efi	le GRAPHIC pri	nt - DC	NOT PROCESS As Filed Data -	DLN	l: 93393313016101				
	990-T		Exempt Organization Business Income Tax Return	n	OMB No. 1545-0047				
Forn	, 990-1		(and proxy tax under section 6033(e))		2020				
		For	calendar year 2020 or other tax year beginning 07-01-2020 and ending 06-30-202°	ı	2020				
_	24 =	'		_	Open to Public				
	rtment of the Treasury nal Revenue Service	►Do	► Go to www.irs.gov/Form990T for instructions and the latest information. not enter SSN numbers on this form as it may be made public if your organization is a 501.	(c)(3).	Inspection for 501(c)(3) Organizations Only				
A	Check box if address changed.								
	Exempt under section 501(c3)	or Type	Number, street, and room or suite no. If a P.O. box, see instructions. 55 MUSIC CONCOURSE DRIVE	E Group exemption number (see instructions)					
	408(e) □ 220(e) 408A □ 530(a) 529(a) □ 529A		City or town, state or province, and ZIP or foreign postal code SAN FRANCISCO, CA 94118	F 🗆	Check box if an amended return.				
			k value of all assets at end of year 832,230,890						
	Check organization t		\checkmark 501(c) corporation \Box 501(c) trust \Box 401(a) trust \Box Other trust \Box Appl	icable i	reinsurance entity				
	Check if filing only to		Claim credit from Form 8941 Claim a refund shown on Form 2439						
			ation filing a consolidated return with a $501(c)(2)$ titleholding corporation		▶ ⊔				
			d Schedules A (Form 990-T)						
			corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group)?	. ► Yes ✓ No				
	•		identifying number of the parent corporation ▶		(445) 270 5444				
L	he books are in car		INKE MCGEE 5 MUSIC CONCOURSE DRIVE	ne num	nber ► (415) 379-5141				
			AN FRANCISCO, CA 94118						
Pa	art I Total Un	relate	d Business Taxable Income						
1	Total of unrelated instructions)		s taxable income computed from all unrelated trades or businesses (see	1	151,031				
2	Reserved .			2					
3	Add lines 1 and 2			3	151,031				
4	Charitable contrib	outions (see instructions for limitation rules)	4	0				
5	Total unrelated b	usiness t	axable income before net operating losses. Subtract line 4 from line 3	5	151,031				
6	Deduction for net	operati	ng loss. See instructions	6					
7	Total of unrelated Subtract line 6 fro		s taxable income before specific deduction and section 199A deduction.	7	151,031				
8	Specific deduction	n (gener	ally \$1,000, but see instructions for exceptions)	8	1,000				
9	Trusts. Section 1	L99A dec	luction. See instructions	9					
10	Total deduction	s. Add li	nes 8 and 9	10	1,000				
11			able income. Subtract line 10 from line 7. If line 10 is greater than line 7, enter	11	150,031				
Pa	rt III Tax Com	nputati	on						
1	Organizations t	axable a	as corporations. Multiply Part I, line 11 by 21% (0.21)	1	31,507				
2			rates. See instructions for tax computation. Income tax on the amount on Tax rate schedule or □ Schedule D (Form 1041) · · · · · · · · ▶	2					
3	Proxy tax. See in			3					
4	Other tax amount			4					
5	Alternative minim	num tax	(trusts only)	5					
6			acility income. See instructions	6					
_7			n 6 to line 1 or 2, whichever applies	7	31,507				
For I	Paperwork Reduction	Act Not	ice, see instructions. Cat. No. 11291J		Form 990-T (2020)				

orm	990-T (2	020)								Page 2
Part		Tax and Payments								
1a	Foreign	tax credit (corporations attach Form 1118	3; trusts attach Form 1116)	1a						
b	Other c	edits (see instructions)		1 b						
		business credit. Attach Form 3800 (see in	•	1c						
d	Credit fo	or prior year minimum tax (attach Form 8	801 or 8827)	1 d						
e	Total c	edits. Add lines 1a through 1d					1e			
2		t line 1e from Part II, line 7	<u>.</u>	· ·_			2		3	31,507
3	Other ta	xes. Check if from:	Form 8611 Form 869:	7 L • •	J Form 8866 • • • • •		3			
4		x. Add lines 2 and 3 (see instructions). [1294. Enter the tax amount here	Check if includes tax previ	ously o	deferred unde	r 	4		3	31,507
5	2020 ne	t 965 tax liability paid from Form 965-A o	or Form 965-B, Part II, colum	n (k),	line 4		5			0
6a	Paymen	ts: A 2019 overpayment credited to 2020		6a		18,969				
b	2020 es	timated tax payments. Check if section 6	43(g) election applies ▶ 🗌	6b						
c	Tax dep	osited with Form 8868		6c						
d	Foreign	organizations: Tax paid or withheld at so	urce (see instructions) .	6d						
e	Backup	withholding (see instructions)		6e						
f	Credit fo	or small employer health insurance premi	ums (attach Form 8941) .	6f						
g	Other ci	redits, adjustments, and payments: \Box F		6g		204				
7	Total p	ayments. Add lines 6a through 6g					7		1	19,173
8	-	ed tax penalty (see instructions). Check if				. ▶□	8			193
9	Tax du	. If line 7 is smaller than the total of line	s 4. 5. and 8. enter amount o	wed		· · · -	9		1	12,527
10		yment. If line 7 is larger than the total o	, , ,				10			
11	-	e amount of line 10 you want: Credited	, , ,		•	efunded▶	11			
Pari		Statements Regarding Certain Ac		mati						
1	financia	ime during the 2020 calendar year, did th account (bank, securities, or other) in a of Foreign Bank and Financial Accounts. If	foreign country? If "Yes," the	organ	ization may h	ave to file Fi			Yes	No
2	During t	he tax year, did the organization receive	a distribution from, or was it	the gr	antor of, or tr	ansferor to, a	a forei	gn trust?		No
	_	see instructions for other forms the orga	•	_	•	,		·		
3	Enter th	e amount of tax-exempt interest received	or accrued during the tax ye	ar		▶ \$				
4a	Did the	organization change its method of accour	ting? (see instructions) .							No
		'Yes," has the organization described the					' expla	in in Part V		
Par	t V	Supplemental Information							<u>'</u>	
rovic	le the ex	planation required by Part IV, line 4b. Als	o provide any other addtiona	inforn	nation. See in	structions.				
Sig	n belie	er penalties of perjury, I declare that I have exa f, it is true, correct, and complete. Declaration of MIKE MCGEE	mined this return, including accom				eparer May th with th	has any knowle ne IRS discuss the preparer sho	dge. his retu wn belo	rn ow
	'	Signature of officer	Date Title				(see ir	structions)? 🗹	Yes L	_l No
Paic	1	Print/Type preparer's name YONG ZHANG CPA	Preparer's signature		Date 2021-11-01	Check it	1.01	N 249785		
^o re	oarer	Firm's name ► RSM US LLP				Firm's EIN		14325		
Jse	Only	Firm's address ► 1861 INTERNATIONAL DI	RIVE SUITE 400			Phone no. (7	03) 336	5-6400		
		MCLEAN, VA 22102						Form (100-T	(2020

Name: CALIFORNIA ACADEMY OF SCIENCES

EIN: 94-1156258

Total gross recein

Total gross receipts							
Partnership or S Corporation name	Share of gross income	Share of deductions	Gain or loss				
CAS ENDOLITH ENDOWMENT FUND LP	125,331	-4,398	120,933				
CAS ENDOLITH ENDOWMENT FUND LP	0	0	0				

Total share of gross income: 125,331

Total share of deductions: -4,398

nare of deductions: -4,398

Total gain or loss: 120,933

Name: CALIFORNIA ACADEMY OF SCIENCES

EIN: 94-1156258

Total gross receints

Total gross receipts						
Partnership or S Corporation name	Share of gross income	Share of deductions	Gain or loss			
CAS ENDOLITH ENDOWMENT FUND LP	49,074	-14,392	34,682			
CAS ENDOLITH ENDOWMENT FUND LP	0	0	0			

Total share of gross income: 49,074

Total share of deductions: -14,392

Total gain or loss: 34,682

Name: CALIFORNIA ACADEMY OF SCIENCES

EIN: 94-1156258

Total gross receints

Total gross receipts						
Partnership or S Corporation name	Share of gross income	Share of deductions	Gain or loss			
CAS ENDOLITH ENDOWMENT FUND LP	9,727	-9,346	381			
CAS ENDOLITH ENDOWMENT FUND LP	0	0	0			

Total share of gross income: 9,727

Total share of deductions: -9,346

nare of deductions: -9,346

Total gain or loss: 381

Name: CALIFORNIA ACADEMY OF SCIENCES

EIN: 94-1156258

Total gross receints

Total gloss receipts							
Partnership or S Corporation name	Share of gross income	Share of deductions	Gain or loss				
CAS ENDOLITH ENDOWMENT FUND LP	0	-82,773	-82,773				
CAS ENDOLITH ENDOWMENT FUND LP	0	0	0				

Total share of gross income: 0

Total share of deductions: -82,773

Total gain or loss: -82,773

Name: CALIFORNIA ACADEMY OF SCIENCES

EIN: 94-1156258

Total gross receipts

Partnership or S Corporation name	Share of gross income	Share of deductions	Gain or loss
CAS ENDOLITH ENDOWMENT FUND LP	0	0	0
CALIFORNIA ACADEMY OF SCIENCES ENDOLITH ENDOWMENT FUND LP	0	-23,289	-23,289

Total share of gross income: 0

Total share of deductions: -23,289

Total gain or loss: -23,289

DLN: 93393313016101

As Filed Data -

Name: CALIFORNIA ACADEMY OF SCIENCES

EIN: 94-1156258

Total	gross	receipts
-------	-------	----------

Partnership or S Corporation name	Share of gross income	Share of deductions	Gain or loss
CAS ENDOLITH ENDOWMENT FUND LP	64,675	-90,058	-25,383

Total share of gross income: 64,675

Total share of deductions: -90,058

Total gain or loss: -25,383

Name: CALIFORNIA ACADEMY OF SCIENCES

EIN: 94-1156258

Total gross receipts

g								
Partnership or S Corporation name	Share of gross income	Share of deductions	Gain or loss					
CALIFORNIA ACADEMY OF SCIENCES ENDOLITH ENDOWMENT FUND LP	35	0	35					

Total share of gross income: 35

Total share of deductions: 0

nare of deductions: 0

Total gain or loss: 35

TY 2020 OtherDeductionSchedule

Name: CALIFORNIA ACADEMY OF SCIENCES

EIN: 94-1156258

Form 4562 amount:

Form 8873 amount:

Management fees (nonemployees):

Legal fee amount:

Accounting amount:

Lobbying amount:

Investment management amount:

Advertising and promotion

amount:
Insurance amount:

Occupancy amount:

Travel amount:

Information technology amount:

Office expenses amount:

 Other type of deduction
 Other type deduction amount

 INCOME TAX PREPARATION FEES
 4,500

efile GRAPHIC print - DO NOT PROCESS						D	LN:	93393313016101			
SCHEDULE A Unrelated Business Taxable Income						ne			OMB No. 1545-0047		
(Form 990-T) From an Unrelated Trade or Business								2020			
	tment of the Treasury al Revenue Service	►Go to www.irs.go ►Do not enter SSN number). O	pen to Public Inspection for 01(c)(3) Organizations Only
	Name of the organiza FORNIA ACADEMY O							iployer id 56258	entifica	tion	number
c (Jnrelated business a	ctivity code (see instructions) ▶ 211110	D Sequ	ence:		1		of		7
E [Describe the unrelate	ed trade or business ▶ PART	NERSHIP INVE	ESTMENTS	5						
Pa	rt I Unrelated	Trade or Business Inc	ome			(A) Income	.	(B) Ex	penses		(C) Net
1a	Gross receipts or s	ales									
b	Less returns and allow	vances	c Balanc	e ▶ 1 c							
2		(Part III, line 8)		<u> </u>							
3	-	act line 2 from line 1c		—							
4a		come (attach Sch D (Form 10ctions)		. 4a							
b	Net gain (loss) (Fo	rm 4797) (attach Form 4797) (see instruction	ons) 4b							
c	Capital loss deduct	ion for trusts		4c							
5	` ,	a partnership or an S corpo	•		9	120	0,933				120,933
6	Rent income (Part	IV)		. 6			0			0	
7	Unrelated debt-fina	anced income (Part V)		. 7			0			0	
8		royalties, and rents from a vI)		. 8			0			0	
9	Investment income organizations (Part	e of section 501(c)(7), (9), o	(17)	. 9			0			0	
10	Exploited exempt a	ctivity income (Part VIII) .		. 10							
11	Advertising income	(Part IX)		. 11			0			0	
12	•	instructions; attach stateme	•								
13	Total. Combine lin	es 3 through 12		. 13		120	0,933			0	120,933
Pai		ns Not Taken Elsewher with the unrelated busin		uctions f	or lin	nitations on	deduc	ctions) De	duction	ns mi	ust be directly
1	Compensation of o	fficers, directors, and trustee	s (Part X) .						[1	0
2	Salaries and wages								[2	
3	Repairs and mainte	enance							L	3	
4	Bad debts								[4	
5	,	atement) (see instructions)							[5	
6	Taxes and licenses									6	500
7		h Form 4562) (see instruction	•			7					
8	Less depreciation of	laimed in Part III and elsewh	ere on return	٠.		8a				8b	
9	Depletion									9	
10		ferred compensation plans .								10	
11		rograms							· ·	11	
12		enses (Part VIII)							· ·	12	
13	•	costs (Part IX)								13	0
14		, —							• •	14	4,500
15		=							•	15	5,000
16	Linrelated hucinece	income before net operating	i ioss deductic	on Subtra	ct line	15 trom Darl	t I lina	13 colum	in ((")	16	115 933

Deduction for net operating loss (see instructions)

17 18 115,933 Schedule A (Form 990-T) 2020

Sche	dule A (Form 990-T) 2020				Page 2
Par	Cost of Goods Sold Enter m	ethod of inventory va	aluation >		_
1	Inventory at beginning of year			1	
2	Purchases			2	
3	Cost of labor			3	
4	Additional section 263A costs (attach statement)		4	
5	Other costs (attach statement)			5	
6	Total. Add lines 1 through 5			6	
7	Inventory at end of year				
8	Cost of goods sold. Subtract line 7 from line 6				
9	Do the rules of section 263A (with respect to pro-	· · · · · · · · · · · · · · · · · · ·			∐ Yes ☐ No
Par	`	-			
1	Description of property (property street address	, city, state, ZIP code).	Check if a dual-use (see	instructions)	
	A				
	B L				
	c ⊔				
	D D	Α	В	С	
2	Rent received or accrued	A	В		<u> </u>
_	From personal property (if the percentage of				
-	rent for personal property is more than 10%				
	but not more than 50%)				
b	From real and personal property (if the percentage of rent for personal property				
	exceeds 50% or if the rent is based on profit				
	or income)				
С	Total rents received or accrued by property. Add lines 2a and 2b, columns A through D.				
	, ,				
3	Total rents received or accrued. Add line 2c colu	mns A through D. Enter	here and on Part I, line	6, column (A) . ► _	0
4	Deductions directly connected with the income				
	in lines 2(a) and 2(b) (attach statement) .				
5	Total deductions. Add line 4 columns A throug	h D. Enter here and on	Part I, line 6, column (B)		0
Day	t V Unrelated Debt-Financed Incom	a (see instructions)			
	Description of debt-financed property (property		to ZID and a) Charle if a	d	
1	A □	street address, city, sta	te, ZIP code). Check if a	dual-use (see instruction	15)
	в				
	c □				
	D				
		Α	В	С	D
2	Gross income from or allocable to debt-				
	financed property				
3	Deductions directly connected with or allocable to debt-financed property				
	Straight line depreciation (attach statement)				
b	Other deductions (attach statement)				
С	Total deductions (add lines 3a and 3b, columns A through D)				
4	Amount of average acquisition debt on or				
•	allocable to debt-financed property (attach statement)				
5	Average adjusted basis of or allocable to debt-				
	financed property (attach statement)				
6	Divide line 4 by line 5	%	%	%	%
7	Gross income reportable. Multiply line 2 by line 6				
8	Total gross income. (add line 7, columns A th	rough D). Enter here and	d on Part I, line 7, colum	n (A) ▶ _	0
9	Allocable deductions. Multiply line 3c by line 6				
10	Total allocable deductions. Add line 9, colum	ns A through D. Enter h	ere and on Part I, line 7,	column (B) · · ► _	0
11	Total dividends-received deductions include	d in line 10	<u></u>	<u></u> ▶ _	0
				Schedule A	(Form 990-T) 2020

Schedule Part VI	A (Form 990-T) 2020 Interest, Annuit	ios Dovo	ltice and De	mto from	m Combuol	lad Over	tio	/soo instrusti	2001	Page 3
Part V.	Interest, Annuit	ies, Roya	Titles, and Ke	ents troi	n Control			ed Organization		
				2 Not	unrelated		of specified	5. Part of colu		6. Deductions directly
1. N	lame of controlled organi	ization	2. Employer identification number	incom	unrelated le (loss) ltructions)		nts made	that is included in the control organization gross incorporations	ded lling n's	connected with income in column 5
(1)								_		
(2)										
(3)										
(4)										
			Non	exempt C	ontrolled Or	ganization:	S			
7	. Taxable income	inco	et unrelated ome (loss) instructions)		Total of spe payments m		that is in controlling	of column 9 cluded in the organization's s income		Deductions directly connected with ncome in column 10
(1)										
(2)										
(3)										
(4)										
Totals . Part VI	I Investment Income	me of a		(c)(7), (9), or (1 7 3. Deduc	7) Organ	ization (setly 4	column (A) 0 ee instructions Set-asides ach statement)	5)	5. Total deductions and set-asides
					1	statement			(add columns 3 and 4)
(1)										
(2)										
(3)										
(4)			Add amounts in c Enter here and c line 9, colum	on Part I, n (A)						add amounts in column 5. Enter here and on Part I, line 9, column (B)
Totals	<u></u>			0						0
Part VI	<u> </u>	-	ty Income, (Other Th	an Adver	tising In	icome (see	instructions)		
1 Des	scription of exploited acti	vitiy:								
2 Gro	ss unrelated business in	come from	trade or busine	ss. Enter l	here and on	Part I, line	e 10, column	(A)	2	
	penses directly connected umn (B)								3	
	income (loss) from unress 5 through 7		or business. Su			_	ain, complete		4	
5 Gro	ss income from activity t	that is not u	unrelated busine	ess incom	e				5	
6 Exp	enses attributable to inc	ome entere	d on line 5					[6	
	ess exempt expenses. S								7	

	dule A (Form 990-T) 2020				Page 4
	Advertising Income				
1	Name(s) of periodical(s). Check box if reporting $\mathbf{A} \square$	two or more periodical	s on a consolidated basi	S.	
	в 🗆				
	c 🗆				
	D 🗆				
Enter	amounts for each periodical listed above in the c	corresponding column.			
		Α	В	С	D
2	Gross advertising income				
а	Add columns A through D. Enter here and on Pa	rt I, line 11, column (A)		0
3	Direct Advertising costs by periodical				
а	Add columns A through D. Enter here and on Pa	rt I, line 11, column (B)		0
4	Advertising gain (loss). Subtract line 3 from line 2. For any column in line 4 showing a gain, complete lines 5 through 8. For any column in line 4 showing a loss or zero, do not complete lines 5 through 7, and enter zero on line 8				
5	Readership costs				
6	Circulation income				
7	Excess readership costs. If line 6 is less than line 5, subtract line 6 from line 5. If line 5 is less than line 6, enter zero				
8	Excess readership costs allowed as a deduction. For each column showing a gain on line 4, enter the lesser of line 4 or line 7				
а	Add line 8, columns A through D. Enter the grea	ater of the columns tota	l or zero here and on Pa	ort II, line 13 ►	0
Pai	rt X Compensation of Officers, Direct	tors, and Trustees	(see instructions)		
	1. Name	:	2. Title	3. Percentage of time devoted to business	4. Compensation attributable to unrelated business
(1)					
(2) (3)					
(4)					
	l. Enter here and on Part II, line 1				0
Par	t XI Supplemental Information (see i	nstructions)			
	``				
				Schedul	e A (Form 990-T) 2020

efil	e GRAPHIC print	t - DO NOT PROCESS	As Filed [Data -						DL	N: 9	93393313016101
SCI	HEDULE A	Unrel	ated Bus	sines	s T	axable In		OMB No. 1545-0047				
	rm 990-T)					ade or Bu						2020
	tment of the Treasury al Revenue Service	►Go to www.irs.g ►Do not enter SSN number									O 5	pen to Public Inspection for 01(c)(3) Organizations Only
	Name of the organiza FORNIA ACADEMY O							nployei 156258	r ident	tificati	ion ı	number
c (Jnrelated business ac	ctivity code (see instructions	s) > 211120	D Sequ	ience	e:	2		c	of		7
E [Describe the unrelate	ed trade or business ▶ PART	NERSHIP INVI	ESTMENT	s							
Pa	rt I Unrelated	Trade or Business Inc	ome			(A) Income	1	(B)	Ехре	nses		(C) Net
1a	Gross receipts or sa	ales										
b	Less returns and allow	vances	c Balanc	e ▶ 1 0	<u>. </u>						_	
2	Cost of goods sold	(Part III, line 8)		. 2	$oldsymbol{ol}}}}}}}}}}}}}}$							
3	Gross Profit. Subtra	act line 2 from line 1c		. 3								
4a		come (attach Sch D (Form 10 ctions)		. 4a	1							
b	Net gain (loss) (For	rm 4797) (attach Form 4797	') (see instruction	ons) 4Ł	,							
c	Capital loss deducti	ion for trusts		40	:							
5	` ,	a partnership or an S corpo	•		حو	J 34	4,682					34,682
6	Rent income (Part 1	IV)		. 6			0				0	
7	Unrelated debt-fina	anced income (Part V)		. 7			0				0	
8		royalties, and rents from a VI)		. 8			0				0	
9	Investment income organizations (Part	of section 501(c)(7), (9), o	r (17)	. 9			0				0	
10	Exploited exempt a	ctivity income (Part VIII) .		. 10)							
11	Advertising income	(Part IX)		. 11			0				0	
12	Other income (see	instructions; attach stateme	ent)	. 12	:							
13	Total. Combine line	es 3 through 12		. 13	;	34	4,682				0	34,682
Pai		ns Not Taken Elsewher with the unrelated busir		ructions	for I	imitations on	dedu	ctions)	Dedu	ctions	s mu	ıst be directly
1	Compensation of of	fficers, directors, and trustee	es (Part X) .								1	0
2	Salaries and wages									. $ abla$	2	
3	Repairs and mainte	enance								. $ abla$	3	
4	Bad debts									. [4	
5	Interest (attach sta	atement) (see instructions)									5	
6	Taxes and licenses										6	
7	Depreciation (attac	h Form 4562) (see instruction	ons)			7						
8	Less depreciation c	laimed in Part III and elsewl	here on returr	١.		8a				8	3b	
9	'									. L	9	
10	Contributions to de	ferred compensation plans .								. 1	LO	
11		rograms								_	11	
12		enses (Part VIII)								_	L2	
13	•	costs (Part IX)								. 1	L3	0
14	Other deductions (a	,								_	L4	
15		Add lines 1 through 14 .									L5	0
16	Unrelated business	income before net operating	g loss deduction	on. Subtr	act li	ne 15 from Part	: I, line	e 13, co	lumn ((C) 1	L6	34,682

17 Deduction for net operating loss (see instructions) Unrelated business taxable income. Subtract line 17 from line 16

Sche	dule A (Form 990-T) 2020				Page 2
Par	Cost of Goods Sold Enter m	ethod of inventory va	aluation >		_
1	Inventory at beginning of year			1	
2	Purchases			2	
3	Cost of labor			3	
4	Additional section 263A costs (attach statement)		4	
5	Other costs (attach statement)			5	
6	Total. Add lines 1 through 5			6	
7	Inventory at end of year				
8	Cost of goods sold. Subtract line 7 from line 6				
9	Do the rules of section 263A (with respect to pro-	· · · · · · · · · · · · · · · · · · ·			∐ Yes ☐ No
Par	`	-			
1	Description of property (property street address	, city, state, ZIP code).	Check if a dual-use (see	instructions)	
	A				
	B L				
	c ⊔				
	D D	Α	В	С	
2	Rent received or accrued	A	В		<u> </u>
_	From personal property (if the percentage of				
-	rent for personal property is more than 10%				
	but not more than 50%)				
b	From real and personal property (if the percentage of rent for personal property				
	exceeds 50% or if the rent is based on profit				
	or income)				
С	Total rents received or accrued by property. Add lines 2a and 2b, columns A through D.				
	, ,				
3	Total rents received or accrued. Add line 2c colu	mns A through D. Enter	here and on Part I, line	6, column (A) . ► _	0
4	Deductions directly connected with the income				
	in lines 2(a) and 2(b) (attach statement) .				
5	Total deductions. Add line 4 columns A throug	h D. Enter here and on	Part I, line 6, column (B)		0
Day	t V Unrelated Debt-Financed Incom	a (see instructions)			
	Description of debt-financed property (property		to ZID and a) Charle if a	d	
1	A □	street address, city, sta	te, ZIP code). Check if a	dual-use (see instruction	15)
	в				
	c □				
	D				
		Α	В	С	D
2	Gross income from or allocable to debt-				
	financed property				
3	Deductions directly connected with or allocable to debt-financed property				
	Straight line depreciation (attach statement)				
b	Other deductions (attach statement)				
С	Total deductions (add lines 3a and 3b, columns A through D)				
4	Amount of average acquisition debt on or				
•	allocable to debt-financed property (attach statement)				
5	Average adjusted basis of or allocable to debt-				
	financed property (attach statement)				
6	Divide line 4 by line 5	%	%	%	%
7	Gross income reportable. Multiply line 2 by line 6				
8	Total gross income. (add line 7, columns A th	rough D). Enter here and	d on Part I, line 7, colum	n (A) ▶ _	0
9	Allocable deductions. Multiply line 3c by line 6				
10	Total allocable deductions. Add line 9, colum	ns A through D. Enter h	ere and on Part I, line 7,	column (B) · · ► _	0
11	Total dividends-received deductions include	d in line 10	<u></u>	<u></u> ▶ _	0
				Schedule A	(Form 990-T) 2020

Schedule Part VI	A (Form 990-T) 2020 Interest, Annuit	ios Dovo	ltice and De	mto from	m Combuol	lad Over	tio	/soo instrusti	2001	Page 3
Part V.	Interest, Annuit	ies, Roya	Titles, and Ke	ents troi	n Control			ed Organization		
				2 Not	unrelated		of specified	5. Part of colu		6. Deductions directly
1. N	lame of controlled organi	ization	2. Employer identification number	incom	unrelated le (loss) ltructions)		nts made	that is included in the control organization gross incorporations	ded lling n's	connected with income in column 5
(1)								_		
(2)										
(3)										
(4)										
			Non	exempt C	ontrolled Or	ganization:	S			
7	. Taxable income	inco	et unrelated ome (loss) instructions)		Total of spe payments m		that is in controlling	of column 9 cluded in the organization's s income		Deductions directly connected with ncome in column 10
(1)										
(2)										
(3)										
(4)										
Totals . Part VI	I Investment Income	me of a		(c)(7), (9), or (1 7 3. Deduc	7) Organ	ization (setly 4	column (A) 0 ee instructions Set-asides ach statement)	5)	5. Total deductions and set-asides
					1	statement			(add columns 3 and 4)
(1)										
(2)										
(3)										
(4)			Add amounts in c Enter here and c line 9, colum	on Part I, n (A)						add amounts in column 5. Enter here and on Part I, line 9, column (B)
Totals	<u></u>			0						0
Part VI	<u> </u>	-	ty Income, (Other Th	an Adver	tising In	icome (see	instructions)		
1 Des	scription of exploited acti	vitiy:								
2 Gro	ss unrelated business in	come from	trade or busine	ss. Enter l	here and on	Part I, line	e 10, column	(A)	2	
	penses directly connected umn (B)								3	
	income (loss) from unress 5 through 7		or business. Su			_	ain, complete		4	
5 Gro	ss income from activity t	that is not u	unrelated busine	ess incom	e				5	
6 Exp	enses attributable to inc	ome entere	d on line 5					[6	
	ess exempt expenses. S								7	

	dule A (Form 990-T) 2020				Page 4
	Advertising Income				
1	Name(s) of periodical(s). Check box if reporting $\mathbf{A} \square$	two or more periodical	s on a consolidated basi	S.	
	в 🗆				
	c 🗆				
	D 🗆				
Enter	amounts for each periodical listed above in the c	corresponding column.			
		Α	В	С	D
2	Gross advertising income				
а	Add columns A through D. Enter here and on Pa	rt I, line 11, column (A)		0
3	Direct Advertising costs by periodical				
а	Add columns A through D. Enter here and on Pa	rt I, line 11, column (B)		0
4	Advertising gain (loss). Subtract line 3 from line 2. For any column in line 4 showing a gain, complete lines 5 through 8. For any column in line 4 showing a loss or zero, do not complete lines 5 through 7, and enter zero on line 8				
5	Readership costs				
6	Circulation income				
7	Excess readership costs. If line 6 is less than line 5, subtract line 6 from line 5. If line 5 is less than line 6, enter zero				
8	Excess readership costs allowed as a deduction. For each column showing a gain on line 4, enter the lesser of line 4 or line 7				
а	Add line 8, columns A through D. Enter the grea	ater of the columns tota	l or zero here and on Pa	ort II, line 13 ►	0
Pai	rt X Compensation of Officers, Direct	tors, and Trustees	(see instructions)		
	1. Name	:	2. Title	3. Percentage of time devoted to business	4. Compensation attributable to unrelated business
(1)					
(2) (3)					
(4)					
	l. Enter here and on Part II, line 1				0
Par	t XI Supplemental Information (see i	nstructions)			
	``				
				Schedul	e A (Form 990-T) 2020

efil	e GRAPHIC print	t - DO NOT PROCESS As Filed Da	ita -				D	LN:	93393313016101
SC	HEDULE A	Unrelated Bus	iness	s T	axable Inc	on	<u></u>		OMB No. 1545-0047
(Fo	orm 990-T)	From an Unrela			2020				
	tment of the Treasury al Revenue Service	► Go to www.irs.gov/Form990T ► Do not enter SSN numbers on this form as).	Open to Public Inspection for 501(c)(3) Organizations Only
	Name of the organiza FORNIA ACADEMY O						ployer identifica 56258	tion	number
c (Jnrelated business a	ctivity code (see instructions) ► 211130	S equ	ienc	e: 3	3	of		7
E [Describe the unrelate	ed trade or business ▶ PARTNERSHIP INVES	STMENTS	s					
Pa	rt I Unrelated	Trade or Business Income			(A) Income		(B) Expenses		(C) Net
1a	Gross receipts or s	ales							
b	Less returns and allow	wances c Balance	▶ <u>1c</u>						
2	Cost of goods sold	(Part III, line 8)	. 2						
3	Gross Profit. Subtra	act line 2 from line 1c	. 3						
4a		come (attach Sch D (Form 1041 or Form	4-						
		tions)	-	+		-+			
	• , , ,	rm 4797) (attach Form 4797) (see instruction	s) 4b 4c	+		-+			
	Capital loss deduct	on for trusts approximation or an S corporation (attach	40	+		\dashv			
5	` ,		. 5	9	; J 3	881			381
6	· · · · · · · · · · · · · · · · · · ·	IV)		T		0		0	
7	Unrelated debt-fina	anced income (Part V)	. 7			0		0	
8		royalties, and rents from a controlled VI)	. 8			0		0	
9	organizations (Part	e of section 501(c)(7), (9), or (17)				0		0	
10		activity income (Part VIII)		_		_			
11	_	(Part IX)		-		0		0	
12	•	instructions; attach statement)		-					204
13		es 3 through 12		_		381		0	381
Pai		ns Not Taken Elsewhere (See instru with the unrelated business income	ctions	for	limitations on de	educ	tions) Deduction	ns m	iust be directly
1	Compensation of o	fficers, directors, and trustees (Part X) .						1	0
2	Salaries and wages						[2	
3	Repairs and mainte	enance				•	[3	
4				٠		•		4	
5	•	atement) (see instructions)		•		•		5	
6		h 5 4562) (see in throations)		•		•		6	
7 8		th Form 4562) (see instructions)		•	· · · · - 			8b	
9	'		•	•				9	
10		ferred compensation plans					: : : : :	10	
11		programs					· · · · · · · ·	11	
12		penses (Part VIII)						12	
13		costs (Part IX)					-	13	0
14	Other deductions (•					F	14	
15	•	•					-	15	0
16	Unrelated business	income before net operating loss deduction	. Subtra	act I	ine 15 from Part I,	, line	13, column (C)	16	381
17	Deduction for net o	operating loss (see instructions)					[17	0

Sche	dule A (Form 990-T) 2020				Page 2
Par	Cost of Goods Sold Enter m	ethod of inventory va	aluation >		_
1	Inventory at beginning of year			1	
2	Purchases			2	
3	Cost of labor			3	
4	Additional section 263A costs (attach statement)		4	
5	Other costs (attach statement)			5	
6	Total. Add lines 1 through 5			6	
7	Inventory at end of year				
8	Cost of goods sold. Subtract line 7 from line 6				
9	Do the rules of section 263A (with respect to pro-	· · · · · · · · · · · · · · · · · · ·			∐ Yes ☐ No
Par	`	-			
1	Description of property (property street address	, city, state, ZIP code).	Check if a dual-use (see	instructions)	
	A				
	B L				
	c ⊔				
	D D	Α	В	С	
2	Rent received or accrued	A	В		<u> </u>
_	From personal property (if the percentage of				
-	rent for personal property is more than 10%				
	but not more than 50%)				
b	From real and personal property (if the percentage of rent for personal property				
	exceeds 50% or if the rent is based on profit				
	or income)				
С	Total rents received or accrued by property. Add lines 2a and 2b, columns A through D.				
	, ,				
3	Total rents received or accrued. Add line 2c colu	mns A through D. Enter	here and on Part I, line	6, column (A) . ► _	0
4	Deductions directly connected with the income				
	in lines 2(a) and 2(b) (attach statement) .				
5	Total deductions. Add line 4 columns A throug	h D. Enter here and on	Part I, line 6, column (B)		0
Day	t V Unrelated Debt-Financed Incom	a (see instructions)			
	Description of debt-financed property (property		to ZID and a) Charle if a	d	
1	A □	street address, city, sta	te, ZIP code). Check if a	dual-use (see instruction	15)
	в				
	c □				
	D				
		Α	В	С	D
2	Gross income from or allocable to debt-				
	financed property				
3	Deductions directly connected with or allocable to debt-financed property				
	Straight line depreciation (attach statement)				
b	Other deductions (attach statement)				
С	Total deductions (add lines 3a and 3b, columns A through D)				
4	Amount of average acquisition debt on or				
•	allocable to debt-financed property (attach statement)				
5	Average adjusted basis of or allocable to debt-				
	financed property (attach statement)				
6	Divide line 4 by line 5	%	%	%	%
7	Gross income reportable. Multiply line 2 by line 6				
8	Total gross income. (add line 7, columns A th	rough D). Enter here and	d on Part I, line 7, colum	n (A) ▶ _	0
9	Allocable deductions. Multiply line 3c by line 6				
10	Total allocable deductions. Add line 9, colum	ns A through D. Enter h	ere and on Part I, line 7,	column (B) · · ► _	0
11	Total dividends-received deductions include	d in line 10	<u></u>	<u></u> ▶ _	0
				Schedule A	(Form 990-T) 2020

Schedule Part VI	A (Form 990-T) 2020 Interest, Annuit	ios Dovo	ltice and De	mto from	m Combuol	lad Over	tio	/soo instrusti	2001	Page 3
Part V.	Interest, Annuit	ies, Roya	Titles, and Ke	ents troi	n Control			ed Organization		
				2 Not	unrelated		of specified	5. Part of colu		6. Deductions directly
1. N	lame of controlled organi	ization	2. Employer identification number	incom	unrelated le (loss) ltructions)		nts made	that is included in the control organization gross incorporations	ded lling n's	connected with income in column 5
(1)								_		
(2)										
(3)										
(4)										
			Non	exempt C	ontrolled Or	ganization:	S			
7	. Taxable income	inco	et unrelated ome (loss) instructions)		Total of spe payments m		that is in controlling	of column 9 cluded in the organization's s income		Deductions directly connected with ncome in column 10
(1)										
(2)										
(3)										
(4)										
Totals . Part VI	I Investment Income	me of a		(c)(7), (9), or (1 7 3. Deduc	7) Organ	ization (setly 4	column (A) 0 ee instructions Set-asides ach statement)	5)	5. Total deductions and set-asides
					1	statement			(add columns 3 and 4)
(1)										
(2)										
(3)										
(4)			Add amounts in c Enter here and c line 9, colum	on Part I, n (A)						add amounts in column 5. Enter here and on Part I, line 9, column (B)
Totals	<u></u>			0						0
Part VI	<u> </u>	-	ty Income, (Other Th	an Adver	tising In	icome (see	instructions)		
1 Des	scription of exploited acti	vitiy:								
2 Gro	ss unrelated business in	come from	trade or busine	ss. Enter l	here and on	Part I, line	e 10, column	(A)	2	
	penses directly connected umn (B)								3	
	income (loss) from unress 5 through 7		or business. Su			_	ain, complete		4	
5 Gro	ss income from activity t	that is not u	unrelated busine	ess incom	e				5	
6 Exp	enses attributable to inc	ome entere	d on line 5					[6	
	ess exempt expenses. S								7	

	dule A (Form 990-T) 2020				Page 4
	Advertising Income				
1	Name(s) of periodical(s). Check box if reporting $\mathbf{A} \square$	two or more periodical	s on a consolidated basi	S.	
	в 🗆				
	c 🗆				
	D 🗆				
Enter	amounts for each periodical listed above in the c	corresponding column.			
		Α	В	С	D
2	Gross advertising income				
а	Add columns A through D. Enter here and on Pa	rt I, line 11, column (A)		0
3	Direct Advertising costs by periodical				
а	Add columns A through D. Enter here and on Pa	rt I, line 11, column (B)		0
4	Advertising gain (loss). Subtract line 3 from line 2. For any column in line 4 showing a gain, complete lines 5 through 8. For any column in line 4 showing a loss or zero, do not complete lines 5 through 7, and enter zero on line 8				
5	Readership costs				
6	Circulation income				
7	Excess readership costs. If line 6 is less than line 5, subtract line 6 from line 5. If line 5 is less than line 6, enter zero				
8	Excess readership costs allowed as a deduction. For each column showing a gain on line 4, enter the lesser of line 4 or line 7				
а	Add line 8, columns A through D. Enter the grea	ater of the columns tota	l or zero here and on Pa	ort II, line 13 ►	0
Pai	rt X Compensation of Officers, Direct	tors, and Trustees	(see instructions)		
	1. Name	:	2. Title	3. Percentage of time devoted to business	4. Compensation attributable to unrelated business
(1)					
(2) (3)					
(4)					
	l. Enter here and on Part II, line 1				0
Par	t XI Supplemental Information (see i	nstructions)			
	``				
				Schedul	e A (Form 990-T) 2020

efil	e GRAPHIC print	t - DO NOT PROCESS As Filed D	ata -				[LN:	93393313016101
SC	HEDULE A	Unrelated Bus	iness	s T	Taxable Inc	<u></u>		OMB No. 1545-0047	
(Fo	rm 990-T)	From an Unrela							2020
	tment of the Treasury al Revenue Service	► Go to www.irs.gov/Form9907 ► Do not enter SSN numbers on this form a						3).	Open to Public Inspection for 501(c)(3) Organizations Only
	Name of the organiza FORNIA ACADEMY O						iployer identifica 56258	tion	number
c (Jnrelated business a	ctivity code (see instructions) ▶ 532420) Sequ	iend	ce:	4	of		7
E [Describe the unrelate	ed trade or business ▶ PARTNERSHIP INVE	STMENT:	s					
Pa	rt I Unrelated	Trade or Business Income			(A) Income		(B) Expense:	5	(C) Net
1a	Gross receipts or sa	ales							
b	Less returns and allow	wances c Balance	• ▶ 1 c	;					
2	Cost of goods sold	(Part III, line 8)	. 2						
3	Gross Profit. Subtra	act line 2 from line 1c	. 3						
4a		come (attach Sch D (Form 1041 or Form							
_		ctions)		+		_			
	- , , ,	rm 4797) (attach Form 4797) (see instruction	· —	+		-			
	Capital loss deduct	ion for trusts a partnership or an S corporation (attach)	4c	+		-			
5	` ,	a partnership or an 5 corporation (attach	. 5	9	-82,7	773			-82,773
6	·	IV)		_	-	0		0	,
7	Unrelated debt-fina	anced income (Part V)	. 7			0		0	
8		royalties, and rents from a controlled VI)	. 8			0		0	
9	organizations (Part	e of section 501(c)(7), (9), or (17)				0		0	
10		activity income (Part VIII)		-		_			
11	-	(Part IX)		-		0		0	
12	•	instructions; attach statement)		-					
13		es 3 through 12			-82,7			0	-82,773
Pai		ns Not Taken Elsewhere (See instru with the unrelated business income	ıctions	for	limitations on de	educ	tions) Deductio	ns m	ust be directly
1	Compensation of o	fficers, directors, and trustees (Part X) .						1	0
2	Salaries and wages							2	
3	Repairs and mainte	enance				•		3	
4				٠		•		4	
5		atement) (see instructions)		٠		•		5	
6				•		•		6	
7		th Form 4562) (see instructions)		•	7			۵.	
8	•	laimed in Part III and elsewhere on return	•	•	8a			8b 9	
9 10		ferred compensation plans						10	
11		programs						11	
12		penses (Part VIII)						12	
13		costs (Part IX)						13	0
14	Other deductions (a	,						14	
15	,	•						15	0
16		income before net operating loss deduction						16	-82,773
17		operating loss (see instructions)						17	0

Unrelated business taxable income. Subtract line 17 from line 16

Sche	dule A (Form 990-T) 2020				Page 2
Par	Cost of Goods Sold Enter m	ethod of inventory va	aluation >		_
1	Inventory at beginning of year			1	
2	Purchases			2	
3	Cost of labor			3	
4	Additional section 263A costs (attach statement)		4	
5	Other costs (attach statement)			5	
6	Total. Add lines 1 through 5			6	
7	Inventory at end of year				
8	Cost of goods sold. Subtract line 7 from line 6				
9	Do the rules of section 263A (with respect to pro-	· · · · · · · · · · · · · · · · · · ·			∐ Yes ☐ No
Par	`	-			
1	Description of property (property street address	, city, state, ZIP code).	Check if a dual-use (see	instructions)	
	A				
	B L				
	c ⊔				
	D D	Α	В	С	
2	Rent received or accrued	A	В		<u> </u>
_	From personal property (if the percentage of				
-	rent for personal property is more than 10%				
	but not more than 50%)				
b	From real and personal property (if the percentage of rent for personal property				
	exceeds 50% or if the rent is based on profit				
	or income)				
С	Total rents received or accrued by property. Add lines 2a and 2b, columns A through D.				
	, ,				
3	Total rents received or accrued. Add line 2c colu	mns A through D. Enter	here and on Part I, line	6, column (A) . ► _	0
4	Deductions directly connected with the income				
	in lines 2(a) and 2(b) (attach statement) .				
5	Total deductions. Add line 4 columns A throug	h D. Enter here and on	Part I, line 6, column (B)		0
Day	t V Unrelated Debt-Financed Incom	a (see instructions)			
	Description of debt-financed property (property		to ZID and a) Charle if a	d	
1	A □	street address, city, sta	te, ZIP code). Check if a	dual-use (see instruction	15)
	в				
	c □				
	D				
		Α	В	С	D
2	Gross income from or allocable to debt-				
	financed property				
3	Deductions directly connected with or allocable to debt-financed property				
	Straight line depreciation (attach statement)				
b	Other deductions (attach statement)				
С	Total deductions (add lines 3a and 3b, columns A through D)				
4	Amount of average acquisition debt on or				
•	allocable to debt-financed property (attach statement)				
5	Average adjusted basis of or allocable to debt-				
	financed property (attach statement)				
6	Divide line 4 by line 5	%	%	%	%
7	Gross income reportable. Multiply line 2 by line 6				
8	Total gross income. (add line 7, columns A th	rough D). Enter here and	d on Part I, line 7, colum	n (A) ▶ _	0
9	Allocable deductions. Multiply line 3c by line 6				
10	Total allocable deductions. Add line 9, colum	ns A through D. Enter h	ere and on Part I, line 7,	column (B) · · ► _	0
11	Total dividends-received deductions include	d in line 10	<u></u>	<u></u> ▶ _	0
				Schedule A	(Form 990-T) 2020

Schedule Part VI	A (Form 990-T) 2020 Interest, Annuit	ios Dovo	ltice and De	mto from	m Combuol	lad Over	tio	/soo instrusti	2001	Page 3
Part V.	Interest, Annuit	ies, Roya	Titles, and Ke	ents troi	n Control			ed Organization		
				2 Not	unrelated		of specified	5. Part of colu		6. Deductions directly
1. N	lame of controlled organi	ization	2. Employer identification number	fication income			nts made	that is included in the control organization gross incorporations	ded lling n's	connected with income in column 5
(1)								_		
(2)										
(3)										
(4)										
			Non	exempt C	ontrolled Or	ganization:	S			
7	. Taxable income	inco	et unrelated ome (loss) instructions)		Total of spe payments m		that is in controlling	of column 9 cluded in the organization's s income		Deductions directly connected with ncome in column 10
(1)										
(2)										
(3)										
(4)										
Totals . Part VI	I Investment Income	me of a		(c)(7), (9), or (1 7 3. Deduc	7) Organ	ization (setly 4	column (A) 0 ee instructions Set-asides ach statement)	5)	5. Total deductions and set-asides
					1	statement			(add columns 3 and 4)
(1)										
(2)										
(3)										
(4)			Add amounts in c Enter here and c line 9, colum	on Part I, n (A)						add amounts in column 5. Enter here and on Part I, line 9, column (B)
Totals	<u></u>			0						0
Part VI	<u> </u>	-	ty Income, (Other Th	an Adver	tising In	icome (see	instructions)		
1 Des	scription of exploited acti	vitiy:								
2 Gro	ss unrelated business in	come from	trade or busine	ss. Enter l	here and on	Part I, line	e 10, column	(A)	2	
	penses directly connected umn (B)								3	
	income (loss) from unress 5 through 7		or business. Su			_	ain, complete		4	
5 Gro	ss income from activity t	that is not u	unrelated busine	ess incom	e				5	
6 Exp	enses attributable to inc	ome entere	d on line 5					[6	
	ess exempt expenses. S								7	

	dule A (Form 990-T) 2020				Page 4
	Advertising Income				
1	Name(s) of periodical(s). Check box if reporting $\mathbf{A} \square$	two or more periodical	s on a consolidated basi	S.	
	в 🗆				
	c 🗆				
	D 🗆				
Enter	amounts for each periodical listed above in the c	corresponding column.			
		Α	В	С	D
2	Gross advertising income				
а	Add columns A through D. Enter here and on Pa	rt I, line 11, column (A)		0
3	Direct Advertising costs by periodical				
а	Add columns A through D. Enter here and on Pa	rt I, line 11, column (B)		0
4	Advertising gain (loss). Subtract line 3 from line 2. For any column in line 4 showing a gain, complete lines 5 through 8. For any column in line 4 showing a loss or zero, do not complete lines 5 through 7, and enter zero on line 8				
5	Readership costs				
6	Circulation income				
7	Excess readership costs. If line 6 is less than line 5, subtract line 6 from line 5. If line 5 is less than line 6, enter zero				
8	Excess readership costs allowed as a deduction. For each column showing a gain on line 4, enter the lesser of line 4 or line 7				
а	Add line 8, columns A through D. Enter the grea	ater of the columns tota	l or zero here and on Pa	ort II, line 13 ►	0
Pai	rt X Compensation of Officers, Direct	tors, and Trustees	(see instructions)		
	1. Name	:	2. Title	3. Percentage of time devoted to business	4. Compensation attributable to unrelated business
(1)					
(2) (3)					
(4)					
	l. Enter here and on Part II, line 1				0
Par	t XI Supplemental Information (see i	nstructions)			
	``				
				Schedul	e A (Form 990-T) 2020

efile GRAPHIC print - DO NOT PROCESS										DL	N:	93393313016101			
SC	HEDULE A	Unrela	ated Bus	sines	S	Taxabl	e In	cor	ne						OMB No. 1545-0047
(Fo	rm 990-T)		ın Unrel												2020
	tment of the Treasury al Revenue Service	►Go to www.irs.go ►Do not enter SSN number											(c)(3).	ç	Open to Public Inspection for 501(c)(3) Organizations Only
	Name of the organiza FORNIA ACADEMY O							B En 94-11			r ide	enti	ficat	ion	number
c ı	Jnrelated business a	ctivity code (see instructions) ▶ 551112	D Seq	uen	ıce:	1	5				of			7
E [Describe the unrelate	ed trade or business ▶ PARTI	NERSHIP INVI	ESTMEN	TS										
Pa	rt I Unrelated	Trade or Business Inc	ome			(A) In	icome			(B)	Ex	pen	ses		(C) Net
1a	Gross receipts or sa	ales													
b	Less returns and allow	vances	c Balanc	:e ▶ 1	<u>c</u>									_	
2	Cost of goods sold	(Part III, line 8)		. 2	2										
3	Gross Profit. Subtra	act line 2 from line 1c		. 3	3										
4a		come (attach Sch D (Form 10 ctions)		. 4	a										
b	Net gain (loss) (Fo	rm 4797) (attach Form 4797) (see instruction	ons) 4	b										
C	Capital loss deduct	ion for trusts		4	c										
5	` ,	a partnership or an S corpo	•		5 6	*3	-23	,289							-23,289
6	Rent income (Part	IV)		. 6	5			0						0	
7	Unrelated debt-fina	nced income (Part V)		. 2	<u>'</u>			0						0	
8		royalties, and rents from a d		. ε	3			0						0	
9	Investment income organizations (Part	of section 501(c)(7), (9), or VII)	(17)	9	,			0						0	
10	Exploited exempt a	ctivity income (Part VIII) .		. 1	0										
11	Advertising income	(Part IX)		. 1	1			0						0	
12	•	instructions; attach stateme	•		-										
13		es 3 through 12						,289						0	-23,289
Pai		ns Not Taken Elsewher with the unrelated busin	•	ructions	for	r limitatior	ns on o	dedu	ctio	ns)	De	duc	tions	s m	ust be directly
1	Compensation of of	fficers, directors, and trustee	s (Part X) .											1	0
2	Salaries and wages													2	
3	Repairs and mainte	nance												3	
4	Bad debts													4	
5	,	tement) (see instructions)												5	
6	Taxes and licenses													6	
7	Depreciation (attac	h Form 4562) (see instruction	ns)				7								
8		laimed in Part III and elsewh					8a							3b	
9													-	9	
10		ferred compensation plans .												LO	
11		rograms												L1	
12		enses (Part VIII)											_	L2	
13		costs (Part IX)												L3	0
14	Other deductions (,											-	L4	
15		Add lines 1 through 14											_	L5	0
16	Unrelated business	income before net operating	i loss deductio	on. Subt	ract	: Iine 15 fro	m Part	I, line	e 13	, co	lum	ın (C	:) 1	L6	-23,289

17

Sche	dule A (Form 990-T) 2020				Page 2
Par	Cost of Goods Sold Enter m	ethod of inventory va	aluation >		_
1	Inventory at beginning of year			1	
2	Purchases			2	
3	Cost of labor			3	
4	Additional section 263A costs (attach statement)		4	
5	Other costs (attach statement)			5	
6	Total. Add lines 1 through 5			6	
7	Inventory at end of year				
8	Cost of goods sold. Subtract line 7 from line 6				
9	Do the rules of section 263A (with respect to pro-	· · · · · · · · · · · · · · · · · · ·			∐ Yes ☐ No
Par	`	-			
1	Description of property (property street address	, city, state, ZIP code).	Check if a dual-use (see	instructions)	
	A				
	B L				
	c ⊔				
	D D	Α	В	С	
2	Rent received or accrued	A	В		<u> </u>
_	From personal property (if the percentage of				
-	rent for personal property is more than 10%				
	but not more than 50%)				
b	From real and personal property (if the percentage of rent for personal property				
	exceeds 50% or if the rent is based on profit				
	or income)				
С	Total rents received or accrued by property. Add lines 2a and 2b, columns A through D.				
	, ,				
3	Total rents received or accrued. Add line 2c colu	mns A through D. Enter	here and on Part I, line	6, column (A) . ► _	0
4	Deductions directly connected with the income				
	in lines 2(a) and 2(b) (attach statement) .				
5	Total deductions. Add line 4 columns A throug	h D. Enter here and on	Part I, line 6, column (B)		0
Day	t V Unrelated Debt-Financed Incom	a (see instructions)			
	Description of debt-financed property (property		to ZID and a) Charle if a	d	
1	A □	street address, city, sta	te, ZIP code). Check if a	dual-use (see instruction	15)
	в				
	c □				
	D				
		Α	В	С	D
2	Gross income from or allocable to debt-				
	financed property				
3	Deductions directly connected with or allocable to debt-financed property				
	Straight line depreciation (attach statement)				
b	Other deductions (attach statement)				
С	Total deductions (add lines 3a and 3b, columns A through D)				
4	Amount of average acquisition debt on or				
•	allocable to debt-financed property (attach statement)				
5	Average adjusted basis of or allocable to debt-				
	financed property (attach statement)				
6	Divide line 4 by line 5	%	%	%	%
7	Gross income reportable. Multiply line 2 by line 6				
8	Total gross income. (add line 7, columns A th	rough D). Enter here and	d on Part I, line 7, colum	n (A) ▶ _	0
9	Allocable deductions. Multiply line 3c by line 6				
10	Total allocable deductions. Add line 9, colum	ns A through D. Enter h	ere and on Part I, line 7,	column (B) · · ► _	0
11	Total dividends-received deductions include	d in line 10	<u></u>	<u></u> ▶ _	0
				Schedule A	(Form 990-T) 2020

Schedule Part VI	A (Form 990-T) 2020 Interest, Annuit	ios Dovo	ltice and De	mto from	m Combuol	lad Over	tio	/soo instrusti	2001	Page 3
Part V.	Interest, Annuit	ies, Roya	Titles, and Ke	ents troi	n Control			ed Organization		
				2 Not	unrelated		of specified	5. Part of colu		6. Deductions directly
1. N	lame of controlled organi	ization	2. Employer identification number	fication income			nts made	that is included in the control organization gross incorporations	ded lling n's	connected with income in column 5
(1)								_		
(2)										
(3)										
(4)										
			Non	exempt C	ontrolled Or	ganization:	S			
7	. Taxable income	inco	et unrelated ome (loss) instructions)		Total of spe payments m		that is in controlling	of column 9 cluded in the organization's s income		Deductions directly connected with ncome in column 10
(1)										
(2)										
(3)										
(4)										
Totals . Part VI	I Investment Income	me of a		(c)(7), (9), or (1 7 3. Deduc	7) Organ	ization (setly 4	column (A) 0 ee instructions Set-asides ach statement)	5)	5. Total deductions and set-asides
					1	statement			(add columns 3 and 4)
(1)										
(2)										
(3)										
(4)			Add amounts in c Enter here and c line 9, colum	on Part I, n (A)						add amounts in column 5. Enter here and on Part I, line 9, column (B)
Totals	<u></u>			0						0
Part VI	<u> </u>	-	ty Income, (Other Th	an Adver	tising In	icome (see	instructions)		
1 Des	scription of exploited acti	vitiy:								
2 Gro	ss unrelated business in	come from	trade or busine	ss. Enter l	here and on	Part I, line	e 10, column	(A)	2	
	penses directly connected umn (B)								3	
	income (loss) from unress 5 through 7		or business. Su			_	ain, complete		4	
5 Gro	ss income from activity t	that is not u	unrelated busine	ess incom	e				5	
6 Exp	enses attributable to inc	ome entere	d on line 5					[6	
	ess exempt expenses. S								7	

	dule A (Form 990-T) 2020				Page 4
	Advertising Income				
1	Name(s) of periodical(s). Check box if reporting $\mathbf{A} \square$	two or more periodical	s on a consolidated basi	S.	
	в 🗆				
	c 🗆				
	D 🗆				
Enter	amounts for each periodical listed above in the c	corresponding column.			
		Α	В	С	D
2	Gross advertising income				
а	Add columns A through D. Enter here and on Pa	rt I, line 11, column (A)		0
3	Direct Advertising costs by periodical				
а	Add columns A through D. Enter here and on Pa	rt I, line 11, column (B)		0
4	Advertising gain (loss). Subtract line 3 from line 2. For any column in line 4 showing a gain, complete lines 5 through 8. For any column in line 4 showing a loss or zero, do not complete lines 5 through 7, and enter zero on line 8				
5	Readership costs				
6	Circulation income				
7	Excess readership costs. If line 6 is less than line 5, subtract line 6 from line 5. If line 5 is less than line 6, enter zero				
8	Excess readership costs allowed as a deduction. For each column showing a gain on line 4, enter the lesser of line 4 or line 7				
а	Add line 8, columns A through D. Enter the grea	ater of the columns tota	l or zero here and on Pa	ort II, line 13 ►	0
Pai	rt X Compensation of Officers, Direct	tors, and Trustees	(see instructions)		
	1. Name	:	2. Title	3. Percentage of time devoted to business	4. Compensation attributable to unrelated business
(1)					
(2) (3)					
(4)					
	l. Enter here and on Part II, line 1				0
Par	t XI Supplemental Information (see i	nstructions)			
	``				
				Schedul	e A (Form 990-T) 2020

efil	e GRAPHIC print	t - DO NOT PROCESS	As Filed D	Data -								DLN:	93393313016	101
SCI	HEDULE A	Unrela	ated Bus	sine	SS	Tax	able In	con	ne				OMB No. 1545-00	47
(Fo	rm 990-T)	From a	n Unrel	ated	T	rad	e or Bu	sine	ess				2020	
	tment of the Treasury al Revenue Service	►Go to www.irs.ge ►Do not enter SSN number										:)(3).	Open to Public Inspect 501(c)(3) Organizations	ion for s Only
	Name of the organiza FORNIA ACADEMY O						B Employer identification number 94-1156258							
c (Jnrelated business ac	ctivity code (see instructions) ▶ 523920	D Se	que	ence:	'	6			of		7	
E [Describe the unrelate	ed trade or business ▶ PARTI	NERSHIP INVE	ESTMEN	NTS								T	
Pa	rt I Unrelated	Trade or Business Inc	ome			((A) Income		(1	B) Ex	cpens	es	(C) Net	
1a	Gross receipts or sa	ales												
b	Less returns and allow	vances	c Balanc	:e ▶:	1 c									
2	Cost of goods sold	(Part III, line 8)		. L	2									
3	Gross Profit. Subtra	act line 2 from line 1c		· L	3									
4a		come (attach Sch D (Form 10 ctions)		. [4a	9	16	,924					1	6,924
b	Net gain (loss) (For	rm 4797) (attach Form 4797) (see instruction	ons)	4b									
C	Capital loss deducti	ion for trusts		Ŀ	4c									
5	` ,	a partnership or an S corpo	*		5	% J	-25	,383					-2	5,383
6	Rent income (Part 1	IV)		. L	6			0				0		
7	Unrelated debt-fina	anced income (Part V)			7			0				0		
8		royalties, and rents from a vI)			8			0				0		
9	Investment income organizations (Part	of section 501(c)(7), (9), o	(17)		9			0				0		
10	Exploited exempt a	ctivity income (Part VIII) .		. [:	10									
11	Advertising income	(Part IX)		. [:	11			0				0		
12	Other income (see	instructions; attach stateme	nt)	. [:	12									
13	Total. Combine line	es 3 through 12		. :	13		-8	,459				0	-	8,459
Pai		ns Not Taken Elsewher with the unrelated busin		ruction	s f	or limi	tations on o	dedu	tions	s) De	educt	ions m	nust be directly	
1	Compensation of of	fficers, directors, and trustee	s (Part X) .									1		0
2	Salaries and wages	•										2		
3	Repairs and mainte	enance										3		
4	Bad debts											4		
5	Interest (attach sta	tement) (see instructions)										5		
6	Taxes and licenses											6		
7	Depreciation (attac	h Form 4562) (see instruction	ons)				7							
8	Less depreciation c	laimed in Part III and elsewh	nere on return	1			8a					8b		
9	Depletion											9		
10	Contributions to de	ferred compensation plans .										10		
11	Employee benefit p	rograms										11		
12	Excess exempt exp	enses (Part VIII)										12		
13	•	costs (Part IX)										13		0
14	Other deductions (a	,										14		
15		Add lines 1 through 14 .										15		0
16	Unrelated business	income before net operating	loss deduction	on. Sub	tra	ct line	15 from Part	I, line	13, d	colum	nn (C)	16	-	8,459

17 Deduction for net operating loss (see instructions) Unrelated business taxable income. Subtract line 17 from line 16 . . .

17

Sche	dule A (Form 990-T) 2020				Page 2
Par	Cost of Goods Sold Enter m	ethod of inventory va	aluation >		_
1	Inventory at beginning of year			1	
2	Purchases			2	
3	Cost of labor			3	
4	Additional section 263A costs (attach statement)		4	
5	Other costs (attach statement)			5	
6	Total. Add lines 1 through 5			6	
7	Inventory at end of year				
8	Cost of goods sold. Subtract line 7 from line 6				
9	Do the rules of section 263A (with respect to pro-	· · · · · · · · · · · · · · · · · · ·			∐ Yes ☐ No
Par	`	-			
1	Description of property (property street address	, city, state, ZIP code).	Check if a dual-use (see	instructions)	
	A				
	B L				
	c ⊔				
	D D	Α	В	С	
2	Rent received or accrued	A	В		<u> </u>
_	From personal property (if the percentage of				
-	rent for personal property is more than 10%				
	but not more than 50%)				
b	From real and personal property (if the percentage of rent for personal property				
	exceeds 50% or if the rent is based on profit				
	or income)				
С	Total rents received or accrued by property. Add lines 2a and 2b, columns A through D.				
	, ,				
3	Total rents received or accrued. Add line 2c colu	mns A through D. Enter	here and on Part I, line	6, column (A) . ► _	0
4	Deductions directly connected with the income				
	in lines 2(a) and 2(b) (attach statement) .				
5	Total deductions. Add line 4 columns A throug	h D. Enter here and on	Part I, line 6, column (B)		0
Day	t V Unrelated Debt-Financed Incom	a (see instructions)			
	Description of debt-financed property (property		to ZID and a) Charle if a	d	
1	A □	street address, city, sta	te, ZIP code). Check if a	dual-use (see instruction	15)
	в				
	c □				
	D				
		Α	В	С	D
2	Gross income from or allocable to debt-				
	financed property				
3	Deductions directly connected with or allocable to debt-financed property				
	Straight line depreciation (attach statement)				
b	Other deductions (attach statement)				
С	Total deductions (add lines 3a and 3b, columns A through D)				
4	Amount of average acquisition debt on or				
•	allocable to debt-financed property (attach statement)				
5	Average adjusted basis of or allocable to debt-				
	financed property (attach statement)				
6	Divide line 4 by line 5	%	%	%	%
7	Gross income reportable. Multiply line 2 by line 6				
8	Total gross income. (add line 7, columns A th	rough D). Enter here and	d on Part I, line 7, colum	n (A) ▶ _	0
9	Allocable deductions. Multiply line 3c by line 6				
10	Total allocable deductions. Add line 9, colum	ns A through D. Enter h	ere and on Part I, line 7,	column (B) · · ► _	0
11	Total dividends-received deductions include	d in line 10	<u></u>	<u></u> ▶ _	0
				Schedule A	(Form 990-T) 2020

Schedule Part VI	A (Form 990-T) 2020 Interest, Annuit	ios Dovo	ltice and De	mto from	m Combuol	lad Over	tio	/soo instrusti	2001	Page 3
Part V.	Interest, Annuit	ies, Roya	Titles, and Ke	ents troi	n Control			ed Organization		
				2 Not	unrelated		of specified	5. Part of colu		6. Deductions directly
1. N	lame of controlled organi	ization	2. Employer identification number	fication income			nts made	that is included in the control organization gross incorporations	ded lling n's	connected with income in column 5
(1)								_		
(2)										
(3)										
(4)										
			Non	exempt C	ontrolled Or	ganization:	S			
7	. Taxable income	inco	et unrelated ome (loss) instructions)		Total of spe payments m		that is in controlling	of column 9 cluded in the organization's s income		Deductions directly connected with ncome in column 10
(1)										
(2)										
(3)										
(4)										
Totals . Part VI	I Investment Income	me of a		(c)(7), (9), or (1 7 3. Deduc	7) Organ	ization (setly 4	column (A) 0 ee instructions Set-asides ach statement)	5)	5. Total deductions and set-asides
					1	statement			(add columns 3 and 4)
(1)										
(2)										
(3)										
(4)			Add amounts in c Enter here and c line 9, colum	on Part I, n (A)						add amounts in column 5. Enter here and on Part I, line 9, column (B)
Totals	<u></u>			0						0
Part VI	<u> </u>	-	ty Income, (Other Th	an Adver	tising In	icome (see	instructions)		
1 Des	scription of exploited acti	vitiy:								
2 Gro	ss unrelated business in	come from	trade or busine	ss. Enter l	here and on	Part I, line	e 10, column	(A)	2	
	penses directly connected umn (B)								3	
	income (loss) from unress 5 through 7		or business. Su			_	ain, complete		4	
5 Gro	ss income from activity t	that is not u	unrelated busine	ess incom	e				5	
6 Exp	enses attributable to inc	ome entere	d on line 5 .					[6	
	ess exempt expenses. S								7	

	dule A (Form 990-T) 2020				Page 4
	Advertising Income				
1	Name(s) of periodical(s). Check box if reporting $\mathbf{A} \square$	two or more periodical	s on a consolidated basi	S.	
	в 🗆				
	c 🗆				
	D 🗆				
Enter	amounts for each periodical listed above in the c	corresponding column.			
		Α	В	С	D
2	Gross advertising income				
а	Add columns A through D. Enter here and on Pa	rt I, line 11, column (A)		0
3	Direct Advertising costs by periodical				
а	Add columns A through D. Enter here and on Pa	rt I, line 11, column (B)		0
4	Advertising gain (loss). Subtract line 3 from line 2. For any column in line 4 showing a gain, complete lines 5 through 8. For any column in line 4 showing a loss or zero, do not complete lines 5 through 7, and enter zero on line 8				
5	Readership costs				
6	Circulation income				
7	Excess readership costs. If line 6 is less than line 5, subtract line 6 from line 5. If line 5 is less than line 6, enter zero				
8	Excess readership costs allowed as a deduction. For each column showing a gain on line 4, enter the lesser of line 4 or line 7				
а	Add line 8, columns A through D. Enter the grea	ater of the columns tota	l or zero here and on Pa	ort II, line 13 ►	0
Pai	rt X Compensation of Officers, Direct	tors, and Trustees	(see instructions)		
	1. Name	:	2. Title	3. Percentage of time devoted to business	4. Compensation attributable to unrelated business
(1)					
(2) (3)					
(4)					
	l. Enter here and on Part II, line 1				0
Par	t XI Supplemental Information (see i	nstructions)			
	``				
				Schedul	e A (Form 990-T) 2020

efil	e GRAPHIC print	t - DO NOT PROCESS	As Filed [Data -	a - DLN: 93393313016101								
SC	HEDULE A	Unrel	ated Bus	siness	Ta	xable I	ncon	ne			OMB No. 1545-0047		
(Fo	orm 990-T)		an Unrel								2020		
	tment of the Treasury al Revenue Service	►Go to <i>www.irs.g.</i> ►Do not enter SSN number								(3).	Open to Public Inspection for 501(c)(3) Organizations Only		
	Name of the organiza FORNIA ACADEMY O							iployer id 56258	dentific	ation	number		
c (Jnrelated business a	ctivity code (see instructions	s) > 511120	D Sequ	ence:		7		of		7		
E [Describe the unrelate	ed trade or business ▶ PART	NERSHIP INV	ESTMENT:	5								
Pa	rt I Unrelated	Trade or Business Inc	ome			(A) Income	e	(B) E	xpense	es	(C) Net		
1a	Gross receipts or s	ales											
b	Less returns and allow	wances	c Baland	:e ▶ 1 c									
2	Cost of goods sold	(Part III, line 8)		. 2									
3	Gross Profit. Subtra	act line 2 from line 1c		. 3									
4a		come (attach Sch D (Form 10 ctions)		. 4a									
b	Net gain (loss) (Fo	rm 4797) (attach Form 4797	') (see instruction	ons) 4b									
c	Capital loss deduct	ion for trusts		4c									
5	` ,	a partnership or an S corpo	,		چ		35				35		
6	Rent income (Part	IV)		. 6			0			0			
7	Unrelated debt-fina	anced income (Part V)		. 7			0			0			
8		royalties, and rents from a VI)		. 8			0			0			
9	Investment income organizations (Part	e of section 501(c)(7), (9), o	r (17) • • • •	. 9			0			0			
10		ectivity income (Part VIII) .			_								
11	_	(Part IX)			_		0			0			
12	•	instructions; attach stateme	•		_								
13		es 3 through 12					35			0	35		
Pai		ns Not Taken Elsewher with the unrelated busir		ructions	for lir	nitations on	dedud	tions) D	eductio	ons m	ust be directly		
1	Compensation of o	fficers, directors, and trustee	es (Part X) .							1	0		
2	Salaries and wages									2			
3	Repairs and mainte	enance								3			
4	Bad debts									4			
5		atement) (see instructions)								5			
6										6			
7		ch Form 4562) (see instruction	•			7				_			
8	Less depreciation of	laimed in Part III and elsew				8a				8b			
9	Depletion									9			
10		ferred compensation plans .								10			
11		programs								11			
12		penses (Part VIII)								12			
13	•	costs (Part IX)								13	0		
14	Other deductions (•							• •	14	_		
15		-								15	0		
16	Linrelated hucinece	income before net operation	a loss deductio	on Subtra	act lin	a 15 trom Dar	or I line	13 colur	nn(C)	16	35		

35

17

Sche	dule A (Form 990-T) 2020				Page 2
Par	Cost of Goods Sold Enter m	ethod of inventory va	aluation >		_
1	Inventory at beginning of year			1	
2	Purchases			2	
3	Cost of labor			3	
4	Additional section 263A costs (attach statement)		4	
5	Other costs (attach statement)			5	
6	Total. Add lines 1 through 5			6	
7	Inventory at end of year				
8	Cost of goods sold. Subtract line 7 from line 6				
9	Do the rules of section 263A (with respect to pro-	· · · · · · · · · · · · · · · · · · ·			∐ Yes ☐ No
Par	`	-			
1	Description of property (property street address	, city, state, ZIP code).	Check if a dual-use (see	instructions)	
	A				
	B L				
	c ⊔				
	D D	Α	В	С	
2	Rent received or accrued	A	В		<u> </u>
_	From personal property (if the percentage of				
-	rent for personal property is more than 10%				
	but not more than 50%)				
b	From real and personal property (if the percentage of rent for personal property				
	exceeds 50% or if the rent is based on profit				
	or income)				
С	Total rents received or accrued by property. Add lines 2a and 2b, columns A through D.				
	, ,				
3	Total rents received or accrued. Add line 2c colu	mns A through D. Enter	here and on Part I, line	6, column (A) . ► _	0
4	Deductions directly connected with the income				
	in lines 2(a) and 2(b) (attach statement) .				
5	Total deductions. Add line 4 columns A throug	h D. Enter here and on	Part I, line 6, column (B)		0
Day	t V Unrelated Debt-Financed Incom	a (see instructions)			
	Description of debt-financed property (property		to ZID and a) Charle if a	d	
1	A □	street address, city, sta	te, ZIP code). Check if a	dual-use (see instruction	15)
	в				
	c □				
	D				
		Α	В	С	D
2	Gross income from or allocable to debt-				
	financed property				
3	Deductions directly connected with or allocable to debt-financed property				
	Straight line depreciation (attach statement)				
b	Other deductions (attach statement)				
С	Total deductions (add lines 3a and 3b, columns A through D)				
4	Amount of average acquisition debt on or				
•	allocable to debt-financed property (attach statement)				
5	Average adjusted basis of or allocable to debt-				
	financed property (attach statement)				
6	Divide line 4 by line 5	%	%	%	%
7	Gross income reportable. Multiply line 2 by line 6				
8	Total gross income. (add line 7, columns A th	rough D). Enter here and	d on Part I, line 7, colum	n (A) ▶ _	0
9	Allocable deductions. Multiply line 3c by line 6				
10	Total allocable deductions. Add line 9, colum	ns A through D. Enter h	ere and on Part I, line 7,	column (B) · · ► _	0
11	Total dividends-received deductions include	d in line 10	<u></u>	<u></u> ▶ _	0
				Schedule A	(Form 990-T) 2020

Schedule A (Form 990-T) 2020 Part VI Interest, Annu	ities Beve	ltics and De	nto fuo.	m Control	led Over	tio	/soo instrusti	·nc\	Page 3
Interest, Annu	ities, Roya	Titles, and Re	ents troi	m Control			ed Organization		
			2 Not	unrolated			5. Part of colu		6. Deductions directly
1. Name of controlled organization		2. Employer identification number	3. Net unrelated income (loss) (see instructions)		4. Total of specified payments made		that is included in the controlling organization's gross income		connected with income in column 5
(1)							_		
(2)									
(3)									
(4)									
		Non	exempt C	ontrolled Or	ganization	S			
7. Taxable income	7. Taxable income 8. Net incom (see ins		9. Total of specified payments made			10. Part of column 9 that is included in the controlling organization gross income			Deductions directly connected with ncome in column 10
(1)									
(2)									
(3)									
(4)									
Totals	come of a	Section 501 2. Amount of	(c)(7), ((9), or (1)	► 7) Organ tions direct	ization (setly 4	column (A) 0 ee instructions Set-asides ach statement)	5)	5. Total deductions and set-asides
				1	statement		acii stateiiiei	(add columns 3 and 4)
(1)									
(2)									
(3)									
(4)									
Totals		Add amounts in a Enter here and a line 9, colum	on Part I,						add amounts in column 5. Enter here and on Part I, line 9, column (B)
Totals		ity Incomo ()thar Th	an Advor	ticina In	como (co	instructions)		
<u> </u>	-	ty Income, (Julei II	iaii Auvel	using III	Come (See	: mistructions)		
1 Description of exploited a	· —		- F. I	L	D 1 T 1	10	<u> </u>	_	
2 Gross unrelated business3 Expenses directly connect	ed with produ	uction of unrela	ted busine	ess income.	Enter here	and on Part	I, line 10,	3	
column (B)	related trade		ubtract lin	ie 3 from lin	e 2. If a ga			4	
3								5	
Gross income from activitExpenses attributable to i	•							6	
Expenses attributable to iExcess exempt expenses.						mount on li	no / Entor	-	
here and on Part II. line 1								7	

	dule A (Form 990-T) 2020				Page 4
	Advertising Income				
1	Name(s) of periodical(s). Check box if reporting $\mathbf{A} \square$	two or more periodical	s on a consolidated basi	S.	
	в 🗆				
	c 🗆				
	D 🗆				
Enter	amounts for each periodical listed above in the o	corresponding column.			
		Α	В	С	D
2	Gross advertising income				
а	Add columns A through D. Enter here and on Pa	rt I, line 11, column (A)		0
3	Direct Advertising costs by periodical				
а	Add columns A through D. Enter here and on Pa	rt I, line 11, column (B)		0
4	Advertising gain (loss). Subtract line 3 from line 2. For any column in line 4 showing a gain, complete lines 5 through 8. For any column in line 4 showing a loss or zero, do not complete lines 5 through 7, and enter zero on line 8				
5	Readership costs				
6	Circulation income				
7	Excess readership costs. If line 6 is less than line 5, subtract line 6 from line 5. If line 5 is less than line 6, enter zero				
8	Excess readership costs allowed as a deduction. For each column showing a gain on line 4, enter the lesser of line 4 or line 7				
а	Add line 8, columns A through D. Enter the grea	ater of the columns tota	l or zero here and on Pa	ort II, line 13 ►	0
Pai	rt X Compensation of Officers, Direct	tors, and Trustees	(see instructions)		
	1. Name	:	2. Title	3. Percentage of time devoted to business	4. Compensation attributable to unrelated business
(1)					
(2) (3)					
(4)					
	I. Enter here and on Part II, line 1				0
Par	t XI Supplemental Information (see i	nstructions)			
	``				
				Schedul	e A (Form 990-T) 2020

efile	GRAPHIC print	- DO NOT PRO	CESS	As Filed D	ata -							DLN	I: 93393313	016101
SCH	EDULE D			Capital (Gain	s and Los	ses						OMB No. 15	45-0123
	m 1120)	Attach to Form 1120 1120-C 1120-F 1120-FSC 1120-H 1120-TC-DISC 1120-I												
% J		1120-ND, 1120-PC, 1120-POL, 1120-REIT, 1120-RIC, 1120-SF, or certain Forms 990-T.										2()		
	nent of the Treasury Revenue Service	▶ Go to w	ww.irs.	gov/Form112	0 for i	nstructions and	the la	atest i	nfor	matic	on.			
Name	Tereful Service										ification number			
CALIF	ORNIA ACADEMY OF	SCIENCES							ا ۵٫	-115	5255	,		
Did th	e corporation dispose	e of any investmer	nt(s) in a	qualified oppo	rtunity	fund during the ta	ax vea	r?	J 34	-113	3230)	☐ Yes	П №
	s," attach Form 8949	•	. ,			-			loss.				⊔ Yes	∐ No
Pai	t I Short-Term	Capital Gains	and Lo	sses Ger	nerally	Assets Held	One	Year	or L	ess	(se	e in:	structions)	
	See instructions for			(d)		(e)		g) Adj					(h) Gain or (l	
	the amounts to er below.	iter on the lines	Proceeds (sales price)			Cost (or other basis)			1				Subtract colum column (d) and	` '
						,		column (g)				the result with		
	This form may be earlif you round off cent												(g)	
	dollars.													
1a	Totals for all short-t reported on Form 10													
	basis was reported t													
	which you have no a instructions). However													
	to report all these tr	ansactions on												
	Form 8949, leave th go to line 1b	is line blank and												
1Ł	Totals for all transac													
	Form(s) 8949 with													
2	Totals for all transact Form(s) 8949 with E													
3	Totals for all transact Form(s) 8949 with E													899
4	Short-term capital g		nt sales i	from Form 625	2, line 2	26 or 37						4		
5	Short-term capital g	ain or (loss) from	like-kind	exchanges from	m Form	8824						5		
	Unused capital loss	, ,		•					•			6		()
	Net short-term capit											7		899
Par	Long-Term		and Lo		erally							_		
	See instructions for the amounts to en	•		(d) Proceeds		(e) Cost		g) Adj r loss :					(h) Gain or (l e Subtract colum	
	below.		(s	ales price)		(or other basis)		949, P		I, line	2,		column (d) and the result with	
	This form may be ea	asier to complete					ا	olumn	(9)			- 1	(g)	Column
	if you round off cent dollars.	ts to whole												
8a	Totals for all long-te	rm transactions												
	reported on Form 10	099-B for which												
	basis was reported t which you have no a													
	instructions). Howev	er, if you choose												
	to report all these tr Form 8949, leave th													
	go to line 8b													
8l:	Totals for all transac Form(s) 8949 with E													
9	Totals for all transact Form(s) 8949 with E													
10	Totals for all transactions Form(s) 8949 with													13,688
11	Enter gain from Forr		·									11		2,337
12	Long-term capital ga	ain from installmer	nt sales f	rom Form 6252	2, line 2	6 or 37						12		
13	Long-term capital ga	ain or (loss) from l	ike-kind	exchanges fron	n Form	8824						13		
	14 Capital gain distributions (see instructions)							٠	14		46.005			
	Net long-term capita IIII Summary o			nes &a through	14 in (column h			•	• •	•	15		16,025
	Enter excess of net			a 7) over not le	na-tor-	n capital loca (lin	o 1E\					16		899
	Net capital gain. Ent										•	17		16,025
	Add lines 16 and 17.		-						•			18		16,924
	Note: If losses exce							•		-				<u> </u>
For P	aperwork Reductio	n Act Notice, see	the In	structions for	Form	1120. Cat	t. No.	11460	М		Sc	hedu	ıle D (Form 1:	120) 2020

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OMB No. 1545-0074

Department of the

Internal Revenue Service

Treasury

Sales and Other Dispositions of Capital Assets

▶ Go to www.irs.gov/Form8949 for instructions and the latest information. ▶ File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

Attachment

						560	quence No. ==			
Name(s) shown on return CALIFORNIA ACADEMY OF SCIENCES		Social security number or taxpayer identification number								
CALIFORNIA ACADEMY OF SCIENCES						94-1156258				
Before you check Box A, B, or C belo statement will have the same inform broker and may even tell you which	ation as Form 1									
Part I Short-Term. Transact		capital asset	s you held 1 ye	ear or less are ger	nerally sh	ort term (see in	structions). Fo			
long-term transactions		·		-	•	•	,			
Note: You may aggreg and for which no adjus to report these transac	tments or cod	les are requir	ed. Enter the t							
You must check Box A, B, or C be Form 8949, page 1, for each applical complete as many forms with the sai	low. Check on ble box. If you h	ly one box. If nave more shor	more than one b							
(A) Short-term transactions rep	orted on Form(s) 1099-B show	ing basis was re	ported to the IRS (se	ee Note ab	oove)				
☐ (B) Short-term transactions rep ☑ (C) Short-term transactions not				t reported to the IRS	;					
1 (a) Description of property	(b) Date acquired	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis. See the Note below	If you enter a enter a	i, if any, to gain or loss. In amount in column (g), code in column (f). Sparate instructions.	(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)			
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)			and see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment				
CAS ENDOLITH ENDOWMENT FUND, LP				()			89			
2 Totals. Add the amounts in colum (subtract negative amounts). Ente include on your Schedule D, line : checked), line 2 (if Box B above Box C above is checked).	er each total her 1b (if Box A abo is checked), or l	e and ove is l ine 3 (if		()			89			

Form 8949 (2020) Attachment Sequence No. 12A Page 2 Social security number or taxpayer identification number Name(s) shown on return. Name and SSN or taxpayer identification no, not required if shown on other side CALIFORNIA ACADEMY OF SCIENCES Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check. Part II Long-Term. Transactions involving capital assets you held more than 1 year are generally long term (see instructions). For short-term transactions, see page 1. Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions). You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need. (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above) (E) Long-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS (F) Long-term transactions not reported to you on Form 1099-B (h) Adjustment, if any, to gain or loss. 1 If you enter an amount in column (g). Gain or (loss). (e) enter a code in column (f). (c) (d) Cost or other basis. Subtract column (a) (b) Date sold or See the Note below See the separate instructions. Proceeds (e) Description of property Date acquired disposed of (sales price) and see Column (e) from column (d) (Example: 100 sh. XYZ Co.) (Mo., day, yr.) (Mo., day, yr.) (see instructions) in the separate and (f) (g) instructions combine the result Code(s) from Amount of instructions adjustment with column (q) CAS ENDOLITH ENDOWMENT FUND, LP 13,688 **2 Totals**. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if **Box F** above is checked) 13,688 Note: If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment. Form 8949 (2020)