

**John L Cutler & Associates
600 17th St S Ste 2800
Denver, CO 80202-5428
303-634-2259**

May 12, 2020

CONFIDENTIAL

Independence Academy
675 29 Road
Grand Junction, CO 81504

Dear :

We have prepared the following returns from information provided by you without verification or audit.

Return of Organization Exempt From Income Tax (Form 990)

We suggest that you examine these returns carefully to fully acquaint yourself with all items contained therein to ensure that there are no omissions or misstatements. Attached are instructions for signing and filing each return. Please follow those instructions carefully.

Enclosed is any material you furnished for use in preparing the returns. If the returns are examined, requests may be made for supporting documentation. Therefore, we recommend that you retain all pertinent records for at least seven years.

In order that we may properly advise you of tax considerations, please keep us informed of any significant changes in your financial affairs or of any correspondence received from taxing authorities.

If you have any questions, or if we can be of assistance in any way, please call.

Sincerely,

John L Cutler & Associates

Filing Instructions
Independence Academy
Exempt Organization Tax Return
Taxable Year Ended June 30, 2019

Date Due: May 15, 2020

Remittance: None is required. Your Form 990 for the tax year ended 6/30/19 shows no balance due.

Mail To: Department of the Treasury
Internal Revenue Service Center
Ogden, UT 84201-0027

If a private delivery service is used, mail to:
OSPC
1973 Rulon White Blvd.
Ogden, UT 84201-1000

Signature: The return should be signed and dated on Page 1 by an officer representing the organization.

Independence Academy
675 29 Road
Grand Junction, CO 81504

Department of the Treasury
Internal Revenue Service Center
Ogden, UT 84201-0027



Form **990**
Department of the Treasury
Internal Revenue Service

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

OMB No. 1545-0047
2018
Open to Public Inspection

A For the 2018 calendar year, or tax year beginning 07/01/18, and ending 06/30/19

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization <p align="center">Independence Academy</p> Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite 675 29 Road City or town, state or province, country, and ZIP or foreign postal code Grand Junction CO 81504	D Employer identification number 04-3748642 E Telephone number 970-255-8565 G Gross receipts \$ 3,313,162
F Name and address of principal officer: Sherry Price 675 29 Road Grand Junction CO 81504		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(c) Group exemption number ▶
J Website: ▶ independence.mesa.k12.co.us		L Year of formation: 2002 M State of legal domicile: CO
K Form of organization: <input type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input checked="" type="checkbox"/> Other ▶		

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: <p align="center">See Schedule O</p>																									
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.																									
	3 Number of voting members of the governing body (Part VI, line 1a)	3 5																								
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4 5																								
	5 Total number of individuals employed in calendar year 2018 (Part V, line 2a)	5 46																								
	6 Total number of volunteers (estimate if necessary)	6 0																								
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a 0																								
	7b Net unrelated business taxable income from Form 990-T, line 38	7b 0																								
Revenue		<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th align="center">Prior Year</th> <th align="center">Current Year</th> </tr> </thead> <tbody> <tr> <td>8 Contributions and grants (Part VIII, line 1h)</td> <td align="right">374,587</td> <td align="right">183,317</td> </tr> <tr> <td>9 Program service revenue (Part VIII, line 2g)</td> <td align="right">3,035,410</td> <td align="right">3,064,739</td> </tr> <tr> <td>10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)</td> <td align="right">4,855</td> <td align="right">1,051</td> </tr> <tr> <td>11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)</td> <td></td> <td align="right">64,055</td> </tr> <tr> <td>12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)</td> <td align="right">3,414,852</td> <td align="right">3,313,162</td> </tr> </tbody> </table>		Prior Year	Current Year	8 Contributions and grants (Part VIII, line 1h)	374,587	183,317	9 Program service revenue (Part VIII, line 2g)	3,035,410	3,064,739	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	4,855	1,051	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		64,055	12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,414,852	3,313,162						
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Part II Signature Block

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

Sign Here	Signature of officer: <i>Sherry Price</i> Type or print name and title: Sherry Price Board President	Date: 5/12/20
Paid Preparer Use Only	Print/Type preparer's name: John L. Cutler Preparer's signature: <i>John L. Cutler</i> Date: 05/12/20 Check <input type="checkbox"/> if self-employed Firm's name: John L. Cutler & Associates Firm's address: 600 17th St S Ste 2800 Denver, CO 80202-5428 Firm's EIN: 303-634-2259	

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No