Form <b>990</b>
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Department of the Treasury

## **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 J **Open to Public** 

Interna	ai neve	Hue Service do to the service and to the service			inspection					
AF	or th	e 2023 calendar year, or tax year beginning $JUL 1, 2023$ and	ending J	<u>UN 30, 2024</u>						
B C	heck if plicab	e: C Name of organization		D Employer identific	cation number					
	Addre	SCHOLARS								
	Name	e Doing business as	56-162740	01						
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number						
	Final return			(913) 962	2-4422					
termin- ated City or town, state or province, country, and ZIP or foreign postal code <b>G</b> Gross receipts \$ 2,065,432										
	Amen return	OVERLAND FARK, KS 00202		H(a) Is this a group re	turn					
	Applic tion	F Name and address of principal officer: STAN WALLACE		for subordinates	? Yes X No					
	pendi	SAME AS C ABOVE		H(b) Are all subordinates in	cluded? Yes No					
<u> </u> T	ax-ex	empt status: X 501(c)(3) 501(c) ( ) (insert no.) 4947(a)(1) (	or 📃 527	If "No," attach a	list. See instructions					
	/ebsi			H(c) Group exemption						
		organization: X Corporation Trust Association Other	L Year	of formation: 1988 N	State of legal domicile: NC					
Pa	rt I	Summary								
a	1	Briefly describe the organization's mission or most significant activities: GLOB								
Governance		CHRISTIAN ACADEMICS ARE ADEQUATELY EQUIPP								
ern.	2	Check this box if the organization discontinued its operations or dispos	sed of more	I _ I						
Š	3				6					
୍ ଅ	4	Number of independent voting members of the governing body (Part VI, line 1b)			6					
Activities &		Total number of individuals employed in calendar year 2023 (Part V, line 2a)		47						
İ	6	Total number of volunteers (estimate if necessary)		104						
Pct			<u>7a</u>	0.						
_	b	Net unrelated business taxable income from Form 990-T, Part I, line 11	<u></u>		0.					
	-			Prior Year	Current Year					
e	8	Contributions and grants (Part VIII, line 1h)		<u>2,060,783</u> . 0.	2,010,810.					
Revenue	9	Program service revenue (Part VIII, line 2g)		23,812.	<u> </u>					
Be		Investment income (Part VIII, column (A), lines 3, 4, and 7d)	6,965.	0.						
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		2,091,560.	2,064,770.					
_	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		28,088.	22,004,770.					
	13 14	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	20,000.	0.						
	14 15	Benefits paid to or for members (Part IX, column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		1,337,566.	1,457,523.					
Expenses		Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.					
en e		Total fundraising expenses (Part IX, column (A), line 11e)	69.	0.						
Ă		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		434,491.	518,736.					
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		1,800,145.	1,998,282.					
	19	Revenue less expenses. Subtract line 18 from line 12		291,415.	66,488.					
r sa			Be	ginning of Current Year	End of Year					
ets	20	Total assets (Part X, line 16)		2,016,002.	2,085,932.					
Ass	21	Total liabilities (Part X, line 26)		79,060.	66,448.					
Net Assets or Fund Balances	22	Net assets or fund balances. Subtract line 21 from line 20	1,936,942.	2,019,484.						
Pa	rt II	Signature Block								
Unde	r pena		s and stateme	ents, and to the best of my	knowledge and belief, it is					
true,	corre	t, and complete. Declaration of preparer (other than officer) is based on all information of wh	nich preparer							
		Elan Whall		1/04	1212.4					

Sign	Signature of officer				Date						
Here	STAN WALLACE, PRESIDENT										
	Type or print name and title										
	Print/Type preparer's name	Preparer's signature		Date	Check	PTIN					
Paid	MATTHEW C. HALL				self-employed PC	1573021					
Preparer	Firm's name RUBINBROWN LLP				Firm's EIN 43-07	765316					
Use Only	Firm's address 1200 MAIN STREET	, SUITE 1000									
	KANSAS CITY, MO	64105			Phone no. 816-47	2-1122					
May the I	May the IRS discuss this return with the preparer shown above? See instructions										
LHA For	LHA For Paperwork Reduction Act Notice, see the separate instructions. 332001 12-21-23 Form 990 (2023)										

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Check if Schedue Contains a response or note to any line in this Part II  Check if Schedue Contains a response or note to any line in this Part II  Check if Schedue Contains a response or note to any line in this Part II  CollEadause, UNIVERSITIES SO THAT CHRISTIAN ACADEMICS ARE ADEQUATELY EQUIPPED TO HAVE A REDEMPTIVE INFLUENCE AMONG THEIR STUDENTS, COLLEAGUES, UNIVERSITIES AND DISCIPLINES, AT A REASONABLE COST.  Did the organization undertake any significant program services, AT A REASONABLE COST.  Did the organization indertake any significant program services, and the organization cases conducting, or make significant change in how it conducts, any program services, as measured by expenses. Section 501(02) and 501(02) organizations are required to report the mount of grants and allocations to othen, and reverse, and reverse, far, for each program service accompliations are required to report the mount of grants and allocations to othen, and reverse, and reverse, far, for each program services accompliation or HESE ACADEMICS INFLUENCE THEN STUDENTS, COLLEAGUES, DISCIPLINES, AND UNIVERSITIES FOR CHRIST THROUGH TEACHING, RESEARCH, AND ADMINISTRATIVE DUTIES. ANDORMICE 1, 350 ACADEMICS SERVENCES WERE 45 FELLOWS WHO RECEIVED ADDITIONAL FACULTY CARE, FUNDRAISING SUPPORT, AND OTHER ADMINISTRATIVE SERVICES.  Difference: 465 FELLOWS WHO RECEIVED ADDITIONAL FACULTY CARE, FUNDRAISING SUPPORT, AND OTHER ADMINISTRATIVE SERVICES.  Difference: 465 FELLOWS WHO RECEIVED ADDITIONAL FACULTY CARE, FUNDRAISING SUPPORT, AND OTHER ADMINISTRATIVE SERVICES.  Difference: 465 FELLOWS WHO RECEIVED ADDITIONAL FACULTY CARE, FUNDRAISING SUPPORT, AND OTHER ADMINISTRATIVE SERVICES.  Difference: 465 FELLOWS WHO RECEIVED ADDITIONAL FACULTY CARE, FUNDRAISING SUPPORT, AND OTHER ADMINISTRATIVE SERVICES.  Difference: 465 FELLOWS WHO RECEIVED ADDITIONAL FACULTY CARE, FUNDRAISING SUPPORT, AND OTHER ADMINISTRATIVE SERVICES.  Difference: 465 FELLOWS WHO RECEIVED ADDITIONAL FACULTY CARE, FUNDRAISING SUPPORT, AND OTHER ADMINISTRATIVE SERVICES.  Differ	1 Briefly describe the organization's mission: GLOBAL SCHOLARS EXISTS SO THAT CHRISTIAN ACADE	MICS ARE ADEQUATELY THEIR STUDENTS,	<u>. X</u>
Bondy describe the organization's mission:           GLOBAL SCHOLARS EXISTS SO THAT CHRISTIAN ACADEMICS ARE ADEQUATELY           EQUIPPED TO HAVE A REDEMPTIVE INFLUENCE AMONG THEIR STUDENTS;           COLLEAGUES, UNIVERSITIES AND DISCIPLINES, AT A REASONABLE COST.           Did the organization undertake any significant program services during the year which were not listed on the proform 500 or 500-627           D'strict the these new services on Schedule 0.           Describe the organization case conducting, or make significant changes in how it conducts, any program services, as measured by expenses.           Section 501(6)(3) and 501(6)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, to each program service accomplishments for each of its three largest program services, as measured by expenses.           Section 501(6)(3) and 501(6)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, to each program service accomplishments for each of this three largest program services.         0           GLOBAL SCHOLARS EQUIPS, SUPPORTS, AND/OR RESOURCES MORE THAN 1, 350         ACADEMICS AROUND THE WORLD. THESE ACADEMICS INFLUENCE THEIRS TOTUBENTS, COLLEAGUES, DISCIFUENCE AND ON THE SUPPORT, AND OTHER ADMINISTRATIVE DUTIES. AMONG THE 1, 350 ACADEMICS SERVED WERE 4 5 PELLONS WHO RECEIVED ADDITIONAL FACULTY CARE, FUNDRAISING SUPPORT, AND ADMINISTRATIVE DUTIES. ACADEMICS LAUNCHED, OFFERING 14           BENETITS ON SERVICES TO ITS MEMBERS. AT THE END OF FY 3.2-24, THE SOCIETY HAD 34.0 MEMBERS OF THE SOCIETY SONLINE COMMUNITY.           ADDITIONAL	1 Briefly describe the organization's mission: GLOBAL SCHOLARS EXISTS SO THAT CHRISTIAN ACADE	MICS ARE ADEQUATELY THEIR STUDENTS,	<u>. [X</u>
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Od the organization undertake any significant program services during the year which were not listed on the prior from B00 or B00-E2?       IV Yes; X         If Yes; 'describe these new services on Schedule 0.       Ves; X         Did the organization cases conducting, or make significant changes in how it conducts, any program services, as measured by expenses.       Section 5010(2); and 5010(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and rearenue, if my, for each program services are required to report the amount of grants and allocations to others, the total expenses, and rearenue, if my, for each program services completion prevents'.       12,000.) (prevents', and completion services are required to report the amount of grants and allocations to others, the total expenses, and rearenue, if my, for each program services (DEORAL SCHOLARS EQUIPS, SUPPORT, AND/OR RESOURCES MORE THAN 11,350         GLOBAL SCHOLARS EQUIPS, SUPPORTS, AND/OR RESOURCES MORE THAN 11,350       ACADEMICS AROUND THE WORLD. THESE ACADEMICS INFLUENCE THEIR STUDENTS, COLLEAGUES, DISCIPLINES, AND UNIVERSITIES FOR CHRIST THROUGH EACHING, SERVED WERE 45 FELLOWS WHO RECEIVED ADDITIONAL FACULTY CARE, FUNDRAISING SUPPORT, AND OTHER ADMINISTRATIVE DUTIES. AND MANNISTRATIVE SERVICES.         0       (cook			
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Dut morganization cases conducting, or make significant changes in how it conducts, any program services?	prior Form 990 or 990-EZ?	Yes	XNC
<pre>If "%", describe these changes on Schedule 0. Describe tregenization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(6)(8) and 501(6)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported</pre>	If "Yes," describe these new services on Schedule O.		
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 Form 990 (2023)
 GLOBAL
 SCHOLARS

 Part IV
 Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			37
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8	X	
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	<u> </u>
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	<u> </u>
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		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	<u> </u>
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	<u> </u>
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	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		<u> </u>
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	<u> </u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? 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			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		<u> </u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		<u>X</u>
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	<u> </u>
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 Form 990 (2023)
 GLOBAL
 SCHOLARS

 Part IV
 Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? 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	25		
210	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		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
с	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		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	25b		х
26	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		- 23
20	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			v
h	"Yes," complete Schedule L, Part IV	28a		X X
	A family member of any individual described in line 28a? <i>If</i> "Yes," <i>complete Schedule L, Part IV</i>	28b		<u></u>
C	"Yes," complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in noncash 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		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes, " complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
<u>.</u>	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			х
35 2	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	34 35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	000		
	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		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?		77	
Par	Note: All Form 990 filers are required to complete Schedule O           t V         Statements Regarding Other IRS Filings and Tax Compliance	38	Х	
1 0	Check if Schedule O contains a response or note to any line in this Part V			
	האסטול זו סטרובענוב ט נטרוגמוזס מ ובסטטרוסב טו דוטנב נט מוזץ וווים ווד נוזוס רמוג ע		Yes	No
1ว	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 10		162	
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		
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Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)				Yes	No			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		I		Tes	NO			
Lu	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 return		•	2b	Х				
				3a		Х			
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule	ο		3b					
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	authori	ty over, a						
	financial account in a foreign country (such as a bank account, securities account, or other financial a	ccour	nt)?	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).								
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		<u>x</u> x			
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction file Form 2006 T2			5b		<u> </u>			
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			<u>5c</u>					
Ua	any contributions that were not tax deductible as charitable contributions?			6a		Х			
b	If "Yes," did the organization include with every solicitation an express statement that such contributi								
-	were not tax deductible?			6b					
7	Organizations that may receive deductible contributions under section 170(c).								
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	vices p	rovided 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	as requ	uired						
	to file Form 8282?			7c		<u> </u>			
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d							
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co	ontrac	t?	7e		<u>X</u>			
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra			7f 7g		X			
g									
-	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organiza			7h					
8	8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the								
9	sponsoring organization have excess business holdings at any time during the year?								
				9a 9b					
10	Section 501(c)(7) organizations. Enter:								
а	Initiation fees and capital contributions included on Part VIII, line 12	10a							
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b							
11	Section 501(c)(12) organizations. Enter:								
а	Gross income from members or shareholders	11a							
b	Gross income from other sources. (Do not net amounts due or paid to other sources against								
	amounts due or received from them.)	11b							
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1	?	12a					
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b							
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			40-					
а	Is the organization licensed to issue qualified health plans in more than one state?			<u>13a</u>					
h	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which the								
U	organization is licensed to issue qualified health plans	13b							
с									
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedu			14a 14b		X			
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune								
	excess parachute payment(s) during the year?			15		X			
	If "Yes," see the instructions and file Form 4720, Schedule N.								
16	16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income?								
	If "Yes," complete Form 4720, Schedule O.								
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any ac	tivities	5						
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?			17					
	If "Yes," complete Form 6069.			_	0000				
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	Check if Schedule O contains a response or note to any line in this Part VI			<u></u>			X
Sec	tion A. Governing Body and Management					<u> </u>	
		1	1		c 🕅	Yes	N
1a	Enter the number of voting members of the governing body at the end of the tax year	. 18	3		6		
	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.				c		
-	Enter the number of voting members included on line 1a, above, who are independent	-			6		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relations						Ι,
_	officer, director, trustee, or key employee?				. 2		2
3	Did the organization delegate control over management duties customarily performed by or under						,
	of officers, directors, trustees, or key employees to a management company or other person?						2 2
4	Did the organization make any significant changes to its governing documents since the prior Form						
5	Did the organization become aware during the year of a significant diversion of the organization's a						
6 7-	Did the organization have members or stockholders?				. 6		╧
7a	Did the organization have members, stockholders, or other persons who had the power to elect or				7-		2
Ŀ	more members of the governing body?				. <u>7a</u>		-
D	Are any governance decisions of the organization reserved to (or subject to approval by) members,				71.		2
_	persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the				. 7b		1-1
3					0.0	x	
	The governing body?						2
	Each committee with authority to act on behalf of the governing body?				. <u>8b</u>		_
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be n				. 9		2
	organization's mailing address? If "Yes." provide the names and addresses on Schedule O				9		4
00	tion B. Policies (This Section B requests information about policies not required by the Internal	Revent	<u>ie Coae.)</u>			Yes	
0-	Did the organization have local chapters, branches, or affiliates?				10a		
	If "Yes," did the organization have written policies and procedures governing the activities of such						Ľ
D	and branches to ensure their operations are consistent with the organization's exempt purposes?				10b		
1-	Has the organization provided a complete copy of this Form 990 to all members of its governing be				. 11a		┢
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.		ore ming		11a		
	Did the organization have a written conflict of interest policy? If "No," go to line 13				12a	x	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give r					X	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If</i>						┢
U	on Schedule O how this was done				12c	х	
3	Did the organization have a written whistleblower policy?					X	
4						X	┢
5	Did the organization have a written document retention and destruction policy?				. 14		
•	persons, comparability data, and contemporaneous substantiation of the deliberation and decision		nacpena	CIT			
а	The organization's CEO, Executive Director, or top management official				15a	x	
	Other officers or key employees of the organization						2
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.				. 150		
62	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ement	with a				
54	taxable entity during the year?				16a		
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evalu						
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the org						
	exempt status with respect to such arrangements?				. 16b		
ec	tion C. Disclosure			<u></u>	. 100		-
7	List the states with which a copy of this Form 990 is required to be filedAL, CO, KS, MA,	MI.	MN.MS	. NH . N	D.OH	. PA	. S
8	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990,						
•	for public inspection. Indicate how you made these available. Check all that apply.	and ot			(0)0 011137	avana	010
	Own website       Another's website       X       Upon request       Other (expl)	ain an '	Schodulo	(			
9	Describe on Schedule O whether (and if so, how) the organization made its governing documents,			,	and finan	cial	
•	statements available to the public during the tax year.	oonno		or policy, c		orar	
0	State the name, address, and telephone number of the person who possesses the organization's b	ooks a	nd record	1s			
0	LYNN SIMONS - (913) 962-4422			15			
	P.O. BOX 12147, OVERLAND PARK, KS 66282						
2000	SEE SCHEDULE O FOR FULL LIST OF STATES				Forr	n <b>990</b>	(20
,∠uut					rull		120
10	30       132842       20327.0000       2023.05000       GLOBAL	SCHO	OLARS			20	3

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response

to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

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GLOBAL SCHOLARS

Form 990 (2023)

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 Complet	te this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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."

GLOBAL SCHOLARS

• 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.

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

(A)	(B)	(C)					(D)	(E)	(F)	
Name and title	Average	Position		Position (do not check more than one		Reportable	Reportable	Estimated		
	hours per	box	box, unless perso		rson is both an		n an	compensation	compensation	amount of
	week			officer and a directo		irector/trustee)		from	from related	other
	(list any	rector						the	organizations	compensation
	hours for	or di	ee			ated		organization	(W-2/1099-MISC/	from the
	related	ustee	trust		98	bens		(W-2/1099-MISC/	1099-NEC)	organization and related
	organizations below	ual tr	ional		vold	t com		1099-NEC)		organizations
	line)	ndividual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) DR. STAN WALLACE	40.00	_	-		×	1 0	Ц			
PRESIDENT & CEO		1				x		127,325.	0.	17,708.
(2) MR. JT SMITH	2.00									
CHAIR		Х		Х				0.	0.	0.
(3) DR. DAWN CLAYTON	1.00									
VICE-CHAIR		Х		Х				0.	0.	0.
(4) MS. GARIANNE HOWARD	1.00									
SECRETARY		Х		Х				0.	0.	0.
(5) MR. JAMES DUNPHY	1.00									
TREASURER - THRU 3/23		Х		Х				0.	0.	0.
(6) MR. JOHN DRAPER	1.00									
TREASURER - AS OF 4/23		Х		Х				0.	0.	0.
(7) DR. HAYWARD MAFUYAI	1.00									
DIRECTOR		Х						0.	0.	0.
(8) MR. JEFF ADAMS	1.00									
DIRECTOR		Х						0.	0.	0.
						-				
		1								
		1								
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	90 (2023) GLOBAL SC	CHOLARS								56-16	274	01	Pa	age <b>8</b>
Part	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)													
	(A) Name and title	<b>(B)</b> Average hours per week (list any	box, offic	Position (do not check more than one oxo, unless person is both an officer and a director/trustee) fror			an	(D) Reportable compensation from the	(E) Reportable compensation from related		Est am	(F) imate ount o other	of	
		hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MIS( 1099-NEC)		fro orga and	oensat om the nizati relate nizatio	e on ed
	Subtotal								127,325.		0.	17	7,70	
	Fotal from continuation sheets to Part VI         Fotal (add lines 1b and 1c)								0.		<u>0.</u> 0.	17	7,70	<u>0.</u> )8.
	Fotal number of individuals (including but n								· · ·				<u> </u>	
(	compensation from the organization												Yes	<u>1</u> No
	Did the organization list any <b>former</b> officer,										ſ		Tes	x
<b>4</b> F	ine 1a? <i>If "Yes," complete Schedule J for</i> s For any individual listed on line 1a, is the su	m of reportabl	e co	mpe	ensat	tion	and	oth		he organization		3		x
	and related organizations greater than \$150 Did any person listed on line 1a receive or a											4		<u> </u>
	endered to the organization? If "Yes." com	plete Schedule	e J fo	or su	ich p	bers	on .					5		Х
	on B. Independent Contractors Complete this table for your five highest co	mpensated ind	leper	nder	nt co	ontra	actor	s th	nat received more than \$	100.000 of comp	ensati	on fro	m	
	he organization. Report compensation for													
	(A) Name and business	address	NC	ONE	2				(B) Description of s	ervices	Co	(C) ompen		<u>ו</u>
	Fotal number of independent contractors (in 6100,000 of compensation from the organized and the second structure of the secon	•	ot lin	niteo	to t	thos C		ted	above) who received mo	ore than				

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Pa	rt VII	II Statement of Rev	venue					
		Check if Schedule O c	contains a respo	nse or note to any lin	e in this Part VIII			
						(B) Related or exempt	(C) Unrelated	(D) Revenue excluded
					Total revenue	function revenue	business revenue	from tax under
								sections 512 - 514
ts ts	1 a	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues	1b	11,379.				
۲ وی	с	Fundraising events	1c					
ar /	d							
<u>بان</u> الأن	е	Government grants (contri	ibutions) <b>1e</b>					
ŝ	f	All other contributions, gifts,	grants, and					
put		similar amounts not included	above 1f	1,999,431.				
Ē	a	Noncash contributions included in I						
and	h				2,010,810.			
				Business Code				
ø	2 a	I						
Program Service Revenue	b							
Ser	c							
ĒŠ	d							
gra Re	u							
or of	e	All other program convice	rovopuo					
-	f	1 5						
	g	Total. Add lines 2a-2f						
	3	Investment income (includ	-		54,622.			54,622.
					54,022.			54,022.
	4	Income from investment o						
	5	Royalties						
			(i) Real	(ii) Personal				
	6 a		6a					
	b		6b					
	с		6c					
	d	Net rental income or (loss)	) <u></u>					
	7 a	Gross amount from sales of	(i) Securit	ies (ii) Other				
		assets other than inventory	7a					
	b	Less: cost or other basis						
ne		and sales expenses	7b 66	2.				
Revenue	с	Gain or (loss)	7c - 66	2.				
Be	d	Net gain or (loss)		. <u>.</u>	-662.			-662.
er		Gross income from fundraisir						
Othe		including \$	of					
		contributions reported on						
		Part IV, line 18	-	8a				
	b			8b				
	с			its				
		Gross income from gamin						
		Part IV, line 19	-	9a				
	ь	Less: direct expenses		9b				
		Net income or (loss) from						
		Gross sales of inventory, le						
	10 0	and allowances		10-2				
	ь	Less: cost of goods sold		10b				
				· · · · ·				
	C	Net income or (loss) from s	sales of inventor	Business Code				
sn								
eol	11 a							
scellaneo Revenue	b							
Miscellaneous Revenue	С							
Mis	d	All other revenue						
_		Total. Add lines 11a-11d						F2 0 C0
	12	Total revenue. See instructio	ons		2,064,770.	0.	0.	53,960.
33200	9 12-21	1-23						Form <b>990</b> (2023

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GLOBAL SCHOLARS

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GLOBAL SCHOLARS Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

0000	on 501(c)(3) and 501(c)(4) organizations must comp				
	Check if Schedule O contains a response	se or note to any line in t	(B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	<b>(C)</b> Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	10,000.	10,000.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16	12,023.	12,023.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	1 202 020	916,398.	205 220	1 ( ) ) ) 1
7	Other salaries and wages	1,283,839.	910,398.	205,220.	162,221.
8	Pension plan accruals and contributions (include	20 672	22 207	0 4 2 2	7 052
~	section 401(k) and 403(b) employer contributions)	<u>39,672.</u> 68,701.	23,297.	8,422.	7,953.
9	Other employee benefits	65,311.	67,691. 46,252.	11,838.	7,221.
10	Payroll taxes	05,511.	40,252.	11,030.	1,221.
11	Fees for services (nonemployees):				
a	Management				
b	F	29,950.		29,950.	
-	Accounting	29,950.		29,950.	
d	Lobbying Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
a	Other. (If line 11g amount exceeds 10% of line 25,				
9	column (A), amount, list line 11g expenses on Sch 0.)	177,628.	169,603.	7,575.	450.
12	Advertising and promotion			.,	
13	Office expenses	71,090.	39,603.	21,299.	10,188.
14	Information technology	26,438.	12,855.	10,002.	3,581.
15	Royalties				•
16	Occupancy	17,110.	16,371.	149.	590.
17	Travel	127,152.	105,604.	7,903.	13,645.
18	Payments of travel or entertainment expenses	-			-
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,975.	1,975.		
23	Insurance	7,467.		7,467.	
24	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A),				
	amount, list line 24e expenses on Schedule 0.)	0.6 0.54	04 504		
а	TRAINING AND PROFESSION	36,351.	31,591.	4,346.	414.
b	DONATIONS AND GIFTS	23,575.	21,619.	150.	1,806.
С					
d					
	All other expenses	1 000 202	1 171 000	315,331.	208 060
<u>25</u>	Total functional expenses. Add lines 1 through 24e	1,998,282.	1,474,882.	313,331.	208,069.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)				
	(AGU 300-120)				

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#### GLOBAL SCHOLARS

<u>m 990</u> art X	(2023) GLOBAL SCHOLARS		56-	1627401 Page
	Check if Schedule O contains a response or note to any line in this Part X			
		<b>(A)</b> Beginning of year		<b>(B)</b> End of year
				-
1	Cash - non-interest-bearing	200,999.	1	240,023
2	Savings and temporary cash investments	1,498,457.	2	1,451,612
3	Pledges and grants receivable, net	0.	3	100,000
4	Accounts receivable, net		4	
5	Loans and other receivables from any current or former officer, director,			
	trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons		5	
6	Loans and other receivables from other disqualified persons (as defined			
	under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
7	Notes and loans receivable, net		7	
8	Inventories for sale or use		8	14 45
9	Prepaid expenses and deferred charges	55,623.	9	14,454
10a	Land, buildings, and equipment: cost or other			
	basis. Complete Part VI of Schedule D 10a 8,594.	2 540		E CI
	Less: accumulated depreciation   10b   8,029.	2,540.	10c	56
11	Investments - publicly traded securities	187,208.	11	208,10
12	Investments - other securities. See Part IV, line 11		12	
13	Investments - program-related. See Part IV, line 11		13	
14	Intangible assets	71 175	14	<b>D1 1D</b>
15	Other assets. See Part IV, line 11	71,175.	15	71,17
16	Total assets. Add lines 1 through 15 (must equal line 33)	2,016,002.	16	2,085,93
17	Accounts payable and accrued expenses	55,163.	17	40,97
18	Grants payable	E 096	18	E 00
19	Deferred revenue	5,986.	19	5,90
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
22	Loans and other payables to any current or former officer, director,			
	trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons		22	
23	Secured mortgages and notes payable to unrelated third parties		23	
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities (including federal income tax, payables to related third			
	parties, and other liabilities not included on lines 17-24). Complete Part X	17 011		10 57
	of Schedule D	<u>    17,911.</u> 79,060.	25	19,57 66,44
26	Total liabilities. Add lines 17 through 25	79,000.	26	00,44
	Organizations that follow FASB ASC 958, check here			
07	and complete lines 27, 28, 32, and 33.	1,509,672.	07	1 503 36
27	Net assets without donor restrictions	427,270.	27	<u>1,593,36</u> 426,12
28	Net assets with donor restrictions	427,270.	28	420,12
27 28 29 30 31 32	Organizations that do not follow FASB ASC 958, check here			
	and complete lines 29 through 33.			
29	Capital stock or trust principal, or current funds		29	
30	Paid-in or capital surplus, or land, building, or equipment fund		30	
31	Retained earnings, endowment, accumulated income, or other funds	1 036 013	31	2 010 10
	Total net assets or fund balances	1,936,942.	32	2,019,48
33	Total liabilities and net assets/fund balances	2,016,002.	33	2,085,93 Form <b>990</b> (2)

12401030 132842 20327.0000

Form	1990 (2023) GLOBAL SCHOLARS	56-	-1627401	Pa	.ge <b>12</b>
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,06	4,7	70.
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,99	8,2	82.
3	Revenue less expenses. Subtract line 2 from line 1	3			88.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,93	6,9	42.
5	Net unrealized gains (losses) on investments	5	1	6,0	54.
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			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	2,01	9,4	84.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	О.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		<b>2</b> b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	,			
	review, or compilation of its financial statements and selection of an independent accountant?			X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule C	).		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		<u>3a</u>		<u> </u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		

Form **990** (2023)

332012 12-21-23

Department of the Treasury

Internal Revenue Service

(Form 990)

## **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.

OMB No. 1545-0047
2023
Open to Public Inspection

#### Name of the organization

Name o	of the organization						Employer	identification number				
		AL SCHOLAR					5	6-1627401				
Part	Reason for Public (	Charity Status.	(All organizations must c	omplete th	nis part.) S	ee instruction	S.					
The org	anization is not a private found	ation because it is: (I	For lines 1 through 12, c	heck only	one box.)							
1	A church, convention of ch	urches, or associatio	n of churches described	l in sectio	n 170(b)(1	)(A)(i).						
2	A school described in sect	ion 170(b)(1)(A)(ii). (	Attach Schedule E (Forn	า 990).)								
3	A hospital or a cooperative	hospital service orga	anization described in so	ection 170	(b)(1)(A)(ii	i).						
4	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name,											
	city, and state:											
5	An organization operated for	or the benefit of a col	llege or university owned	l or operat	ed by a go	vernmental u	nit describe	ed in				
	section 170(b)(1)(A)(iv). (C	Complete Part II.)										
6	A federal, state, or local gov	vernment or governm	nental unit described in	section 17	70(b)(1)(A)	(v).						
7 X	An organization that norma	Ily receives a substa	ntial part of its support fi	rom a gove	ernmental	unit or from th	ie general p	oublic described in				
	section 170(b)(1)(A)(vi). (C	omplete Part II.)										
8	A community trust describe	ed in section 170(b)	(1)(A)(vi). (Complete Par	t II.)								
9	An agricultural research org	ganization described	in section 170(b)(1)(A)(	ix) operate	ed in conju	inction with a	land-grant	college				
	or university or a non-land-g	grant college of agric	ulture (see instructions).	Enter the	name, city	, and state of	the college	or				
	university:											
10	An organization that norma	Ily receives (1) more	than 33 1/3% of its supp	ort from c	ontributior	ns, membersh	ip fees, and	d gross receipts from				
	activities related to its exen							-				
	income and unrelated busir	ness taxable income	(less section 511 tax) fro	om busines	ses acqui	red by the org	anization a	Ifter June 30, 1975.				
	_ See section 509(a)(2). (Co	mplete Part III.)										
11	An organization organized a	-	•	•								
12 🗌	An organization organized a	-	•	-			•					
	more publicly supported or	-						Check the box on				
г	lines 12a through 12d that	• •					-					
a	<b>Type I.</b> A supporting orga	-	-	• • • •	-							
	the supported organization			majority c	of the direc	tors or truste	es of the su	ipporting				
. г	organization. You must o	•				-1	- (-)	·				
b [	Type II. A supporting org	-				•		•				
	control or management o			ame perso	ns that col	ntroi or manag	ge the supp	Dorted				
•	organization(s). You mus	-		in connoct	ion with a	ad functional	lu intograto	d with				
ς	Type III functionally inte						ly integrate	a with,				
a [	its supported organization		-				tod organi-	ration(a)				
d	Type III non-functionally that is not functionally int						-					
	requirement (see instructi			•		-	anallenin	101055				
е [	Check this box if the orga	-										
0	functionally integrated, or					турс і, турс	n, rype m					
f F	nter the number of supported of											
	rovide the following information	•										
	(i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga in your governi	nization listed	(v) Amount of	monetary	(vi) Amount of other				
	organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see ir	structions)	support (see instructions)				
Total								1				

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

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

Calendar year (of fical year beginning in ) (a) 2019 (b) 2020 (c) 2021 (d) 2022 (c) 2023 (n) Tetal include any "unusual grants.") (b) 2020 (c) 2021 (d) 2022 (c) 2023 (n) Tetal include any "unusual grants.") (c) 2017 264. 2176502. 2214657. 2060783. 2010810. 10510016. 2017 2017 2017 2017 2017 2017 2017 2017	Se	ction A. Public Support			1	1	1		
membership fees received. (bo not include any Purscall grants )       2047264.       2176502.       2214657.       2060783.       2010810.       10510016.         2 Tax revenues levied for the organ- ization's benefit and ether paid to or expended on its behalt       2047264.       2176502.       2214657.       2060783.       2010810.       10510016.         3 The value of services or facilities thumibled by agovernmental unit to the organization without charge       2047264.       2176502.       2214657.       2060783.       2010810.       10510016.         5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) include and in the the exceeds 2% of the amount shown on line 11, column (f)       2047264.       2176502.       2214657.       2060783.       2010810.       10510016.         6 Public support. scanatine stores and income from interest, dividends, payments received on securities loans, rents, rogalias, and income from interest, dividends, payments received on securities loans, rents, rogalias, and income from interest, dividends, payments received on securities loans, rents, rogalias, and income from situates and ither organization of to busines activities, whether or not the business in regularly carried on to closs from the sale of capital ansats (Explain in Part VI)       5,136.       1,952.       2,354.       35,359.       54,622.       100,423.         7 Hould support Additions of the payments activities, whether or not the business in regularly carried on tor to sthe the sale of capital ansats (Explain in Part	Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total	
include any 'unusual grants.''       2047264.       2176502.       2214657.       2060783.       2010810.       L0510016.         2 Tax revewels eviced for the organization's benefit and either paid to or expended on its behalf       2047264.       2176502.       2214657.       2060783.       2010810.       L0510016.         3 The value of services or facilities furnished by a governmental unit to the organization without charge granization's included on line 1 that exceeds 2% of the annount shown on line 11.       2047264.       2176502.       2214657.       2060783.       2010810.       L0510016.         5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the annount shown on line 11.       2047264.       2176502.       2214657.       2060783.       2010810.       L0510016.         6 Public support.       (a) 2019       (b) 2020       (c) 2021       (d) 2022       (e) 203.       (f) Total         7 Amounts from line 4.       2047264.       2176502.       2,354.       35,359.       54,622.       100,423.         9 Net income from intravest, more from intravest, and income from intravest, and income from intravest, and and the ael of capital and to the capital and to the capital and to the capital and to the ael of capital and to the ael and capital and to the capital and to the ael of capital and to	1	Gifts, grants, contributions, and							
2       Tar evenues levied for the organization is behalf         3       The value of services or facilities turnished by a governmental unit to the organization without charge         4       Tatal. Add lines 1 through 3         6       The portion of total contributions by each person (offset than a governmental unit or publicly supported organization) included on line 1 through 3       2047264. 2176502. 2214657. 2060783. 2010810. 10510016.         5       The portion of total contributions by each person (offset than a governmental unit or publicly supported organization) included on line 1 thrackeeds 2% of the amount shown on line 11, column (f)       190.582.         6       Public support. Schedules them text       2047264. 2176502. 2214657. 2060783. 2010810. 10510016.         8       Gross income from interest.       2047264. 2176502. 2214657. 2060783. 2010810. 10510016.         9       Met income from interest.       6, 1366. 1, 952. 2, 354. 35, 359. 54, 622. 100, 423.         9       Net income from interest.       6, 1366. 1, 952. 2, 354. 35, 359. 54, 622. 100, 423.         9       Net income from interest.       6, 1366. 1, 952. 2, 354. 35, 359. 54, 622. 100, 423.         9       Net income from interest.       6, 1366. 1, 952. 2, 354. 35, 359. 54, 622. 100, 423.         9       Net income from interest.       6, 1366. 1, 952. 2, 354. 35, 359. 54, 622. 100, 723.         10       Other income. Do not include gain or loss from the sale of caphite second. third, ourth, or		membership fees received. (Do not							
icreation's benefit and either paid to or expended on its behalf		include any "unusual grants.")	2047264.	2176502.	2214657.	2060783.	2010810.	10510016.	
a The value of services or facilities turnished by a governmental unit to the organization without charge       2047264. 2176502. 2214657. 2060783. 2010810. 10510016.         5 The portion of total contributions by each preson (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (n)       2047264. 2176502. 2214657. 2060783. 2010810. 10510016.         6 Public support, down the 10, column (n)       1000.000000000000000000000000000000000	2	Tax revenues levied for the organ-							
3 The value of services or facilities turnished by a governmental unit to the organization without charge To The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11. column (i)       2047264. 2176502. 2214657. 2060783. 2010810. 10510016.         6 Public support. Longent the finance is non net 4.       10319434.         Section B. Total Support Calledar year (of fisel year beginning in) 7 Amounts from line 4.       (a) 2019       (c) 2021       (d) 2022       (e) 2023       (f) Total 100, 582.         Calledar year (of fisel year beginning in) 7 Amounts from line 4.       2047264. 2176502. 2214657. 2060783. 2010810. 10510016.         8 Gross income from linterest, dividends, payments received on securities lossing. rents, royalles, and income from similar sources 9 Net income from unrelated business a strivities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the stale of capital assets (Explain in Part VI).       10.610.439.         11 Total support. Additions / through 10       10.610.439.         12 Gross receipts from related activities, etc. (see instructions)       12       6, 965.         13 First S years. It the Form 90 is for the organization's first, second, third, fourth, or fifth tax year as a section 50(c) organization, check this box and stop here.       14       9763         9 Aublic support test - 2022. If the organization of dird check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization dualifies as a publicl		ization's benefit and either paid to							
furnished by a governmental unit to the organization without charge       2047264.2176502.2214657.2060783.2010810.10510016.         6 The portion of total contributions by each preson (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)       2047264.2176502.2214657.2060783.2010810.10510016.         6 Public support. Subsective 6 from tire 4.       10319434.         Section B. Total Support       103019434.         2047264.2176502.2214657.2060783.2010810.10510016.       (g) 2023         6 Public support.       (g) 2019       (g) 2020         10 Other Income from interest, dividends, sayments received on securities loans, rents, royallies, and income from interest, organities, and income from interest, organites, and income from interest, organites, activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI).       11 Total support. Add lines 7 through 10 Explaint and proper procentage for 2023 (line 6, colurum (f), divided by line 11, colurum (f))       14 1 97.26 % 19 7.63 % 19 7.66 %         14 Public support percentage for 2023 line 6, colurum fit, divided by line 11, colurum (f)       14 1 97.26 % 19 7.63 %         17 10% infect-and-circumstances test - 2023. If the organization did not check the box on line 13, and line 14 is 33 1/3% or m		or expended on its behalf							
the organization without charge       2047264. 2176502. 2214657. 2060783. 2010810. 10510016.         the portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, columm (f)       2047264. 2176502. 2214657. 2060783. 2010810. 10510016.         column (f)       190,582.         Calledar year (or fiscuport. Selencitive Stron line 4.       10319434.         Section B. Total Support       2047264. 2176502. 2214657. 2060783. 2010810. 10510016.         Calledar year (or fiscuport. Selencitive Stron line 4.       10319434.         Section B. Total Support       2047264. 2176502. 2214657. 2060783. 2010810. 10510016.         Coses income from line 4.       2047264. 2176502. 2314657. 2060783. 2010810. 10510016.         Section B. Total Support       6, 136. 1, 952. 2, 354. 35, 359. 54, 622. 100, 423.         O Het income from similar sources       6, 136. 1, 952. 2, 354. 35, 359. 54, 622. 100, 423.         In Total support. Add lines 7 through 10       100610439.         12 Gross received on sequal control strong bio for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.         Computation of Public Support test- 2023. If the organization of dnot check the tox on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization dnot check the tox on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization dualifies as a publicly supp	3	The value of services or facilities							
4 Total. Add lines 1 through 3       2047264.2176502.2214657.2060783.2010810.10510016.         5 The portion of total contributions by each preson (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)       190,582.         6 Public support. Subtract the 5 from the 2       10319434.         Section B. Total Support       (a) 2019       (b) 2020       (c) 2021       (d) 2022       (e) 2023       (f) Total         Cellendar year (of fiscal year beginning in)       7 Amounts from line 4.       2047264.2176502.21214657.2060783.2010810.10510016.         8 Gross income from interest, dividends, payments received on securities loans, rents, royatiles, and income from similar sources.       6,136.1,952.2,354.35,359.54,622.100,423.         9 Net income from unrelated business activities, whether or not the business is regularly carried on or tot include gain or loss from the sale of capital assets (Explain in Part VI)       10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI)       12 6,965.         11 Total support Add lines / through 10       12 6,965.       19 -7.63 sg       14 97.26 g         14 Public support precentage for 2023 (line 6, column (f), divided by line 11, column (f))       14 97.26 g       97.63 sg         15 Public support test - 2023. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization meets the facts and-icrums		furnished by a governmental unit to							
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)       190,582.         6 Public support, Subtext thes toom hex.       10319434.         Section B. Total Support         Calendar year (or fiscal year beginning in) 7 Announts from line 4         2047264. 2176502. 2214657. 2060783. 2010810. 10510016.         8 Gross income from interest, dividends, payments received on securities cans, rents, royatiles, and income from similar sources activities, whether or not the business is regularly carried on or loss from the sale of capital asset (Explain in Part VI)       6,136. 1,952. 2,354. 35,359. 54,622. 100,423.         10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI)       100610439.         100610439.         100610439.         Section C. Computation of Public Support Percentage         A Public support percentage from 2022 Schedule A, Part II, line 14         10         Section C. Computation of Public Support Percentage         1         Schedule A, Part II, line 14         12         100610439.         12         Schedule A, Part II, line 14         12		the organization without charge $\dots$							
by each person (other than a governmental unit or publicly supported organization) nolloded on line 1 that exceeds 2% of the amount shown on line 11, column (f) 190,582. 6 Public support. Subtrat line 5 term in 4 100 100 200 (c) 2021 (c) 2022 (e) 2023 (f) Total Section B. Total Support Calendar year (or fiscal year beginning in) 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, noyaties, and income from similar sources sativities, whether or not the business is regularly carried on roless from the sale of capital assets (Explain in Part VI) 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI) 11 Total support additions 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 12 Gross receipts from related activities, etc. (see instructions) 12 Gross receipts from related activities, etc. (see instructions) 12 Gross receipts from related activities, etc. (see instructions) 14 Public support percentage from 2022 Schedule A, Part II, line 14 15 97.63 % 16 33 1/3% support test - 2023. If the organization of int check a box on line 13 or 16a, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17 a 10% -fact-sind-circumstances test - 2023. If the organization did not check a box on line 13 or 16a, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17 a 10% -fact-sind-circumstances test - 2023. If the organization did not check a box on line 13, fab, or 16a, and line 14 is 10% or more, and if the organization qualifies as a publicly supported organization 18 Private foundation. The organization did not check a box on line 13, fab, or 16a, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test. Check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. Check th	4	Total. Add lines 1 through 3	2047264.	2176502.	2214657.	2060783.	2010810.	10510016.	
governmental unit or publicly supported organization) included on line 11 that exceeds 2% of the amount shown on line 11, colurm (f)       190,582.         6 Public support.       10319434.         Section B. Total Support       10319434.         Calendar year (or fiscal year beginning in) 7 Amounts from line 4.       2047264.       2176502.       2214657.       2060783.       2010810.       10510016.         8 Gross income from interest, dividends, payments received on securities loans, rents, royaties, and income from similar sources 9 Net income. Do not include gain or Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI)       6,136.       1,952.       2,354.       35,359.       54,622.       100,423.         11 Total support. Add lines 7 through 10       10610439.       12       6,965.         13 First Systers. If the Form 900 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.       12       6,965.         14 Public support percentage from 2022 Schedule A, Part II, line 14.       15       97.26       %         14 Support percentage from 2022 Schedule A, Part II, line 14.       15       97.26       %         15 Support percentage from 2022 Schedule A, Part II, line 14.       15       97.63       %         16 33 1/3% support test - 2022. If the organization did not check abox on line 13, and line 14 is 31/3% or more, check this box and st	5	The portion of total contributions							
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securities loans, rents, royalties, and income from similar sources       6,136.       1,952.       2,354.       35,359.       54,622.       100,423.         9 Net income from unrelated business activities, whether or not the business is regularly carried on       10       0 Uther income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)       10       10.0610439.         11 Total support. Add lines 7 through 10       10.0610439.       12       6,965.         13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here       14       97.26.%         14 Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f))       14       97.26.%         15 Public support percentage for 2023 (line 6, column (f), divided by on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization       X         17a 10% -facts-and-circumstances test - 2023. If the organization did not check a box on line 13, r16a, or 16b, and line 14 is 10% or more, and if the organization qualifies as a publicly supported organization       17a         17a 10% -facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, or 17a, a	8	Gross income from interest,							
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organization, check this box and stop here       Image: Section C. Computation of Public Support Percentage         14       Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f))       14       97.26       %         15       Public support percentage from 2022 Schedule A, Part II, line 14       15       97.63       %         16a 33 1/3% support test - 2023. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization       Image: Stap here. The organization qualifies as a publicly supported organization       Image: Stap here. Stap her	12	Gross receipts from related activities,	etc. (see instructio	ons)			12	6,965.	
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Schedule A	(Form	990	202
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Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

#### Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2019 (b) 2020 (c) 2021 (d) 2022 (e) 2023 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") Gross receipts from admissions, merchandise sold or services performed, 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 business under section 513 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 5 The value of services or facilities furnished by a governmental unit to the organization without charge 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 8 Public support. (Subtract line 7c from line 6.) Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2019 (b) 2020 (c) 2021 (d) 2022 (e) 2023 (f) Total 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 businesses 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 the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2023 (line 8, column (f), divided by line 13, column (f)) 15 % 15 Public support percentage from 2022 Schedule A, Part III, line 15 16 % 16 Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2023 (line 10c, column (f), divided by line 13, column (f)) 17 % 18 Investment income percentage from 2022 Schedule A, Part III, line 17 18 % 19a 33 1/3% support tests - 2023. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2022. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions 332023 12-21-23 Schedule A (Form 990) 2023 15

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2023.05000 GLOBAL SCHOLARS

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4a

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4c

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5b

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9a

9b

9c

Yes No

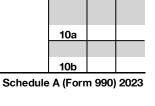
#### Part IV Supporting Organizations

(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 Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes." answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes." describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes." answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 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 disgualified 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 disgualified 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.)

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## 2023.05000 GLOBAL SCHOLARS

Schedule A (Form 990) 2023 GLOBAL SCHOLA		Supporting Org		
	Schedule A (	(Form 990) 2023	GLOBAL	SCHOLARS

2

	_		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
с	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
		11c		
Sec	tion B. Type I Supporting Organizations			
	_		Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		

2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised. or controlled the supporting organization.

Section C. Type II Supporting Organizations

 Yes
 No

 1
 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed
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Section D. All Type III Supporting Organizations	

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

#### Section E. Type III Functionally Integrated Supporting Organizations

- 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
- a The organization satisfied the Activities Test. Complete line 2 below.
- **b** The organization is the parent of each of its supported organizations. *Complete* **line 3** *below.*

С	The organization supported a governmental entity.	Describe in <b>Part VI</b> how you supported a governmental entity (see instructions).

17

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

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

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in Part VI the role played by the organization in this regard.* 332025 12-21-23

3b | | Schedule A (Form 990) 2023

2a

2b

3a

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2023.05000 GLOBAL SCHOLARS

Yes No

Sche	dule A (Form 990) 2023 GLOBAL SCHOLARS			56-1627401 Page 6
_	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	Orga	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying t	trust or	n Nov. 20, 1970 ( <i>explain i</i> i	n Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations must c			
Sect	ion 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	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
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		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
_1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functionally	integra	ted Type III supporting or	ganization (see
	instructions).	÷		- ·

Schedule A (Form 990) 2023

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Schedule A (Form 990) 2023

GLOBAL SCHOLARS

Schedule A (Form 990) 2023

Par	t V   Type III Non-Functionally Integrated 509(	(a)(3) Supporting Orga	nizations <sub>(continue</sub>	ed)	
Secti	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exer	mpt purposes		1	
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported			
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	3	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in <b>Part VI</b> )		5	
6	Other distributions ( <i>describe in Part VI</i> ). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	ne organization is responsive			
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2023 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
		(i)	(ii)		(iii)
Secti	on E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2023	;	Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2023 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2023				
а	From 2018				
b	From 2019				
с	From 2020				
d	From 2021				
е	From 2022				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2023 distributable amount				
i	Carryover from 2018 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2023 from Section D,				
	line 7: \$				
а	Applied to underdistributions of prior years				
	Applied to 2023 distributable amount				
с	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2023, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2023. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2024. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
	Excess from 2019				
	Excess from 2020				
	Excess from 2021				
	Excess from 2022				
	Excess from 2023				

Schedule A	(Form 990	) 202
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LOBAL S	SCHOLARS
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	(Form 990) 2023	GLOBAL SCHO			56-1627401	Page 8
Part VI	Part IV, Section A, I line 1; Part IV, Sect Section D, lines 5, 6	lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6 ion D, lines 2 and 3; Part IV, 5	5, 9a, 9b, 9c, 11a, 11b, and section E, lines 1c, 2a, 2b, 3a	rt II, line 10; Part II, line 17a or 11c; Part IV, Section B, lines 1 a, and 3b; Part V, line 1; Part V, nplete this part for any addition	17b; Part III, line 12; and 2; Part IV, Section , Section B, line 1e; Pa	C,
	(See instructions.)					
32028 12-21-2	3		20		Schedule A (Form 9	90) 2023
01030 1	L32842 2032	27.0000		GLOBAL SCHOLARS		20327

	EDULE D		I Financial Statemen			OMB No. 1545	-0047
(Form 9	90)		nization answered "Yes" on Form 99 11a, 11b, 11c, 11d, 11e, 11f, 12a, or				3
	t of the Treasury	At	tach to Form 990.			Open to Pu Inspection	
	venue Service f the organizatio		) for instructions and the latest infor		Emp	loyer identification n	
Nume o		GLOBAL SCHOLARS			Linb	56-162740	
Part I	Organiza	tions Maintaining Donor Advised	I Funds or Other Similar Fund	ls or Ac	count		
	organization	answered "Yes" on Form 990, Part IV, line	96.				
			(a) Donor advised funds	(k	<b>)</b> Func	ds and other accounts	3
<b>1</b> To	otal number at en	d of year					
<b>2</b> Ag	ggregate value of	contributions to (during year)					
<b>3</b> Ag	ggregate value of	grants from (during year)					
<b>4</b> Ag	ggregate value at	end of year					
5 Di	d the organizatio	n inform all donors and donor advisors in w	riting that the assets held in donor ad	vised funds	5		
ar	e the organizatio	n's property, subject to the organization's e	exclusive legal control?			Yes	No
6 Di	d the organizatio	n inform all grantees, donors, and donor ac	lvisors in writing that grant funds can b	be used on	ly		
foi	r charitable purpo	oses and not for the benefit of the donor or	donor advisor, or for any other purpos	se conferrir	ng		
im	permissible priva					Yes	No
Part I	I Conserva	ation Easements. Complete if the org	anization answered "Yes" on Form 99	0, Part IV, I	ine 7.		
<b>1</b> Pu	urpose(s) of cons	ervation easements held by the organizatio	n (check all that apply).				
	Preservation	of land for public use (for example, recreat	ion or education) 🛛 🗌 Preservation	of a histor	rically i	mportant land area	
	Protection of	natural habitat	Preservation	of a certifi	ed his	toric structure	
	Preservation	of open space					
<b>2</b> Co	omplete lines 2a f	through 2d if the organization held a qualified	ed conservation contribution in the for	m of a con	servati	ion easement on the l	ast
da	ay of the tax year.					Held at the End of the T	'ax Year
a To	otal number of co	nservation easements		[	2a		
<b>b</b> To	otal acreage restri	icted by conservation easements			2b		
<b>c</b> Nu	umber of conserv	ation easements on a certified historic stru	cture included on line 2a		2c		
d Nu	umber of conserv	ation easements included on line 2c acquir	red after July 25, 2006, and not	ſ			
on	n a historic struct	ure listed in the National Register			2d		
		ation easements modified, transferred, rele			ation c	during the tax	
	ar						
4 Nu	umber of states w	where property subject to conservation ease	ement is located				
5 Do	oes the organizat	ion have a written policy regarding the perio	odic monitoring, inspection, handling o	of			
vic	plations, and enfo	prcement of the conservation easements it	holds?			Yes	No
6 St	aff and volunteer	hours devoted to monitoring, inspecting, h	nandling of violations, and enforcing co	onservatior	easer	ments during the year	
<b>7</b> Ar	mount of expense	es incurred in monitoring, inspecting, handl	ing of violations, and enforcing conser	vation eas	ements	s during the year	
			-				
<b>8</b> Do	oes each conserv	ration easement reported on line 2d above	satisfy the requirements of section 170	D(h)(4)(B)(i)			
an	nd section 170(h)(	(4)(B)(ii)?				Yes	No
		e how the organization reports conservatio				1	
ba	alance sheet, and	include, if applicable, the text of the footno	ote to the organization's financial state	ments that	t descr	ribes the	
or	ganization's acco	ounting for conservation easements.	-				
Part I	II Organiza	tions Maintaining Collections of	Art, Historical Treasures, or (	Other Si	milar	Assets.	
	Complete if	the organization answered "Yes" on Form	990, Part IV, line 8.				
1a Ift	the organization e	elected, as permitted under FASB ASC 958	3, not to report in its revenue statemen	t and bala	nce sh	eet works	
	0	asures, or other similar assets held for publ					
	-	Part XIII the text of the footnote to its finance					
	· •	elected, as permitted under FASB ASC 958			sheet	works of	
	-	ures, or other similar assets held for public					

	provide the following amounts relating to these items.		
	(i) Revenue included on Form 990, Part VIII, line 1	\$	
	(ii) Assets included in Form 990, Part X	\$	
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide	le	
	the following amounts required to be reported under FASB ASC 958 relating to these items:		
а	Revenue included on Form 990, Part VIII, line 1	\$	
b	Assets included in Form 990, Part X	\$	71,175.
LHA	For Paperwork Reduction Act Notice, see the Instructions for Form 990.	Sched	ule D (Form 990) 2023
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Sche		SCHOLARS						56-16	27403	L Pa	age <b>2</b>
Par	t III Organizations Maintaining C	Collections of Ar	t, Hist	orical Tre	easures, or	Othe	r Simila	r Assets	(contir	ued)	
3	Using the organization's acquisition, access	ion, and other record	s, checł	k any of the	following that	make si	ignificant	use of its			
	collection items (check all that apply).										
а	Public exhibition	c	1 🗌 k		change progra						
b	X Scholarly research	e		Other							
С	X Preservation for future generations										
4	Provide a description of the organization's c	-		•	-			se in Part	XIII.		
5	During the year, did the organization solicit of	or receive donations	of art, hi	storical trea	,				_		_
	to be sold to raise funds rather than to be m								Yes	X	No
Par	t IV Escrow and Custodial Arran		ete if the	organizatio	n answered "\	es" on	Form 990	, Part IV, li	ne 9, or		
	reported an amount on Form 990, Pa										
1a	Is the organization an agent, trustee, custod		•						-		-
	on Form 990, Part X?							L	Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing 1	table:					<b>A</b>		
									Amoun		
	Beginning balance										
	Additions during the year										
-	Distributions during the year										
t Or	Ending balance										1
	Did the organization include an amount on F If "Yes," explain the arrangement in Part XIII						ity?	······ L	Yes		_ No □
Par			1				<u></u>				
		(a) Current year	1	Prior year	(c) Two year			ears back	(e) Four	vears	back
1a	Beginning of year balance	(u) current your	(2)	nor your	(0) 1110 your	o buok	(u) 11100	Jouro Suon	(0) 1 001	youro	buon
ia h	Contributions										
с С	Net investment earnings, gains, and losses										
о Ь	Grants or scholarships										
	Other expenditures for facilities										
Ũ	and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the cur	rent vear end balance	e (line 1)	a. column (a	)) held as:	•					
a	Board designated or quasi-endowment		%	3, (-	,,,						
b	Permanent endowment	%									
с	Term endowment	%									
	The percentages on lines 2a, 2b, and 2c sho	- ould equal 100%.									
3a	Are there endowment funds not in the posse		ation tha	at are held a	nd administer	ed for th	e				
	organization by:									Yes	No
	(i) Unrelated organizations?								3a(i)		
									3a(ii)		
b	If "Yes" on line 3a(ii), are the related organization	ations listed as requir	red on S	chedule R?					3b		
4	Describe in Part XIII the intended uses of the		wment f	funds.							
Par	t VI Land, Buildings, and Equipm										
	Complete if the organization answere	ed "Yes" on Form 990	D, Part IN	V, line 11a. S	See Form 990,	Part X,	line 10.				
	Description of property	(a) Cost or c basis (investr		• •	t or other (other)	• •	ccumulate preciation		( <b>d)</b> Boo	< value	e
1a	Land										
b	Buildings										
с	Leasehold improvements										
d	Equipment				8,594.		8,0	29.		50	65.
	Other										
Tota	. Add lines 1a through 1e. (Column (d) must e	equal Form 990, Part	<u>X, line 1</u>	0c, column	<i>(B))</i>	<u></u>					65.
								O - L L L.	D /E	000	0000

Schedule D (Form 990) 2023

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(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))         Part VIII       Investments - Program Related.			
Complete if the organization answered "Yes" of	n Form 990, Part IV, line	11c. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))			
Part IX Other Assets			
Complete if the organization answered "Yes" of		11d. See Form 990, Part X, line 15.	
(a) [	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, line 15, col. Part X Other Liabilities	<i>(B)</i> )		
Part X Other Liabilities Complete if the organization answered "Yes" of	n Form 000 Dout IV line	110 or 11f Soo Form OOD Dart V line OF	
(a) Description of lightlity	HERE STREET, INC.	110 01 111. See Form 990, Part A, INE 25.	(b) Book value
<u>n</u> (, , , ,			(b) DOOR Value
(1) Federal income taxes (2) LIABILITY FOR COLLEGE ALLO	WANCE		
			19,571.
			±3,3/±•
(4)			
(5)			
<u>(6)</u>			
(7) (8)			
(9)			
			19,571.
Total. (Column (b) must equal Form 990, Part X, line 25, col.	( <i>B))</i>		±,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,

Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the 2. 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) 2023

332053 09-28-23

Part VII Investments - Other Securities

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

Sche	dule D (Form 990) 2023 GLOBAL SCHOLARS				1627401 Page 4
Pa	t XI Reconciliation of Revenue per Audited Financial Stateme	nts Wit	h Revenue per Ro	eturn	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	-			
1	Total revenue, gains, and other support per audited financial statements			1	3,368,386.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	. 2a	16,054.	•	
b	Donated services and use of facilities	2b	1,287,562.	•	
с	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	1,303,616.
3	Subtract line 2e from line 1			3	2,064,770.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	. 4a			
b	Other (Describe in Part XIII.)	. 4b			
с	Add lines 4a and 4b			4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	2,064,770.
Pa	t XII Reconciliation of Expenses per Audited Financial Statem		th Expenses per	Retur	n
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a				
1	Total expenses and losses per audited financial statements			1	3,285,844.
1 2	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:				3,285,844.
-			1,287,562.		3,285,844.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	. 2a			3,285,844.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities	2a 2b			3,285,844.
2 a b	Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments	2a 2b 2c			
2 a b c	Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses	2a 2b 2c 2d	1,287,562.		
2 a b c d	Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	2a 2b 2c 2d	1,287,562.		3,285,844. 1,287,562. 1,998,282.
2 a b c d e	Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines <b>2a</b> through <b>2d</b>	2a 2b 2c 2d	1,287,562.	2e	
2 a b c d e 3	Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines <b>2a</b> through <b>2d</b> Subtract line <b>2e</b> from line <b>1</b>	2a 2b 2c 2d	1,287,562.	2e	
2 a b c d e 3 4	Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines <b>2a</b> through <b>2d</b> Subtract line <b>2e</b> from line <b>1</b> Amounts included on Form 990, Part IX, line 25, but not on line 1:	2a 2b 2c 2d	1,287,562.	2e	
2 a b c d e 3 4 a	Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines <b>2a</b> through <b>2d</b> Subtract line <b>2e</b> from line <b>1</b> Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b	2a 2b 2c 2d 4a 4b	1,287,562.	2e 3 4c	1,287,562. 1,998,282. 0.
2 ab c d e 3 4 a b c 5	Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines <b>2a</b> through <b>2d</b> Subtract line <b>2e</b> from line <b>1</b> Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)	2a 2b 2c 2d 4a 4b	1,287,562.	2e 3	1,287,562. 1,998,282.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

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Schedule D (Form 990) 2023

CLOBAL CCHOLARS

LHA 332071 11-29-23

## Statement of Activities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

Attach to Form 990.

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

agents, and for and in the region gram services, investments, grants to describe specific type independent investments contractors recipients located in the region) of service(s) in the region in the region in the region EAST ASIA AND THE PACIFIC - AUSTRALIA, TEACHING, RESEARCH, OR BRUNEI, BURMA, ADMINISTRATION AT THE CAMBODIA 0 PROGRAM SERVICES JNIVERSITY LEVEL 4 158,408. EUROPE (INCLUDING ICELAND & GREENLAND) TEACHING, RESEARCH, OR - ALBANIA, ANDORRA, ADMINISTRATION AT THE UNIVERSITY LEVEL AUSTRIA, BELGIUM 0 23 PROGRAM SERVICES 550,479. NORTH AMERICA CANADA AND MEXICO. TEACHING, RESEARCH, OR BUT NOT THE UNITED ADMINISTRATION AT THE STATES 0 5 PROGRAM SERVICES UNIVERSITY LEVEL 27,364. RUSSTA AND NEIGHBORING STATES -TEACHING, RESEARCH, OR ARMENIA, AZERBIJAN, ADMINISTRATION AT THE UNIVERSITY LEVEL BELARUS . 0 2 PROGRAM SERVICES 12,062. SOUTH AMERICA -ARGENTINA, BOLIVIA, TEACHING, RESEARCH, OR BRAZIL, CHILE, ADMINISTRATION AT THE COLUMBIA, ECUADOR, 0 5 PROGRAM SERVICES UNIVERSITY LEVEL 69,967. SOUTH ASTA -AFGHANISTAN, TEACHING, RESEARCH, OR ADMINISTRATION AT THE BANGLADESH, BHUTAN, INDIA, MALDIVES 0 1 PROGRAM SERVICES UNIVERSITY LEVEL 32,667. SUB-SAHARAN AFRICA ANGOLA, BENIN, TEACHING, RESEARCH, OR ADMINISTRATION AT THE BOTSWANA, BURKINA FASO 0 14 PROGRAM SERVICES UNIVERSITY LEVEL 337,189. 0 54 1,188,136. 3 a Subtotal b Total from continuation 0 0 Ο. sheets to Part I c Totals (add lines 3a 0 54 1,188,136. and 3b) For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Name of the organization

#### GLOBAL SCHOLARS

56-1627401 General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Part I Form 990, Part IV, line 14b.

- For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, X Yes the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?
- 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

(by type) (such as, fundraising, pro-

3	Activities per Region. (Th	ne following Part	I, line 3 table ca	n be duplicated if additional space is n	eeded.)
	(a) Region	(b) Number of	(c) Number of	(d) Activities conducted in the region	(e) If

employees,

offices

### SCHEDULE F (Form 990)

Department of the Treasury

Internal Revenue Service

Open to Public Inspection

Employer identification number

(e) If activity listed in (d)

is a program service,

OMB No. 1545-0047

No

(f) Total

expenditures

Schedule F (Form 990) 2023

Schedule F (Form 990) 2023

Schedule F	(Form 990) 2023

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	<b>(d)</b> Purpose of grant	<b>(e)</b> Amount of cash grant	(f) Manner of cash disbursement	<b>(g)</b> Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

3 Enter total number of other organizations or entities

56-1627401

	SUB-SAHARAN					
	AFRICA - ANGOLA,					
	BENIN, BOTSWANA,					
FERENCE	BURKINA FASO,	1	2,000.	WIRE	0.	
	EAST ASIA AND THE					
PPORT	PACIFIC	1	2,000.	WIRE	0.	
	SUB-SAHARAN					
PPORT	AFRICA	4	6,423.	WIRE	0.	

(d) Amount of

cash grant

#### Schedule F (Form 990) 2023

(a) Type of grant or assistance

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

(c) Number of

recipients

GLOBAL SCHOLARS

(b) Region

Part III can be duplicated if additional space is needed.

# REGIONAL CONF FMV PROFESSOR SUP FMV PROFESSOR SUP FMV PROFESSOR SUPPORT SOUTH AMERICA 1,600.WIRE 0. FMV 1

(e) Manner of

cash disbursement

**(h)** Method of valuation (book, FMV, appraisal, other)

Schedule F (Form 990) 2023

(f) Amount of

noncash

assistance

(g) Description of

noncash assistance

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see the Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see the Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? <i>If</i> "Yes," <i>the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see the Instructions for Form 5471)</i>	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? <i>If</i> "Yes," <i>the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see the Instructions for Form 8621)</i>	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? <i>If</i> "Yes," <i>the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see the Instructions for Form 8865)</i>	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? <i>If</i> "Yes," <i>the organization may be required to separately file Form 5713, International Boycott Report (see the Instructions for Form 5713; don't file with Form 990)</i>	Yes	X No

Schedule F (Form 990) 2023

GLOBAL SCHOLARS Schedule F (Form 990) 2023 Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

PART I, LINE 2:

Part V

THE GRANT PROCESS VARIED DEPENDING ON THE TYPE OF GRANT OR ASSISTANCE.

THE GRANT TO AN ORGANIZATION WAS MADE TO AN ORGANIZATION WITH A LONG TERM

RELATIONSHIP WITH GLOBAL SCHOLARS, SUPPORTING WELL-ESTABLISHED, ONGOING

THE GRANT TO A FOREIGN INDIVIDUAL REPORTED HERE WAS MADE TO AN PROJECTS.

INDIVIDUAL WITH A LONG TERM RELATIONSHIP WITH GLOBAL SCHOLARS, SUPPORTING

WELL-ESTABLISHED, ONGOING PROJECTS. AN ANNUAL REPORT ON THE PROGRESS OF

PROJECTS IS RECEIVED. OTHER GRANTS, UNDER THE \$5,000 REPORTING THRESHOLD

WERE MADE TO INDIVIDUAL GRANT RECIPIENTS WHO COMPLETED A GRANT

APPLICATION PROCESS, OUTLINING THE PROPOSED USE FOR THE GRANT FUNDS.

GLOBAL SCHOLARS RECEIVES PERIODIC REPORTS ON THE PROGRESS OF THE PROJECT,

AS APPROPRIATE FOR THE SCOPE OF THE PROJECT.

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SCHEDULE (Form 990)	Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.										
	Department of the Treasury Attach to Form 990. Open to Public										
Internal Revenue	Service		Go to www.irs	s.gov/Form990 for	the latest information	ation.		Inspection			
Name of the	Name of the organization GLOBAL SCHOLARS Employer identification number 56-1627401										
Part I	General Information on Grants a	nd Assistance									
criteria	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection     criteria used to award the grants or assistance?     X Yes No										
	Grants and Other Assistance to recipient that received more than S					anization answered "Y	′es" on Form 990, Part	IV, line 21, for any			
	ime and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance			
301 PLATT	DD COLLEGE BLVD , CA 91711	95-1911291	501(C)(3)	10,000.	0.			CSF LEGACY GRANT			
	total number of section 501(c)(3) a total number of other organization:		·	l e line 1 table			I	<u>1.</u> 0.			

3 Enter total number of other organizations listed in the line 1 table

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

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	<b>(b)</b> Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	<b>(e)</b> Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance

**Part IV** Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:

Schedule I (Form 990) 2023

THE PROCESS WILL VARY DEPENDING ON THE TYPE OF GRANT OR ASSISTANCE.

56-1627401

Page 2

SC	HEDULE J	Compensation Informa	ation	1	OMB No. 1	1545-00	47			
(Fo	rm 990)	- For certain Officers, Directors, Trustees, Key Emplo			20	22	)			
		Compensated Employees Complete if the organization answered "Yes" on Form	000 Dort IV line 22		20	<b>Z</b> J	)			
Dena	tment of the Treasury	Attach to Form 990.	1 990, Part IV, iine 23.		Open to					
Intern	Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information.									
Nan	ne of the organization			Employer id			mber			
		GLOBAL SCHOLARS		56-1	62740	1				
Part I Questions Regarding Compensation										
1a		ate box(es) if the organization provided any of the following to or for a	•	990,						
		ine 1a. Complete Part III to provide any relevant information regardin	•							
	First-class or c		e or residence for perso							
	Travel for com		iness use of personal res							
			ub dues or initiation fees							
		pending account Personal services	(such as maid, chauffeu	ir, cnet)						
	If any of the bayes	n line to are checked, did the executivation follow a written policy re-	acting polymont or							
D		on line 1a are checked, did the organization follow a written policy re- rovision of all of the expenses described above? If "No," complete Pa			46	Х				
2		require substantiation prior to reimbursing or allowing expenses inc			<u>1b</u>	Λ				
2	•	s, including the CEO/Executive Director, regarding the items checke	•		2	Х				
	inusiees, and onice	s, including the CEO/Executive Director, regarding the items checke			🔼	21				
3	Indicate which if ar	y, of the following the organization used to establish the compensati	ion of the organization's							
Ŭ		ctor. Check all that apply. Do not check any boxes for methods used								
		tion of the CEO/Executive Director, but explain in Part III.	n by a related organizatio							
	Compensation		ent contract							
	<u> </u>	ompensation consultant X Compensation su								
	<u> </u>		oard or compensation c	ommittee						
				ommittee						
4	During the year, did	any person listed on Form 990, Part VII, Section A, line 1a, with resp	ect to the filing							
•	organization or a re		g							
а	•				4a		X			
b							X			
с	-	ative manufacture and any liter based as a set in a subset of the set of the			4		X			
	If "Yes" to any of lir	es 4a-c, list the persons and provide the applicable amounts for each								
	Only section 501(c	)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5	-9.							
5	For persons listed of	n Form 990, Part VII, Section A, line 1a, did the organization pay or a	ccrue any compensatio	n						
	contingent on the r	evenues of:								
а	The organization?				. 5a		X			
	Any related organiz						X			
	If "Yes" on line 5a c	r 5b, describe in Part III.								
6	For persons listed of	n Form 990, Part VII, Section A, line 1a, did the organization pay or a	ccrue any compensatio	n						
	contingent on the n	et earnings of:								
а	The organization?				. 6a		X			
b	Any related organiz						X			
	If "Yes" on line 6a o	r 6b, describe in Part III.								
7	For persons listed of	n Form 990, Part VII, Section A, line 1a, did the organization provide	any nonfixed payments							
		es 5 and 6? If "Yes," describe in Part III			7		X			
8	Were any amounts	reported on Form 990, Part VII, paid or accrued pursuant to a contra-	ct that was subject to th	ie						
	initial contract exce	ption described in Regulations section 53.4958-4(a)(3)? If "Yes," desc	cribe in Part III		8		X			
9		d the organization also follow the rebuttable presumption procedure	described in							
	Regulations section		<u></u>		9					
For	Paperwork Reducti	on Act Notice, see the Instructions for Form 990.		Sched	ule J (Forn	n 990)	) 2023			

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#### 56-1627401

Page **2** 

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

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

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

	(B) Breakdown of W	/-2 and/or 1099-MIS compensation	C and/or 1099-NEC		(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990	
(A) Name and Title	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation				
(i)								
(ii)								
(i)								
(ii)								
(i)								
(ii)								
(i)								
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				I	I	1	1	

#### Part III Supplemental Information

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

Schedule J (Form 990) 2023

SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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.



GLOBAL SCHOLARS

56-1627401

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

INFLUENCE AMONG THEIR STUDENTS, COLLEAGUES, UNIVERSITIES AND

DISCIPLINES, AT A REASONABLE COST.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

5. COMMUNICATE THE GOSPEL EFFECTIVELY AND HELP OTHERS GROW IN THEIR

FAITH

6. COLLABORATE WITH OTHER CHRISTIAN SCHOLARS LOCALLY AND GLOBALLY

FORM 990, PART VI, SECTION A, LINE 8B:

THE BOARD OF DIRECTORS DOCUMENTS ITS MEETINGS OR OTHER ACTIONS ON THE

BOARD'S GOOGLE DRIVE. NO BOARD COMMITTEE HAS AUTHORITY TO ACT ON BEHALF OF THE ENTIRE BOARD.

FORM 990, PART VI, SECTION B, LINE 11B:

THE ORGANIZATION PROVIDES A COMPLETE COPY OF THE FORM 990 TO THE ENTIRE GOVERNING BODY BEFORE FILING THE FORM. UPON RECEIPT OF THE FORM 990 BY THE ORGANIZATION IT WILLL BE REVIEWED BY THE BOARD TREASURER, IN CONSULTATION WITH THE FINANCE COMMITTEE OF THE BOARD OF DIRECTORS. THE ENTIRE FORM 990 WILL THEN BE FORWARDED TO ALL BOARD MEMBERS FOR QUESTIONS, COMMENTS, AND REVIEW PRIOR TO THE FORM 990 BEING FILED.

 FORM 990, PART VI, SECTION B, LINE 12C:

 THE BOARD MEMBERS WERE PROVIDED A COPY OF THE CONFLICT OF INTEREST POLICY

 IN MARCH 2024. EACH BOARD MEMBER AFFIRMED, IN WRITING, THEIR RECEIPT OF THE

 POLICY. NO CONFLICTS OR POTENTIAL CONFLICTS WERE IDENTIFIED. ADDITIONALLY,

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

 LHA
 332211 11-14-23

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Schedule O (Form 990) 2023	Page <b>2</b>
Name of the organization	Employer identification number
GLOBAL SCHOLARS	56-1627401
THE MEMBERS OF THE LEADERSHIP TEAM AND ALL KEY EMPLOYEES R	FOFTVED & CODY OF
THE MEMBERS OF THE DEADERSHIP TEAM AND ADD RET EMPLOTEES R	ECEIVED A COFI OF
THE POLICY IN JULY 2023 AND AFFIRMED THEIR COMPLIANCE. NO	CONFLICTS OR

POTENTIAL CONFLICTS WERE IDENTIFIED.

FORM 990, PART VI, SECTION B, LINE 15A:

THE BOARD OF DIRECTORS REVIEWS THE CEO/PRESIDENT'S PERFORMANCE AND

COMPENSATION. IN FY 23-24, THE BOARD AUTHORIZED A 5% SALARY INCREASE FOR

THE CEO. THE CEO/PRESIDENT ASSESSES THE PERFORMANCE OF HIS LEADERSHIP TEAM

AND REVIEWS COMPENSATION, IF APPROPRIATE, AS DUTIES CHANGE AND AT LEAST

ANNUALLY. THE CEO/PRESIDENT USES PUBLICALLY AVAILABLE RESOURCES SUCH AS

SALARY SURVEYS AS PART OF HIS REVIEW OF COMPENSATION.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990: AL,CO,KS,MA,MI,MN,MS,NH,ND,OH,PA,SC,TN,UT,VA,WA,WI

FORM 990, PART VI, SECTION C, LINE 19:

AVAILABLE UPON REQUEST.

FORM 990, PART XII, LINE 2C

NO CHANGE FROM PRIOR YEAR

332212 11-14-23