Form 8879-TE

IRS e-file Signature Authorization for a Tax Exempt Entity

OIVIB	140.	1040-0047	

For calendar year 2022, or fiscal year beginning \underline{JUL} 1 , 2022, and ending \underline{JUN} 30 , 20 $\underline{23}$

Do not send to the IRS. Keep for your records. Department of the Treasury Go to www.irs.gov/Form8879TE for the latest information. Internal Revenue Service EIN or SSN Name of filer 47-1166814 Mesa Valley Community School, Inc. Nathan Brantlev Name and title of officer or person subject to tax President Part I Type of Return and Return Information Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter 0.). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I. b Total revenue, if any (Form 990, Part VIII, column (A), line 12) _______ 1b _______ 3 , 380 , 588 . Form 990 check here 1a b Total revenue, if any (Form 990-EZ, line 9) 2a Form 990-EZ check here ... За Form 1120-POL check here b Total tax (Form 1120-POL, line 22) Form 990-PF check here ... 4a b Balance due (Form 8868, line 3c) 5b Form 8868 check here 5a b Total tax (Form 990-T, Part III, line 4) 6b Form 990-T check here 6a b Total tax (Form 4720, Part III, line 1) ______7b 7a Form 4720 check here b FMV of assets at end of tax year (Form 5227, Item D) 8a Form 5227 check here b Tax due (Form 5330, Part II, line 19) Form 5330 check here 9a b Amount of credit payment requested (Form 8038-CP, Part III, line 22) 10a Form 8038-CP check here Declaration and Signature Authorization of Officer or Person Subject to Tax Part II Under penaltiles of perjury, I declare that X I am an officer of the above entity or I am a person subject to tax with respect to (name , (EIN)_ and that I have examined a copy of the 2022 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and 2022 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic navment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal. PIN: check one box only 66814 X lauthorize Hinkle & Company, PC to enter my PIN Enter five numbers, but ERO firm name do not enter all zeros as my signature on the tax year 2022 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen. As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2022 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(les) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen. Part III Certification and Authentication ERO's EFIN/PIN. Enter your six-digit electronic filing identification 73280995004 number (EFIN) followed by your five-digit self-selected PIN. Do not enter all zeros I certify that the above numeric entry is my PIN, which is my signature on the 2022 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns, 04/24/24 Hinkle & Company, PC ERO's signature

> **ERO Must Retain This Form - See Instructions** Do Not Submit This Form to the IRS Unless Requested To Do So

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8879-TE (2022)

Form **99**0

Extended to May 15, 2024 Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service

Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information.

2022 2023 A For the 2022 calendar year, or tax year beginning JUL 1, and ending JUN 30. C Name of organization Check if applicable: D Employer identification number Address change Mesa Valley Community School, Inc. Name change 47-1166814 initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final return/ 970-254-7202 609 25 Road 3,380,588. termin-ated City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ Amended return Grand Junction, CO 81505 H(a) is this a group return Applica-Ition pending F Name and address of principal officer: Nathan Brantley __Yes 🗓 No for subordinates? H(b) Are all subordinates included? Yes No Tax-exempt status: X 501(c)(3) 501(c) ((insert no.) 4947(a)(1) or 527 If "No," attach a list. See instructions www.mesavalleycommunityschool.org H(c) Group exemption number K Form of organization: X Corporation Trust Association L Year of formation: 2008 M State of legal domicile: CO Part I Summary Briefly describe the organization's mission or most significant activities: MVCS creates an opportunity for Governance students to pursue a personalized learning plan supported by \square if the organization discontinued its operations or disposed of more than 25% of its net assets. Check this box Number of voting members of the governing body (Part VI, line 1a) 5 4 Number of independent voting members of the governing body (Part VI, line 1b) Activities & 5 Total number of individuals employed in calendar year 2022 (Part V, line 2a) 5 0 6 Total number of volunteers (estimate if necessary) 7 a Total unrelated business revenue from Part VIII, column (C), line 12 b Net unrelated business taxable income from Form 990-T, Part I, Ilne 11 **Current Year** Prior Year 0. 782,329. 8 Contributions and grants (Part VIII, line 1h) 0. 2,583,528. 9 Program service revenue (Part VIII, line 2g) 0. 12,440. 10 Investment Income (Part VIII, column (A), lines 3, 4, and 7d) 2,291. 0. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 3,380,588. 0. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 0. Grants and similar amounts paid (Part IX, column (A), lines 1-3) Ο. 0. 14 Benefits paid to or for members (Part IX, column (A), line 4) 0. 1,964,048. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 0. 0. 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) 793,343. 0. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 2,757,391. 0. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) Ō. 623,197. Revenue less expenses. Subtract line 18 from line 12 Beginning of Current Year **End of Year** 6,125,522. 4,974,586. 20 Total assets (Part X, line 16) 2,756,006. 7,320,545. Total liabilities (Part X, line 26) 2,218,580. -1.195.023. 22 Net assets or fund balances. Subtract line 21 from line 20 Part | 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. Signature of officer Sign Nathan Brantley, President Here Type or print name and title Date PTIN Preparer's signature Print/Type preparer's name 04/24/24 P00532558 James D. Hinkle James D. Hinkle Paid Hinkle & Company, PC Firm's EIN 27-1494012 Preparer Firm's name Firm's address 750 W Hampden Avenue, Suite 400 Use Only Phone no. (303)796-1000Englewood, CO 80110 X Yes No May the IRS discuss this return with the preparer shown above? See instructions

Check Schedule Combine a resource or mote to any line in this Part	Form	990 (2022) Mesa Valley Community School, Inc. 47-1100014 Page 2 till Statement of Program Service Accomplishments
Biddy describe the organization's mission: NVCS creates Opportunity for students to pursue a personalized Learning plan supported by district and private resources, technology, and a learning community that includes family members, tutors, highly Qualified instructors, and specialized consultants.	r aı	
WCS creates opportunity for students to pursue a personalized learning plan supported by district and private resources, technology, and a learning community that includes family members, tutors, highly qualified instructors, and specialized consultants. 2 Did the organization undertak any significant program services during the year which were not heted on the prior form 980 or 90-027		
learning plan supported by district and private resources, technology, and a learning community that includes family members, tutors, highly qualified instructors, and specialized consultants. Dottheogenization understate any significant program services during the year which were not leted on the poor form 990 or 990-827 Yes No III Yes, describe these new services on Schedule O.	3	
and a learning community that includes family members, tutors, highly qualified instructors, and specialized consultants. 2 Did the organization undertake any algebloant program services during the year which were not listed on the prior form 900 or 900 E27 Yes		learning plan supported by district and private resources, technology.
		and a learning community that includes family members, tutors, highly
2 Did the organization undertake any significant program services during the year which were not listed on the prior form 900 or 900-622 Yes X No If "Yes", "describe these new services on Schedule O. 3 Did the organization crease conducting, or make significant changes in how it conducts, any program services, as measured by expenses. 4 Dear-the the organization's program service accomplishments for each of its three largest program services, as measured by expenses, section 501(6), and 501(6)) quanizations are equives to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service accomplishments for each of its three largest program services, as measured by expenses, and revenue, if any, for each program service approach or sported. 4a (Soate:) (Squares 1		
prior Form 990 or 990-EZ?	2	
3 If Yos," describe these new services on Schedule C. 1 Did the organization case conducting, or medical equations of section of the organization's program service ecomplishments for each of list three largest program services, as measured by expenses. Section 50 (rick)s and 50 (rick)s an	_	
3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?		
If Yes, 'describe these changes on Schedule O.	3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
40 Clostrib the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(6) and 501(c)(6) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service special. 40 (Coate:	_	
Section SOI (s)(3) and SOI (s)(4) organizations are required to report the amount of grants and allocations to others, the total expanses, and revenue, if any, for each program service service service and service service services service	4	
## Code:		
		revenue, if any, for each program service reported.
4b (Code:) (Expenses \$	4a	
4c (Codo:) (Expenses \$		Provide a personalized learning plan for 257 students.
4c (Codo:) (Expenses \$		
4d Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$) (Revenue \$) 4e Total program service expenses 1,965,497.	4b	(Code:) (Expenses \$) (Revenue \$)
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4e Total program service expenses 1,965,497.	4d	
	<u>4e</u>	

			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	X	
2	is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			i
	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			٧,
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	_		707
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6_		<u> </u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		₹7
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			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?			x
	If "Yes," complete Schedule D, Part IV	9_		
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	_ ا		x
	or in quasi endowments? /f "Yes," complete Schedule D, Part V	10	(SAR)	_ <u>^</u>
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. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D.	व्यवस्थित संबंद	Service State	Land
a		11a	х	
L	Part VI Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	<u> 11a</u>	25	
D	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		x
c	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	110		
•	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? /f "Yes," complete Schedule D, Part IX	11d	Х	
9.	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		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
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	_		
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	<u> </u>	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	1		
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundralsing services on Part IX,	1		
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	_17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	1		
	1c and 8a? If "Yes," complete Schedule G, Part II	18	<u> </u>	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	1		
	complete Schedule G, Part III	19		X
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	<u>20a</u>		X.
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	<u>.</u>	
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			٦,
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	000	<u> </u>

Form	990 (2022) Mesa Valley Community School, Inc. 47-1166 t]V Checklist of Required Schedules (continued)	5814	P	age 4
IT all	Checklist of Required Scrieddies (continued)		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
h	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			
2 5a	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	200		
D	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
		25b		х
	Schedule L, Part I Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	200		
26				
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%	26		x
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	_26		-25
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,		j	
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled	0.7		x
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27	70% (* 20 %)	3.34
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):	Galesc.	1243CH 2	edik dil
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If		ŀ	
	"Yes," complete Schedule L, Part IV	28a	 	X
	A family member of any Individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
C	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			37
	"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			L
	Schedule N, Part II	32	ļ	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	-	l	1
	Part V, line 1	34	<u> </u>	X
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	ļ	X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36	l	Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	\		
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	<u>L</u>	X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	X	
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance		•	
1.4.4.4.4.	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- If not applicable	3	1746	

					Yes	No.
1a	Enter the number reported in box 3 of Form 1096. Enter -0- If not applicable	1a	23	31000		× 1
b	Enter the number of Forms W-2G included on line 1a, Enter -0- if not applicable	1b	0		King Aller	
¢	Did the organization comply with backup withholding rules for reportable payments to vendors and re-	porta	ole gaming	70.2	MA.	
	(gambling) winnings to prize winners?		**********	1c		X

and the same			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	23.0	15 75	
	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	THE TORCHE	X
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? 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).			4
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b	l	
7	Organizations that may receive deductible contributions under section 170(c).	7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year		STATE OF	e de la composition della comp
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, dld the organization file a Form 1098-C?	7h		<u> </u>
8	Sponsoring organizations maintaining donor advised funds. Dld a donor advised fund maintained by the			31.26
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	is several	this to the end
10	Section 501(c)(7) organizations. Enter:	135 (1)	en o	
a	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	最終	Silv.	
11	Section 501(c)(12) organizations. Enter:	700		45
а	Gross income from members or shareholders			
b	Gross Income from other sources. (Do not net amounts due or paid to other sources against	100 6	34	
	amounts due or received from them.)	4%以外	200	8020
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	190,000	20-20-ba
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		11674	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	4.4	r-Principle	W 256
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	1.55.350	<i>3794</i> 33
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans	- 100	3.5	
C	Enter the amount of reserves on hand	28116	Alexander (T.
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	<u> </u>	X
b	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	١		٠,
	excess parachute payment(s) during the year?	15	COLUMN TO	X
	If "Yes," see the instructions and file Form 4720, Schedule N.	KARG	接為於	
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16	Santin	X
	If "Yes," complete Form 4720, Schedule O.	EST	200	
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities	l		ļ
	that would result in the Imposition of an excise tax under section 4951, 4952 or 4953?	17	Tan Bad	19/08/8/8/8
	If "Vee " complete Form 6060	T 27 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	■ 2.23 (2007)	Fig. 37.77

Form 990 (2022) Mesa Valley Community School, Inc. 47-1166814 Page Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response

<u> </u>	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.			
				X
200	Check if Schedule O contains a response or note to any line in this Part VI tion A. Governing Body and Management			<u> </u>
sec	tion A. Governing Body and Management		Van	N/a
_	and the second of the second o	dr. C.	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 5			100
	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.	Well at		
b	Enter the number of voting members included on line 1a, above, who are independent	38/74	1 F. 4.	1469
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	niani.	Additi	
	officer, director, trustee, or key employee?	2		<u> </u>
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	•	<u>X</u>
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		<u>X</u>
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	_5_		<u>X</u>
6	Did the organization have members or stockholders?	6		<u>X</u>
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		<u> </u>
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b	97	X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes." provide the names and addresses on Schedule O	9		<u> </u>
Sec	tion B. Policies (This Section B requests Information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		_X_
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	numero estado	<u> </u>
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.		MAN TO	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		<u>X</u>
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	<u> </u>	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	on Schedule O how this was done	12c	<u> </u>	
13	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	(575/10)	金数	2021
а	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b	Title with one we	X
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See Instructions.		67.59	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		X_
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		$ldsymbol{f f f f f f f f f f f f f $
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed			
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			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	l finan	cial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	Costello Smith and Company PC - 9702410921			
	743 Horizon Court Ste 300A, Grand Junction, CO 81506			

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

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

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

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

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

(A)	(B)			(()			(D)	(E)	(F)
Name and title	Average	/da	nnt o	Pos	ition	than a		Reportable	Reportable	Estimated
	hours per	box	unle:	ss pei	son I	than o s both r/trus	an an	compensation	compensation	amount of
:	week			aaa	recto	rytrus	eej	from	from related	other
	(list any hours for	lirecto		ł		_		the organization	organizations (W-2/1099-MISC/	compensation from the
	related	ee Or (stee		ŀ	nsafe((W-2/1099-MISC/	1099-NEC)	organization
	organizations	lodividual trustee or director	institutional trustee		Кеу етріоуве	Highest compensated employee		1099-NEC)	,	and related
	below	vidual	itation	页	ешрі	Lest c	ner	;		organizations
	line)	Indi	T ST	Officer	Key	野猫	For		• .	
(1) Laurajean Downs	40.00			l		ŀ				
Director			<u> </u>	X	_	ŀ		79,234.	0.	16,525
(2) Julie Hoge	2.00	١						65.046		10 50
Board Member		X	_	<u> </u>		┞	-	65,216.	: . 0.	13,763
(3) Kami Costello	2.00								_	10 001
Board Member		Х			_	_		64,434.	0.	13,394
(4) Nathan Brantley	2.00	.		, ,				,	_ ا	,
President	1 2 00	Х	<u> </u>	Х	_	┝		0.	0.	0
(5) Kalista Wickham	2.00	٠ <u>.</u>		,,				,		,
Vice President	2 00	Х	<u> </u>	X	_			0.	0.	0
(6) Carolyn Lenderman Treasurer	2.00	\ V-		x				0.	0.	_
(7) Martha Brabeck	2.00	X		^_		-	_	0.	0.	0
Secretary	4.00	x		x				0.	0.	0
(8) Audrey Somerville	2.00	^	 		\vdash	\vdash		<u> </u>	·	
Board Member	2.00	х						0.	0.	0
DOGL G. Hellingt		^	 	 	 -		_	• • •	0.	
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Part VII Section A. Officers, Directors, Trus	tees, Key Emp	loye	es,	and	Hig	ghes	t C	ompensated Employee	s (continued)		
(A)	(B)			{(3)			(D)	. (E)		(F)
Name and title	Average	٠	Position (do not check more than one		Reportable	Reportable	Est	imated			
•	hours per	box,	box, unless person is both a officer and a director/trusted					compensation	compensatio	n am	ount of
	week							from	from related		other
	(list any	cţo						the	organization	s com	pensation
	hours for	ndividual trustee or director	_			pa		organization	(W-2/1099-MIS	GC/ fro	om the
	related	tee o	nstitutional trustee			Highest compensated employee		(W-2/1099-MISC/	1099-NEC)		anization
	organizations	trus	ם		, de	E		1099-NEC)		L	l related
	below	ridual	tutial	Ā	퓵	esto	횰			orga	nizations
	line)	lgi	Insti	Officer	Key employee	E E	Former				
		Ι.									
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1b Subtotal	********							208,884.			3,682.
c Total from continuation sheets to Part VI								0.		0.	<u> </u>
d Total (add lines 1b and 1c)	-							208,884.		0. 4	3,682.
2 Total number of individuals (including but r								eceived more than \$100.	000 of reportabl	9	
compensation from the organization						-,					0
componential from the organization											Yes No
C Did the constant of the conformation of the	divoctor tract	I			مريما		r bio	shoot componented own	loveo en	7819	
3 Did the organization list any former officer											X
line 1a? If "Yes," complete Schedule J for s										24 W 25 CH	
4 For any individual listed on line 1a, is the st										3.4 6 2.5	
and related organizations greater than \$15	0,000? <i> f "Ye</i> s,	," co	mpl	ete (Sch	edul	e J i	for such individual		4	X
5 Did any person listed on line 1a receive or	accrue comper	nsati	on f	rom	any	unr	elat	ed organization or indivi	dual for services		Cally May 1
rendered to the organization? If "Yes," con	nplete Schedul	e J f	or se	uch	pers	son				5	X
Section B. Independent Contractors											
Complete this table for your five highest co	mpensated inc	iepe	nde	nt c	ontr	acto	rs ti	hat received more than 5	100,000 of com	pensation fro	om
the organization, Report compensation for											
(A)								(B)		(0)
ارجي Name and business	address	N	INC	R.				Description of s	services	Compe	
		-11	0112								
					-						
								·			
Patterna de la companya del companya de la companya del companya de la companya d				,							
									•		
2 Total number of independent contractors (including but a	ot li	mita	d +~	the	en II	eten	t ahove) who recolved m	ore than	GARLE BOUR	4.14.16.16.16.16.16.16.16.16.16.16.16.16.16.
		UL III	i i i i i i i	u tO		0 0	ot40	A STOAR MITO LACEINARY III	O'D HIGH	Maria A.	vy sinse
\$100,000 of compensation from the organ	zauon					U				LONG GOOD SECURITION OF THE PARTY OF THE PAR	MARKET SOURCE STREET

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (C) Revenuè excluded Related or exempt Total revenue Unrelated from tax under function revenue business revenue sections 512 - 514 Grants mounts Federated campaigns 1a Membership dues 1b Fundraising events 1c d Related organizations 1d 782,218. e Government grants (contributions) 1e f All other contributions, gifts, grants, and 111. similar amounts not included above g Noncash contributions included in lines 1a-1f [1g|\$ 782,329. h Total. Add lines 1a-1f **Business Code** 2a Per Pupil Funding 611600 319,950. 2,319,950. Program Service b Mill Levy 611600 181,708. 181,708. c Classroom Fees 81,870. 611600 81,870. f All other program service revenue 2,583,528. g Total. Add lines 2a-2f 3 Investment income (including dividends, interest, and other similar amounts) 12,440. 12,440. Income from investment of tax-exempt bond proceeds Royalties (i) Real (ii) Personal 6 a Gross rents 6a b Less: rental expenses 6с Rental income or (loss) d Net rental Income or (loss) (i) Securities (ii) Other Maria de Sala 7 a Gross amount from sales of assets other than inventory 7a **b** Less: cost or other basis and sales expenses Other Revenue c Gain or (loss) ______7c d Net gain or (loss) 8 a Gross income from fundraising events (not 的 经特别 计分类的 Paga Aga Aga including \$ Processing contributions reported on line 1c). See Part IV, line 18 b Less: direct expenses ______8b c Net income or (loss) from fundraising events a sanangan akan 9 a Gross income from gaming activities. See Part IV, line 19 9a b Less: direct expenses 96 c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns 10a and allowances b Less: cost of goods sold 106 c Net income or (loss) from sales of inventory **Business Code** Miscellaneous 611600 2,291. 2,291. d All other revenue 2,291. nici Scawchaw (A. Markovacour-co.) Control of the e Total. Add lines 11a-11d ,380,588.2,585,819. 0. 12,440. Total revenue. See instructions

	on 501(c)(3) and 501(c)(4) organizations must comp Check if Schedule O contains a respon		this Part IX		
	oot include amounts reported on lines 6b, 3b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations		I		
	and domestic governments. See Part IV, line 21			Terro Gartinger (d. Edwinso)	AND THE
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign		•	A STATE OF BUILDING	
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				A Company
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	252,555.		252,555.	,
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	1,226,388.	1,226,388.		
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	141,958.	141,958.		
10	Payroll taxes	343,147.	343,147.		
11	Fees for services (nonemployees):			+	
а	Management	67,379.		67,379.	
b	Legal	26,544.		26,544.	
C	Accounting	49,779.	41,779.	8,000.	
d					
e	Professional fundraising services. See Part IV, line 17			27532506365	
f	Investment management fees				
g					
	column (A), amount, list line 11g expenses on Sch 0.)				
12	Advertising and promotion	1,155.	903.	252.	
13	Office expenses	85,284.	85,284.		
14	Information technology	72,108.	72,108.		
15	Royalties				
16	Occupancy	57,747.		57,747.	
17	Travel	37,406.	37,406.		,
 18	Payments of travel or entertainment expenses		- :		
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings		:		
20	Interest	109,633.		109,633.	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	209,959.		209,959.	
23	Insurance	26,238.		26,238.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
а	0.1.	201,492.	201,167.	325.	
b	a 1	123,969.	105,953.	18,016.	
o O	27	50,814.	35,568.	15,246.	
d	0mmm = 1 1 1 1 1	-326,164.	-326,164.		
	All other expenses			<u> </u>	
е 25	Total functional expenses. Add lines 1 through 24e	2,757,391.	1,965,497.	791,894.	0.
<u>25</u> 26	Joint costs. Complete this line only if the organization	-,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		1	
~ U	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.			1	1
	Check here (1972) MANUAL CORP. OF A MANUAL CORP.				

Balance Sheet

Part X Check if Schedule O contains a response or note to any line in this Part X Beginning of year End of year 812,513. 644,955. Cash - non-interest-bearing 1 2 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 3 35,362. 181,451. 4 4 Accounts receivable, net 5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) Notes and loans receivable, net 7 Inventories for sale or use 8 34,167. 140,189. 9 Prepaid expenses and deferred charges 9. 被影響的物質的物 10a Land, buildings, and equipment: cost or other 4,965,498. basis, Complete Part VI of Schedule D ______ 10a b Less: accumulated depreciation 10b 774,997. 4,092,544. 4,190,501. 10c 11 Investments - publicly traded securities 11 12 Investments - other securities. See Part IV, line 11 12 Investments - program-related. See Part IV, line 11 13 .13 14 14 Intangible assets 968,426. Other assets. See Part IV, line 11 15 15 4,974,586. 6,125,522. 16 16 Total assets. Add lines 1 through 15 (must equal line 33) 280,821. 357,504. Accounts payable and accrued expenses 17 17 18 18 Grants payable 19 Deferred revenue 19 20 Tax-exempt bond llabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 AND PERMIT SHOPE OF Loans and other payables to any current or former officer, director, 4 trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 2,466,587. 6,145,609. Secured mortgages and notes payable to unrelated third parties 23 23 24 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 8,598. 817,432 of Schedule D 25 ,756,006. 320,545. 26 Total liabilities. Add lines 17 through 25 X Organizations that follow FASB ASC 958, check here Net Assets or Fund Balances and complete lines 27, 28, 32, and 33, 492,184. 1,921,401. Net assets without donor restrictions 27 27 -3,116,424. Net assets with donor restrictions 1,726,396. 28 A STATE OF THE REAL PROPERTY. Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. Capital stock or trust principal, or current funds 29 30 Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds 31 31 2,218,580. -1,195,023.32 32 Total net assets or fund balances 6,125,522. Total liabilities and net assets/fund balances 4,974,586. 33

Form 990 (2022)

Form	990 (2022) Mesa Valley Community School, Inc.	<u>47-1</u> 2	166814	Pag	_е 12
Pai	TXI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,380		
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,757		
3	Revenue less expenses. Subtract line 2 from line 1	3	623		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	2,218	<u>,58</u>	<u> </u>
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9	-4,036	,80	<u>) () . </u>
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	-1,195	,02	<u> </u>
Pa	rt XIII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
	·		Energy Court	Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other		_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	0.	seleni		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a		1557) 1577	根据2 译 安祝
	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		<u> X</u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,	Para		
	consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis		55.52		
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audlt,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	edule O.			731
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R, Part 200, Subpart F?	********	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red audit			ı
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		

3b Form **990** (2022)

SCHEDULE A

(Form 990)

Department of the Treasury internal Revenue Service

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

ZUZZOpen to Public

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Mesa Valley Community School, Inc.

Employer identification number 47–1166814

	MCBU	· varrey cor	HEHOTET CA DOTTO	<i>7 - 1</i> - 1 - 1	,± C •		1 TIOOOTA			
Part I	Reason for Public	Charity Status.	(All organizations must c	omplete tl	his part.) S	ee instructions.				
The orga	nization is not a private found	dation because it is: (l	For lines 1 through 12, c	heck only	one box.)	,				
1 🗔	A church, convention of ch	urches, or associatio	n of churches described	in sectio	n 170(b)(1	I)(A)(i).				
2 X	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).)									
3	A hospital or a cooperative)(b)(1)(A)(ii	i).				
4	A medical research organiz					-	the hospital's name.			
•	city, and state:				000110	eta ti ata ata ata a				
5	An organization operated for	or the benefit of a col	liege or university owner	or operat	ed by a go	vernmental unit describe	ad in			
J [nego of university owner	i or operar	ea by a gu	Activitiental and account	20 III			
	section 170(b)(1)(A)(iv). (TOU VAVAL					
6	A federal, state, or local go	-				• •				
7	An organization that norma	•	ntial part of its support fi	om a gove	ernmental	unit or from the general i	public described in			
	section 170(b)(1)(A)(vi). (C						•			
8	A community trust describe						•			
9	An agricultural research or									
	or university or a non-land-	grant college of agric	ulture (see Instructions).	Enter the	name, city	, and state of the college	or			
	university:		·				1			
10	An organization that norma	ally receives (1) more	than 33 1/3% of its supp	ort from c	ontribution	ns, membership fees, and	d gross recelpts from			
	activities related to its exer	npt functions, subjec	t to certain exceptions; a	and (2) no	more than	33 1/3% of its support f	rom gross investment			
	income and unrelated busi	ness taxable income	(less section 511 tax) fro	m busines	sses acqui	red by the organization a	after June 30, 1975.			
	See section 509(a)(2). (Co	mplete Part III.)								
11 🗀	An organization organized	and operated exclusi	vely to test for public sa	fety. See	section 50)9(a)(4).				
12 🗔	An organization organized	and operated exclusi	vely for the benefit of, to	perform t	he function	ns of, or to carry out the	purposes of one or			
	more publicly supported or	•								
	lines 12a through 12d that						:			
а	Type I. A supporting orga						alvina			
	the supported organization									
	organization. You must			11110,0112,	51 and an oc	, , , , , , , , , , , , , , , , , , ,	apportung			
b 🗌	Type II. A supporting org	-		tion with it	e elloporta	nd organization(s), by hav	ilna			
	control or management of									
				aille perso	i io u iai co	illioi oi manage ine supi	ported			
	organization(s). You mus	-		!	ماسلانين سيمانا	om al from all and all of limite accepts	ماناه در ام			
c L	☐ Type III functionally integrated assumption to a superior of a su						au with,			
	its supported organizatio		-							
d∟	Type III non-functionally									
	that is not functionally in						veness			
·	requirement (see instruct	tions). You must co n	nplete Part IV, Sections	A and D,	and Part	V.				
e L	Check this box if the orga	anization received a \	written determination fro	m the IRS	that it is a	Type I, Type II, Type III				
	functionally integrated, o									
f Ent	ter the number of supported o	organizations		*************						
g Pro	ovide the following information									
	(i) Name of supported	(ii) EIN	(iii) Type of organization (described on lines 1-10	(IV) IS the orga in your govern	anization listed ing document?	(v) Amount of monetary	(vi) Amount of other			
	organization		above (see instructions))	Yes	No	support (see instructions)	support (see instructions)			
-										
			 				<u> </u>			
					 					
							1			
	*****		Liver to the second of the sec	Caracita (Sec	LE SENSEY		 			
Total		■ 4.2 しかでの物質のこのは関係のできる場合は「中国語」	■ 15-1 中心 2017年1月1日 1日 1	in the action of the action of the contract	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)		i e			

Π	Support Sche	dule for Organizations	Described in Section	is 170(b)(1)(A)(iv) and	170(b)(1)(A)(vi)

lendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
Gifts, grants, contributions, and						
membership fees received. (Do not						
include any "unusual grants.")						
Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf						
The value of services or facilities						
furnished by a governmental unit to						
the organization without charge						
Total, Add lines 1 through 3						
The portion of total contributions		7 4 2 7 10 10 10 10 10 10 10 10 10 10 10 10 10				
by each person (other than a						
governmental unit or publicly				Recorded to		
supported organization) included						
on line 1 that exceeds 2% of the						
amount shown on line 11,		17.000.3400	# 1 / 442 K Y (24) 19	LAGARIAN PER		
column (f)			Carry Carry Carry			
Public support, Subtract line 5 from line 4.						
ection B. Total Support	<u> 1838 - Grander Stander, der der Stander</u>	ELL LE POLIS DE VINE ROLL MARCHA (M.	1000 Carl Sq. 1200 Say 1000	The state of the s	ST S	
endar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
Amounts from line 4	(4,7,55,5	(3)	1-7			
Gross income from interest,			***	***		
dividends, payments received on						
securities loans, rents, royalties,]				
				1		
· ·					1 3	
and income from similar sources						
and income from similar sources Net Income from unrelated business						
and income from similar sources Net income from unrelated business activities, whether or not the						
and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on						
and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income. Do not include gain						
and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital						
and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. Add lines 7 through 10	ato (cos instruction				12	
and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. Add lines 7 through 10 Gross receipts from related activities,	•		fourth or fifth toy		12 01(a)(3)	
and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. Add lines 7 through 10 Gross receipts from related activities, First 5 years. If the Form 990 ls for the	ne organization's fi	rst, second, third,		year as a section 5	01(c)(3)	
and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. Add lines 7 through 10 carries receipts from related activities, First 5 years. If the Form 990 is for the organization, check this box and stores.	ne organization's fi p here	rst, second, third,		year as a section 5	01(c)(3)	
and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. Add lines 7 through 10 Gross receipts from related activities, First 5 years. If the Form 990 is for the organization, check this box and storection C. Computation of Publications.	ne organization's fi p here ic Support Pei	rst, second, third, centage		year as a section 5	01(c)(3)	
and income from similar sources Net Income from unrelated business activities, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. Add lines 7 through 10 Gross receipts from related activities, First 5 years. If the Form 990 is for the organization, check this box and storection C. Computation of Public Public support percentage for 2022 (I	ne organization's fi o here ic Support Pei Ine 6, column (f), c	rst, second, third, centage livided by line 11, o	column (f))	year as a section 5	01(c)(3)	
and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. Add lines 7 through 10 Gross receipts from related activities, First 5 years. If the Form 990 is for the organization, check this box and stop oction C. Computation of Public Support percentage for 2022 (I Public support percentage from 2021)	ne organization's fi p here ic Support Per lne 6, column (f), c Schedule A, Part	rst, second, third, rcentage livided by line 11, of II, line 14	column (f))	year as a section 5	01(c)(3) 14 15	
and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. Add lines 7 through 10 Gross receipts from related activities, First 5 years. If the Form 990 is for the organization, check this box and stop ection C. Computation of Public Public support percentage for 2022 (If Public support percentage from 2021 is 33 1/3% support test - 2022. If the contents are support test - 2022.	ne organization's fi p here ic Support Per Ine 6, column (f), c Schedule A, Part organization did no	rst, second, third, rcentage livided by line 11, of the 14 control of the box	column (f))	year as a section 5	01(c)(3) 14 15 lore, check this box	and
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and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. Add lines 7 through 10 Gross receipts from related activities, First 5 years. If the Form 990 is for the organization, check this box and stop ection C. Computation of Public Public support percentage for 2022 (If Public support percentage from 2021 as 33 1/3% support test - 2022. If the contents are support test - 2022.	ne organization's fine here ic Support Per line 6, column (f), c Schedule A, Part organization did no as a publicly supporganization did no	rst, second, third, rcentage livided by line 11, of the line 14 of check the box of the local order organization of the local of the local organization organization of the local organization organization organization of the local organization organization of the local organization organizat	column (f)) n line 13, and line line 13 or 16a, and	year as a section 5	01(c)(3) 14 15 ore, check this box or more, check this	and box

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

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

organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization

Part III Support Schedule for	Organizations	Described in a	section sosta)(2)		
(Complete only if you checke	ed the box on line 10	of Part I or if the	organization failed	to qualify under P	art II. If the organizat	ion fails to
qualify under the tests listed Section A. Public Support	below, please comp	olete Part II.)				
Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1 Gifts, grants, contributions, and	(4) 20 (0	(4) 23 :3	(4) 2425	(4)	, , , , , , , , , , , , , , , , , , , ,	
membership fees received. (Do not						
include any "unusual grants.")						
2 Gross receipts from admissions,						
merchandlse 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-			1			
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					<u> </u>	
		1				
furnished by a governmental unit to	'					
the organization without charge					 	
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b) Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the		·				
amount on line 13 for the year			:			
c Add lines 7a and 7b	on the art of the first of the art of the first of the art of the	r (1860) santanni si wakale wilike	I Societa Madi sobjetoviči, dos		V. MEC SALIS CYCLES SEE A 2	· · · · · · · · · · · · · · · · · · ·
8 Public support. (Subtract line 7c from line 6.)	「おかけれておかけませき」機能をおいる可能		2. 10. 2. 2. 2. 11. 12. 12. 12. 12. 12. 12. 1	THE PROPERTY OF THE CONTRACTOR	行。 医内部结束 法通过的现在分词 医克拉克氏征 医克尔氏征	
Costion P. Total Cunnort	Light of the state			Ben a site of the estimate of the same	The second secon	
Section B. Total Support	Tassas was jense pipa sign-				T 410000 I	
Section B. Total Support Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
Section B. Total Support Calendar year (or fiscal year beginning in) 9 Amounts from line 6		(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
Section B. Total Support Calendar year (or fiscal year beginning in) 9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties,		(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
Section B. Total Support Calendar year (or fiscal year beginning in) 9 Amounts from line 6 10a Gross income from Interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources		(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
Section B. Total Support Calendar year (or fiscal year beginning in) 9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources b Unrelated business taxable income		(b) 2019	(e) 2020	(d) 2021	(e) 2022	(f) Total
Section B. Total Support Calendar year (or fiscal year beginning in) 9 Amounts from line 6 10a Gross income from Interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesse		(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
Section B. Total Support Calendar year (or fiscal year beginning in) 9 Amounts from line 6 10a Gross income from Interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesse acquired after June 30, 1975	s	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
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Section B. Total Support Calendar year (or fiscal year beginning in) 9 Amounts from line 6 10a Gross income from Interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesse acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 13 Total support. (Add lines 9, 10c, 11, and 12.) 14 First 5 years. If the Form 990 is for check this box and stop here	the organization's fi blic Support Per (line 8, column (f), c 21 Schedule A, Part	rst, second, third, rcentage divided by line 13,	fourth, or fifth tax y	/ear as a section (501(c)(3) organization	7,
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Section B. Total Support Calendar year (or fiscal year beginning in) 9 Amounts from line 6 10a Gross income from Interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesse acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 13 Total support. (Add lines 9, 10c, 11, and 12.) 14 First 5 years. If the Form 990 is for check this box and stop here Section C. Computation of Put 15 Public support percentage for 2022 16 Public support percentage from 2035 Section D. Computation of Investment income percentage from 18 investment income p	the organization's fi blic Support Per (line 8, column (f), c 21 Schedule A, Part estment Income 2022 (line 10c, column 2021 Schedule A,	rcentage divided by line 13, lil, line 15 Percentage mn (f), divided by line 17	fourth, or fifth tax y	/ear as a section t	501(c)(3) organization 15 16	% % %
Section B. Total Support Calendar year (or fiscal year beginning in) 9 Amounts from line 6 10a Gross income from Interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesse acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 13 Total support. (Add lines 9, 10c, 11, and 12.) 14 First 5 years. If the Form 990 is for check this box and stop here Section C. Computation of Public support percentage from 202 16 Public support percentage from 202 17 Investment income percentage from 19a 33 1/3% support tests - 2022. If the position of the sale of tests - 2022. If the support tests - 2022.	the organization's final time of the organization's final time of the organization's final time of the organization of the org	drst, second, third, rcentage divided by line 13, III, line 15 Percentage mn (f), divided by l Part III, line 17 not check the box	fourth, or fifth tax y	/ear as a section 6	501(c)(3) organization 15 16 17 18 33 1/3%, and line 17	% % % % is not
Section B. Total Support Calendar year (or fiscal year beginning in) 9 Amounts from line 6 10a Gross income from Interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesse acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 13 Total support. (Add lines 9, 10c, 11, and 12.) 14 First 5 years. If the Form 990 is for check this box and stop here Section C. Computation of Put 15 Public support percentage for 2022 16 Public support percentage from 2035 Section D. Computation of Investment income percentage from 18 investment income p	the organization's final time and stop here. The	rcentage divided by line 13, lll, line 15 e Percentage mn (f), divided by line 17 not check the box e organization qual	fourth, or fifth tax y column (f)) ine 13, column (f)) on line 14, and line ifles as a publicly s	/ear as a section of	15 16 17 18 33 1/3%, and line 17 ation	% % % is not

Bast V Com 990) 2022

Part IV Supporting Organizations

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

Section	A. All	Supporting	Organ	izations

- 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.
- 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? /f "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (I) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7?

 If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI**.
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

		Yes	No
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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.

Schedule A (Form 990) 2022

3a

0-1	dule A (Form 990) 2022 Mesa Valley Community S	school	Inc. 4	7-116681 4 Page 6
Scne Pa r		ng Organ		/ IIIOOIII Tageo
1	Check here if the organization satisfied the Integral Part Test as a qualifying			art VI). See instructions.
-	All other Type III non-functionally integrated supporting organizations mus		•	·
Secti	on A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see Instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		·
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see	74:33 2772		
	instructions for short tax year or assets held for part of year):	200 miles		
a	Average monthly value of securities	1a		4.1
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d	•	the second of th
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):	14,25		
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,			1.0
	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	of many street was given the fact where the provided with the first the first or the contract.	
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	PERMITTING TO SERVER STATES	
	Enter 0.85 of line 1.	2		

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

<u>3</u>

5

ing out parallel age in the

Minimum asset amount for prior year (from Section B, line 8, column A)

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

emergency temporary reduction (see instructions).

Enter greater of line 2 or line 3.

instructions).

Income tax imposed in prior year

Schedule A (Form 990) 2022

7

Schedule A (Form 990) 2022

a Excess from 2018 b Excess from 2019 c Excess from 2020 d Excess from 2021 e Excess from 2022

Schedule A	(Form 990) 2022	мева	valley	Commur	TICA !	20100Т	' TUG.	4	<u>1-TT000</u>	14 Page 8
Part VI	Supplemental Inform Part IV, Section A, lines 1, line 1; Part IV, Section D, I Section D, lines 5, 6, and 8 (See instructions.)	nation. 2, 3b, 3c, ines 2 and 8; and Pari	Provide the e 4b, 4c, 5a, 6, 3; Part IV, Se V, Section E	explanations, , 9a, 9b, 9c, ection E, lines , lines 2, 5, a	required b 11a, 11b, a s 1c, 2a, 2 ind 6. Also	y Part II, ling and 11c; Pa b, 3a, and 3 complete t	e 10; Part II, li urt IV, Section 3b; Part V, line his part for an	ne 17a or 17b B, lines 1 and 1; Part V, Sed y additional in	Part III, line 2; Part IV, Section B, line 1 formation.	12; ection C, e; Part V,
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SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2022
Open to Public Inspection

Name of the organization

Mesa Valley Community School, Inc.

Employer identification number 47-1166814

Pa	Organizations Maintaining Donor Advise organization answered "Yes" on Form 990, Part IV, Iin		or Accounts. Complete if the
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advis	ed funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can be	used only
	for charitable purposes and not for the benefit of the donor o	r donor advisor, or for any other purpose	conferring
Commission -	impermissible private benefit?		Yes No
Pa	til Conservation Easements. Complete if the org	ganization answered "Yes" on Form 990,	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).	
	Preservation of land for public use (for example, recrea	ition or education) 🔲 Preservation o	f a historically important land area
	Protection of natural habitat	Preservation o	f a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	fied conservation contribution in the form	
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
C	Number of conservation easements on a certified historic stru		2c
d	Number of conservation easements included in (c) acquired a		
	historic structure listed in the National Register		
3	Number of conservation easements modified, transferred, release	eased, extinguished, or terminated by the	e organization during the tax
	year		
4	Number of states where property subject to conservation eas		
5	Does the organization have a written policy regarding the per		
	violations, and enforcement of the conservation easements it	***************************************	
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing con-	servation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and enforcing conserva	tion easements during the year
			• •
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170	(h)(4)(B)(i)
	and section 170(h)(4)(B)(li)?	C14417414	Yes No
9	In Part XIII, describe how the organization reports conservation	on easements in its revenue and expense	statement and
	balance sheet, and include, if applicable, the text of the footn	note to the organization's financial statem	ents that describes the
	organization's accounting for conservation easements.		
Pai	Collections Maintaining Collections of	· · · · · · · · · · · · · · · · · · ·	ther Similar Assets.
	Complete if the organization answered "Yes" on Form		
1a	If the organization elected, as permitted under FASB ASC 95	•	
	of art, historical treasures, or other similar assets held for pub	· · · · · · · · · · · · · · · · · · ·	•
	service, provide in Part XIII the text of the footnote to its finan		
b	If the organization elected, as permitted under FASB ASC 95	•	
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in furth	nerance of public service,
	provide the following amounts relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		
2	If the organization received or held works of art, historical trea	asures, or other similar assets for financia	il gain, provide
	the following amounts required to be reported under FASB A	•	
а	Revenue included on Form 990, Part VIII, line 1	***************************************	\$
h	Assets included in Form 990, Part X		¢

	dule D (Form 990) 2022 Mesa Va. t III Organizations Maintaining C	lley Commun				Othe		ts contin		ge <u>2</u>
3	Using the organization's acquisition, accessi								uea)	_
3	collection items (check all that apply):	on, and other record	5, UIGUN	any or uno i	Ollowing that	make a	grimearit dae or it	3		
	Public exhibition			000 04 040	hanaa nraara					
a	- 	d			hange progra					
b	Scholarly research	e	,,	Jiner	·					—
C	Preservation for future generations	H O					t	37811		
4	Provide a description of the organization's co	•		-	-			art Aill.		
5	During the year, did the organization solicit o							Yes		N1-
Dar	to be sold to raise funds rather than to be matter than the property of the the property									No
Fai	reported an amount on Form 990, Pai		ete ir tne	organizatio	n answered "	Yes or	ronn 990, Part r	v, line 9, or		
1a	Is the organization an agent, trustee, custodi	an or other intermed	iary for c	ontributions	s or other ass	ets not	included			
	on Form 990, Part X?						Г	Yes		No
b	If "Yes," explain the arrangement in Part XIII						-			
-			•					Amount		
С	Beginning balance						1c	•		
	Additions during the year									
e	Distributions during the year									
4										
0-	Ending balance Did the organization include an amount on Fe							Yes	\Box	No
	9		•				-		$\overline{\Box}$	NO
	If "Yes," explain the arrangement in Part XIII. TY Endowment Funds. Complete						10			
ı aı	Lindowillent Fullus. Complete			•	1		(d) Three years bac	ok (a) Four	voare h	nok
		(a) Current year	(0) P	rior year	(C) TWO year	SDACK	(G) Tillee years oar	ck (e) Four	years b	aun
1a	Beginning of year balance									
b	Contributions				ļ					
C	Net investment earnings, gains, and losses						ų, <u>– -</u> ,			
d	Grants or scholarships									
е	Other expenditures for facilities				,					
	and programs				ì					
f	Administrative expenses									
g	End of year balance	l'		,						
2	Provide the estimated percentage of the curr		o /line 1a	column (a)	// held as:					
	, –	· · · · · · · · · · · · · · · · · · ·	% %	, ooiamii (a	n Hola do.					
_	Board designated or quasi-endowment	%	— ⁷⁶					•		
b	Permanent endowment		-							
C		%								
	The percentages on lines 2a, 2b, and 2c sho									
За	Are there endowment funds not in the posse	ssion of the organiza	ation that	are held ar	nd administer	ed for ti	ne	Г	V	
	organization by:								Yes	No
	(i) Unrelated organizations							3a(i)		
	(ii) Related organizations							3a(ii)		
b	If "Yes" on line 3a(ii), are the related organiza	itions listed as requir	red on Sc	hedule R?				3b		
4	Describe in Part XIII the intended uses of the		wment fu	unds.						
Par	t VI Land, Buildings, and Equipm	ient.								
	Complete if the organization answere	d "Yes" on Form 990), Part IV	, Ilne 11a. S	See Form 990	, Part X	, line 10.			
	Description of property	(a) Cost or o			t or other (other)	1-7	Accumulated epreciation	(d) Boo	k value	
10	Land	<u></u>	- /		2,117.	Mar die	Selection Con	491	2,11	7.
	Land	k"			5,312.	esterni et trejetti.	774,997.	3,49		
b	Buildings			=,40	J, J140		,, ₂ ,,,,,	2/=2/	, , , ,	<u> </u>
C	Leasehold improvements			20	8 060			200	3,06	<u>a</u>
	Equipment			40	8,069.			400	5,00	3.
	Other							/ 10	0 50	1
Tota	I. Add lines 1a through 1e. <i>(Column (d) must e</i>	aual Form 990. Part	X. colum	ın (B). line 1	<i>0c.</i>)			4,19	U,5V	<u> </u>

Schedule D (Form 990) 2022 Mesa Valley	Community So	chool, Inc.	47-1166814 Page 3
Part VII Investments - Other Securities.	E 000 D 1411	444 0 5 000 5 18 5	•
Complete if the organization answered "Yes" o	· · · · · · · · · · · · · · · · · · ·		
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of Valuation: Gos	et or end-of-year market value
(1) Financial derivatives			<u> </u>
(2) Closely held equity interests	·····		
(3) Other			<u> </u>
(A)			
(B) · · · ·			
(C)			
(D)			·
<u>(E)</u>			
(F)	• •		
(G)			<u> </u>
(H).	····		Charles to the control of the feet of the control o
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" o			
(a) Description of investment	(b) Book value	(c) Method of valuation: Cos	st or end-of-year market value
(1)			
(2)		1	<u> </u>
(3)	<u> </u>		
(4)	· · · · · · · · · · · · · · · · · · ·		<u> </u>
(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" or	n Farm 000 Dart IV I'm	a 11d Cas Form 000 Dark V line 1	
	Description	a Tu. See Form 990, Fart A, lifte 1	(b) Book value
(1) OPEB Adjustment	resomption		41,042.
(2) Pension Adjustment	· · · · · · · · · · · · · · · · · · ·		927,384.
		·	927,304.
(3)			
(4)			<u> </u>
(5)			
(6)	·		
(7) (8)			
		· · · · · · · · · · · · · · · · · · ·	
(9) Total. (Column (b) must equal Form 990, Part X, col. (B) line	151	· · · · · · · · · · · · · · · · · · ·	968,426.
Part X Other Liabilities.	10:/		
Complete if the organization answered "Yes" o	n Form 990. Part IV. line	e 11e or 11f. See Form 990. Part X	. llne 25.
. (a) Deparintion of liability			(b) Book value
(1) Federal income taxes			
(2) Deferred Inflows - Pension			759,243.
(3) Deferred Inflows - OPEB			58,189.
(4)			00,200.
(5)			
(6)			······································
(7)	·	·	
(8)		·	
(9)			
Total. (Column (b) must equal Form 990. Part X. col. (B) line	25.1	***************************************	817,432.
- V-Sun (Column (D) must equal Form 330, Fart A, Col. (B) line	CU.,	*	·······

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) 2022 Mesa Valley Community S			814 Page 4
Part XI Reconciliation of Revenue per Audited Financial Sta	tements With Revenu	e per Return.	
Complete if the organization answered "Yes" on Form 990, Part IV, lir	ne 12a.		
1 Total revenue, gains, and other support per audited financial statements		1 3,	380,588.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 1		
a Net unrealized gains (losses) on investments	2a		
b Donated services and use of facilities			
c Recoveries of prior year grants	2c	33	
d Other (Describe in Part XIII.)		324	_
e Add lines 2a through 2d		2e	0.
3 Subtract line 2e from line 1		3 3,	380,588.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		688	-
a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b Other (Describe in Part XIII.)			
c Add lines 4a and 4b		4c	0.
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I. line 12.		1 1 ^	380,588.
Part XII Reconciliation of Expenses per Audited Financial St	atements With Expen	ses per Return.	
Complete if the organization answered "Yes" on Form 990, Part IV, li	ne 12a.		
1 Total expenses and losses per audited financial statements	·	1 2,	757,391.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a Donated services and use of facilities	2a		
b Prior year adjustments		34870 44874	
c Other losses	l i		
d Other (Describe in Part XIII.)			
e Add lines 2a through 2d		20	0.
3 Subtract line 2e from line 1			757,391.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a Investment expenses not included on Form 990, Part VIII, line 7b	42		
b Other (Describe in Part XIII.)		4c	0.
c Add lines 4a and 4b			757,391.
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990. Part I, line 1 Part XIII Supplemental Information.	8.)	5 Z ₁	737,334.
Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and Ines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a			.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
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SCHEDULE E

(Form 990)

Schools

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

2022

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Attach to Form 990 or Form 990-EZ.

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

Mesa Valley Community School, Inc.

Employer identification number 47-1166814

Pa	rag		· .	
			YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter,			
	bylaws, other governing instrument, or in a resolution of its governing body?	1	X	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures,		O. CO.	
	catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	X	
3	Has the organization publicized its racially nondiscriminatory policy on its primary publicly accessible Internet		* 3	
	homepage at all times during its tax year in a manner reasonably expected to be noticed by visitors to the	10000	anain.	
	homepage, or through newspaper or broadcast media during the period of solicitation for students, or during the			
	registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general			
	community it serves? If "Yes," please describe. If "No," please explain. If you need more space, use Part II	3	Х	
	Statements on the racially nondiscriminatory policy are		200	
	provided in the MVCS office, but not publicized in newpaper			
	or broadcast media.	100	100	
			4. A.	
			NO.	4
4	Does the organization maintain the following?	475	ar is	W S
а	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	X	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	X	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing			
	with student admissions, programs, and scholarships?	4c	X	<u> </u>
ď	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	X	<u> </u>
	If you answered "No" to any of the above, please explain. If you need more space, use Part II.	1.45	\$1000	
			17.74	100
		146		8 19 3
			(A)	
5	Does the organization discriminate by race in any way with respect to:	(Chick		
а	Students' rights or privileges?	5a		X
b	Admissions policies?	5b		Х
c	Employment of faculty or administrative staff?	5c		X
	Scholarships or other financial assistance?	5d		X
	Educational policies?	5е		X
f	Use of facilities?	5f		X
g	Athletic programs?	5g		X
h	Other extracurricular activities?	5h		X
	If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.	Y.	2.40	
			37.5	
		163		
		100		
6a	Does the organization receive any financial aid or assistance from a governmental agency?	6a	444 (584 (5	X
	Has the organization's right to such aid ever been revoked or suspended?	6b		X
-	If you answered "Yes" on either line 6a or line 6b, explain on Part II.		#1.977	1700
7	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through	(F) (Marr)		
-	4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, as modified by Rev. Proc. 2019-22, 2019-22 I.R.B. 1260, covering	100.2		
	racial nondiscrimination? If "No " explain on Part II	7	l x	io asserbia

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

Schedule E (Form 990) 2022

Schedule E	E (Form 990) 2022	Mesa	Valley	Community	School,	Inc.	47-1166814	Page 2
Part II	Supplemental Info	rmation.	Provide the e	xplanations required	by Part I, lines	3, 4d, 5h, 6b, and 7,	as	
	applicable. Also provide	anv other a	dditional infor	mation. See Instruct	ions.			
	approasion too promo	, any 0 10 . a					<u></u>	•
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SCHEDULE O (Form 990)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2022
Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Mesa Valley Community School, Inc.

Employer identification number 47-1166814

Form 990, Part I, Line 1, Description of Organization Mission:							
district and private resources, technology, and a learning community							
that includes family members, tutors, highly qualified instructors, and							
specialized consultants.							
Form 990, Part VI, Section B, line 11b:							
Board of directors reviews the 990.							
Form 990, Part VI, Section C, Line 19:							
No documents available to the public.							
Form 990, Part XI, line 9, Changes in Net Assets:							
Prior period adjustment for unreported Pension and OPEB							
<u>deferrrals</u> -4,036,800.							
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