planning, monitoring, and recommending the yearly budget to the Board of Directors. As needed, this committee will make recommendations to the Board of Directors in relation to Operational and Fiscal Planning.

Executive Summary

- 2023-2024 Financials Update
- 2024-2025 Funding Estimate
- 2024-2025 Draft Budget
- Review Form 990 Tax Submission
- Proposed Motions

February 2023-2024 Financial Review

- All expenses are tracking as expected
 - The only overages are on Risk and Revenue generating lines

2024-2025 Funding Estimate

- We are using a 5% increase to PPR
- The same starting student estimated count as previous years

2024-2025 Draft Budget

- See PowerPoint

990 Form Tax Submission

Proposed Motions

- Motion XX-XX-XX: Motion to approve the 2024 25 budget as presented and discussed
- Motion XX-XX-XX: Motion to approve the Form 990 tax submission as presented and discussed

Contact Travis Harrison if you would like to join this committee: TravisHarrison@lincolnacademy.net



Account Number	Description	Prior Year			Current Year		Current Year		
		Total	Estimated Revenue	Budget	Operational Funds	Capital Funds	Total	Variance	Percent Spent
	Prior Year Carryforward	<u>5,835,465.50</u>			<u>3,675,067.01</u>	<u>2,412,894.91</u>	<u>6,087,961.92</u>		
401000	Commissions/Profits	1,847.43	8,663.00	0.00	1,437.37	-	1,437.37	7,225.63	17%
401400	Ticket Sales	1,005.00	1,668.00	0.00	1,285.75	-	1,285.75	382.25	77%
408000	Resale	21,785.36	20,000.00	0.00	17,787.56	-	17,787.56	2,212.44	89%
409000	Sales-Fund Raising	4,424.41	12,846.00	0.00	5,266.87	-	5,266.87	7,579.13	41%
411000	Prop Tax-Mill Levy Override	1,463,617.50	1,500,066.00	0.00	1,196,098.20	-	1,196,098.20	303,967.80	80%
415000	Earnings On Investments	83,747.79	65,000.00	0.00	-	83,506.69	83,506.69	(18,506.69)	128%
419000	Other Revenue	9.14	1,137.00	0.00	12.88	-	12.88	1,124.12	1%
433000	State Revenue - Cap Construction	257,864.60	273,036.00	0.00	-	198,228.24	198,228.24	74,807.76	73%
433000	State Revenue - UPK Payments	-	188,500.00	0.00	157,432.60	-	157,432.60	31,067.40	84%
434000	Exceptional Children Revenue	99,636.00	90,354.00	0.00	90,354.00	-	90,354.00	-	100%
450000	Transfers PPR	6,974,913.52	7,972,483.00	0.00	5,980,143.60	-	5,980,143.60	1,992,339.40	75%
450000	Transfers BOND	412,248.75	461,120.50	0.00	-	289,244.44	289,244.44	171,876.06	63%
451000	Fees/Dues	96,179.75	82,817.00	0.00	81,660.12	-	81,660.12	1,156.88	99%
455000	Tuition from Individuals	275,019.12	111,500.00	0.00	151,776.83	-	151,776.83	(40,276.83)	136%
461000	Building Rental	6,490.00	15,796.00	0.00	1,555.00	-	1,555.00	14,241.00	10%
474000	Transportation - Field Trips	35,963.85	49,968.00	0.00	41,918.45	-	41,918.45	8,049.55	84%
482000	Activity Revenue	11,912.50	21,711.00	0.00	12,550.00	-	12,550.00	9,161.00	58%
498000	Donations	35,734.00	18,169.00	0.00	19,156.49	-	19,156.49	(987.49)	105%
499000	Miscellaneous Revenue	-	600.00	0.00	-	-	-	600.00	0%
950500	Mandatory Transfers State Intercept	(412,248.75)	(461,120.50)	0.00	(74,694.75)	(214,549.69)	(289,244.44)	(171,876.06)	63%
	Revenues	<u>9,370,149.97</u>	<u>10,434,314.00</u>	<u>-</u>	<u>7,683,740.97</u>	<u>356,429.68</u>	<u>8,040,170.65</u>	<u>2,394,143.35</u>	<u>77%</u>
	Available	<u>15,205,615.47</u>	<u>10,434,314.00</u>		<u>11,358,807.98</u>	<u>2,769,324.59</u>	<u>14,128,132.57</u>	<u>2,394,143.35</u>	<u>135%</u>
511700-521000	Adminstration	338,245.10		377,010.00	291,291.99	-	281,291.99	95,718.01	75%
521100	Teacher	2,830,544.48		3,171,284.00	2,344,038.58	-	2,344,038.58	827,245.42	74%
521900	Substitute Teacher	30,930.00		45,000.00	41,470.00	-	41,470.00	3,530.00	92%
522100	Counselor	25,904.62		69,517.00	18,496.26	-	18,496.26	51,020.74	27%
522200	Teacher Librarian	75,522.00		85,417.00	63,238.18	-	63,238.18	22,178.82	74%
524200	Coordinator - Classified	151,293.03		162,970.00	128,956.74	-	128,956.74	34,013.26	79%
526200	Instructional Coach	130,552.14		153,729.00	113,297.17	-	113,297.17	40,431.83	74%
529200	Occupational Therapist	30,108.57		44,394.00	22,689.62	-	22,689.62	21,704.38	51%
529400	Nurse	25,500.00		27,540.00	20,485.00	-	20,485.00	7,055.00	74%
529600	Social Worker	71,165.10		133,405.00	37,793.21	-	37,793.21	95,611.79	28%
529800	Speech Therapist	47,910.15		53,363.00	37,515.31	-	37,515.31	15,847.69	70%
552100	School Secretary	226,216.17		255,664.00	174,727.56	-	174,727.56	80,936.44	68%
557100	Paraprofessional	688,993.24		770,693.00	482,343.79	-	482,343.79	288,349.21	63%
557600	Clinic Aides	27,856.62		29,700.00	22,312.57	-	22,312.57	7,387.43	75%
591100	Custodian	118,162.18		153,889.00	76,396.11	-	76,396.11	77,492.89	50%
591400	Campus Supervisor	67,619.39		69,055.00	59,421.27	-	59,421.27	9,633.73	86%
599400	Unused Sick Leave	26,954.21		25,000.00	1,320.98	-	1,320.98	23,679.02	5%
599810	Additional Pay - Certificated	2,695.00		15,000.00	6,375.00	-	6,375.00	8,625.00	43%
599820	Additional Pay-Classified	2,521.15		1,750.00	50.00	-	50.00	1,700.00	3%
599830	Additional Pay-Administrative	200.00		1,750.00	200.00	-	200.00	1,550.00	11%
	Salaries	<u>4,918,893.15</u>		<u>5,646,130.00</u>	<u>3,932,419.34</u>	<u>-</u>	<u>3,932,419.34</u>	<u>1,713,710.66</u>	<u>70%</u>
699000	Employee Benefits	1,420,501.56		1,697,475.00	1,120,853.96	-	1,120,853.96	576,621.04	66%
	Benefits	<u>1,420,501.56</u>		<u>1,697,475.00</u>	<u>1,120,853.96</u>	<u>-</u>	<u>1,120,853.96</u>	<u>576,621.04</u>	<u>66%</u>
	Total Salaries and Benefits	<u>6,339,394.71</u>		<u>7,343,605.00</u>	<u>5,053,273.30</u>	<u>-</u>	<u>5,053,273.30</u>	<u>2,290,331.70</u>	<u>69%</u>
701000	Mileage And Travel	53.94		1,100.00	825.30	-	825.30	274.70	75%
702000	Employee Training & Conf	3,557.46		18,350.00	431.02	-	431.02	17,918.98	2%
703000	Awards And Banquets	-		0.00	-	-	-	-	n/a
708000	Background Verifications	2,254.70		2,500.00	1,609.99	-	1,609.99	890.01	64%
710000	Meals/Refreshments	4,554.67		7,805.00	1,789.69	-	1,789.69	6,015.31	23%
713000	Student Transportation	6,672.85		10,498.00	3,169.20	-	3,169.20	7,328.80	30%
715000	Student Admission/Entry Fees	34,885.81		43,000.00	38,276.78	-	38,276.78	4,723.22	89%
721000	Legal Fees	637.50		10,000.00	1,112.50	-	1,112.50	8,887.50	11%
723000	Printing	-		1,100.00	-	-	-	1,100.00	0%
731000	Contracted Services	170,452.83		202,500.00	118,283.69	-	118,283.69	84,216.31	58%
735000	Bank Fees & Other Expense	4,586.25		5,200.00	-	3,983.24	3,983.24	1,216.76	77%
743000	Equipment Rental	1,146.22		5,500.00	560.29	-	560.29	4,939.71	10%
745000	Contract Maint/Eq Repair	10,568.65		10,100.00	1,768.49	-	1,768.49	8,331.51	18%
745500	Technology Services	51,403.06		85,000.00	36,001.36	-	36,001.36	48,998.64	42%
746000	Const Maint/Repair-Bldg	136,338.81		201,500.00	166,982.54	-	166,982.54	34,517.46	83%
747000	Software Purch/Lease	-		0.00	-	-	-	-	n/a
752000	Marketing - Advertising	8,442.60		3,000.00	1,006.69	-	1,006.69	1,993.31	34%



Account Number	Description	Prior Year		Current Year		Current Year		Current Year		Percent Spent
		Total	Estimated Revenue	Budget	Operational Funds	Capital Funds	Total	Variance	Total	
761000	Natural Gas	29,924.17		45,000.00	13,418.96	-	-	13,418.96	31,581.04	30%
764000	Electricity	77,643.49		85,000.00	56,395.83	-	-	56,395.83	28,604.17	66%
765000	Voice Communication Line	12,846.37		20,000.00	10,327.85	-	-	10,327.85	9,672.15	52%
766000	Water & Sanitation	18,310.51		22,000.00	11,064.86	-	-	11,064.86	10,935.14	50%
768000	Postage	249.40		600.00	552.17	-	-	552.17	47.83	92%
769000	Permits/Licenses/Fees	26,714.76		22,000.00	10,306.76	-	-	10,306.76	11,693.24	47%
770000	Risk Management Charges	81,221.93		90,000.00	93,199.36	-	-	93,199.36	(3,199.36)	104%
770800	Unemployment Comp Insur	9,782.47		16,938.00	3,248.14	-	-	3,248.14	13,689.86	19%
781000	Lease Purch-Other-Principal	140,000.00		145,000.00	-	-	-	-	145,000.00	0%
781500	Lease Purch-Other-Interest	319,024.10		315,631.00	-	157,815.35	-	157,815.35	157,815.65	50%
950000	Transfers District Fees	852,395.67		921,124.00	690,882.21	-	-	690,882.21	230,241.79	75%
	Purchased Services	<u>2,003,668.22</u>		<u>2,290,446.00</u>	<u>1,261,213.68</u>	<u>161,798.59</u>		<u>1,423,012.27</u>	<u>867,433.73</u>	<u>62%</u>
801000	Contingency	-		0.00	-	-	-	-	-	n/a
804000	Fund Raising	-		1,500.00	-	-	-	-	1,500.00	0%
805000	Materials/Supplies-Other	12,292.36		23,000.00	6,681.92	-	-	6,681.92	16,318.08	29%
806000	Materials/Supplies Resale	18,866.21		20,500.00	4,062.85	-	-	4,062.85	16,437.15	20%
807000	Furniture & Fixtures	-		0.00	-	-	-	-	-	n/a
810000	Office Material/Supplies	1,808.25		3,500.00	3,498.75	-	-	3,498.75	1.25	100%
810001	Office Equipment - Under \$5K	41,800.75		11,000.00	2,524.86	-	-	2,524.86	8,475.14	23%
812000	Clinic Supplies/Materials	723.77		1,250.00	2,084.47	-	-	2,084.47	(834.47)	167%
814000	Custodial Supplies	15,714.82		17,200.00	8,762.93	-	-	8,762.93	8,437.07	51%
820000	Instructional Material/Supply	70,857.04		108,035.00	31,010.72	-	-	31,010.72	77,024.28	29%
820001	Instructional Equip-Under \$5K	22,550.04		58,500.00	56,631.76	-	-	56,631.76	1,868.24	97%
822000	Textbooks	101,133.20		43,500.00	13,231.99	-	-	13,231.99	30,268.01	30%
823000	Copier Usage	30,748.68		35,000.00	22,580.95	-	-	22,580.95	12,419.05	65%
824000	Testing Materials	618.36		2,000.00	-	-	-	-	2,000.00	0%
826000	Graduation Materials	33.13		500.00	-	-	-	-	500.00	0%
829000	Athletic Supplies	-		0.00	-	-	-	-	-	n/a
840000	Maint Materials/Supplies	24,997.64		30,000.00	12,784.74	-	-	12,784.74	17,215.26	43%
852000	Vehicle Fuel Expense	-		0.00	-	-	-	-	-	n/a
870000	Library Materials	4,621.94		5,700.00	5,054.95	-	-	5,054.95	645.05	89%
885000	Miscellaneous Expense	-		500.00	-	-	-	-	500.00	0%
889000	Consumable Supplies	12.47		500.00	21.25	-	-	21.25	478.75	4%
	Materials and Supplies	<u>346,778.66</u>		<u>362,185.00</u>	<u>168,932.14</u>	<u>-</u>		<u>168,932.14</u>	<u>193,252.86</u>	<u>47%</u>
930000	Building Improvements	427,811.96		2,402,392.00	2,064,706.22	-	-	2,064,706.22	337,685.78	86%
	Capital Outlay	<u>427,811.96</u>		<u>2,402,392.00</u>	<u>2,064,706.22</u>	<u>-</u>		<u>2,064,706.22</u>	<u>337,685.78</u>	<u>86%</u>
	Total Expenditures	<u>9,117,653.55</u>		<u>12,398,628.00</u>	<u>8,548,125.34</u>	<u>161,798.59</u>		<u>8,709,923.93</u>		
	Pre-Adjusted Carryforward	<u>6,087,961.92</u>			<u>2,810,682.64</u>	<u>2,607,526.00</u>		<u>5,418,208.64</u>		
810001	Office Equipment - Under \$5K	-		0.00	-	-	-	-	-	
820001	Instructional Equip-Under \$5K	-		(22,299.45)	-	-	-	-	-	
	Encumbrances	-		<u>(22,299.45)</u>	-	-	-	-	-	
810001	Office Equipment - Under \$5K	-		0.00	-	-	-	-	-	
820001	Instructional Equip-Under \$5K	-		0.00	28,239.50	-	-	28,239.50	-	
	Requisitions	-		-	<u>28,239.50</u>	<u>-</u>		<u>28,239.50</u>		
	TABOR (school enters amount)		267,482.37							
	Adjusted Carryforward	<u>6,087,961.92</u>			<u>2,782,443.14</u>	<u>2,607,526.00</u>		<u>5,389,969.14</u>		

Jefferson County School District, R-1
 Calculation of Per Pupil Revenue /Summary of District Service Expenses
 FOR THE FISCAL YEAR ENDING JUNE 30, 2025

Lincoln Academy		PROJECTED ENROLLMENT FOR THE 24-25 SCHOOL	
55800		STUDENTS	
School Identifying Number	55800		
Per Pupil Revenue (PPR) GT8	\$10,850.00	Jeffco says \$11,038.44	188.44 FDK 88
One-day Count	756.00		1 88
Annual Pupil Funding (450000)	8,202,600.00		\$195,300.00 2 84
Gross Quarterly Transfer	2,050,650.00		3 84
			4 84
			5 84
			6 84
District Services (Annually)			7 80
Administration Services 5% of PPR (950000) (in system only)	410,130.00		8 80
Insurance Reserve \$114 per FTE (950000)	NO		
Homebound Students \$34.00 per hour	NO		756
Student Health Service \$95 per FTE (950000)	NO		
Special Education Programs \$567 per FTE less Home school FTE (950000)	428,652.00	**likely going up	REVISED TO \$567
Special Education Programs \$525 per FTE (950000) Home School	-		
English as a Second Language \$97.50 per FTE (950000)	73,710.00	per Jeffco purchase services	
EAP Annual Flat Rate per School \$1400 with staff count above 50 (950000)	1,400.00		
Library Services Jeffcat \$3.00 per FTE (950000)	NO		
Substitute Teacher System	YES		
NWEA-MAPS, English, Lang. Arts & Math \$8.25 per student	YES		
NWEA-MAPS, Science \$2.25 per student	YES		
Mount Evans/Windy Peak Outdoor lab	NO		
The Following Services Are on An As Needed Basis			
Instructional Services \$300.00 half day \$450 full day	As Needed		
Property Management \$55.00 per hour	As Needed		
Waren Tech 25% PPR per 1/2 day 50% PPR full day per student - for each semester	As Needed		
Total District Services	913,892.00		
Additional Revenue			
Mill Levy Funding 95% FTE 1892.99	1,431,100.44	per Jeffco purchase services	20-21 178
			21-22 166
		USED FUNDING FROM 23-24 AND F/R NUMBER THAT IS AN AVERAGE OF THE LAST 4 YEARS	
Mill Levy Funding 5% FRL \$529.41	104,293.77		22-23 192
2018 Inflation Mill Levy Over Ride Funding 95% FTE INCLUDED ABOVE			23-24 252
2018 Inflation Mill Levy Over Ride Funding 5% FTE INCLUDED ABOVE			197 AVERAGE OF PAST 4 YEARS
Total Mill Levy Over-ride (411000)	1,535,394.21		
Charter School Capital Construction Grant-Estimate (CR020 433000) \$396.20 MULTIPLIED BY PRIOR YEAR FTE 23-24 FTE = 772	305,866.40	per Jeffco purchase services	

ECEA Per Pupil Revenue	1,750.00	
Exceptional Children One-day Count DEC 2021	47.00	FROM JEANNE COUNT ON 12-1-2023
Annual ECEA Funding (434000)	82,250.00	
ECEA Per Pupil Revenue, Tier B \$1,873.00 Tier B SB12-246 \$5618.00	5,618.00	
Tier B DEC 2021	-	
Annual Tier B Funding (434000)	-	
Total Annual ECEA Funding	82,250.00	

Lincoln Academy Board of Directors 2024-25 Budget Forecast

April 2024

The Mission of Lincoln Academy is to help students attain their highest social and academic potential through an academically rigorous, content-rich educational program in a safe, orderly, and caring environment.



Finance Committee Members

- ▶ Travis Harrison: BoD Treasurer, Parent Member
 - ▶ travisharrison@lincolnacademy.net
- ▶ David Schoenhals: Executive Director
- ▶ Lori Woods: Operations Director
- ▶ Cindie Poulter: Business Manager
- ▶ Kati Gerson: Incoming Business Manager
- ▶ Khila Stacey: Financial Secretary
- ▶ Creg Hughes: Community Member

Budgeting Strategy Reminders

- ▶ Conservative revenue forecasts
- ▶ Prioritized “Return on Education”
 - ▶ Assigning resources directly towards student success
 - ▶ Prioritizing people, staff retention
 - ▶ Maximized COLA increases within conservative revenue forecasts
 - ▶ Potential for increased margin with increased student head counts and PPR revenue
- ▶ Changes since March:
 - ▶ Updated salaries and benefits to account for known staffing changes/district comps
 - ▶ Tighter estimations of non-salary related budgets

Updated Revenue Forecasts

- ▶ Student Enrollment: Conservatively estimated revenue for 756 students right now
 - ▶ Filling some grades with a few extra students to allow for any summer attrition as well as kindergarten enrollment falling short of target
 - ▶ Expecting at least ~764 enrollment in K-8 with ~60 PreK students (increase in ~20 PreK students over 23-24)

Enrollment for 2024-2025							
	Budgeted Number	Number Enrolled for 24-25	Fill to	Outstanding Offers	Siblings Waiting	Number Waiting as of 4-8	working Ideas for final numbers
K	88	85	92	0	0	0	85
1	88	93	92	0	1	19	92
2	84	88	87	0	0	10	87
3	84	87	87	0	0	14	87
4	84	88	87	0	0	11	87
5	84	89	89	0	1	13	87
6	84	86	89	2	0	2	87
7	84	82	82	0	0	8	80
8	84	77	77	0	0	10	77
Total	764	775	782			87	769

PreK Enrollment for 24-25			
	Number Enrolled for 24-25	Fill to	Number Waiting
AM	24	24	41
PM	23	24	0
Full	16	16	44
Total	63	64	85

Revenue Forecasts cont'd

- ▶ Per Pupil Revenue (PPR)
 - ▶ Currently budgeting for a 5% increase (\$10,850 per student)
 - ▶ Conservative by at least \$188 per student
 - ▶ Jeffco Purchased Services Agreement calls out \$11,038 per student (6.9% increase)
 - ▶ Historical Perspective: Year end PPR trends higher than what was budgeted in the previous spring
 - ▶ 22-23 Jeffco proposed \$9,271 and Lincoln actually received \$9,350
 - ▶ 23-24 Jeffco proposed \$9,998 and Lincoln is currently receiving \$10,328
- ▶ Mill Levy Revenue (property taxes)
 - ▶ Budgeting \$1,892 per student and \$529 per F/R student (no change from 23-24)
 - ▶ F/R student head count for 23-24 was 252
 - ▶ Historical Perspective: 22-23 \$1,800 per students and \$646 per F/R students
- ▶ No other significant revenue changes
 - ▶ Capital Construction: \$396 per student based on last year's FTE (increase of \$30/student)
 - ▶ Tier 1 SPED: \$1,750 per qualifying student (no change from 22-23, 23-24)

Expense Forecasts

▶ Materials and Purchased Services

- ▶ Raised some budget lines for inflation and rolling replacement plans (average of 7% increases)

- ▶ Utilities and Communications

- ▶ Contracted Services: HVAC maintenance, IT services, trash, cleaning services, fire alarm and security monitoring, etc.

- ▶ Technology Services: educational online services and internet

- ▶ Construction Maintenance and Building Repair

- ▶ Marketing and Advertising for recruiting staff

- ▶ Risk Management and Unemployment

- ▶ Tech Equipment

▶ District Fees

- ▶ Administrative Services (5% of PPR) - formula could change beginning in 25-26

- ▶ \$567 per student for SPED (4% increase) - charters are costing more than we are paying

- ▶ \$97.50 per student for ESL (25% discount) - some charters negotiating to leave Jeffco

Expense Forecasts cont'd

▶ Salaries and Benefits

- ▶ 5% COLA Increase to Teacher Scales (with bottom two steps hard coded)
 - ▶ 8% given in FY24, 6% given in FY 23
- ▶ Bachelor's Degree Scale (\$50,000 to \$76,875)
 - ▶ 84% - 99% of 23-24 District (91% on average, 84% is on step 22)
 - ▶ 106% on average of 23-24 Pinnacle
 - ▶ 100% on average of of 23-24 Excel
 - ▶ 96% on average of 23-24 JA
 - ▶ Doral and WWA do not post scales that allow for similar comparisons
- ▶ Master's Degree Scale (\$52,000 to \$93,059)
 - ▶ 86% - 101% of 23-24 District (93% on average, 86% is on step 6)
 - ▶ 108% on average of 23-24 Pinnacle
 - ▶ 99% on average of 23-24 Excel
 - ▶ 98% on average of 23-24 JA
 - ▶ Doral and WWA do not post scales that allow for similar comparisons

Expense Forecasts cont'd

- ▶ Sample teacher growth (due to COLA and step increases)
 - ▶ BA: Step 7 in 2023-24, paid \$57,801 → Step 8 in 2024-25, paid \$60,691 (5% increase)
 - ▶ BA: Step 9 in 2023-24, paid \$57,801 → Step 10 in 2024-25, paid \$62,955 (9% increase)
- ▶ 7% increase to Education Assistant scale
 - ▶ 25% increase in FY23, 4% increase in FY24
 - ▶ Average of 92.9% of 23-24 District
 - ▶ \$17.48 - \$22.47 per hour
- ▶ 5% increase or appropriate market adjustment to Support Staff
- ▶ No increase to PERA contributions this year
- ▶ 7.6% increase to monthly health insurance contributions for staff taking benefits
 - ▶ Covers Kaiser HDHP single employee plan (\$569/month)

2024-25 General Fund Margin Forecast

- ▶ Total Revenue: \$10,658,146
- ▶ Total Expenses: \$10,563,661

Expense Type	Expense Budget	% of Total Expenses
Salaries	\$6,079,232	57.55%
Benefits	\$1,697,476	17.06%
Purchased Services*	\$1,785,334	16.9%
Debt Services	\$462,100	4.37%
Materials & Supplies	\$384,327	3.64%
Capital Outlay	\$50,000	<1%

▶ *Purchased Services Breakdown:

- ▶ 40% Required District Fees
- ▶ 21% Required Bond Payments
- ▶ 39% Other

2024-25 Margin Forecast Cont'd

- ▶ Margin: \$94,484 (0.89%)
 - ▶ Ways to move the margin:
 - ▶ Each Additional Student (conservative \$10,850 per student)
 - ▶ Predicted 764 Head Count would raise margin by \$86,800 in PPR
 - ▶ PreK adding ~20 students and moving to full day (~\$100,000 revenue increase)
 - ▶ If Jeffco gives full PPR and we fill to 764 with full PreK
 - ▶ Estimated Margin: \$322,816 (\$228,332 improvement)
- ▶ Teacher and Support Staff COLA
 - ▶ \$53,000 for every 1% change
- ▶ Educational Assistant COLA
 - ▶ \$23,500 for every 3% change

Proposed 2024-25 Teacher Scales

Years Teaching	LINCOLN BA 23-24	5.00%	JEFFCO 23-24 Lane 1 Bachelor's Degree	PERCENTAGE BETWEEN LA 24-25 & DISTRICT 23-24	LINCOLN Post Graduate or 40 Credits 23-24	5.00%	JEFFCO 23-24 Lane 3 Master's Degree	PERCENTAGE BETWEEN LA 24-25 & DISTRICT 23-24
1	44,956	50,000	52,625	95%	47,525	52,000	56,919	91%
2-3	47,525	51,500	53,941	95%	50,094	54,000	58,342	93%
			55,289	93%			59,801	90%
4-6	51,379	53,948	56,671	95%	55,232	57,994	61,296	95%
			58,088	93%			62,828	92%
			59,540	91%			64,399	90%
7-9	57,801	60,691	61,029	99%	61,654	64,737	66,009	98%
			62,555	97%			67,659	96%
MAX CREDIT GIVEN AT JEFFCO			64,116	95%			69,311	93%
10-12	59,957	62,955	65,721	96%	69,361	72,829	71,084	102%
			67,364	93%			72,861	100%
			69,049	91%			74,683	98%
13-16	64,223	67,434	70,775	95%	77,068	80,921	76,550	106%
			72,544	93%			78,464	103%
			74,358	91%			80,425	101%
			76,217	88%			82,436	98%
17-19	68,077	71,481	78,122	91%	81,564	85,642	84,497	101%
			80,075	89%			86,609	99%
			82,077	87%			88,775	96%
20-22	70,646	74,178	84,129	88%	85,417	89,688	90,994	99%
			86,232	86%			93,269	96%
			88,388	84%			95,600	94%
23+	73,214	76,875	88,388	87%	88,628	93,059	95,600	97%
			88,388	87%			95,600	97%
			88,388	87%			95,600	97%
			JEFFCO MAX				JEFFCO MAX	

Proposed 2024-25 Educational Assistant Scales

	23-24	PROPOSED 24-25
STEP 1	\$ 16.34	\$ 17.48
STEP 2	\$ 16.44	\$ 17.59
STEP 3	\$ 16.58	\$ 17.74
STEP 4	\$ 16.91	\$ 18.09
STEP 5	\$ 17.24	\$ 18.45
STEP 6	\$ 17.58	\$ 18.81
STEP 7	\$ 18.73	\$ 20.04
STEPS 8-11	\$ 19.39	\$ 20.75
STEPS 12-15	\$ 20.05	\$ 21.45
STEPS 16- 19	\$ 20.79	\$ 22.25
STEP 20 AND ABOVE	21.00	\$ 22.47

Motion Discussion

- ▶ Travis Harrison: Motion to approve the 2024-25 budget as presented and discussed.

Jefferson County Public Schools
Charter Schools
Lincoln Academy Charter School



Budget for 24-25

Account		24-25 WORKING BUDGET FIRST DRAFT		
Number	Description	Estimated Revenue	Budget	Bond Transfers
	Prior Year Carry forward			
401000	Commissions/Profits	8,663.00		
401400	Ticket Sales	1,668.00		
408000	Resale	20,000.00		
409000	Sales-Fund Raising	12,846.00		
411000	Prop Tax-Mill Levy Override	1,535,394.21		
415000	Earnings On Investments	11,330.00		
419000	Other Revenue	1,137.00		
433000	State Revenue - Cap Construction	305,866.40		
433000	State Revenue - UPK Payments	188,500.00		
434000	Exceptional Children Revenue	82,250.00		
450000	Transfers PPR Funding ONLY	8,202,600.00		
451000	Fees/Dues	82,817.00		
455000	Tuition from Individuals	112,000.00		
461000	Building Rental	15,796.00		
474000	Trans - Field Trips	49,968.00		
482000	Resale/Activity Revenue	21,711.00		
498000	Donations	5,000.00		
499000	Miscellaneous Revenue	600.00		
950500	State Intercept Bond Transfers	(460,902.42)		460,902.42
950500	Bond R & R Payments	-		0.00
	Revenues	10,197,244.19		460,902.42
512100-513100	Administration		376,722.00	
521100	Teacher		3,430,947.72	
521900	Substitute Teacher		45,000.00	
522100	Counselor		80,921.40	
522200	Teacher Librarian		89,687.85	
524200	Coordinator - Classified		178,445.87	
526200	Instructional Coach		161,392.70	
529200	Occupational Therapist		39,924.29	
529400	Charter Nurse		29,750.00	
529600	Social Worker		163,379.25	
529800	Speech Therapist		56,798.74	
552100	School Secretary		241,076.63	
557100	Paraprofessional		868,806.81	
557600	Clinic Aides		31,221.00	
591100	Custodian		157,687.15	
591400	Campus Supervisor		79,282.40	
599400	Unused Sick Leave		25,000.00	
599810	Additional Pay - Certificated		15,000.00	
599820	Additional Pay-Classified		1,750.00	
599830	Additional Pay-Administrative		1,750.00	
	Salaries		6,074,543.82	-
699000	Employee Benefits		1,801,593.60	-
	Benefits		1,801,593.60	-
	Total Salaries and Benefits		7,876,137.42	
701000	Mileage And Travel		2,000.00	
702000	Employee Training & Conf		18,350.00	
708000	Employee Background Verificatn		3,250.00	
710000	Meals/Refreshments		7,805.00	
713000	Student Transportation		10,500.00	
715000	Student Admission/Entry Fees		51,000.00	
721000	Legal Fees		18,000.00	
723000	Printing		1,100.00	
731000	Contracted Services		209,000.00	
735000	Bank Fees		2,000.00	
743000	Equipment Rental		5,500.00	

745000	Contract Maint/Eq Repair		12,100.00	
745500	Technology Services		93,500.00	
746000	Const Maint/Repair-Bldg		95,000.00	
752000	Marketing - Advertising		3,000.00	
761000	Natural Gas		40,000.00	
764000	Electricity		85,000.00	
765000	Voice Communication Line		30,000.00	
766000	Water & Sanitation		22,000.00	
768000	Postage		600.00	
769000	Permits/Licenses/Fees		22,000.00	
770000	Risk Management Charges		130,000.00	
770800	Unemployment Comp Insur		18,223.63	
781000	Lease Purch-Other-Principal		0.00	150,000.00
781500	Lease Purch-Other-Interest		0.00	312,100.10
950000	Transfers District Fees		913,892.00	
	Purchased Services		1,793,820.63	462,100.10
804000	Fund Raising		1,500.00	
805000	Materials/Supplies-Other		23,000.00	
806000	Materials/Supplies Resale		24,610.00	
810000	Office Material/Supplies		4,500.00	
810001	Office Equipment - Under \$5K		35,000.00	
812000	Clinic Supplies/Materials		2,500.00	
814000	Custodial Supplies		17,200.00	
820000	Instructional Material/Supply		108,035.00	
820001	Instructional Equip-Under \$5K		63,282.95	
822000	Textbooks		30,000.00	
823000	Copier Usage		35,000.00	
824000	Testing Materials		2,000.00	
826000	Graduation Materials		500.00	
840000	Maint Materials/Supplies		33,000.00	
870000	Library Materials		3,200.00	
885000	Miscellaneous Expense		500.00	
889000	Consumable Supplies		500.00	
	Materials and Supplies		384,327.95	-
930000	Building Improvements		50,000.00	0.00
	Capital Outlay		50,000.00	-
		801000 Contingency Appropriation for Building Needs	0.00	
	Total Expenditures		10,104,286.00	462,100.10
	NET PROFIT/(LOSS)	0.86%	91,760.51	
	18-19 Beginning Fund Balance		<u>0.00</u>	
	Adjusted Carry Forward		0.00	
	801000 Contingency			
	Appropriation of Carry Forward over 15%		0.00	

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990 for instructions and the latest information.

A For the 2022 calendar year, or tax year beginning 07/01/22, and ending 06/30/23

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization <p align="center">Lincoln Academy</p> Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite <p>7180 Oak Street</p> City or town, state or province, country, and ZIP or foreign postal code <p>Arvada CO 80004</p>	D Employer identification number <p align="center">84-1578383</p> E Telephone number <p align="center">303-467-5363</p> G Gross receipts\$ 9,755,820
F Name and address of principal officer: <p>Travis Harrison</p>		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions

I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	J Website: www.lincolnacademy.net	H(c) Group exemption number
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other	L Year of formation:	M State of legal domicile: CO

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: <p align="center">Operation of a Charter School.</p>		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	7
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	7
	5 Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	0
	6 Total number of volunteers (estimate if necessary)	6	150
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
7b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 420,625	Current Year 397,659
	9 Program service revenue (Part VIII, line 2g)	8,703,328	8,888,734
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	0	0
	11 Other revenue (Part VIII, column (A), lines 5, 6c, 8c, 9c, 10c, and 11e)	104,595	469,427
	12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	9,228,548	9,755,820
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	0	0
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	3,480,810	7,058,796
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b Total fundraising expenses (Part IX, column (D), line 25)	0	0
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	2,991,179	2,928,801
18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	6,471,989	9,987,597	
19 Revenue less expenses. Subtract line 18 from line 12	2,756,559	-231,777	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 21,861,221	End of Year 22,140,405
	21 Total liabilities (Part X, line 26)	22,448,982	22,959,943
	22 Net assets or fund balances. Subtract line 21 from line 20	-587,761	-819,538

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer <p align="center">Travis Harrison</p> Type or print name and title	Date <p align="center">Treasurer</p>
	Print/Type preparer's name <p>John Cutler</p>	Preparer's signature Date <p>01/30/24</p> Check <input type="checkbox"/> if self-employed PTIN <p>P00879543</p>
Paid Preparer Use Only	Firm's name <p>John L Cutler & Associates</p>	Firm's EIN <p>20-2011689</p>
	Firm's address <p>600 17th St S Ste 2800 Denver, CO 80202-5428</p>	Phone no. <p>303-634-2259</p>

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

Operation of a Charter School.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ **5,705,137** including grants of\$) (Revenue \$)

Operation of a Charter School.

4b (Code:) (Expenses \$ including grants of\$) (Revenue \$)

N/A

4c (Code:) (Expenses \$ including grants of\$) (Revenue \$)

N/A

4d Other program services (Describe on Schedule O.)

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

4e Total program service expenses **5,705,137**

Part IV Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		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? <i>If "Yes," complete Schedule C, Part II</i>		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? <i>If "Yes," complete Schedule C, Part III</i>		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? <i>If "Yes," complete Schedule D, Part I</i>		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? <i>If "Yes," complete Schedule D, Part II</i>		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		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? <i>If "Yes," complete Schedule D, Part IV</i>		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
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? <i>If "Yes," complete Schedule D, Part VII</i>		X
c	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? <i>If "Yes," complete Schedule D, Part VIII</i>		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? <i>If "Yes," complete Schedule D, Part IX</i>	X	
e	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	X	
14a	Did the organization maintain an office, employees, or agents outside of the United States?		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? <i>If "Yes," complete Schedule F, Parts I and IV</i>		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? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I. See instructions</i>		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>		X

Part IV Checklist of Required Schedules (continued)

		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>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? <i>If "Yes," complete Schedule J</i>	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		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):		
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>		X
b	A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>		X
c	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>		X
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		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? <i>If "Yes," complete Schedule R, Part I</i>		X
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		

Part V Statements Regarding Other IRS Filings and Tax Compliance <i>(continued)</i>		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
2a			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	
3a	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? <i>If "No" to line 3b, provide an explanation on Schedule O</i>	3b	
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).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	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).		
a	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	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8	
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a	
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a	
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	
c	Enter the amount of reserves on hand	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	X
b	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i>	14b	
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.	15	X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16	X
17	Section 501(c)(21) organizations. Did the trust, any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.	17	

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 instructions for definition of "key employee."
 - List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
 - List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
 - List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
- See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) Amanda Corrion President	2.00 0.00	X		X				0	0	0
(2) Michah Gibreath Vice President	2.00 0.00	X		X				0	0	0
(3) Lacy Cleveland Secretary	2.00 0.00	X		X				0	0	0
(4) Travis Harrison Treasurer	2.00 0.00	X		X				0	0	0
(5) Rob McCready Member	2.00 0.00	X						0	0	0
(6) Brandon DeVito Member	2.00 0.00	X						0	0	0
(7) Kyle Pethe Adjunct	2.00 0.00	X						0	0	0
(8) David Schoenhals Executive Director	40.00 0.00					X		145,600	0	31,158
(9)										
(10)										
(11)										

Part VIII Statement of Revenue

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e	357,501			
	f All other contributions, gifts, grants, and similar amounts not included above	1f	40,158			
	g Noncash contributions included in lines 1a-1f	1g	\$			
	h Total. Add lines 1a-1f		397,659			
Program Service Revenue			Business Code			
	2a PPR Revenue		611710	6,974,914	6,974,914	
	b Mill Levy Override		611710	1,463,617	1,463,617	
	c Tuition and Fees		611710	450,203	450,203	
	d					
	e					
	f All other program service revenue					
g Total. Add lines 2a-2f			8,888,734			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)					
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
	6a Gross rents	6a	(i) Real			
			(ii) Personal			
	b Less: rental expenses	6b				
	c Rental inc. or (loss)	6c				
	d Net rental income or (loss)					
	7a Gross amount from sales of assets other than inventory	7a	(i) Securities			
			(ii) Other			
	b Less: cost or other basis and sales exps.	7b				
	c Gain or (loss)	7c				
d Net gain or (loss)						
8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	8a					
b Less: direct expenses	8b					
c Net income or (loss) from fundraising events						
9a Gross income from gaming activities. See Part IV, line 19	9a					
b Less: direct expenses	9b					
c Net income or (loss) from gaming activities						
10a Gross sales of inventory, less returns and allowances	10a					
b Less: cost of goods sold	10b					
c Net income or (loss) from sales of inventory						
Miscellaneous Revenue			Business Code			
	11a State Aid		611710	385,670	385,670	
	b Other Revenue		611710	83,757	83,757	
	c					
	d All other revenue					
e Total. Add lines 11a-11d			469,427			
12 Total revenue. See instructions			9,755,820	9,358,161	0	

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	4,918,893	3,860,005	1,058,888	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	2,139,903	1,641,793	498,110	
10 Payroll taxes				
11 Fees for services (nonemployees):				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 7				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
12 Advertising and promotion	8,442		8,442	
13 Office expenses	11,645		11,645	
14 Information technology	51,403		51,403	
15 Royalties				
16 Occupancy				
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest	360,773		360,773	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	676,606		676,606	
23 Insurance	91,004		91,004	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a District Purchased Svcs	852,396		852,396	
b Supplies & Materials	346,779	199,780	146,999	
c Contracted Services	170,453		170,453	
d Repairs and Maintenance	146,907		146,907	
e All other expenses	212,393	3,559	208,834	
25 Total functional expenses. Add lines 1 through 24e	9,987,597	5,705,137	4,282,460	0
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	3,695,465	1	3,947,248
	2 Savings and temporary cash investments	2,759,640	2	2,649,354
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net		4	
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	17,725	9	21,270
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 15,968,528		
	b Less: accumulated depreciation	10b 3,826,136	12,391,184	10c 12,142,392
	11 Investments—publicly traded securities		11	
	12 Investments—other securities. See Part IV, line 11		12	
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets	699,098	14	678,536
	15 Other assets. See Part IV, line 11	2,298,109	15	2,701,605
16 Total assets. Add lines 1 through 15 (must equal line 33)	21,861,221	16	22,140,405	
Liabilities	17 Accounts payable and accrued expenses	202,246	17	100,801
	18 Grants payable		18	
	19 Deferred revenue	28,706	19	3,776
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties	8,843,499	23	8,698,101
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	13,374,531	25	14,157,265
	26 Total liabilities. Add lines 17 through 25	22,448,982	26	22,959,943
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions		27	
	28 Net assets with donor restrictions		28	
	Organizations that do not follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds	-587,761	31	-819,538
	32 Total net assets or fund balances	-587,761	32	-819,538
33 Total liabilities and net assets/fund balances	21,861,221	33	22,140,405	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	9,755,820
2	Total expenses (must equal Part IX, column (A), line 25)	2	9,987,597
3	Revenue less expenses. Subtract line 2 from line 1	3	-231,777
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	-587,761
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	-819,538

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		X
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		

**SCHEDULE A
(Form 990)**

Public Charity Status and Public Support

OMB No. 1545-0047

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

2022

Department of the Treasury
Internal Revenue Service

Attach to Form 990 or Form 990-EZ.

Open to Public
Inspection

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

Name of the organization

Lincoln Academy

Employer identification number

84-1578383

Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 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:
- 5 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)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 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 university:
- 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.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 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.
 - a **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.**
 - 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.**
 - 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.**
 - d **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.**
 - e 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.
 - f Enter the number of supported organizations
 - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

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

Schedule A (Form 990) 2022

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization'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						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						

12 Gross receipts from related activities, etc. (see instructions) 12

13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

14 Public support percentage for 2022 (line 6, column (f) divided by line 11, column (f)) 14 %

15 Public support percentage from 2021 Schedule A, Part II, line 14 15 %

16a 33 1/3% support test—2022. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

b 33 1/3% support test—2021. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

17a 10%-facts-and-circumstances test—2022. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here.** Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization

b 10%-facts-and-circumstances test—2021. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here.** Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization

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

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

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

Section A. Public Support

Table with 7 columns: Calendar year (or fiscal year beginning in), (a) 2018, (b) 2019, (c) 2020, (d) 2021, (e) 2022, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions, merchandise sold or services performed; 3 Gross receipts from activities that are not an unrelated trade or business; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 7c Add lines 7a and 7b; 8 Public support.

Section B. Total Support

Table with 7 columns: Calendar year (or fiscal year beginning in), (a) 2018, (b) 2019, (c) 2020, (d) 2021, (e) 2022, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 10c Add lines 10a and 10b; 11 Net income from unrelated business activities not included on line 10b; 12 Other income; 13 Total support; 14 First 5 years.

14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

Section C. Computation of Public Support Percentage

Table with 3 columns: Description, Value, Percentage. Row 15: Public support percentage for 2022 (line 8, column (f), divided by line 13, column (f)) 15 %; Row 16: Public support percentage from 2021 Schedule A, Part III, line 15 16 %

Section D. Computation of Investment Income Percentage

Table with 3 columns: Description, Value, Percentage. Row 17: Investment income percentage for 2022 (line 10c, column (f), divided by line 13, column (f)) 17 %; Row 18: Investment income percentage from 2021 Schedule A, Part III, line 17 18 %

19a 33 1/3% support tests—2022. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests—2021. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

(Complete only if you checked a box on 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

		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
3b	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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
3c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
4b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
4c	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)? <i>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.</i>		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i>		
5b	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?		
5c	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? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
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))? <i>If "Yes," provide detail in Part VI.</i>		
9b	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? <i>If "Yes," provide detail in Part VI.</i>		
9c	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? <i>If "Yes," provide detail in Part VI.</i>		
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)? <i>If "Yes," answer line 10b below.</i>		
10b	Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?		
11a		
b A family member of a person described on line 11a above?		
11b		
c A 35% controlled entity of a person described on line 11a or 11b above? <i>If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.</i>		
11c		

Section B. Type I Supporting Organizations

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

Section 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)? <i>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).</i>		
1		

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

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

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- 1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in **Part VI**). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section 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	
Section B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	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	
Section 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	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations *(continued)*

Section D – Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	1
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4 Amounts paid to acquire exempt-use assets	4
5 Qualified set-aside amounts (prior IRS approval required— <i>provide details in Part VI</i>)	5
6 Other distributions (<i>describe in Part VI</i>). See instructions.	6
7 Total annual distributions. Add lines 1 through 6.	7
8 Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	8
9 Distributable amount for 2022 from Section C, line 6	9
10 Line 8 amount divided by line 9 amount	10

Section E – Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2022	(iii) Distributable Amount for 2022
1 Distributable amount for 2022 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2022 (reasonable cause required— <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2022			
a From 2017			
b From 2018			
c From 2019			
d From 2020			
e From 2021			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2022 distributable amount			
i Carryover from 2017 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2022 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2022 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2023. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2018			
b Excess from 2019			
c Excess from 2020			
d Excess from 2021			
e Excess from 2022			

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

DRAFT

**Schedule B
(Form 990)**

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2022

Name of the organization

Employer identification number

Lincoln Academy

84-1578383

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(**3**) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

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

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

General Rule

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

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

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

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

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

Schedule B (Form 990) (2022)

Name of organization

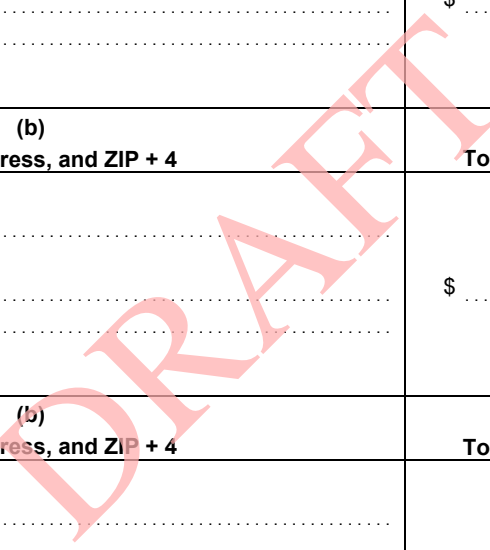
Lincoln Academy

Employer identification number

84-1578383

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Lincoln Academy PTO 7180 Oak Street Arvada CO 80004	\$ 35,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)



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

2022

Open to Public Inspection

Name of the organization

Lincoln Academy

Employer identification number

84-1578383

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 3 columns: Question number, (a) Donor advised funds, (b) Funds and other accounts. Includes questions 1-6 regarding donor advised funds.

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Table with 3 columns: Question number, Description, Held at the End of the Tax Year. Includes questions 1-8 regarding conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Table with 3 columns: Question number, Description, Amount. Includes questions 1a, 1b, 2, 2a, 2b regarding art and historical treasures.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):

- a** Public exhibition
- b** Scholarly research
- c** Preservation for future generations
- d** Loan or exchange program
- e** Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a** Board designated or quasi-endowment
- b** Permanent endowment
- c** Term endowment

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

	Yes	No
(i) Unrelated organizations	3a(i)	
(ii) Related organizations	3a(ii)	
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?	3b	

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		2,440,489		2,440,489
b Buildings		13,416,778	3,722,395	9,694,383
c Leasehold improvements				
d Equipment		111,261	103,741	7,520
e Other				

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) **12,142,392**

Part VII Investments – Other Securities.

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (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. (Column (b) must equal Form 990, Part X, col. (B) line 13.)		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) Related to Pensions	2,641,006
(2) Related to OPEB	60,599
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	2,701,605

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) Net Pension Liability	11,247,156
(3) Deferred Inflows Related to Pension	1,849,899
(4) Accrued Salaries and Benefits	425,329
(5) Net OPEB Liability	383,270
(6) Deferred Inflows Related to OPEB	145,270
(7) Accrued Interest Payable	106,341
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	14,157,265

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

Part XIII **Supplemental Information** *(continued)*

DRAFT

**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

2022

Open to Public Inspection

Lincoln Academy

Employer identification number

84-1578383

Part 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?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3 Has the organization publicized its racially nondiscriminatory policy on its primary publicly accessible Internet homepage at all times during its tax year in a manner reasonably expected to be noticed by visitors to the homepage, or through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain. If you need more space, use Part II These policies are available upon request at the School office.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4 Does the organization maintain the following?		
a Records indicating the racial composition of the student body, faculty, and administrative staff?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
d Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain. If you need more space, use Part II.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5 Does the organization discriminate by race in any way with respect to:		
a Students' rights or privileges?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
a Admissions policies?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b Employment of faculty or administrative staff?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
c Scholarships or other financial assistance?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
d Educational policies?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
f Use of facilities?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
g Athletic programs?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
h Other extracurricular activities? If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
6a Does the organization receive any financial aid or assistance from a governmental agency?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" on either line 6a or line 6b, explain on Part II.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
7 Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, as modified by Rev. Proc. 2019-22, 2019-22 I.R.B. 1260, covering racial nondiscrimination? If "No," explain on Part II	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Part II **Supplemental Information.** Provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also provide any other additional information. See instructions.

Sch E - Financial Aid or Government Assistance Explanation

The School receives funding from the state Department of Education.

DRAFT

SCHEDULE J
(Form 990)

Department of the Treasury
Internal Revenue Service
Name of the organization

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.

OMB No. 1545-0047

2022

Open to Public
Inspection

Lincoln Academy

Employer identification number
84-1578383

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> 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

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?

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.

- | | |
|--|--|
| <input type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input type="checkbox"/> 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:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in or receive payment from a supplemental nonqualified retirement plan?
- c** Participate in or receive payment from an equity-based compensation arrangement?
- 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 contingent on the revenues of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

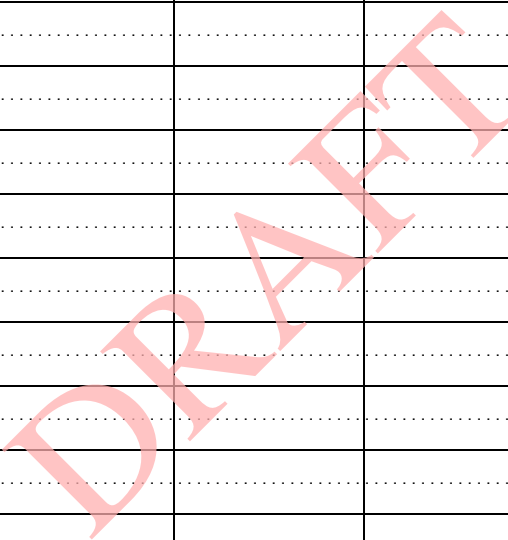
	Yes	No
1b		
2		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)–(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 David Schoenhals Executive Director	(i)	145,600	0	0	31,158	0	176,758	0
	(ii)	0	0	0	0	0	0	0
2	(i)							
	(ii)							
3	(i)							
	(ii)							
4	(i)							
	(ii)							
5	(i)							
	(ii)							
6	(i)							
	(ii)							
7	(i)							
	(ii)							
8	(i)							
	(ii)							
9	(i)							
	(ii)							
10	(i)							
	(ii)							
11	(i)							
	(ii)							
12	(i)							
	(ii)							
13	(i)							
	(ii)							
14	(i)							
	(ii)							
15	(i)							
	(ii)							
16	(i)							
	(ii)							



Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

DRAFT

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2022

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Inspection**

Name of the organization

Lincoln Academy

Employer identification number

84-1578383

Form 990, Part III, Line 4d - All Other Accomplishments

Operation of a Charter School

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990

The 990 will be reviewed and approved by the Board before filing.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy

The Board reveiws these policies annually.

Form 990, Part VI, Line 15a - Compensation Process for Top Official

The Board reviews these policies annually.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation

**The Board determines the salary for the Principal based on annual
performance and District salary scales.**