# **PUBLIC DISCLOSURE COPY**

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## **ARMANINO**<sup>LLP</sup>

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## \*\* PUBLIC DISCLOSURE COPY \*\*

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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

Department of the Treasury Internal Revenue Service

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



<u>A</u> F	or the 2	020 calendar year, or tax year beginning JUL 1, 2020 and	ending JU	N 30, 2021									
B c a	heck if pplicable:	C Name of organization		D Employer identified	cation number								
	Address change	SCHOOL OF ARTS AND CULTURE AT MHP											
	Name change	Doing business as		80-0714882									
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number	r								
	Final return/	return/ 1700 ADM ROCK AVENDE											
	termin- ated	City or town, state or province, country, and ZIP or foreign postal code <b>G</b> Gross receipts \$ 4,867,560											
	Amended return	SAN JUSE, CA 95110		H(a) Is this a group re	eturn								
	Applica-	I for subordinates?											
	pending	SAME AS C ABOVE		H(b) Are all subordinates in	icluded? Yes No								
		npt status: $X = 501(c)(3) = 501(c) ( ) $ (insert no.) 4947(a)(1) c	or 527	If "No," attach a	list. See instructions								
		SCHOOLOFARTSANDCULTURE.ORG		H(c) Group exemptio									
		ganization: 🗴 Corporation 🔄 Trust 🦳 Association 🦳 Other 🕨	L Year c	f formation: 2011	State of legal domicile: CA								
Pa	art I S	Summary											
đ			SSION OF	THE SCHOOL IS TO									
u C		ATALYZE CREATIVITY AND EMPOWER COMMUNITY.											
Governance	<b>2</b> Cr	neck this box 🕨 🛄 if the organization discontinued its operations or dispos	ed of more t	han 25% of its net ass	sets.								
0V6					14								
		umber of independent voting members of the governing body (Part VI, line 1b)			12								
es S		otal number of individuals employed in calendar year 2020 (Part V, line 2a)			47								
viti	<b>6</b> To	otal number of volunteers (estimate if necessary)		6	50								
Activities &	7 a To	otal unrelated business revenue from Part VIII, column (C), line 12			0.								
_	b Ne	et unrelated business taxable income from Form 990-T, Part I, line 11	<u></u>	7b	0.								
				Prior Year	Current Year								
ē	<b>8</b> Co	ontributions and grants (Part VIII, line 1h)		2,836,191.	4,260,869.								
nue	<b>9</b> Pr	ogram service revenue (Part VIII, line 2g)		505,055.	585,001.								
Revenue	<b>10</b> Inv	vestment income (Part VIII, column (A), lines 3, 4, and 7d)		489.	1,028.								
ш	<b>11</b> Ot	ther revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		8,832.	14,464.								
	<b>12</b> To	otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		3,350,567.	4,861,362.								
	<b>13</b> Gr	rants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.								
	1	enefits paid to or for members (Part IX, column (A), line 4)		0.	0.								
Se	<b>15</b> Sa	alaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) $\ _{.}$		914,587.	1,221,571.								
Expenses	<b>16a</b> Pr	ofessional fundraising fees (Part IX, column (A), line 11e)		54,196.	52,516.								
xpe	b To	otal fundraising expenses (Part IX, column (D), line 25)											
ш		ther expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,304,476.	2,127,940.								
	<b>18</b> To	otal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		2,273,259.	3,402,027.								
		evenue less expenses. Subtract line 18 from line 12		1,077,308.	1,459,335.								
s or Ices			Beg	inning of Current Year	End of Year								
sets	<b>20</b> To	otal assets (Part X, line 16)		7,908,404.	8,721,548.								
t As		otal liabilities (Part X, line 26)		374,411.	292,625.								
Eun		et assets or fund balances. Subtract line 21 from line 20		7,533,993.	8,428,923.								
Pa	art 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	Signature of officer			Date
Here	JESSICA PAZ-CEDILLOS, EXECUTIVE D	DIRECTOR		
	Type or print name and title			
	Print/Type preparer's name	Preparer's signature	Date	Check PTIN
Paid	MATTHEW PETROSKI	MATTHEW PETROSKI	04/21/22	2 self-employed P00853132
Preparer	Firm's name ARMANINO LLP			Firm's EIN 🕨 94-6214841
Use Only	Firm's address 🖕 50 W. SAN FERNANDO ST, S	STE 500		
	SAN JOSE, CA 95113			Phone no.408-200-6400
May the If	RS discuss this return with the preparer shown abo	ve? See instructions		X Yes No
032001 12-2	3-20 LHA For Paperwork Reduction Act Notic	ce, see the separate instructions.		Form <b>990</b> (2020)

Form	1990 (2020) SCHOOL OF ARTS AND CULTURE AT MHP	80-0714882	Page <b>2</b>
	rt III Statement of Program Service Accomplishments		5
	Check if Schedule O contains a response or note to any line in this Part III		X
1	Briefly describe the organization's mission:		
	THE MISSION OF THE SCHOOL IS TO CATALYZE CREATIVITY AND EMPOWER		
	COMMUNITY. THE SCHOOL ENVISIONS A WORLD WHERE CREATIVITY INSPIRES		
	COMPASSION AND VIBRANT COMMUNITIES.		
2	Did the organization undertake any significant program services during the year which were not listed on the		
	prior Form 990 or 990-EZ?	X Y	'es 🗌 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?	? 🗌 Y	′es 🛛 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, a	s measured by expens	es.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to oth	ers, the total expenses	s, and
	revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$1,947,259. including grants of \$) (Rev	/enue \$	)
	SPECIAL INITIATIVES		,
	DURING THE YEAR ENDED JUNE 30, 2021, THE SCHOOL OF ARTS AND CULTURE AT		
	MHP LAUNCHED A SPECIAL PROJECT INITIATIVE, IN PARTNERSHIP WITH THE		
	CALIFORNIA ARTS COUNCIL AND SVCREATES, CALLED THE ADMINISTRATORS OF		
	COLOR FELLOWSHIP. THE SCHOOL SERVES AS THE ADMINISTERING ORGANIZATION		
	FOR THIS PILOT PROGRAM THAT HAS THE GOAL OF UPLIFTING AN INCLUSIVE		
	WORKFORCE AND SUPPORTING THE VIBRANCY OF ORGANIZATIONS THAT CREATE AND		
	PRESERVE THE CULTURAL IDENTITIES OF ALL CALIFORNIA COMMUNITIES. THE		
	CALIFORNIA ARTS COUNCIL ADMINISTRATORS OF COLOR FELLOWSHIP ("CAC ACF")		
	SEEKS TO ADDRESS THE DEARTH OF OPPORTUNITIES FOR PEOPLE OF COLOR IN		
	ARTS ADMINISTRATION, WITH THE INTENTION OF CREATING A PIPELINE FOR		
4b	(Code:) (Expenses \$417,937. including grants of \$) (Rev		585 001 )
40	EVENTS - COMMUNITY ACCESS AND ENGAGEMENT	enue \$	) ( )
	THE COMMUNITY ENGAGEMENT PROGRAM PROVIDES LOCAL ARTISTS AND ARTS AND		
	COMMUNITY AGENCIES ACCESS TO THE MEXICAN HERITAGE PLAZA; TRAINING AND		
	TECHNICAL ASSISTANCE ON THE USE OF THE SPACE; AND ACCESS TO AUDIENCE		
	NETWORKS. ACTIVATING AND CURATING THE SIX-ACRE, \$35 MILLION, CITY-OWNED		
	FACILITY AS A PROGRAMMABLE ARTS AND CULTURAL DESTINATION AND COMMUNITY		
	HUB, THE SCHOOL PROVIDES EAST SAN JOSE WITH A SAFE, ACTIVE, FAMILY		
	VENUE FOR DIVERSE ARTS ACTIVITIES THAT SPEAK TO ITS UNIQUE CULTURAL		
	HERITAGE. IN THE YEAR ENDED JUNE 30, 2020, THE COMMUNITY ENGAGEMENT		
	PROGRAM WORKED WITH 60 COMMUNITY PARTNERS TO PRESENT RELEVANT,		
	MULTICULTURAL PROGRAMMING THAT CELEBRATED THE LOCAL COMMUNITY'S		
40			
4c	MULTICULTURAL ARTS LEADERSHIP INSTITUTE (MALI):	venue \$	)
	THE MULTICULTURAL ARTS LEADERSHIP INSTITUTE ("MALI") IS A PROFESSIONAL		
	DEVELOPMENT OPPORTUNITY FOR LEADERS OF COLOR IN THE ARTS, CULTURAL, AND		
	ENTERTAINMENT SECTORS. THROUGH MALI'S YEAR-LONG TRAINING PROGRAM, THE		
	SCHOOL DEVELOPS LOCAL MULTICULTURAL ARTS PRACTITIONERS BY GIVING THEM		
	THE TECHNICAL SKILLS, PHILOSOPHICAL UNDERPINNINGS, AND NETWORKING		
	OPPORTUNITIES NECESSARY TO GROW AND SUSTAIN THEIR INDIVIDUAL WORK,		
	THEIR ORGANIZATIONS, AND THE ARTS SECTOR IN SILICON VALLEY. SINCE 2008,		
	MALI HAS WORKED WITH 138 LEADERS OF COLOR IN SILICON VALLEY, OF WHICH		
	25 HOLD DIRECTOR-LEVEL POSITIONS, 25 ARE SMALL BUSINESS OWNERS, 12 ARE		
	ARTIST LAUREATES, 5 ARE SAN JOSE CULTURAL AMBASSADORS, AND 7 WORK IN		
4d	Other program services (Describe on Schedule O.)	00.000	
	(Expenses \$ 519,592. including grants of \$ ) (Revenue \$	20,662.)	
4e	Total program service expenses 2,947,478.		000
		For	m <b>990</b> (2020)
032002	2 12-23-20 SEE SCHEDULE O FOR CONTINUATION(S)		
	2		

Form 990 (2020)

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		x
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
-	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	L		
Ŭ	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
'	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
•				<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			x
•	Schedule D, Part III	8		
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
с	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Х	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		x
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		x
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	<u> </u>		
2	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
15	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15		
16		16		x
47	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	10		<u> </u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	47	х	
40	column (A), lines 6 and 11e? <i>If</i> "Yes," <i>complete Schedule G, Part I</i>	17	Δ	<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	40	х	
40	1c and 8a? If "Yes," complete Schedule G, Part II	18	Δ	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Yes,"			<b>.</b>
	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21	000	X
032003	12-23-20	Form	990	(2020)

13260421 701245 0504664.T

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
~~	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete	23		x
24 2	Schedule J Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	23		
270	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
~~	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
-	instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>	28a		x
ь	"Yes," complete Schedule L, Part IV A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		x
	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If	200		
Ū	"Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		x
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	<u>35a</u>		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
00	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	26		x
37	If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization	36		<u> </u>
51	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	- <u>-</u> -		
	Note: All Form 990 filers are required to complete Schedule O	38	х	
Pa				•
	Check if Schedule O contains a response or note to any line in this Part V	<u></u> .		
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 22			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b			
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X	
032004	\$ 12-23-20	Form	990	(2020)

Form	990 (2020) SCHOOL OF ARTS AND CULTURE AT MHP 80-071488	2	Р	age <b>5</b>
Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 47			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	х	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		x
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		x
b	If "Yes," enter the name of the foreign country			
-	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		x
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		x
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
ou	any contributions that were not tax deductible as charitable contributions?	6a		x
h	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
D		6b		
7	Organizations that may receive deductible contributions under section 170(c).	00		
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	х	
		7b	x	<u> </u>
	If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	- 10		<u> </u>
C		7c		x
Ь	to file Form 8282? If "Yes," indicate the number of Forms 8282 filed during the year 7d	10		
		7e		x
e f		7e 7f		x
	If the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7g		
g	If the organization received a contribution of qualified intellectual property, did the organization life rorm 8099 as required?	79 7h		
h 8				
0	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the	8		
0	sponsoring organization have excess business holdings at any time during the year?	0		
9	Sponsoring organizations maintaining donor advised funds.	0-		
a L	Did the sponsoring organization make any taxable distributions under section 4966?	9a 0h		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders 11a			
a	Gross income from other sources (Do not net amounts due or paid to other sources against			
40-	amounts due or received from them.)	10-		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	<u>12a</u>		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	10		-
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
-	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			v
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		X
	If "Yes," see instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
	If "Yes," complete Form 4720, Schedule O.	_	000	(2020)

Form **990** (2020)

032005 12-23-20

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	stion A. Governing Body and Management	<u></u>		
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 14	•		
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b 12	<u>.</u>		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
7a	•			
	more members of the governing body?	<u>7a</u>		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			v
_	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		х	
a L	The governing body?	8a	X	
a	Each committee with authority to act on behalf of the governing body?	8b	Δ	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	9		x
Sec	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		21
	(This Section B requests information about policies not required by the internal Revenue Code.)		Yes	No
102	Did the organization have local chapters, branches, or affiliates?	10a	163	X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	104		
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
112	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	х	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	х	
b	···· ··· ··· ··· ··· · · · · · · · · ·	12b	х	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe	12.0		
-	in Schedule O how this was done	12c	х	
13	Did the organization have a written whistleblower policy?	13	Х	
.e 14	Did the organization have a written document retention and destruction policy?	14	х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	х	
	Other officers or key employees of the organization	15b	Х	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed CA			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)	s only)	availa	ble
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	d financ	cial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	VANESSA SHIEH - (408)794-6250			
	1700 ALUM ROCK AVENUE, SAN JOSE, CA 95116		990	

Form 990 (2		80-0714882	Page 1
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Com	pensated	
	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 Comple	te this table for all persons required to be listed. Report compensation for the calendar year ending with	n or within the organization's	stax 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 and/or Box 7 of Form 1099-MISC) 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 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.

Name and title         Average hours per work of an anothold in the indicate and a set of the indindicate and a set	(A)	(B)				C)			(D)	(E)	(F)
hours per week, (its any person of action organizations pelow line)         box, store metal sector (its any person person person person person person person person pelow line)         box, store sector person person person person person person person person pelow line)         compensation metal pelow line)         compensation metal pelow line)	Name and title		(do					ane	Reportable	Reportable	Estimated
Week (list any hours for related organizations below line)         Tot the organization (W-2/1099-MISC)         Inducted organization (W-2/1099-MISC)         Compensation from the organization (W-2/1099-MISC)           (1) JESSICA PAZ-CEDILLOS         40.00 Wine)         X         X         110,000         0.         8,262.           (1) JESSICA PAZ-CEDILLOS         40.00 Wine)         X         X         110,000         0.         8,262.           (2) VANESSA SRIEH         40.00 MIGUE SALINAS         X         109,664.         0.         7,907.           (3) ROY HIRABAYASHI         1.00 JIRECTOR         X         X         0.         0.         640.           (4) MIGUE SALINAS         1.00 GI ALEXANDRA URBANONSKI         X         X         0.         0.         0.           (7) STEPHEN MCCRAY         1.00 GI ALEXANDRA URBANONSKI         X         X         0.         0.         0.           (10) EKRESTOR         X         X         0.         0.         0.         0.         0.           (13) AUGUE SALINAS         1.00 GI ALEXANDRA URBANONSKI         1.00 K         X         X         0.         0.         0.           (16) SUBAN CAEVEDO         1.00 GI ALEXANDRA URBANONSKI         1.00 K         X         0.         0.         0.         <		hours per	box	, unles	ss pe	rson i	s both	n an	compensation	compensation	amount of
(1) JESSICA PAZ-CEDILLOS       40.00       x       x       110,000.       0.       8,262.         (2) VANESAS SHIEH       40.00       x       109,664.       0.       7,907.         (3) ROY HIRABAYASHI       1.00       x       36,296.       0.       640.         DIRECTOR       x       36,296.       0.       640.       0.       0.         BOAD CHAIR       x       x       0.       0.       0.       0.       0.         C(1) MIGUEL SALINAS       1.00       x       x       0.       0.       0.       0.         BOAD CHAIR       x       x       x       0.		week		cer an I	id a d	lirecto	or/trus	tee)	from	from related	other
(1) JESSICA PAZ-CEDILLOS       40.00       x       x       110,000.       0.       8,262.         (2) VANESAS SHIEH       40.00       x       109,664.       0.       7,907.         (3) ROY HIRABAYASHI       1.00       x       36,296.       0.       640.         DIRECTOR       x       36,296.       0.       640.         (4) MGUEL SALINAS       1.00       x       36,296.       0.       640.         BOAD CHAIR       x       x       0.       0.       0.       0.         (5) JULIA CASTO       1.00       x       0.       0.       0.       0.       0.         (6) ALEXANDRA URBANOWSKI       1.00       x       x       0.       0.       0.       0.         (7) STEPHEN MCCRAY       1.00       x       x       0.       0.       0.       0.         SIGRETARY       X       X       0.       0.       0.       0.       0.       0.         (9) PERE JENSEN       1.00       x       0.       0.       0.       0.       0.       0.       0.       0.         (11) ANGELINA RAMOS       1.00       x       0.       0.       0.       0.       0.			rector							-	-
(1) JESSICA PAZ-CEDILLOS       40.00       x       x       110,000.       0.       8,262.         (2) VANESAS SHIEH       40.00       x       109,664.       0.       7,907.         (3) ROY HIRABAYASHI       1.00       x       36,296.       0.       640.         DIRECTOR       x       36,296.       0.       640.         (4) MGUEL SALINAS       1.00       x       36,296.       0.       640.         BOAD CHAIR       x       x       0.       0.       0.       0.         (5) JULIA CASTO       1.00       x       0.       0.       0.       0.       0.         (6) ALEXANDRA URBANOWSKI       1.00       x       x       0.       0.       0.       0.         (7) STEPHEN MCCRAY       1.00       x       x       0.       0.       0.       0.         SIGRETARY       X       X       0.       0.       0.       0.       0.       0.         (9) PERE JENSEN       1.00       x       0.       0.       0.       0.       0.       0.       0.       0.         (11) ANGELINA RAMOS       1.00       x       0.       0.       0.       0.       0.			or dir	e			ated		, , , , , , , , , , , , , , , , , , ,	(W-2/1099-MISC)	
(1) JESSICA PAZ-CEDILLOS       40.00       x       x       110,000.       0.       8,262.         (2) VANESAS SHIEH       40.00       x       109,664.       0.       7,907.         (3) ROY HIRABAYASHI       1.00       x       36,296.       0.       640.         DIRECTOR       x       36,296.       0.       640.       0.       0.         BOAD CHAIR       x       x       0.       0.       0.       0.       0.         C(1) MIGUEL SALINAS       1.00       x       x       0.       0.       0.       0.         BOAD CHAIR       x       x       x       0.			ustee	truste		e	bens		(W-2/1099-MISC)		-
(1) JESSICA PAZ-CEDILLOS       40.00       x       x       110,000.       0.       8,262.         (2) VANESAS SHIEH       40.00       x       109,664.       0.       7,907.         (3) ROY HIRABAYASHI       1.00       x       36,296.       0.       640.         DIRECTOR       x       36,296.       0.       640.       0.       0.         BOAD CHAIR       x       x       0.       0.       0.       0.       0.         C(1) MIGUEL SALINAS       1.00       x       x       0.       0.       0.       0.         BOAD CHAIR       x       x       x       0.		l °	ual tr	tional		n ploye	t com				
(1) JESSICA PAZ-CEDILLOS       40.00       x       x       110,000.       0.       8,262.         (2) VANESAS SHIEH       40.00       x       109,664.       0.       7,907.         (3) ROY HIRABAYASHI       1.00       x       36,296.       0.       640.         DIRECTOR       x       36,296.       0.       640.         (4) MGUEL SALINAS       1.00       x       36,296.       0.       640.         BOAD CHAIR       x       x       0.       0.       0.       0.         (5) JULIA CASTO       1.00       x       0.       0.       0.       0.       0.         (6) ALEXANDRA URBANOWSKI       1.00       x       x       0.       0.       0.       0.         (7) STEPHEN MCCRAY       1.00       x       x       0.       0.       0.       0.         SIGRETARY       X       X       0.       0.       0.       0.       0.       0.         (9) PERE JENSEN       1.00       x       0.       0.       0.       0.       0.       0.       0.       0.         (11) ANGELINA RAMOS       1.00       x       0.       0.       0.       0.       0.			ndivid	nstitut	Officer	(ey em	Highes	ormei			organizations
(2) VANESSA SHIEH       40.00       x       109,664.       0.       7,907.         (3) ROY HIRABAYASHI       1.00       x       36,296.       0.       640.         (4) MIGUEL SALINAS       1.00       x       x       0.       0.       640.         (5) JULIA CASTO       1.00       x       x       0.       0.       0.         VICE CHAIR       x       x       0.       0.       0.       0.         (5) JULIA CASTO       1.00       x       x       0.       0.       0.         VICE CHAIR       x       x       0.       0.       0.       0.       0.         (6) ALEXANDRA URBANOWSKI       1.00       x       x       0.       0.       0.       0.         SECRETARY       X       X       0.	(1) JESSICA PAZ-CEDILLOS	40.00				-					
ASSOCIATE DIRECTOR         X         109,664.         0.         7,907.           (3) ROY HIRABAYASHI         1.00         X         36,296.         0.         640.           DIRECTOR         X         X         0.         0.         640.           BOARD CHAIR         X         X         0.         0.         0.           BOARD CHAIR         X         X         0.         0.         0.           (5) JULIA CASTO         1.00         X         X         0.         0.         0.           (6) ALEXANDRA URBANONSKI         1.00         X         X         0.         0.         0.           (7) STEPHEN MCCRAY         1.00         X         X         0.         0.         0.           SECRETARY         X         X         0.         0.         0.         0.         0.           OIRECTOR         X         X         0.         0.         0.         0.         0.         0.         0.           IPRESTOR MARTINEZ         1.00         X         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0.         0. <td>EXECUTIVE DIRECTOR</td> <td></td> <td>х</td> <td></td> <td>х</td> <td></td> <td></td> <td></td> <td>110,000.</td> <td>0.</td> <td>8,262.</td>	EXECUTIVE DIRECTOR		х		х				110,000.	0.	8,262.
(3) ROY HIRABAYASHI       1.00       x       36,296.       0.       640.         (4) MIGUEL SALINAS       1.00       x       x       0.       0.       640.         (4) MIGUEL SALINAS       1.00       x       x       0.       0.       0.         (5) JULIA CASTO       1.00       x       x       0.       0.       0.         (6) ALEXANDRA URBANOWSKI       1.00       x       x       0.       0.       0.         (7) STEPHEN MCCRAY       1.00       x       x       0.       0.       0.         (8) SUSAN ACEVEDO       1.00       x       0.       0.       0.       0.         DIRECTOR       x       0.       0.       0.       0.       0.       0.         (9) FETER JENSEN       1.00       x       0.       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.       0.         (10) ERRESTO MATINEZ       1.00       X       0.       0.       0.       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.	(2) VANESSA SHIEH	40.00									
DIRECTOR         X         36,296.         0.         640.           (4) MIGUEL SALINAS         1.00         X         X         0.         0.         0.           BOARD CHAIR         X         X         0.         0.         0.         0.           G(5) JULIC CASTO         1.00         X         X         0.         0.         0.           VICE CHAIR         X         X         0.         0.         0.         0.           (6) ALEXANDRA URBANOWSKI         1.00         X         X         0.         0.         0.           (7) STEPHEN MCCRAY         1.00         X         X         0.         0.         0.           (8) SUSAN ACEVEDO         1.00         X         X         0.         0.         0.           (9) PETER JENSEN         1.00         X         0.         0.         0.         0.           (10) ERNESTO MARTINEZ         1.00         X         0.         0.         0.         0.           (11) ANGELINA RAMOS         1.00         X         0.         0.         0.         0.           (12) BRENDAN RAMSON         1.00         X         0.         0.         0.         0. <td>ASSOCIATE DIRECTOR</td> <td></td> <td></td> <td></td> <td>х</td> <td></td> <td></td> <td></td> <td>109,664.</td> <td>0.</td> <td>7,907.</td>	ASSOCIATE DIRECTOR				х				109,664.	0.	7,907.
(4) MIGUEL SALINAS       1.00       x       x       x       0.       0.       0.         BOARD CHAIR       x       x       x       0.       0.       0.       0.         (5) JULIA CASTO       1.00       x       x       x       0.       0.       0.         VICE CHAIR       x       x       x       0.       0.       0.       0.         (6) ALEXANDRA URBANOWSKI       1.00       x       x       x       0.       0.       0.         (7) STEPHEN MCCRAY       1.00       x       x       0.       0.       0.       0.         (8) SUSAN ACEVEDO       1.00       x       x       0.       0.       0.       0.         DIRECTOR       1.00       x       0.       0.       0.       0.       0.         (10) ERNESTO MARTINEZ       1.00       x       0.       0.       0.       0.       0.       0.         DIRECTOR       x       0.       0.       0.       0.       0.       0.       0.       0.         (11) ANGELINA RAMOS       1.00       x       0.       0.       0.       0.       0.       0.       0.       0.	(3) ROY HIRABAYASHI	1.00									
BOARD CHAIR         x <th< td=""><td>DIRECTOR</td><td></td><td>х</td><td></td><td></td><td></td><td></td><td></td><td>36,296.</td><td>Ο.</td><td>640.</td></th<>	DIRECTOR		х						36,296.	Ο.	640.
(5)       JULIA CASTO       1.00       x       x       x       0.       0.       0.         VICE CHAIR       x       x       x       x       0.       0.       0.       0.         (6)       ALEXANDRA URBANOWSKI       1.00       x       x       0.       0.       0.       0.         (7)       STEPHEN MCCRAY       1.00       x       x       0.       0.       0.         (8)       SUSAN ACEVEDO       1.00       x       x       0.       0.       0.         DIRECTOR       x       x       0.       0.       0.       0.       0.         (9)       PETER JENSEN       1.00       x       0.       0.       0.       0.         DIRECTOR       x       0.       0.       0.       0.       0.       0.       0.         (10)       ENESTO MARTINEZ       1.00       x       0.       0.       0.       0.       0.       0.         DIRECTOR       x       0.       0.       0.       0.       0.       0.       0.       0.       0.         (11) ANGELINA RAMOS       1.00       X       0.       0.       0. <t< td=""><td>(4) MIGUEL SALINAS</td><td>1.00</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></t<>	(4) MIGUEL SALINAS	1.00									
VICE CHAIR         X         X         X         X         0.         0.         0.           (6) ALEXANDRA URBANOWSKI         1.00         X         X         X         0.         0.         0.           TREASURER         X         X         X         0.         0.         0.         0.           (7) STEPHEN MCCRAY         1.00         X         X         0.         0.         0.           SECRETARY         X         X         0.         0.         0.         0.           (8) SUSAN ACEVEDO         1.00         X         0.         0.         0.         0.           DIRECTOR         X         X         0.         0.         0.         0.         0.           (10) ERNESTO MARTINEZ         1.00         X         0.         0.         0.         0.           DIRECTOR         X         0.         0.         0.         0.         0.         0.           (11) ANGELINA RAMOS         1.00         X         0.         0.         0.         0.           DIRECTOR         X         0.         0.         0.         0.         0.         0.           (11) ANGELINA RAMOS <td< td=""><td>BOARD CHAIR</td><td></td><td>х</td><td></td><td>х</td><td></td><td></td><td></td><td>0.</td><td>0.</td><td>0.</td></td<>	BOARD CHAIR		х		х				0.	0.	0.
(6) ALEXANDRA URBANOWSKI       1.00       x       x       x       0.       0.       0.         TREASURER       x       x       x       x       x       0.       0.       0.         (7) STEPHEN MCCRAY       1.00       x       x       x       0.       0.       0.         SECRETARY       x       x       x       0.       0.       0.       0.         (8) SUSAN ACEVEDO       1.00       x       x       0.       0.       0.       0.         DIRECTOR       x       0.       0.       0.       0.       0.       0.       0.         DIRECTOR (LEFT 12/20)       x       0.       0.       0.       0.       0.       0.         DIRECTOR MARTINEZ       1.00       x       0.       0.       0.       0.       0.         DIRECTOR       x       0.       0.       0.       0.       0.       0.       0.       0.       0.         DIRECTOR       x       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.       0.	(5) JULIA CASTO	1.00									
TREASURER         X         X         X         X         0.	VICE CHAIR		Х		Х				٥.	٥.	0.
(7) STEPHEN MCCRAY       1.00       X       X       X       0.       0.       0.         SECRETARY       X       X       X       0.       0.       0.       0.         (8) SUSAN ACEVEDO       1.00       X       X       0.       0.       0.       0.         DIRECTOR       X       X       0.       0.       0.       0.       0.         (9) PETER JENSEN       1.00       X       0.       0.       0.       0.       0.         (10) ERNESTO MARTINEZ       1.00       X       0.       0.       0.       0.       0.         DIRECTOR       X       0. <td>(6) ALEXANDRA URBANOWSKI</td> <td>1.00</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	(6) ALEXANDRA URBANOWSKI	1.00									
SECRETARY         x         x         x         x         x         0.         0.         0.           (8) SUSAN ACEVEDO         1.00         x         0. <td>TREASURER</td> <td></td> <td>х</td> <td></td> <td>х</td> <td></td> <td></td> <td></td> <td>0.</td> <td>0.</td> <td>0.</td>	TREASURER		х		х				0.	0.	0.
(8)         SUSAN ACEVEDO         1.00         X         0.	(7) STEPHEN MCCRAY	1.00									
DIRECTOR         X         0         0. <th< td=""><td>SECRETARY</td><td></td><td>Х</td><td></td><td>Х</td><td></td><td></td><td></td><td>٥.</td><td>٥.</td><td>0.</td></th<>	SECRETARY		Х		Х				٥.	٥.	0.
(9) PETER JENSEN       1.00       x       0.       0.       0.         DIRECTOR (LEFT 12/20)       x       0.       0.       0.       0.         (10) ERNESTO MARTINEZ       1.00       x       0.       0.       0.         DIRECTOR       x       0.       0.       0.       0.       0.         (11) ANGELINA RAMOS       1.00       x       0.       0.       0.       0.         DIRECTOR       x       0.       0.       0.       0.       0.       0.         (12) BRENDAN RAWSON       1.00       x       0.       0.       0.       0.       0.         DIRECTOR (START 12/20)       x       1.00       x       0.       0.       0.       0.         DIRECTOR (START 05/21)       x       0.       0.       0.       0.       0.       0.         DIRECTOR       1.00       x       0.       0.       0.       0.       0.       0.         (15) ITZA SANCHEZ       1.00       X       0.       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.         (15) ITZA SANCHEZ </td <td>(8) SUSAN ACEVEDO</td> <td>1.00</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	(8) SUSAN ACEVEDO	1.00									
DIRECTOR (LEFT 12/20)       x       0.       0.       0.       0.         (10) ERNESTO MARTINEZ       1.00       x       0.       0.       0.       0.         DIRECTOR       x       0.       0.       0.       0.       0.       0.         (11) ANGELINA RAMOS       1.00       x       0.       0.       0.       0.       0.         DIRECTOR       x       0.       0.       0.       0.       0.       0.       0.         DIRECTOR (START 12/20)       x       0. <td< td=""><td>DIRECTOR</td><td></td><td>х</td><td></td><td></td><td></td><td></td><td></td><td>٥.</td><td>0.</td><td>0.</td></td<>	DIRECTOR		х						٥.	0.	0.
(10) ERNESTO MARTINEZ       1.00       x       0       0.       0.       0.         DIRECTOR       x       1.00       x       0.       0.       0.       0.         (11) ANGELINA RAMOS       1.00       x       0.       0.       0.       0.         DIRECTOR       x       0.       0.       0.       0.       0.       0.         DIRECTOR       x       0       0.       0.       0.       0.       0.         (12) BRENDAN RAWSON       1.00       x       0.       0.       0.       0.       0.         DIRECTOR (START 12/20)       x       0       0.       0.       0.       0.       0.         (13) ANGEL RIOS, JR.       1.00       x       0       0.       0.       0.       0.         DIRECTOR (START 05/21)       x       0       0.       0.       0.       0.       0.         DIRECTOR       x       0       0.       0.       0.       0.       0.       0.         (14) CARLOS SANCHEZ       1.00       x       0.       0.       0.       0.       0.       0.       0.         DIRECTOR       x       0. <td< td=""><td>(9) PETER JENSEN</td><td>1.00</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></td<>	(9) PETER JENSEN	1.00									
DIRECTOR         X         0         0. <th< td=""><td>DIRECTOR (LEFT 12/20)</td><td></td><td>Х</td><td></td><td></td><td></td><td></td><td></td><td>0.</td><td>0.</td><td>0.</td></th<>	DIRECTOR (LEFT 12/20)		Х						0.	0.	0.
(11) ANGELINA RAMOS       1.00       x       0.       0.       0.       0.         DIRECTOR       x       0.       0.       0.       0.       0.       0.         (12) BRENDAN RAWSON       1.00       x       0.       0.       0.       0.       0.         DIRECTOR (START 12/20)       x       0.       0.       0.       0.       0.       0.         (13) ANGEL RIOS, JR.       1.00       x       0.       0.       0.       0.       0.         DIRECTOR (START 05/21)       x       0.       0.       0.       0.       0.       0.         (14) CARLOS SANCHEZ       1.00       x       0.       0.       0.       0.       0.         DIRECTOR       x       0.       0.       0.       0.       0.       0.         (15) ITZA SANCHEZ       1.00       x       0.       0.       0.       0.       0.         DIRECTOR       x       0.       0.       0.       0.       0.       0.       0.         (16) LINDA SNOOK       1.00       1.00       1.00       1.00       1.00       1.00       1.00       1.00       1.00       1.00       1.00	(10) ERNESTO MARTINEZ	1.00									
DIRECTOR         X         0         0. <th< td=""><td>DIRECTOR</td><td></td><td>Х</td><td></td><td></td><td></td><td></td><td></td><td>0.</td><td>0.</td><td>0.</td></th<>	DIRECTOR		Х						0.	0.	0.
(12) BRENDAN RAWSON       1.00       x       0. <td< td=""><td>(11) ANGELINA RAMOS</td><td>1.00</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></td<>	(11) ANGELINA RAMOS	1.00									
DIRECTOR (START 12/20)       X       0       0.       0.       0.       0.         (13) ANGEL RIOS, JR.       1.00       X       0.       0.       0.       0.         DIRECTOR (START 05/21)       X       0.       0.       0.       0.       0.         (14) CARLOS SANCHEZ       1.00       X       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.         (15) ITZA SANCHEZ       1.00       X       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.         (15) ITZA SANCHEZ       1.00       X       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.         (16) LINDA SNOOK       1.00       0       0       0       0	DIRECTOR		Х						0.	0.	0.
(13) ANGEL RIOS, JR.       1.00       X       0. <t< td=""><td></td><td>1.00</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></t<>		1.00									
DIRECTOR (START 05/21)       X       0       0. <th< td=""><td></td><td></td><td>Х</td><td></td><td></td><td></td><td></td><td></td><td>0.</td><td>0.</td><td>0.</td></th<>			Х						0.	0.	0.
(14) CARLOS SANCHEZ     1.00     x     0.     0.     0.       DIRECTOR     X     0.     0.     0.     0.       (15) ITZA SANCHEZ     1.00     X     0.     0.     0.       DIRECTOR     X     0.     0.     0.     0.       (16) LINDA SNOOK     1.00     0     0     0.	(13) ANGEL RIOS, JR.	1.00									
DIRECTOR         X         0. <t< td=""><td>DIRECTOR (START 05/21)</td><td></td><td>Х</td><td></td><td></td><td></td><td></td><td></td><td>0.</td><td>0.</td><td>0.</td></t<>	DIRECTOR (START 05/21)		Х						0.	0.	0.
(15) ITZA SANCHEZ         1.00         x         0.		1.00									
DIRECTOR         x         0. </td <td>DIRECTOR</td> <td></td> <td>Х</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>٥.</td> <td>0.</td> <td>0.</td>	DIRECTOR		Х						٥.	0.	0.
(16) LINDA SNOOK 1.00	(15) ITZA SANCHEZ	1.00									
	DIRECTOR		Х						0.	0.	0.
DIRECTOR         X         0. </td <td>(16) LINDA SNOOK</td> <td>1.00</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	(16) LINDA SNOOK	1.00									
	DIRECTOR		Х						0.	0.	0.

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032007 12-23-20

Form 990 (2020)

## 13260421 701245 0504664.T

	990 (2020) SCHOOL OF ART	TS AND CULT	URE	AT	MH	Р				80-07	1488	2	Р	age <b>8</b>
Part	VII Section A. Officers, Directors, Trus	tees, Key Emp	oloy	ees,	and	d Hig	ghes	st C	ompensated Employee	s (continued)				
	(A)	(B)			(0	C)			(D)	(E)			(F)	
	Name and title	Average	(do		Pos				Reportable	Reportable		E	stimate	ed
		hours per	box	, unle	ss pei	rson i	than d is both	n an	compensation	compensatio	n I	ar	nount	of
		week		cer ar I	nd a d I	irecto	or/trus T	tee)	from	from related			other	
		(list any	ector.						the	organization			pensa	
		hours for related	or di	ee			ated		organization	(W-2/1099-MIS	5C)		om th	
		organizations	ustee	trust		96	upens		(W-2/1099-MISC)				anizat d relat	
		below	lual tr	tional		voldr	st con	-					anizati	
		line)	Individual trustee or director	In stit utio nal tru stee	Officer	Key employee	Highest compensated employee	Former				org	Linzati	0110
				-		×	1	-						
			1											
			1											
			ł											
			ł											
			1											
			ł											
			ł											
1h	Subtotal	1			1		I		255,960.		0.		16	809.
	Subtotal Total from continuation sheets to Part VI								0.		0.		,	0.
	Total (add lines 1b and 1c)								255,960.		0.		16	809.
	Total number of individuals (including but n								,	000 of reportable			/	
	compensation from the organization		030	11310	ua	000	<i>,</i> , , , , , , , , , , , , , , , , , ,	010		ooo of reportable	7			2
													Yes	No
3	Did the organization list any <b>former</b> officer,	director trust	ا مم		mnl	ove	0 Or	hio	nhest compensated emp	lovee on	1			
-	<b>.</b>			•	•	-		Ŭ				3		x
	line 1a? If "Yes," complete Schedule J for se For any individual listed on line 1a, is the su											5		
	and related organizations greater than \$150											4		x
	Did any person listed on line 1a receive or a			•								-		
	rendered to the organization? If "Yes," com											5		x
	ion B. Independent Contractors		- 0 /	01 50		Jers	011 .					Ŭ		<u> </u>
	Complete this table for your five highest co	mpensated inc	lene	nde	nt co	ontra	acto	rs th	hat received more than \$	100 000 of comr	oensat	tion fr	- m	
	the organization. Report compensation for t	•	•							•	Jonioai		5111	
	(A)			- Turi	ig w		<u> </u>		(B)			((	C)	
	Name and business	address							Description of s	ervices	С		nsatio	n
GIANT	CREATIVE SERVICES, INC													
	5 16TH STREET, SAN JOSE, CA 95112	2							EVENTS MANAGEMENT				159.	016.
	CAL OPERATIONS PROTECTIVE SERVIO												,	
	S CAPITOL AVENUE, SAN JOSE, CA								SECURITY SERVICES				117.	763.
	TURA MARKETING												,	
	S FIRST ST., SAN JOSE, CA 95113								MARKETING SERVICES				107.	801.
													/	
2	Total number of independent contractors (ir	ncludina but n	ot lin	nited	d to	thos	se lis	ted	above) who received mo	ore than				
	\$100,000 of compensation from the organiz	•					3		,e .esonoù int					
	. ,	-									_			

032008 12-23-20

		Check if Schedule O o	onto	ins a reen	onse o	or note to any lin	e in this Part \/III			Γ
			Jonta				(A) Total revenue	(B) Related or exempt function revenue	<b>(C)</b> Unrelated business revenue	Revenue exclu
ŋ	1 a	Federated campaigns		1a						
		Membership dues								
	с	Fundraising events		1c		81,673.				
		Related organizations								
		Government grants (contr				996,759.				
ō	f	All other contributions, gifts,	grant	s, and						
		similar amounts not included	abov	e 1f		3,182,437.				
	g	Noncash contributions included in	lines 1	a-1f <b>1g</b>	\$					
a	h	Total. Add lines 1a-1f				►	4,260,869.			
						Business Code				
	2 a	RENTAL INCOME			1	531390	585,001.	585,001.		
	b									
n	с									
aniiaau	d									
Ċ	е									
	f	All other program service	rever	nue						
		Total. Add lines 2a-2f					585,001.			
	3	Investment income (includ								
		other similar amounts)	-				1,028.			1,0
	4	Income from investment o								
	5	Royalties	. <u></u>							
				(i) Rea		(ii) Personal				
	6 a	Gross rents	6a							
		Less: rental expenses	6b							
	с	Rental income or (loss)	6c							
	d	Net rental income or (loss)	)			►				
		Gross amount from sales of		(i) Securi	ities	(ii) Other				
		assets other than inventory	7a							
	b	Less: cost or other basis								
		and sales expenses	7b							
	с	Gain or (loss)	7c							
		Net gain or (loss)				►				
		Gross income from fundraisir								
		including \$	81,	673. of						
		contributions reported on								
		Part IV, line 18			8a	0.				
	b	Less: direct expenses			8b	6,198.				
	с	Net income or (loss) from	fundı	aising eve	nts	►	-6,198.			-6,1
	9 a	Gross income from gamin	g act	ivities. See	э					
		Part IV, line 19			9a					
	b	Less: direct expenses			9b					
		Net income or (loss) from			es	►				
1		Gross sales of inventory, I								
		and allowances			10a					
	b	Less: cost of goods sold			10b					
		Net income or (loss) from			ory					
						Business Code				
1	1 a	MISCELLANEOUS INCOM	E			900099	20,362.	20,362.		
in u	b	FISCAL SPONSORSHIP				900099	300.	300.		
-	с									
Ċ	d	All other revenue								
		Total. Add lines 11a-11d					20,662.			
							4,861,362.	1		-5,1

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Secti	on 501(c)(3) and 501(c)(4) organizations must compl	lete all columns. All othe	er organizations must con	nplete column (A).	
	Check if Schedule O contains a respons	(		(	X
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	<b>(A)</b> Total expenses	<b>(B)</b> Program service expenses	<b>(C)</b> Management and general expenses	<b>(D)</b> 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	302,121.	209,071.	46,618.	46,432.
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	757,048.	701,591.	31,428.	24,029.
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	74,948.	72,393.		2,555.
10	Payroll taxes	87,454.	75,666.	6,600.	5,188.
11	Fees for services (nonemployees):				
а	Management				
b	Legal	825.		825.	
с	Accounting	38,325.		38,325.	
	Lobbying				
е	Professional fundraising services. See Part IV, line 17	52,516.			52,516.
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch 0.)	1,395,660.	1,279,926.	96,792.	18,942.
12	Advertising and promotion				
13	Office expenses	239,739.	192,897.	46,047.	795.
14	Information technology				
15	Royalties				
16	Occupancy	84,616.	77,560.	7,056.	
17	Travel	6,165.	1,060.	4,984.	121.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	49,212.	47,574.	1,471.	167.
23	Insurance	19,746.		19,746.	
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A)				
	amount, list line 24e expenses on Schedule 0.)				
а	PROGRAM EXPENSES	171,707.	171,007.	700.	
b	EVENT RENTAL EXPENSE	75,059.	75,059.		
с	SPONSORSHIP EXPENSE	43,674.	43,674.		
d	MISCELLANEOUS EXPENSES	3,212.		3,212.	
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	3,402,027.	2,947,478.	303,804.	150,745.
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 Figure if following SOP 98-2 (ASC 958-720)				

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Form **990** (2020)

13260421 701245 0504664.T

		Check if Schedule O contains a response or note			<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			4,082.	1	4,023.
	2	Savings and temporary cash investments			1,761,370.	2	2,859,783
	3	Pledges and grants receivable, net			408,610.	3	490,525
	4	Accounts receivable, net			16,609.	4	250,805
	5	Loans and other receivables from any current or				_	·
	•	trustee, key employee, creator or founder, subst					
		controlled entity or family member of any of thes				5	
	6	Loans and other receivables from other disqualif					
	Ŭ	under section 4958(f)(1)), and persons described				6	
	7	Notes and loans receivable, net				7	
Assels	8					8	
	9	Inventories for sale or use Prepaid expenses and deferred charges			13,904.	9	12,586
			 I I			9	
	IUa	Land, buildings, and equipment: cost or other	100	260,078.			
	<b>L</b>	basis. Complete Part VI of Schedule D		167,131.	128,546.	10-	92,947
		Less: accumulated depreciation		· · · · · ·	120,540.	10c	52,547
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, line 1				12	
	13	Investments - program-related. See Part IV, line 1				13	
	14	Intangible assets	E E77E 202	14	F 010 070		
	15	Other assets. See Part IV, line 11	5,575,283.	15	5,010,879		
_	16	Total assets. Add lines 1 through 15 (must equa	7,908,404.	16	8,721,548		
	17	Accounts payable and accrued expenses	209,766.	17	241,828		
	18	Grants payable	20 505	18	F0 808		
	19	Deferred revenue	38,527.	19	50,797		
	20	Tax-exempt bond liabilities			20		
	21	Escrow or custodial account liability. Complete F				21	
2	22	Loans and other payables to any current or form					
È		trustee, key employee, creator or founder, subst					
		controlled entity or family member of any of thes	e persons	····· -		22	
┛│	23	Secured mortgages and notes payable to unrela	ted third p	arties		23	
	24	Unsecured notes and loans payable to unrelated	l third part	es		24	
	25	Other liabilities (including federal income tax, pay	ables to r	elated third			
		parties, and other liabilities not included on lines	17-24). Co	mplete Part X			
		of Schedule D			126,118.	25	0
	26	Total liabilities. Add lines 17 through 25			374,411.	26	292,625
		Organizations that follow FASB ASC 958, che	ck here 🕽	► X			
Net Assets of Fund Balances		and complete lines 27, 28, 32, and 33.					
aŭ	27	Net assets without donor restrictions			574,569.	27	1,648,999
09	28	Net assets with donor restrictions			6,959,424.	28	6,779,924
		Organizations that do not follow FASB ASC 95	58, check	here 🕨 🗌			
2		and complete lines 29 through 33.					
5	29	Capital stock or trust principal, or current funds				29	
	30	Paid-in or capital surplus, or land, building, or eq				30	
Ê	31	Retained earnings, endowment, accumulated inc				31	
	32	Total net assets or fund balances			7,533,993.	32	8,428,923
- 1	33	Total liabilities and net assets/fund balances			7,908,404.	33	8,721,548

SCHOOL OF ARTS AND CULTURE AT MHP

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

80 - 0714882

Page **11** 

Form 990 (2020) Part X Balance Sheet

Form	990 (2020) SCHOOL OF ARTS AND CULTURE AT MHP	80-071488	2	Pa	<sub>ge</sub> 12
	rt XI Reconciliation of Net Assets				0
	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	4,	861,	362.
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,	402,	027.
3	Revenue less expenses. Subtract line 2 from line 1	3	1,	459,	335.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	7,	533,	993.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6	-	564,	405.
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	8,	428,	923.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	D.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the				
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sing	gle Audit			
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	000	

Form **990** (2020)

SCHEDULE A	SC	HE	DL	JLE	Α
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(Form 990 or 990-EZ)

## **Public Charity Status and Public Support**

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

4947(a)(1) nonexempt charitable trust.

OMB No. 1545-0047
2020
Open to Public

		f the Treasury nue Service			Attach to Form 990 or F v/Form990 for instruction			oformation		Open to Public Inspection
Nan	ne of t	the organizati		do to www.n3.go					Employer	identification numbe
		ine er gumzati		OF ARTS AND CU	ILTURE AT MHP				Linpioyoi	80-0714882
Pa	rt I	Reason			(All organizations must c	omplete th	nis part.) S	ee instruction	3.	
The	organ				For lines 1 through 12, c				-	
1					on of churches described			()(A)(i).		
2	$\square$			-	Attach Schedule E (Forn			· //· ·//·		
3	$\square$				anization described in se			ii).		
4	$\square$				njunction with a hospital				(iii). Enter	the hospital's name,
		city, and stat	-		,				(/-	,
5	$\square$	•		or the benefit of a co	llege or university owned	l or operat	ed by a go	vernmental ur	nit describe	ed in
		-	-	Complete Part II.)	<b>°</b>		, ,			
6					nental unit described in	section 17	70(b)(1)(A)	(v).		
7	X		-	-	ntial part of its support fi				e general p	oublic described in
				omplete Part II.)		Ũ			0 1	
8					(1)(A)(vi). (Complete Par	t II.)				
9					in section 170(b)(1)(A)(		ed in conju	inction with a	land-grant	college
		or university	or a non-land-g	grant college of agric	ulture (see instructions).	Enter the	name, city	, and state of	the college	or
		university:					-		-	
10		An organizati	on that norma	Ily receives (1) more	than 33 1/3% of its supp	ort from c	ontributior	ns, membershi	p fees, and	d gross receipts from
		activities rela	ted to its exen	npt functions, subjec	t to certain exceptions; a	and (2) no	more than	33 1/3% of its	support fi	rom gross investment
		income and ι	Inrelated busir	ness taxable income	(less section 511 tax) fro	m busines	sses acqui	red by the org	anization a	fter June 30, 1975.
		See section	<b>509(a)(2).</b> (Co	mplete Part III.)						
11		An organizati	on organized a	and operated exclusi	ively to test for public sa	fety. See	section 50	09(a)(4).		
12		An organizati	on organized a	and operated exclusi	ively for the benefit of, to	perform t	he functio	ns of, or to car	ry out the	purposes of one or
		more publicly	supported or	ganizations describe	ed in <b>section 509(a)(1)</b> o	r section	509(a)(2).	See section 5	6 <b>09(a)(3).</b> (	Check the box in
		_lines 12a thro	ough 12d that	describes the type o	f supporting organizatior	n and com	plete lines	12e, 12f, and	12g.	
а		<b>Type I.</b> A s	upporting orga	anization operated, s	upervised, or controlled	by its supp	ported org	anization(s), ty	pically by	giving
		the suppor	ted organizatio	on(s) the power to re	gularly appoint or elect a	majority c	of the direc	tors or trustee	es of the su	ipporting
		¬ -		complete Part IV, Se						
b				-	l or controlled in connect			-		-
			0		anization vested in the sa	ame perso	ns that co	ntrol or manag	e the supp	ported
		¬ -		t complete Part IV,						
С			-		g organization operated				y integrate	d with,
	_		-		). You must complete I					
d			-	• •	porting organization oper				•	
					zation generally must sat				an attentiv	eness
		-			mplete Part IV, Sections					
е			•		written determination fro nally integrated supporti			Type I, Type I	і, туре ш	
f	Ent	er the number								
י מ			••	n about the supporte	ad organization(s)					
9		i) Name of supp		(ii) EIN	(iii) Type of organization	(iv) Is the orga	anization listed ing document?	(v) Amount of	monetary	(vi) Amount of other
		organizatior	ı		(described on lines 1-10 above (see instructions))	Yes	No	support (see in	structions)	support (see instructions
Tota	al									

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 032021 01-25-21 Schedule A (Form 990 or 990-EZ) 2020 13

## Schedule A (Form 990 or 990-EZ) 2020 SCHOOL OF ARTS AND CULTURE AT MHP

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

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2016	<b>(b)</b> 2017	(c) 2018	<b>(d)</b> 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	1,313,679.	1,858,761.	1,566,879.	2,836,191.	4,260,869.	11,836,379.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge	164,055.	152,566.	140,824.	128,821.	116,550.	702,816.
4	Total. Add lines 1 through 3	1,477,734.	2,011,327.	1,707,703.	2,965,012.	4,377,419.	12,539,195.
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)						1,482,883.
6	Public support. Subtract line 5 from line 4.						11,056,312.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2016	<b>(b)</b> 2017	<b>(c)</b> 2018	<b>(d)</b> 2019	(e) 2020	(f) Total
7	Amounts from line 4	1,477,734.	2,011,327.	1,707,703.	2,965,012.	4,377,419.	12,539,195.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	411.	397.	401.	489.	1,028.	2,726.
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.)	26,315.	16,883.	15,469.	8,832.	20,662.	88,161.
11	Total support. Add lines 7 through 10						12,630,082.
12	Gross receipts from related activities,	etc. (see instructio	ons)			12	3,481,712.
13	First 5 years. If the Form 990 is for th	e organization's fir	rst, second, third, f	ourth, or fifth tax y	ear as a section 5	01(c)(3)	
	organization, check this box and stop	here					
Sec	ction C. Computation of Publi	c Support Per	centage				
14	Public support percentage for 2020 (li	ine 6, column (f), d	ivided by line 11, c	olumn (f))		14	87.54 %
15	Public support percentage from 2019	Schedule A, Part	II, line 14			15	92.53 %
<b>1</b> 6a	33 1/3% support test - 2020. If the c	organization did no	t check the box or	n line 13, and line 1	4 is 33 1/3% or m	ore, check this box	and
	stop here. The organization qualifies	as a publicly suppo	orted organization				<b>X</b>
b	33 1/3% support test - 2019. If the c	organization did no	t check a box on li	ne 13 or 16a, and	line 15 is 33 1/3%	or more, check thi	s box
	and stop here. The organization qual	ifies as a publicly s	supported organiza	tion			▶∟
17a	10% -facts-and-circumstances test	- 2020. If the org	anization did not c	heck a box on line	13, 16a, or 16b, a	nd line 14 is 10% o	or more,
	and if the organization meets the facts	s-and-circumstance	es test, check this	box and stop her	e. Explain in Part	VI how the organiz	ation
	meets the facts-and-circumstances te	st. The organizatio	n qualifies as a pu	blicly supported or	ganization		
b	10% -facts-and-circumstances test	- 2019. If the org	anization did not c	heck a box on line	13, 16a, 16b, or 1	7a, and line 15 is 1	10% or
	more, and if the organization meets th	ne facts-and-circum	nstances test, cheo	k this box and <b>st</b>	<b>op here.</b> Explain ii	n Part VI how the	
	organization meets the facts-and-circu	umstances test. Th	e organization qua	lifies as a publicly	supported organiz	ation	
18	Private foundation. If the organizatio	n did not check a l	box on line 13, 16a	a, 16b, 17a, or 17b	, check this box a	nd see instructions	
					Sche	dule A (Form 990	or 990-EZ) 2020

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## Schedule A (Form 990 or 990-EZ) 2020 SCHOOL OF ARTS AND CULTURE AT MHP

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

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2016	<b>(b)</b> 2017	(c) 2018	<b>(d)</b> 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus- iness under section 513						
4	Tax revenues levied for the organ-						
•	ization's benefit and either paid to						
_	or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to						
	the organization without charge						
	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2016	<b>(b)</b> 2017	(c) 2018	<b>(d)</b> 2019	(e) 2020	(f) Total
9	Amounts from line 6						
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b						
	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
	First 5 years. If the Form 990 is for the	ne organization's fir	rst. second. third.	fourth. or fifth tax	vear as a section 5	01(c)(3) organizatio	on.
		0					, 
Sec	ction C. Computation of Publi						
15	Public support percentage for 2020 (I	ine 8, column (f), d	ivided by line 13,	column (f))		15	%
16	Public support percentage from 2019	Schedule A, Part	III, line 15			16	%
Sec	ction D. Computation of Inves	stment Income	e Percentage				
	Investment income percentage for 20					17	%
	Investment income percentage from					18	%
19a	<b>33 1/3% support tests - 2020.</b> If the	organization did n	ot check the box	on line 14, and lin	e 15 is more than 3	3 1/3%, and line 1	7 is not
	more than 33 1/3%, check this box ar	nd stop here. The	organization qual	ifies as a publicly s	supported organiza	tion	▶∟
b	<b>33 1/3% support tests - 2019.</b> If the	organization did n	ot check a box or	n line 14 or line 19	a, and line 16 is mo	ore than 33 1/3%, a	ind
	line 18 is not more than 33 1/3%, che	ck this box and <b>st</b>	<b>op here.</b> The orga	anization qualifies	as a publicly suppo	orted organization	
20	Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check t	his box and see ins	tructions	
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			15				

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1

2

3a

3b

3c

4a

4b

4c

5a

<u>5b</u> 5<u>c</u>

6

7

8

9a

9b

9c

10a

10b

Yes No

## Part IV Supporting Organizations

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

## Section A. All Supporting Organizations

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

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		Yes	No
1 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 in lines 11b and			
11c below, the governing body of a supported organization?	11a		
<b>b</b> A family member of a person described in line 11a above?	11b		
c A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
detail in Part VI.	11c		
ection B. Type I Supporting Organizations			
		Yes	Nc

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

#### supervised, or controlled the supporting organization. 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)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s)	1		

## 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			1
	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			1
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			1
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in 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			1
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			1
	supported organizations played in this regard.	3		

## Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method	that the organization used to	satisfy the Integral Part 1	Test during the year	(see instructions).
•	CHECK THE DOX HEAT TO THE HIELITOU		salisiy line initegral i art i	csi uunny inc ycar	1000 1100 0000

a The organization satisfied the Activities Test. Complete line 2 below.

b		The organization	is the parent of	of each of its	supported of	organizations.	Complete line 3 be	elow.
---	--	------------------	------------------	----------------	--------------	----------------	--------------------	-------

с		The organization	supported a	a governmental e	entity. De	escribe in Pa	rt VI how	you supported a	governmental entity	v (see instruction <u>s).</u>	
---	--	------------------	-------------	------------------	------------	---------------	-----------	-----------------	---------------------	-------------------------------	--

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- 2 Activities Test. Answer lines 2a and 2b below.
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in **Part VI identify those supported organizations and explain** how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- **3** Parent of Supported Organizations. **Answer lines 3a and 3b below.**

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If* "Yes" or "No" provide details in **Part VI.** 

**b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If* "Yes," *describe in* **Part VI** *the role played by the organization in this regard.* 

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2a

2b

3a

3b

Yes No

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Schedule A (Form 990 or 990-EZ) 2020 SCHOOL OF ARTS AND CULTURE AT MHI			80-0714882 Page
Part V         Type III Non-Functionally Integrated 509(a)(3) Supportion           1         Check here if the organization satisfied the Integral Part Test as a qualify	<u> </u>		Part VI) See instructions
All other Type III non-functionally integrated supporting organizations mu		•	
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		
<ul> <li>8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)</li> </ul>	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 Check here if the current year is the organization's first as a non-function		Type III supporting org	anization (see

instructions).

Schedule A (Form 990 or 990-EZ) 2020

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Schedule A (Form 990 or 990-EZ) 2020 SCHOOL OF ARTS AND CULTURE AT MHP

Par	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	nizations (continu	ued)	
Secti	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exe		1		
2	Amounts paid to perform activity that directly furthers exemp				
	organizations, in excess of income from activity	2			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	3	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - prior	ovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	ne organization is responsive			
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2020 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount		-	10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2020	ıs	(iii) Distributable Amount for 2020
1	Distributable amount for 2020 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2020 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2020				
a	From 2015				
b	From 2016				
C	From 2017				
d	From 2018				
e	From 2019				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years			_	
h	Applied to 2020 distributable amount				
<u>    i</u>	Carryover from 2015 not applied (see instructions)				
<u>    i</u>	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2020 from Section D,				
	line 7: \$			-	
	Applied to underdistributions of prior years			_	
b	Applied to 2020 distributable amount				
C	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2020, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2020. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2021. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
	Excess from 2016				
	Excess from 2017				
	Excess from 2018				
	Excess from 2019				
е	Excess from 2020				

Schedule A (Form 990 or 990-EZ) 2020

032027 01-25-21

Schedule A	(Form 990 or 990-EZ) 2020 SCHOOL	OF ARTS AND CULTURE AT MHP	80-0714882 Page
Part VI	Supplemental Information. Part IV, Section A, lines 1, 2, 3b, 3c line 1; Part IV, Section D, lines 2 and Section D, lines 5, 6, and 8; and Pa	Provide the explanations required by Part II, line 10; Part II , 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Sectic d 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, li t V, Section E, lines 2, 5, and 6. Also complete this part for	, line 17a or 17b; Part III, line 12; on B, lines 1 and 2; Part IV, Section C, ine 1; Part V, Section B, line 1e; Part V,
	(See instructions.)		
032028 01-25-2	21		Schedule A (Form 990 or 990-EZ) 20
		20	

## **Schedule B**

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

Name of the organization

Organization type (check one):

#### \*\* PUBLIC DISCLOSURE COPY \*\*

## Schedule of Contributors

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

OMB No. 1545-0047

2020

Employer identification number

SCHOOL	OF	ARTS	AND	CULTURE	AT	MHP

80-0714882

Filers of:	Section:
Form 990 or 990-EZ	X 501(c)( <sup>3</sup> ) (enter number) organization
	4947(a)(1) nonexempt charitable trust <b>not</b> 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 or 990-EZ), 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  $\dots$   $\blacktriangleright$  \$

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), 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, 990-EZ, or 990-PF).

 $\label{eq:LHA} \ \ \mbox{For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.}$ 

#### Schedule B (Form 990, 990-EZ, or 990-PF) (2020)

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

SCHOOL OF ARTS AND CULTURE AT MHP

Employer identification number

80-0714882

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		\$130,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$140,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$374,648.	Person     X       Payroll        Noncash        (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$975,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$500,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$176,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2020)

023452 11-25-20

#### Schedule B (Form 990, 990-EZ, or 990-PF) (2020)

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

Employer identification number

SCHOOL OF ARTS AND CULTURE AT MHP

80-0714882

Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$100,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8		\$143,424.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9		\$125,000.	Person     X       Payroll     Image: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10		\$126,118.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2020)

023452 11-25-20

#### Schedule B (Form 990, 990-EZ, or 990-PF) (2020)

Name of organization

SCHOOL OF ARTS AND CULTURE AT MHP

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

artn	Noncash i Topenty (see instructions). Ose duplicate copies of Part in	li additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		_	

Employer identification number

80-0714882

2020.05093 SCHOOL OF ARTS AND CULTUR 05046641

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Page 4

lame of or	ganization		Employer identification numbe
CHOOL O	F ARTS AND CULTURE AT MHP		80-0714882
Part III	Exclusively religious, charitable, etc., contributor	(a) through (e) and the following line er , charitable, etc., contributions of \$1,000 or	ection 501(c)(7), (8), or (10) that total more than \$1,000 for the ye
a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Part I			
-		(e) Transfer of gi	
-	Transferee's name, address,	and ZIP + 4	Relationship of transferor to transferee
(a) No.			
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gi	H .
-	Transferee's name, address,	and ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-		(e) Transfer of gi	
_	Transferee's name, address,	and ZIP + 4	Relationship of transferor to transferee
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gi	
	Transferee's name, address,	and ZIP + 4	Relationship of transferor to transferee
3454 11-25-	-20		Schedule B (Form 990, 990-EZ, or 990-PF) (20

25

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SCHEDULE D       Supplemental Financial Statements         (Form 990)       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.         Department of the Treasury Internal Revenue Service       Attach to Form 990.         Go to www.irs.gov/Form990 for instructions and the latest information.						OMB No. 154	20 Public
Name	e of the organizati				Employ	er identification	number
		SCHOOL OF ARTS AND CULTURE A				80-0714882	
Par	t I Organiza	ations Maintaining Donor Advised	I Funds or Other Similar Funds	s or Ac	counts.	Complete if the	e
	organizatio	n answered "Yes" on Form 990, Part IV, line		1 .			
			(a) Donor advised funds	(	<b>b)</b> Funds a	and other accour	nts
1		nd of year					
2		f contributions to (during year)					
3	Aggregate value of	f grants from (during year)					
4	Aggregate value a	,					
5	÷	on inform all donors and donor advisors in w					
		on's property, subject to the organization's e				Ves	No
6	•	on inform all grantees, donors, and donor ac	• •				
		oses and not for the benefit of the donor or	donor advisor, or for any other purpose	e conferri	ng		
Dev	impermissible priv					Yes	No
Par		ation Easements. Complete if the org		, Part IV,	line 7.		
1		servation easements held by the organizatio	· · · · · · · · · · · · · · · · · · ·				
		n of land for public use (for example, recreat				ortant land area	
	=	f natural habitat	Preservation of	of a certi	fied histori	c structure	
	Preservation	n of open space					
2	•	through 2d if the organization held a qualifi	ed conservation contribution in the form	n of a cor			
	day of the tax year					d at the End of the	e Tax Year
а	Total number of co	onservation easements			2a		

b	Total acreage restricted by conservation easements	2b		
с	Number of conservation easements on a certified historic structure included in (a)	2c		
d	Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure			
	listed in the National Register	2d		
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organi	zation	during the tax	
	year ►			
4	Number of states where property subject to conservation easement is located			
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of			
	violations, and enforcement of the conservation easements it holds?		Yes	No
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation	n ease	ements during the year	
	▶			
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation east	semen	nts during the year	
	▶\$			
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)	(i)		
	and section 170(h)(4)(B)(ii)?		Yes	No
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expense statem			
	balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that	at desc	cribes the	
	organization's accounting for conservation easements.			
Par	t III Organizations Maintaining Collections of Art, Historical Treasures, or Other S	imila	ar Assets.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 8.			
1a	If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and bala	ance sl	heet works	
	of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherar	ice of	public	
	service, provide in Part XIII the text of the footnote to its financial statements that describes these items.			
b	If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance	sheet	t works of	
	art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance	of pu	Iblic service,	
	provide the following amounts relating to these items:			
	(i) Revenue included on Form 990, Part VIII, line 1		\$	
	(ii) Assets included in Form 990, Part X		\$	
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain, p	orovide	e	
	the following amounts required to be reported under FASB ASC 958 relating to these items:			
а	Revenue included on Form 990, Part VIII, line 1		\$	
b	Assets included in Form 990, Part X		\$	
LHA	For Paperwork Reduction Act Notice, see the Instructions for Form 990.		Schedule D (Form 990)	2020
032051	12-01-20			
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Sche	dule D (Form 990) 2020 SCHOOL OF 2	ARTS AND CULTUR	E AT MI	HP				80-071	4882	P	<sub>age</sub> 2
Par	t III Organizations Maintaining C	collections of Ar	t, Histe	orical Tre	easures, or	<sup>·</sup> Other	r Simila	r Assets	(conti	nued)	
3	Using the organization's acquisition, accessi	on, and other record	s, check	any of the	following that	make si	gnificant	use of its	·	,	
	collection items (check all that apply):				C C		•				
а	Public exhibition	c	1 I	Loan or exc	hange progra	ım					
b	Scholarly research	e			indinge progra						
c	Preservation for future generations	·	•								
_		alloctions and avalai	a haw th	ov furthor t	o organizatio	n'a avan	not ouroa	oo in Dort	VIII		
4	Provide a description of the organization's co			-	-			semean	<u>^</u>		
5	During the year, did the organization solicit o				-				7.2	_	٦
Do	to be sold to raise funds rather than to be maintenance of the sold to raise funds rather than to be maintenance of the sold to raise funds and the sold to raise funds rather than to be maintenance of the sold to raise funds rather than to be maintenance of the sold to raise funds rather than to be maintenance of the sold to raise funds rather than to be maintenance of the sold to raise funds rather than to be maintenance of the sold to raise funds rather than to be maintenance of the sold to raise funds rather than to be maintenance of the sold to raise funds rather than to be maintenance of the sold to raise funds rather than to be maintenance of the sold to raise funds rather than to be maintenance of the sold to raise funds rather than to be maintenance of the sold to raise funds rather than to be maintenance of the sold to raise funds rather than to be maintenance of the sold to raise funds rather than to be maintenance of the sold to rather than to be maintenance of the sold to rather than to be maintenance of the sold to rather than to be maintenance of the sold to rather than to be maintenance of the sold to rather than to be maintenance of the sold to rather than to be maintenance of the sold to rather than to be maintenance of the sold to rather than to be maintenance of the sold to rather than to be maintenance of the sold to rather than to be maintenance of the sold to rather than to be maintenance of the sold to rather than to be maintenance of the sold to rather than to be maintenance of the sold to rather than to be maintenance of the sold to be maintenan								Yes		No
Fai			ete if the	e organizatio	on answered "	Yes" on	Form 990	J, Part IV, I	ine 9, or		
	reported an amount on Form 990, Pa										
<b>1</b> a	Is the organization an agent, trustee, custod								-		-
	on Form 990, Part X?							L	Yes	X	No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing t	able:							
									Amoun	t	
С	Beginning balance						. <u>1c</u>				
d	Additions during the year						. 1d				
е	Distributions during the year						. 1e				
f	Ending balance						. 1f				
2a	Did the organization include an amount on F	orm 990, Part X, line	21, for e	escrow or c	ustodial accou	unt liabili	ity?		Yes		No
b	If "Yes," explain the arrangement in Part XIII.	. Check here if the ex	planatio	n has been	provided on F	Part XIII					]
Par	<b>T V Endowment Funds.</b> Complete	if the organization ar	nswered	"Yes" on Fo	orm 990, Part	IV, line 1	10.				
		(a) Current year	<b>(b)</b> P	rior year	(c) Two year	s back	(d) Three	years back	<b>(e)</b> Fou	r years	back
1a	Beginning of year balance										
b	Contributions										
с	Net investment earnings, gains, and losses										
d	Grants or scholarships										
	Other expenditures for facilities										
C											
	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the cur		e (line i g	g, column (a	)) held as:						
a	Board designated or quasi-endowment		_%								
b	Permanent endowment	%									
С	Term endowment	_%									
	The percentages on lines 2a, 2b, and 2c sho	•									
3a	Are there endowment funds not in the posse	ession of the organiza	ation tha	t are held a	nd administer	ed for th	e organiz	ation			
	by:									Yes	No
	(i) Unrelated organizations								3a(i)		
	(ii) Related organizations								3a(ii)		ļ
b	If "Yes" on line 3a(ii), are the related organization	ations listed as requir	red on So	chedule R?					3b		
4	Describe in Part XIII the intended uses of the		wment f	unds.							
Par	t VI Land, Buildings, and Equipm	nent.									
	Complete if the organization answere	d "Yes" on Form 990	), Part IV	/, line 11a. S	See Form 990,	, Part X,	line 10.				
	Description of property	(a) Cost or c	other	(b) Cos	t or other	(c) A	ccumulat	ed	(d) Boo	k valu	e
		basis (investr	ment)	• •	(other)	de	preciation		.,		
1a	Land										
	Buildings										
	Leasehold improvements				67,130.		23	961.		43	169.
	Equipment				192,948.			170.		,	778.
										/	
<u>e</u> Totol	Other		V ·							90	947.
rota	. Add lines 1a through 1e. (Column (d) must e	equal Form 990, Part	<u>x, colun</u>	<u>ו (אן, line 1</u>	UC.)			Sehedule	D (5	,	

Schedule D (Form 990) 2020

032052 12-01-20

## 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. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ►		

#### Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		

## Part IX Other Assets.

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

	(a) Description	(b) Book value
(1)	SECURITY DEPOSITS	19,880.
(2)	DONATED RENT RECEIVABLE	4,990,999.
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
<u>Total. (</u>	Column (b) must equal Form 990, Part X, col. (B) line 15.) X Other Liabilities.	5,010,879.
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)		
(3)		
(4)		
(5)		
(6)		

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

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

Schedule D (Form 990) 2020

X

032053 12-01-20

(7) (8)

Sche	dule D (Form 990) 2020 SCHOOL OF ARTS AND CULTURE AT MHP			80-0714882	Page <b>4</b>
Par	t XI Reconciliation of Revenue per Audited Financial Statemer	nts With R	evenue per Ret	turn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1	Total revenue, gains, and other support per audited financial statements			1	4,984,110.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b	116,550.		
с	Recoveries of prior year grants	2c			
	Other (Describe in Part XIII.)		6,198.		
е	Add lines 2a through 2d			2e	122,748.
3	Subtract line 2e from line 1			3	4,861,362.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b			4c	0.
	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I, line 12.)				4,861,362.
Par	t XII Reconciliation of Expenses per Audited Financial Stateme	ents With B	Expenses per R	leturn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1	Total expenses and losses per audited financial statements			1	4,089,180.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a	680,955.		
b	Prior year adjustments	2b			
С	Other losses	2c			
	Other (Describe in Part XIII.)		6,198.		
е	Add lines 2a through 2d			2e	687,153.
3	Subtract line 2e from line 1			3	3,402,027.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
	Investment expenses not included on Form 990, Part VIII, line 7b				
b	Other (Describe in Part XIII.)	4b			
	Add lines 4a and 4b			4c	0.
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	3,402,027.
	t XIII Supplemental Information.				
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part	,		; Part X, line 2; P	'art XI,
lines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any addi	tional informa	ition.		
PART	X, LINE 2:				
GENE	RALLY ACCEPTED ACCOUNTING PRINCIPLES PROVIDE ACCOUNTING AND DI	SCLOSURE			
GUID	ANCE ABOUT POSITIONS TAKEN BY AN ORGANIZATION IN ITS TAX RETUR	NS THAT			
MIGH	T BE UNCERTAIN. MANAGEMENT HAS CONSIDERED ITS TAX POSITIONS AN	ID			
BELI	EVES THAT ALL OF THE POSITIONS TAKEN BY THE SCHOOL IN ITS FEDE	RAL AND			
STAT	E EXEMPT ORGANIZATION TAX RETURNS ARE MORE LIKELY THAN NOT TO	BE			
SUST	AINED UPON EXAMINATION.				
THE	SCHOOL'S FEDERAL RETURNS FOR THE YEARS ENDED JUNE 30, 2018 AND	BEYOND			
ARE	SUBJECT TO EXAMINATION BY FEDERAL TAXING AUTHORITIES, GENERALI	Y FOR 3			
		•			
YEAR	S AFTER THEY ARE FILED. THE SCHOOL'S STATE RETURNS FOR THE YEA	RS ENDED			
JUNE	30, 2017 AND BEYOND ARE SUBJECT TO EXAMINATION BY STATE TAXIN	IG			

032054 12-01-20

Schedule D (Form 990) 2020

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Schedule D (Form 990) 2020         SCHOOL OF ARTS AND CULTURE AT MHP           Part XIII         Supplemental Information (continued)	80-0714882 Page <b>5</b>
Schedule D (Form 990) 2020       SCHOOL OF ARTS AND CULTURE AT MHP         Part XIII       Supplemental Information (continued)	
AUTHORITIES, GENERALLY FOR 4 YEARS AFTER THEY ARE FILED.	
PART XI, LINE 2D - OTHER ADJUSTMENTS:	
SPECIAL EVENT EXPENSES 6,1	98.
PART XII, LINE 2D - OTHER ADJUSTMENTS:	
SPECIAL EVENT EXPENSES 6,1	98.
	Schedule D (Form 990) 202

0 Schedule D (Form 9

032055 12-01-20

SCHEDULE G	Suppleme	ental Information Regarding	, Fund	raisi	ng or Gaming A	ctiv	vities	OMB No. 1545-0047
(Form 990 or 990-EZ)	Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.							2020
Department of the Treasury		Attach to Form 990						Open to Public
Internal Revenue Service	► Ge	to www.irs.gov/Form990 for inst	ruction	s and	the latest informati	on.		Inspection
Name of the organization								lentification number
		ARTS AND CULTURE AT MHP					80-07148	
	complete this par	<ul> <li>Complete if the organization answ t.</li> </ul>	ered "Y	es" or	n Form 990, Part IV, I	ine 1	7. Form 990-E	Z filers are not
	•	sed funds through any of the followin	•		,			
a X Mail solicitat				-	overnment grants nment grants			
<b>b</b> X Internet and <b>c</b> X Phone solici	email solicitations		ation of Il fundra	•	e e			
d X In-person so		g [] Specia		ising	events			
•		or oral agreement with any individua	l (includ	ing of	ficers, directors, trus	tees	, or	
key employees list	ed in Form 990, P	art VII) or entity in connection with p	orofessi	onal fu	undraising services?		X Ye	es 🗌 No
	•	viduals or entities (fundraisers) pursu	uant to	agreei	ments under which th	he fu	ndraiser is to I	be
compensated at le	ast \$5,000 by the	organization.						
	a a filmatic take a l		(iii) fundr	Did			Amount paid	
(i) Name and addres or entity (fund		(ii) Activity	fundr have c or con	ustody	(iv) Gross receipts from activity	to (	or retained by fundraiser	to (or retained by)
			contrib	itions?		lis	sted in col. (i)	organization
JONO MARCUS CONSUL	TING - 4906		Yes	No				
WESTWAY DRIVE, BET	HESDA, MD	GRANTWRITING	_	Х	3,071,823.		52,516	3,019,307.
Total					3,071,823.		52,516	3,019,307.
	ch the organizatio	on is registered or licensed to solicit	contrib	utions	or has been notified	it is	exempt from I	registration
or licensing.								
CA								
LHA For Paperwork Re	eduction Act Not	ice, see the Instructions for Form	990 or	990-E	Z	Sche	dule G (Form	990 or 990-EZ) 2020
SEE E	PART IV FOR CO	ONTINUATIONS						
032081 11-25-20								

## Schedule G (Form 990 or 990-EZ) 2020 SCHOOL OF ARTS AND CULTURE AT MHP

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000

		of fundraising event contributions and gr			terne man greee receip	
			(a) Event #1	<b>(b)</b> Event #2	(c) Other events NONE	(d) Total events (add col. (a) through
Revenue			TRES VINOS			col. (c)
			(event type)	(event type)	(total number)	
Rev	1	Gross receipts	81,673.			81,673.
	2	Less: Contributions	81,673.			81,673.
	-		,			, ,
	3	Gross income (line 1 minus line 2)				
	4	Cash prizes				
	-	Noncoch prizes				
s	5	Noncash prizes				
Direct Expenses	6	Rent/facility costs				
Ъ						
ectl	7	Food and beverages	6,198.			6,198.
Di						
	8	Entertainment				
	9	Other direct expenses			<b>`</b>	6,198.
	10	Direct expense summary. Add lines 4 through Net income summary. Subtract line 10 from I				-6,198.
Pa				990. Part IV. line 19. or r		
				,,,,,,,,,	-1	
		\$15,000 on Form 990-EZ, line 6a.				
۵D		\$15,000 on Form 990-EZ, line 6a.	(a) Bingo	<b>(b)</b> Pull tabs/instant	(c) Other gaming	(d) Total gaming (add
enue		\$15,000 on Form 990-EZ, line 6a.	(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Jevenue			(a) Bingo		(c) Other gaming	
Revenue	1	\$15,000 on Form 990-EZ, line 6a.	(a) Bingo		(c) Other gaming	
Revenue	1	Gross revenue	(a) Bingo		(c) Other gaming	
	1		(a) Bingo		(c) Other gaming	
	1 2 3	Gross revenue	(a) Bingo		(c) Other gaming	
Expenses		Gross revenue	(a) Bingo		(c) Other gaming	
Expenses		Gross revenue	(a) Bingo		(c) Other gaming	
	3	Gross revenue Cash prizes Noncash prizes Rent/facility costs	(a) Bingo		(c) Other gaming	
Expenses	3	Gross revenue Cash prizes Noncash prizes		bingo/progressive bingo		
Expenses	3 4 5	Gross revenue Cash prizes Noncash prizes Rent/facility costs Other direct expenses	%	bingo/progressive bingo	Yes %	
Expenses	3 4	Gross revenue Cash prizes Noncash prizes Rent/facility costs Other direct expenses		bingo/progressive bingo		
Expenses	3 4 5	Gross revenue Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor	Yes%	bingo/progressive bingo	%%	
Expenses	3 4 5 6	Gross revenue Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor	Yes%	bingo/progressive bingo	%%	
Expenses	3 4 5 6	Gross revenue Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor		bingo/progressive bingo	☐ Yes % No	
Direct Expenses	3 4 5 6 7 8	Gross revenue Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines 2 through Net gaming income summary. Subtract line 7	Yes%           No           1 from line 1, column (d)	bingo/progressive bingo	☐ Yes % No	
6 Direct Expenses	3 4 5 7 8 En	Gross revenue Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines 2 through Net gaming income summary. Subtract line 7 ter the state(s) in which the organization condu	Yes%         No         1 5 in column (d)         ✓ from line 1, column (d)         ucts gaming activities:	bingo/progressive bingo	Yes% No	col. (a) through col. (c))
b C Direct Expenses	3 4 5 7 8 En	Gross revenue Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines 2 through Net gaming income summary. Subtract line 7 ter the state(s) in which the organization conduct the organization licensed to conduct gaming and	Yes%         No         1 5 in column (d)         ✓ from line 1, column (d)         ucts gaming activities:	bingo/progressive bingo	Yes% No	
b C Direct Expenses	3 4 5 7 8 En	Gross revenue Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines 2 through Net gaming income summary. Subtract line 7 ter the state(s) in which the organization condu	Yes%         No         1 5 in column (d)         ✓ from line 1, column (d)         ucts gaming activities:	bingo/progressive bingo	Yes% No	col. (a) through col. (c))

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No **b** If "Yes," explain:

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Schedule G (Form 990 or 990-EZ) 2020

Sch	edule G (Form 990 or 990-EZ) 2020 SCHOOL OF ARTS AND CULTURE AT MHP	80-071488	2	Page 3
11			Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming?		Yes	No
13	Indicate the percentage of gaming activity conducted in:			
	The organization's facility	13a		%
	An outside facility			%
	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
	Address 🕨			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Yes	🗌 No
b	o If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amoun of gaming revenue retained by the third party ▶\$	t		
c	If "Yes," enter name and address of the third party:			
	Name			
	Address			
16	Gaming manager information:			
	Name			
	Gaming manager compensation <b>&gt;</b> \$			
	Description of services provided			
	Director/officer     Employee     Independent contractor			
	Mandatory distributions:			
a	I is the organization required under state law to make charitable distributions from the gaming proceeds to		Vac	🗌 No
r	retain the state gaming license? Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the		103	
~	organization's own exempt activities during the tax year <b>&gt;</b> \$			
Pa	<b>t IV</b> Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); ar 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	d Part III, line	es 9, 9	b, 10b,
ben	EDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:			
(I)	NAME OF FUNDRAISER: JONO MARCUS CONSULTING			
(T)	ADDRESS OF FUNDRAISER: 4906 WESTWAY DRIVE, BETHESDA, MD 20816			
(1)	ADDRESS OF FONDRAISER: 4900 WESIWAI DRIVE, BEINESDA, MD 20010			
PAR	T I, LINE 2B, COLUMN (V):			
JON	O MARCUS CONSULTING WAS PAID ON A MONTHLY BASIS FOR GRANT WRITING			
SER	VICES.			
0320	83 11-25-20 Schedule G 33	(Form 990 o	or 990-	EZ) 2020

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Schedule G (Form 990 or 990-EZ)

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SCHEDULE O	Supplemental Information to Form 990 or 990	-EZ	OMB No. 1545-0047		
(Form 990 or 990-EZ)	m 990 or 990-EZ) Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.				
Department of the Treasury Internal Revenue Service	Attach to Form 990 or 990-EZ. Go to www.irs.gov/Form990 for the latest information.	1	Open to Public Inspection		
Name of the organization	N SCHOOL OF ARTS AND CULTURE AT MHP		r <b>identification number</b> 714882		
FORM 990, PART III	, LINE 2, NEW PROGRAM SERVICES:				
DURING THE YEAR EN	DED JUNE 30, 2021, THE SCHOOL OF ARTS AND CULTURE AT				
MHP LAUNCHED A SPE	CIAL PROJECT INITIATIVE, IN PARTNERSHIP WITH THE				
CALIFORNIA ARTS CO	UNCIL AND SVCREATES, CALLED THE ADMINISTRATORS OF				
COLOR FELLOWSHIP.					
FORM 990, PART III	, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:				
PEOPLE OF COLOR AC	ROSS AND THROUGHOUT THE ARTS SECTOR. CAC ACF				
PROGRAMMING IS MAD	E POSSIBLE IN PART BY A GRANT FROM THE JAMES IRVINE				
FOUNDATION AND A O	NE-TIME INCREASE IN STATE ARTS FUNDING. THIS PILOT				
PROJECT WILL CONCL	UDE AT THE END OF DECEMBER 2021.				
IN ADDITION, DURIN	G THE COVID-19 PANDEMIC, THE SCHOOL ADAPTED ITS TEAM				
AND SPACE, THE MEX	ICAN HERITAGE PLAZA, TO MEET THE NEEDS OF THE LOCAL				
EAST SAN JOSE COMM	UNITY. THE SCHOOL OFFERED FOOD DISTRIBUTION, COVID-19				
TESTING, AND COVID	-19 VACCINATIONS. ALTOGETHER, THE SCHOOL SERVED OVER				
150,000 COMMUNITY	MEMBERS THROUGH COVID-19 RESPONSE ACTIVITIES DURING				
THE YEAR ENDED JUN	E 30, 2021.				
FORM 990, PART III	, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:				
DIVERSITY AND SUBS	IDIZED THE COST OF 90 PRODUCTIONS. DURING THE YEAR				
ENDED JUNE 30, 202	1, THE SCHOOL WAS UNABLE TO HOST ITS COMMUNITY				
PARTNERS DUE TO SH	ELTER IN PLACE ORDERS AS A RESULT OF THE PANDEMIC.				
THE SCHOOL'S COMMU	NITY ACCESS POLICY IS DEFINED PRIMARILY BY THE SPIRIT				
	NCIPLES FOR COMMUNITY ACCESS AND ENGAGEMENT: eduction Act Notice, see the Instructions for Form 990 or 990-EZ. Sch	edule O (Fo	rm 990 or 990-EZ) 2020		
032211 11-20-20					

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-CREATE WELCOMING, INCLUSIVE AND AFFORDABLE COMMUNITY GATHERINGS AND
CULTURAL OFFERINGS IN PARTNERSHIP WITH ARTISTS, ARTS ORGANIZATIONS AND
COMMUNITY FOCUSED NONPROFITS THAT CAPITALIZE ON THE STRENGTHS OF THIS
UNIQUE FACILITY AND LOCATION IN EAST SAN JOSE.
-DEVELOP PARTNERSHIPS WITH A NETWORK OF ARTISTS, ARTS AND COMMUNITY
ORGANIZATIONS THAT WILL LEVERAGE EXISTING RELATIONSHIPS AND CAPACITY
WHILE ADVANCING AND GROWING COLLECTIVE IMPACT.
-BUILD COMMUNITY CONFIDENCE, ENTHUSIASM AND TRUST OVER TIME THROUGH
CONSISTENT COMMUNICATION, RESPONSIVENESS AND A RELIABLE MENU OF
OPPORTUNITIES.
-DEVELOP A BROAD MIX IN PROGRAMMING WITH A FOCUS ON MEXICAN CULTURE
WHILE ACTIVATING OPPORTUNITIES FOR SOCIAL INTEGRATION WITH THE BROADER
MULTICULTURAL ARTISTIC COMMUNITY PRESENT IN SAN JOSE.
-FACILITATE MULTIPLE POINTS OF ENTRY FOR COMMUNITY MEMBERS, PARTNER
ORGANIZATIONS AS WELL AS PRIVATE CLIENTS.
-CREATE A RELATIONSHIP OF RECIPROCITY WITH ORGANIZATIONS AND THE
COMMUNITY THROUGH "MISSION COMPATIBLE" ACTIVATION OF SPACES.
-EMBRACE GRASSROOTS PARTICIPATION AS CRITICAL TO THE SUCCESS OF SCHOOL
OF ARTS AND CULTURE AT MHP'S VISION, AND PROVIDE OPPORTUNITIES FOR
COMMUNITY FEEDBACK.
EVENTS - MARKET RATE RENTAL PROGRAM
THE SCHOOL OF ARTS AND CULTURE AT MHP IS LOCATED IN A BEAUTIFUL
MULTI-USE VENUE IN A HISTORICALLY SIGNIFICANT LOCATION AND
NEIGHBORHOOD. THE SITE IS THE SAME PLACE WHERE CIVIL RIGHTS ACTIVIST

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CESAR CHAVEZ ORGANIZED THE FIRST GRAPE BOYCOTT WITH THE FARMWORKER

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Schedule O (Form 990 or 990-EZ) 2020

Page 2

Employer identification number

80-0714882

Schedule O (Form 990 or 990-EZ) 2020

SCHOOL OF ARTS AND CULTURE AT MHP

Name of the organization

Schedule O (Form 990 or 990-EZ) 2020 Name of the organization	Page 2
SCHOOL OF ARTS AND CULTURE AT MHP	80-0714882
MOVEMENT. THE HOUSE HE LIVED IN IS LOCATED A QUARTER OF A MILE AWAY	
FROM THE SCHOOL.	
THE BUSINESS PLAN WRITTEN BY THE MHP STEERING COMMITTEE IN 2011	
IDENTIFIES RENTAL INCOME FROM THE FACILITY AS AN IMPORTANT COMPONENT OF	
THE LONG-TERM SUSTAINABILITY OF THE SCHOOL OF ARTS AND CULTURE AT MHP.	
THE SCHOOL HAS PARTNERED WITH A FOR-PROFIT COMPANY, GIANT CREATIVE	
SERVICES, TO ENSURE A CAREFUL, CREATIVE AND ATTENTIVE APPROACH TO	
MARKET RATE RENTALS. THIS CLOSE PARTNERSHIP WITH THE SCHOOL STAFF HAS	
SUCCESSFULLY INCREASED THE USAGE OF THE FACILITY BY A NUMBER OF ARTS	
ORGANIZATIONS AND PRIVATE EVENTS IN A MANNER NEVER BEFORE SEEN UNDER	
PREVIOUS OPERATORS. THE SCHOOL'S MARKET RATE RENTAL PROGRAM GENERATES	
REVENUE THAT THEN DIRECTLY SUPPORTS THE SCHOOL PROGRAM. IN ADDITION,	
98% OF ALL EVENTS THAT TAKE PLACE AT THE MEXICAN HERITAGE PLAZA THROUGH	
THE MARKET RATE RENTAL PROGRAM ARE ROOTED IN THE COMMUNITY. DURING THE	
YEAR ENDED JUNE 30, 2021, THE SCHOOL SERVED AS A FOOD DISTRIBUTION	
SITE, A COVID-19 TESTING SITE, AND A COVID-19 VACCINATION SITE FOR THE	
LOCAL EAST SAN JOSE COMMUNITY, SERVING OVER 150,000 PEOPLE (DOUBLE THE	
NUMBER TYPICALLY REACHED IN A YEAR). THE SCHOOL DID NOT HOST OTHER	
EVENTS AS A RESULT OF THE PANDEMIC.	
FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:	
GOVERNMENT. IN ADDITION, SINCE ITS FOUNDING, THE SCHOOL HAS INVESTED	
OVER \$1 MILLION IN MALI MEMBERS AND HAS PROVIDED OVER 10,000 HOURS OF	
DIRECT INSTRUCTION, MENTORSHIP, AND NETWORKING. WITHOUT SUCH	
INVESTMENTS, THESE ARTISTS AND ARTS GROUPS WOULD NOT HAVE BEEN ABLE TO	
FULLY PARTICIPATE IN THE CREATIVE ECONOMY.	

MALI IS BASED ON THE PRINCIPLE THAT WHEN LEADERS IN THE ARTS REFLECT

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Schedule O (Form 990 or 990-EZ) 2020

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Name of the organization SCHOOL OF ARTS AND CULTURE AT MHP	Employer identification numbe 80-0714882
	00 0/14002
THE ETHNIC MAKEUP OF THEIR LOCAL POPULATION, THE AGENCIES THEY	
REPRESENT ARE MORE CULTURALLY RESPONSIVE TO THEIR COMMUNITY'S NEEDS. TO	
PRIORITIZE AND CLARIFY DIVERSITY IN THE ARTS LEADERSHIP FIELD, MALI	
BUILDS INTENTIONAL NETWORKS AMONG ARTS LEADERS OF COLOR AND DEVELOPS IN	
THEM CULTURAL LEADERSHIP SKILLS THAT OVERCOME PAST TOKENISM. AS SUCH,	
MALI: 1) IDENTIFIES FUTURE AND EMERGING MULTICULTURAL ARTS LEADERS; 2)	
DEVELOPS AND DELIVERS A TRAINING PROGRAM THAT BUILDS UPON AND ENHANCES	
THEIR SKILLS AND KNOWLEDGE SO THEY CAN ADDRESS CHALLENGES TO SUCCESS	
AND STABILIZE OR GROW THEIR AGENCIES, AND; 3) EQUIPS THEM TO	
SUCCESSFULLY PARTICIPATE IN COMMUNITY FORUMS, INITIATIVES, AND TASK	
FORCES TO ADDRESS SPECIFIC COMMUNITY ISSUES AND ADVOCATE FOR A STRONG,	
HEALTHY MULTICULTURAL ARTS COMMUNITY.	
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:	
FACILITY	
THE SCHOOL OPERATES THE MEXICAN HERITAGE PLAZA, WHICH IS OWNED BY THE	
CITY OF SAN JOSE. THE SCHOOL LEVERAGES THE \$35 MILLION FACILITY TO	
OFFER ITS PROGRAMS, INCLUDING QUALITY ARTS EDUCATION COURSES TO THE	
COMMUNITY THROUGH ITS ARTS EDUCATION PROGRAM; AN ARTS LEADERSHIP	
PROGRAM FOR PEOPLE OF COLOR (I.E. MALI); AND COMMUNITY EVENTS THROUGH	
ITS COMMUNITY ACCESS AND ENGAGEMENT AND MARKET RATE RENTAL PROGRAMS. IN	
THIS WAY, THE FACILITY IS ACTIVATED AND TRANSFORMED INTO A VIBRANT HUB	
OF COMMUNITY ACTIVITY.	
EXPENSES \$ 510,872. INCLUDING GRANTS OF \$ 0. REVENUE \$ 20,662.	
ARTS EDUCATION PROGRAM:	
The second of the second secon	
032212 11-20-20	Schedule O (Form 990 or 990-EZ) 202

13260421 701245 0504664.T

Schedule O (Form 990 or 990-EZ) 2020 Name of the organization SCHOOL OF ARTS AND CULTURE AT MHP	Employer identification number 80-0714882
THE SCHOOL PROVIDES A "MULTI-CULTURAL AND INTER-CULTURAL VENUE" FOR	
COMMUNITY EVENTS AND PROGRAMS THAT EMBRACE ALL CULTURES, WHILE	
EXPLORING THE ARTISTIC TRADITIONS, CULTURAL HISTORY, AND CONTEMPORARY	
CREATIVE EXPRESSION OF MEXICAN AND LATIN AMERICAN ARTS. THE SCHOOL	
BELIEVES THAT THE ARTS ARE POWERFUL VEHICLES FOR HUMAN DEVELOPMENT AND	
SOCIAL TRANSFORMATION - BY CREATING NURTURING COMMUNITIES FOR YOUNG	
PEOPLE, ESPECIALLY THOSE AT RISK. THE SCHOOL BELIEVES, AS RESEARCH	
INDICATES, THAT CREATIVE EXPERIENCES IN THE ARTS OFFER STUDENTS THE	
OPPORTUNITY TO "ENVISION AND SET GOALS, DETERMINE A METHOD TO REACH A	
GOAL, AND TRY IT OUT, IDENTIFY ALTERNATIVES, EVALUATE, REVISE, SOLVE	
PROBLEMS, IMAGINE, WORK COLLABORATIVELY, AND APPLY SELF-DISCIPLINE"	
(THE CALIFORNIA STATE BOARD OF EDUCATION VISUAL AND PERFORMING ARTS).	
THE GOALS FOR THE ARTS EDUCATION PROGRAM ARE TO ENGAGE YOUTH, AGES 4 TO	
18, IN POSITIVE, CULTURALLY RELEVANT, SAFE AND EMPOWERING LEARNING	
EXPERIENCES THAT WILL INSPIRE AND STRENGTHEN THE YOUTH AND FAMILIES OF	
SAN JOSE TO BE AGENTS OF POSITIVE CHANGE. TO REACH THESE GOALS, THE	
SCHOOL SEEKS TO ACHIEVE THE FOLLOWING OBJECTIVES: 1) OFFER EAST SAN	
JOSE STUDENTS ACCESS TO ARTS EDUCATION; 2) ACTIVATE A COMMUNITY ASSET	
THE MEXICAN HERITAGE PLAZA, WHERE THE SCHOOL IS LOCATED; AND 3) OFFER	
QUALITY STUDENT LEARNING EXPERIENCES IN THE ARTS. THE ARTS EDUCATION	
PROGRAM PROVIDES ARTS AND CULTURE EXPERIENCES FOR STUDENTS AGES 0-18,	
HELPING THEM TO ACHIEVE DEVELOPMENTAL AND EDUCATIONAL MILESTONES	
THROUGH QUARTERLY CLASSES IN DANCE AND MUSIC, ROOTED IN MEXICAN AND	
MEXICAN AMERICAN CULTURE. IN 2017, THE SCHOOL ADOPTED A DEVELOPMENTAL	
PATHWAY APPROACH IN MUSIC TO OFFER STUDENTS SEQUENTIAL INSTRUCTION THAT	

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<sup>2020.05093</sup> SCHOOL OF ARTS AND CULTUR 05046641

Schedule O (Form 990 or 990-EZ) 2020	Page <b>2</b>
Name of the organization SCHOOL OF ARTS AND CULTURE AT MHP	Employer identification number 80-0714882
THE SCHOOL SERVED OVER 900 STUDENTS THROUGH THE PROGRAM. IN THE YEAR	
ENDED JUNE 30, 2021, THE ARTS EDUCATION PROGRAM WAS PLACED ON HIATUS AS	
A RESULT OF THE PANDEMIC. EVEN SO, THE SCHOOL DISTRIBUTED ABOUT 5,000	
ART KITS TO STUDENTS IN ORDER FOR THEM TO CONTINUE ARTS ENGAGEMENT	
WHILE SHELTERING IN PLACE.	
EXPENSES \$ 8,720. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.	
FORM 990, PART VI, SECTION B, LINE 11B:	
THE EXECUTIVE DIRECTOR AND BOARD TREASURER REVIEW THE 990 BEFORE IT IS	
FILED. THE BOARD RECEIVES A COPY OF THE 990 AT THE BOARD MEETING.	
FORM 990, PART VI, SECTION B, LINE 12C:	
BEFORE ASSUMING OFFICE, ALL POTENTIAL OFFICERS AND DIRECTORS OF THE	
CORPORATION SHALL AGREE TO THE POLICY IN WRITING. THE ORGANIZATION'S	
CONFLICT OF INTEREST POLICY ALSO IMPOSES A CONTINUING DUTY ON THE	
CORPORATION'S DIRECTORS AND OFFICERS TO DISCLOSE THE NATURE OF THE CONFLICT	
(OR POTENTIAL CONFLICT) TO THE BOARD PRESIDENT IN WRITING UPON KNOWLEDGE OF	
THE CONFLICT. IF THE DIRECTOR OR OFFICER IS UNCERTAIN WHETHER A CONFLICT	
EXISTS, THAT PERSON MAY REQUEST THAT THE BOARD DETERMINE WHETHER A CONFLICT	
EXISTS BY A MAJORITY VOTE (NOT INCLUDING THE VOTE OF THE CONFLICTED	
DIRECTOR). ISSUES OF POTENTIAL CONFLICT MAY BE REFERRED TO OUTSIDE LEGAL	
COUNSEL FOR ADVICE.	
FORM 990, PART VI, SECTION B, LINE 15:	
THE BOARD FORMED A COMMITTEE TO REVIEW THE COMPENSATION OF THE EXECUTIVE	
AND ASSOCIATE DIRECTORS. THIS COMMITTEE CONDUCTED A SALARY SURVEY AND	

REVIEWED PERFORMANCE ASSESSMENTS PROVIDED BY THE DIRECTORS.

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Schedule O (Form 990 or 990-EZ) 2020

Schedule O (Form 990 or 990-EZ) 2020 Name of the organization		Employer identification number 80-0714882
SCHOOL OF ARTS AND CULTURE AT MHP		00-0714002
FORM 990, PART VI, SECTION C, LINE 19:		
ALL GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS ARE AVAILA	BLE UPON	
REQUEST.		
FORM 990, PART IX, LINE 11G, OTHER FEES:		
DUTSIDE SERVICES:		
PROGRAM SERVICE EXPENSES	242,029.	
MANAGEMENT AND GENERAL EXPENSES	95,298.	
FUNDRAISING EXPENSES	2,184.	
TOTAL EXPENSES	339,511.	
EMPORARY CONTRACTORS:		
PROGRAM SERVICE EXPENSES	1,037,897.	
MANAGEMENT AND GENERAL EXPENSES	1,494.	
FUNDRAISING EXPENSES	16,758.	
FOTAL EXPENSES	1,056,149.	
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	1,395,660.	
ORM 990, PART XII, LINE 2C		
THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.		
THE FROCEDS THE NOT CHANGED FROM THE FRICK TERK.		