	Form	9	90		of Organia	1	-				_	ie DWB No. 1	<u> </u>
	(Rev.	. Januari	y 2020)	Under section 501(c)	, 527, or 4947(a	)(1) of the inte	mai Revei	rue Code (	except pr	ivate fou	ndations	Hoe Z.O.	∯nk -
			If the Treasury	► Do not er	nter social secu	rity numbers	on this for	em if as m	y be mad	le public	10/0	Open to	Public
			nua Servica	> Go to v	vww.irs.gov/Fo	rm990 for inst	anolfour	and the late	est mform	nation.	412	Inspec	
	A	For the	2019 caten	dar year, or tax year t	្រួកព្រះបង្គខាវ	January 1	, 20	19, and en	ding	Decem	ber 34	, 20 19	3 2020
	8	Check if	applicable.	C Name of organization	Student Work I	Development i	Foundatio	n, Inc.			D Emplo	yer Identificatio	ս նդարգ
		Address	Sgnerio	Doing business as					·		Ļ	51-0168187	<del> </del>
	=	Name ci	•	Number and sireet (or	P.O box if mail is	not delivered to	ಕರ್ಡಚಿತ ಕಿರೆರೇ	356)	Room/su	ate	E Teleph	one number of C	
	=	initial ref		P. D. Box 2100					<u> </u>		<b> </b>	405-329-2990	)
	=		balanimerka:	City or lown, state or	•	and ZIP or foreig	iu bostai co	de					
<del>.</del>		Amende	g ustra Superior	Morman, Oklahoma F Name and address of		lou Bornon	·	<del></del>	7 14	- \ In th a a a		Lanpouquia, 62, 🔲 ,	1,008,106
73	ш!	мррисат	fors benoni8	P.O. Box 2100, Norm	•	gs barnett		r				a everindeds 🔲 .	
75	ī	Tax-exe	mpt status		<del></del>	(insert no )	4947(a)(	1) or 1 52				it (see instruction	
5			r ► N/A		_ <del>````</del>	<u> </u>	ī	·			exemption i		•
	K	Form of	ongranzation.	Corporation Trust	Association [	] Other ▶	n	L Year of fo		1975	<del>~</del>	of fegal domicite	KS
	Pa	art F	Summa	ry									
		1	Bnefly des	cribe the organization	n's mission or	most signific	cant activ	rties: Stud	ent Work	Develop	pment Fo	undation, Inc.	<b>'</b> 5
	C		primary pu	rpose is to assist in p	roviding trainir	ig and suppoi	t for indiv	iduals and	groups i	n discip	leship, ed	lucation,	
	Activities & Governance		evangelism	, and missions to hel	p produce mor	e effective dis	Cipleship	ministries	·				
	₩.	2	Check this	box ▶ ☐ if the orga	anization disco	intinued its o	perations	or dispos	ed of mo	re than	25% of	its net assets	
	ŝ	3		voting members of							3		8
	ớ	4		independent voting					16)	<i>.</i>	4		
	iffe	5		per of individuals em			19 (Part V	', line 2a)			5		g
	륟	6		ber of volunteers (es						-	6		0
	∢	7a		ated business reven							7a		0
~		<u> </u>	Net unrela	ted business taxable	income from	Fann 990-T,	line 39	·			7ь		0
2022			<b>3</b>						<u> </u>	Poor Yes	3F	Current )	ear
2	E	8		ons and grante (Part					<u> </u>		414,194	· · · · · · · · · · · · · · · · · · ·	499,249
-	evenue	9		ervice revenue (Part							34,295		48,707
JAN 1	8	10 11		t Income (Part VIII, c					<u> </u>		417,131		464,291
7		12		nue (Part VIII, colum					, <del> </del>		(191)		(3,541)
$\rightarrow$		13	Grants and	ue-add lines 8 thro t similær amounts pa	ud (Part IX col	umm (A) lines	. <u>COMMIN</u> (	A), line (2)	<del>'  </del>		859,429)	<del></del>	1,008,106
		14		aid to or for member				• • • •	<del></del>	~	303,861		393,736
SCANNED		15		her compensation, e				 (10)-Sines	, <del> </del>			···	102 456
=	Ехрепвев	1		at fundralsing fees (f				III (CS D-10)	' <del> </del>		179,543 D		192,456
Æ	â			aising expenses (Pa									
ပ္က	ũ	17		enses (Part IX, colum					. UCARASANA	o de la constanta de la consta	93,716		108,946
03	'	18		nses. Add lines 13-1				ne 25)	<u> </u>				
	i	19	Revenue le	iss expenses. Subtra	act line 18 fron	n line 12 .					577,719 281,710		695,138 312,968
	5 8							<u> </u>	Beanni	ng of Cun		End of Y	
Ь	STEELS STEELS	20	Total asset	ts (Part X, line 16)					-		496,471		8,285,773
	쿻띩			ties (Part X, line 26)							D		0
202	žŽ	22	Net assets	or fund balances, S	ubtract line 21	from line 20	. ,			7.	496,471		8,285,773
,	_	rt it		re Block					· · · · · ·				
oc.	Und	ior pena: N correct	ties of periory, Land complete	, I declare that I have exar e. Declaration of preparer	nined this return, is	ricluding accomp	BAying sch	edules and s	tetaments.	and to the	best of m	y knowledge an	d bettef, it is
, 0			1	7-e . r.Zi-		TO DESCRIPTION OF BAR	1.01.4(0)	o, wurch biet		A KNOWIE	oõe		
8	Sig	ın	Signatu	ure of officer	mest -	<del></del>				1.7		<u> 2620                                   </u>	
< □	He		M	LAX BARDON	lt Prosi	dent				Date	,		
0			Type or	r print name and title	1 2 6 2 5	C1 6 900 C	<del></del>	<del></del>		····			
0	Da:		PrintType	blebater, a value	Prepa	(er s Algnatum)		<del></del>	Date	<del>/</del>	Ch	אודם או	<del></del>
	Pai	g pare				ale B	Cs	مده	7/14	20	Check (v	- · · · ·	<del>1</del> 7704
		e Onl	,			and the same of th	- 1750-18	A COL	<del>~ '  '                                 </del>		s EIN >		77791
ا رکی ا	~3I	- VIII,	v — —	ress > 6301 Waterford		3, Oklahoma C	ity. OK 77	5118	<u> </u>	Phon		81-17575 (405) 254-56	
	May	the IP	S discuss t	this return with the p	reparer shown	above? (see	instruction	ons) .	4				No
. 14.			ork Reduct										

Form 99	Page 2
Part	
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	Student Work Development Foundation, Inc. primary purpose is to assist in providing training and support
	for Individuals, and groups in discipleship, education, evangelism, and missions to help produce more effective
	discipleship ministries
2	Did the organization undertake any significant program services during the year which were not listed on the
_	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
	services?
_	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(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.
4a	(Code: ) (Expenses \$ 290,200 including grants of \$ 375,009 ) (Revenue \$ )
	Student Work Development Foundation, Inc. provides assistance to IRC section 501 (c) (3) organizations
	within the U.S. such as the Baptist Collegiate Ministries and various college and universities, The Christian Challenge,
	The Campus Ventures, The Navigator's and Churchs that reach out to college students and international students to help
	them learn to evangelize young men and women with the Gospel of Jesus Christ and disciple them in the Word of God.
	***************************************
	***************************************
4b	(Code:) (Expenses \$ 84,859 including grants of \$) (Revenue \$ 54,496)
	The Sullivant Retreat Center is a part of Student Work Developement Foundation, Inc. and is used for fostering
	an environment for discipleship, evanglism, teaching and training of college and university campus organizations
	and churches to accomplish Student Work Development Foundation, Inc. purpose of helping produce more effective
	discipleship ministries and spreading the Gospel of the Lord Jesus Christ.
	***************************************
	***************************************
	•••••••••••••••••••••••••••••••••••••••
4c	(Code: ) (Expenses \$ 113,576 including grants of \$ 111,676) (Revenue \$ )
	Student Work Development Foundation, Inc. provides assistance to campus ministries in Europe that reaches out to
	college students to help them learn to evangelize young men and women with the Gospel of Jesus Christ and disciple them
	in the Word of God and spreading the Gospel of the Lord Jesus Christ.
	***************************************
	***************************************
	***************************************
	***************************************
	***************************************
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$ ) (Revenue \$ )
40	Total program service expenses > 488.435

-omo	gen.	1201	a

ABOFTO Page 3

Part	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		
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	V	$\vdash$
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		,
4	Section 501(c)(3) organizations. Did the organization engage in tobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		1
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		~
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		,
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		~
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		~
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		~
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		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	V	
þ	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	<b>V</b>	
C	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		>
đ	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		٧
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		~
1	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	111		
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		~
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		1
13 14a	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E  Did the organization maintain an office, employees, or agents outside of the United States?	13 14a		~
Ь	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	148		
-	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	~	
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	,	
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		·
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		~
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> </u>
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		~
ь 21	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?  Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	20b		
<b>6</b> I	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or demonstration or part if and if	24	أبدا	

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		v
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		,
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		~
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	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		~
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		~
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		>
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		٧
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV Instructions, for applicable filing thresholds, conditions, and exceptions):			
	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		~
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		~
C	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		•
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	4	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		~
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		<u>/</u>
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		•
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		~
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		•
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		~
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		~
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		~
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note:</b> All Form 990 filers are required to complete Schedule O.	38	1	
Part	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			Ū
		2 722	Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	速激 1c	<b>多</b>	類聚

Part	V Statements Regarding Other IRS Filings and Tax Compliance (continued)		<del></del>	<del></del>
-		eren T	Yes	No
28	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		觀	
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 2	9	数数	
þ	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	~	7770747
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	5.00	<b>阿斯</b>	語道
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	$ldsymbol{ldsymbol{ldsymbol{eta}}}$	~
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O .	3b	<u> </u>	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,		l	
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	<u> </u>	1
Ь			<b>B</b>	
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			<b>操設</b>
5 <b>a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	<u> </u>	1
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	Бc	<u> </u>	1
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			Ì
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		~
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or		l	
	gifts were not tax deductible?	6b	EATTIVE:	CSULES:
7	Organizations that may receive deductible contributions under section 170(c).			
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	36.46	<b>建設</b>	100
	and services provided to the payor?	7a		1
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	<u> </u>	
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was		1	١.
	required to file Form 8282?	7c	<del>25.3</del> .	100 MAY C 2
ď	If "Yes," indicate the number of Forms 8282 filed during the year	機構	1600 M	
8	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		7
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	71	<del></del>	-
9	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g 7h	<del> </del> -	<del></del>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		Secon	WAREA 10
8	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8	¥.7872	7.1. V
9	Sponsoring organizations maintaining donor advised funds.	聚設	STEEL S	14 S. C. K.
a	Did the sponsoring organization make any taxable distributions under section 4966?	%₹#X 9a	S. TOPE	THE SEAR
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		<u> </u>
10	Section 501(c)(7) organizations. Enter:	THE REAL PROPERTY.	30.0E	O WHEN
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			
11	Section 501(c)(12) organizations. Enter:	143		
а	Gross income from members or shareholders		强弱	
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	5,7 W.L. 107	PO STROKE (D
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year   12b		松松	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
a	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.	10.00 T		
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand	验的	圖圖	<b>新黎</b>
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		~
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O .	14b		
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		~
	If "Yes," see instructions and file Form 4720, Schedule N.	鐵鐵	是是	
	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	18	لسبير	~
	If "Yes," complete Form 4720, Schedule O.	5.10 miles		經濟

Faut	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O.			
	Check if Schedule O contains a response or note to any line in this Part VI			. 🗹
Sect	on A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 1			
	If there are material differences in voting rights among members of the governing body, or		300	
	if the governing body delegated broad authority to an executive committee or similar			
	committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent . [1b]	上級級		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	<b>3</b> 線 <b>2</b>		EZZE
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, trustees, or key employees to a management company or other person?.	3		1
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		۷
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		~
6	Did the organization have members or stockholders?	6		~
7 <b>a</b>	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		_
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		~
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	8a	~	
b	Each committee with authority to act on behalf of the governing body?	8b	•	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	_		
Coati	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		
30Cu	on B. Policies (This Section B requests information about policies not required by the Internal Rever	<u>ue C</u>	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	.00	~
ь	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
_	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	<b>'</b>	
þ	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	WAR.		議場
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		~
14	Did the organization have a written document retention and destruction policy?	14		~
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	espendent (C	A-EATOL OL
b	Other officers or key employees of the organization	15b		~
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	網網		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		
Ь	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		KAL!
Section	on C. Disclosure	<u></u>		
17	List the states with which a copy of this Form 990 is required to be filled ► Kansas			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-1 (3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  Own website Another's website Upon request Other (explain on Schedule O)	î (Sec	tion 5	01(c)
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict or and financial statements available to the public during the tax year.	f inter	est p	olicy,
20	State the name, address, and telephone number of the person who possesses the organization's books and reconstruction.	cords	<b>&gt;</b>	
	Charlie Anne Cooksey, P. O. Box 2100, Norman, Oklahoma 73070 (405) 329-2990			

_	
D	- 4

Form **990** (2019)

Part VII	Compensation of Officers, Dire	ctors, Trustees, Key E	mployees, Highest Co	mpensated Employees,	and
,	Independent Contractors				

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's current officers, directors, trustees (whother individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See instructions for the order in which to list the persons above.

Check this box if neither the organization no			aniz			ompe	ะกรย	ted any current	officer, director,	or trustee.
(A) Name and title	(B) Average hours per week	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	from the organization and related organizations
(1) Max D. Barnett		l								
President	10	ļ	L	~	<u> </u>			21,500	0	0
(2) Pete Jackson Vice-President				~				O	0	0
(3) Jennifer Slatter										
Secretary				~				0	0	. 0
(4) Charile Anne Cooksey	40				l					-
Treasure				~	<u> </u>	<u> </u>		60,240	0	0
(5) Charles Yohn							ا ا	}		
Board Member		~	_		<u> </u>		بًا	0	0	0
(6) Dillion Pospisii		١.								_
Board Member		_	<b> </b>		<u> </u>		╙	0	0	0
(7) John Hill				ŀ					j	_
Board Member		~		_			<u> </u>	0	0	0
(8) Michael Stewart	40							45.045		o
Board Member Key Employee					~		_	48,065	0	<u>_</u>
(9)										,
(10)										
(11)										
(12)										
(13)										
(14)										

Par	VII Section A. Officers, Directors,	Key Employees, ar						lighest Compe	nsated !	d Employees (continued		
					•	C)				·		}
	(A) (B)					ition	e than :	(D)				(F)
	Name and title					is boti	han Reportable Re			able	Estimated amount	
		hours per week	office	er an	dad	ilrect	or/trus	<u> </u>	compensation from the	compens from rel		of other compensation
		(list any	오골	īg	₽	\$	Highest compensated employee	Former	organization	organiza		from the
		hours for	늏죮	鬒	Officer	è	हें हैं	#	(W-2/1099-MISC)	(W-2/1089	-MISC)	organization and
		related organizations	Individual trustee or director	ਭੂ		Көу етрюуее	8 8	]	1	ĺ		related organizations
		below	] 2	Ē		ğ	륈		1			ŧ
		dotted line)	8	Institutional trustee			ğ					
			İ	•		1	8					
(16)												
								<u> </u>				
(16)												
			<u> </u>				ļ 	<u> </u>				
(17)												
(18)												
			}									
(19)												
discussion.	· · · · · · · · · · · · · · · · · · ·		١.	1								
(20)												
	·											
(21)		1										
dan dan d									ļ			
(22)												
<del>/</del>								ء				
(23)												
<del></del>			i i									
(24)				$\dashv$	$\Box$			Н				
<i>3</i>								li				
(25)					$\dashv$			Н				
X/	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		ĺĺ		ŀ							
1b	Subtotal								129,805		0	0
C	Total from continuation sheets to Part		 n Δ	•	• •		•		0		0	0
ď	Total (add lines 1b and 1c)			•	•	• •	•		129,805			0
2	Total number of individuals (including but	not limited	to th		liet	ed :	hovo	ابدر لا		than \$10		
-	reportable compensation from the organization		to ut	OSE	แอแ	<b>-</b>	IDOVE	, <b>4</b> VI	ic leceived illoid	יוומוז שוע	,,,,,,,,	Oi
	Topandate dempendation nom the organi	Lation								· · · · · · · · · · · · · · · · · · ·		Yes No
3	Did the examination list any fermer	46.00 11.00		<b></b>	-4	. 1-		1-	bisbas			
J	Did the organization list any former of employee on line 1a? If "Yes," complete 5	imicer, uire Schodulo I	for ev	tru:	stee indi	ride	ey er	npr	byee, or nignes	comper	ISSCOO	3
	· ·							• •				CONTRACT STREET, STREE
4	For any individual listed on line 1a, is the											
	organization and related organizations individual	greater tha	an Di	ວບ,ເ	JUU.	<i>e ir</i>	"Yes	5," (	сотрівте Ѕспва	lule J for	sucn	apply 2012 in a velocity and only 19
_			• •	•				•			· ·	4
5	Did any person listed on line 1a receive of									ion or indi	ividual	
Cook	for services rendered to the organization?	17 "YOS," C	ompie	210	Scn	өаи	10 J 10	or si	uch person .		· ·	5 1
	on B. Independent Contractors	<del></del>										
1	Complete this table for your five high	est compe	nsate	ed l	nde	pen	dent	CO	ntractors that re	eceived n	nore t	han \$100,000 of
	compensation from the organization. Repo	nt compen	sation	tor	the	cal	endar	yea	ar ending with or	within the	organ	ization's tax year.
	(A)						ı	ø				(C)
	Name and business addr	000							Description of servi	ces		Compensation
									<del></del>			
		<del></del>										<del> </del>
		'									10. F = 1	
2	Total number of Independent contractor							tho	ose listed above	) who 🎉	TOWN	
	received more than \$100,000 of compensa	tion from t	he orç	jani:	zatio	on 🕨	<u> </u>			<u>/</u> 2		<b>建制的基础的</b>

Par	t VIII							
	-	Check if Schedule O contains a r	espor	nse or note to a	1	<del></del>	· · · · · · · · · · · · · · · · · · ·	<u> </u>
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512-514
য় য	1a	Federated campaigns	1a				The second second second	
듣	b	Membership dues	1b	(				nasi tangga pangga br>Pangga pangga pangg
₹ ي	C	Fundraising events	1c					
# 7	d	Related organizations	1d					
S E	е	Government grants (contributions)						
Contributions, Gifts, Grants and Other Similar Amounts	f	All other contributions, gifts, grants,						
		and similar amounts not included above	1f	499,249				
	9	Noncash contributions included in lines 1a-1f						
	h	Total. Add lines 1a-1f	1g	13) 0	2 - Carlander, 439 440/1951, 5720)			
		rotal. Add lines Ta-77	<u> </u>	Business Code	499,249			年 17 大小 新加州 18 大小
8	2a	Sullivant Retreat Center		90009	48,107	48,107	A Mark Committee of the	5527 6539 55W 5 W 5
Program Service Revenue	ь		70007	40,10	3 0	0	0	
gram Ser Revenue	C						0	<del>-</del>
	d	<u> </u>			(		C	0
ğæ	е					0	0	0
E	1	All other program service revenue				0	0	
	g	Total. Add lines 2a-2f			48,107	<b>非和地工作证</b>	<b>可以是非常是</b>	
	3	Investment income (including div	ldends	s, interest, and	]		ŀ	
		other similar amounts)			464,291	0	0	464,291
	4	Income from investment of tax-exer	npt bo	nd proceeds	<u> </u>	0	0	0
	5	Royalties	<del></del>		Neglet was a set of the set	0	0	0
	0	_	u	(ii) Personal				
	6a b	Gross rents 6a Less: rental expenses 6b						
	C	Rental income or (loss) 6c						
	d	Net rental income or (loss)				The States of the States	Control of the Contro	CONTRACTOR OF THE CONTRACTOR
	7a	Gross amount from (i) Securi	ties	(li) Other		16 A 18 A		7.5.00 SERVER 8 00 SERVER 8 19
	74	sales of assets		<u>`</u>				
		other than inventory 7a						
Q.	b	Less: cost or other basis						
Revenue	,	and sales expenses . 7b			<b>是一种的</b>			
ě	C	Gain or (loss) 7c						
_	d	Net gain or (loss)	<del></del>	<u>, , , , </u>	° C	0	0	0
Office	8a	Gross income from fundraising	1					304/04/2004
0		events (not including \$						Will de Comp
		of contributions reported on line 1c). See Part IV, line 18						
	h.	1c). See Part IV, line 18 Less: direct expenses	8a 8b					
1	b	Net income or (loss) from fundraising		nts <b>&gt;</b>			ACATO STATE OF THE	207451-4060600
		Gross income from gaming	A eve					
	30	activities. See Part IV, line 19 .	9a					
	b	Less: direct expenses	9b					
	C	Net income or (loss) from gaming a		s	0	0	0	0
		Gross sales of inventory, less						
ı		returns and allowances	10a	0				
		Less: cost of goods sold	10b	(3,541)		<b>"是是,是是是</b>	是當時期的	2000年1200年
	C	Net income or (loss) from sales of in	vento		(3,541)	(3,541)	0	0
<u> </u>				Business Code		的學術學	是的最后被对	
2 9	118	***************************************			0	O	О.	0
<u> </u>	b			······································	0	0	o	0
Miscellaneous Revenue	6	All all and an appropriate the second		• • • • • • • • • • • • • • • • • • • •	0	0	0	0
Ĕ		All other revenue	• • {	•	0	62 2 4 550 53153 45 55 C	<b>0</b> ##1.5###1.45#5###5.7#	O CONTRACTOR OF THE PARTY OF TH
	<del></del>	Total revenue. See instructions		<u> </u>	1,008,106	1450,000 186 N. S. S. S. L. S. W. W.		464,291
			• •		a was a market in a market	49,300		TUT/471

o

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).

	Check if Schedule O contains a respons	se or note to any line	e in this Part IX .		<u> L</u>
	ot include amounts reported on lines 6b, 7b, b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundralsing expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21 .	280,160	280,160		
2	Grants and other assistance to domestic	<del></del>			
	individuals. See Part IV, line 22	1 0	o		
3	Grants and other assistance to foreign			Carlo State State State	7.002.00.00
•	organizations, foreign governments, and				
	foreign individuals. See Part IV, lines 15 and 16	113,576	113 576		
4	Benefits paid to or for members	113,570	713,370	THE STATE OF THE S	
5	Compensation of current officers, directors,	<u> </u>		· · · · · · · · · · · · · · · · · · ·	THE PROPERTY AND ASSESSMENT OF THE
3	trustees, and key employees	129,805	48,065	81,740	_
_		127,003	40/,00	81,740	<u> </u>
6	Compensation not included above to disqualified	i			
	persons (as defined under section 4958(f)(1)) and	ĺ			_
_	persons described in section 4958(c)(3)(B)	0	0		0
7	Other salaries and wages	57,624	57,624		0
8	Pension plan accruals and contributions (include				1
	section 401(k) and 403(b) employer contributions)	0	0	0	0
9	Other employee benefits	0	0	0	0
10	Payroll taxes	5,027	5,027	0	0
11	Fees for services (nonemployees):				
а	Management	<u>o</u>		0	0
þ	Legal	5,861	0	5,861	0
C	Accounting	10,853	C	10,863	0
đ	Lobbying	o	0	0	0
•	Professional fundraising services. See Part IV, line 17	0			0
f	Investment management fees	337	0	337	O
g	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O.) .	o	o	o	0
12	Advertising and promotion	0	O	0	0
13	Office expenses	5,746	752	4,994	
14	Information technology	O	0	0	0
15	Royalties	O	o	0	0
16	Occupancy	C	C	O	0
17	Travel	5,564	4,399	1,165	0
18	Payments of travel or entertainment expenses		······································		<del></del>
	for any federal, state, or local public officials	ام	a	o	n
19	Conferences, conventions, and meetings .	3,680	0	3,680	<u> </u>
20	Interest	0	0	3,000	<u>~</u>
21	Payments to affiliates			O O	0
22	Depreciation, depletion, and amortization .	1		0	0
23	Insurance	23,595	23,595		0
		10.2011	23,575 1000 - 25,275		A THE ACT OF THE PARTY OF
24	Other expenses, Itemize expenses not covered above (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
а	Grounds		2010年10年10年10年10日	100万年の日本の日本の日本の	THE SPECIAL VALUE OF A SPECIAL PROPERTY OF A
b	Maintenance	10,438	10,438	0	0
C	Supply	15,332	15,332	0	0
d	Utilities	5,884	5,884	0	0
_		21,656	21,656	0	0
9 25	All other expenses	(05.400)	O	0	0
<u> 25</u> 26	Total functional expenses. Add lines 1 through 24e  Joint costs. Complete this line only if the	695,138	586,508	108,640	0
~~	organization reported in column (B) joint costs	] ]			
	from a combined educational campaign and		ļ		
	fundraising solicitation. Check here ► ☐ if		İ		
	following ŠOP 98-2 (ASC 958-720)	L			· · ·

**Balance Sheet** Part X Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year Cash-non-interest-bearing 178.256 736,118 2 Savings and temporary cash investments . . 2 9,800 22,548 3 3 Pledges and grants receivable, net . . 0 Accounts receivable, net 4 0 0 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 O Loans and other receivables from other disqualified persons (as defined 1,16 under section 4958(f)(1)), and persons described in section 4958(c)(3)(B). 6 0 7 404,489 7 404,489 Inventories for sale or use . . . 8 0 Prepaid expenses and deferred charges 9 0 ก Land, buildings, and equipment: cost or other 10a basis. Complete Part VI of Schedule D . . . . 10a Less: accumulated depreciation . . . . . 10b 10c 1,948,198 1,948,198 11 Investments - publicly traded securities 11 0 12 investments—other securities. See Part IV, line 11 5,187,16B 4,942,980 12 13 Investments-program-related. See Part IV, line 11. 13 0 O. 14 Intangible assets . . . . . . . . . . . 14 0 o 15 Other assets. See Part IV, line 11 . . . . . 15 0 0 16 8,285,773 Total assets. Add lines 1 through 15 (must equal line 33) 16 7,496,471 17 Accounts payable and accrued expenses . . . 17 0 18 Grants payable . . . . . . . . 18 0 Deferred revenue . 19 19 0 o 20 Tax-exempt bond liabilities . . . . . . . . 20 0 21 Escrow or custodial account liability. Complete Part IV of Schedule D . . . 0 21 22 Loans and other payables to any current or former officer, director, iabilities trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons . . . 22 0 Secured mortgages and notes payable to unrelated third parties 0 23 24 Unsecured notes and loans payable to unrelated third parties 0 24 0 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 00 26 Total liabilities. Add lines 17 through 25 26 n Net Assets or Fund Balances Organizations that follow FASB ASC 958, check here > and complete lines 27, 28, 32, and 33. 27 Net assets without donor restrictions 6,337,575 27 5.548.273 28 Net assets with donor restrictions . 28 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 Paid-in or capital surplus, or land, building, or equipment fund . 30 30 1,948,198 31 Retained earnings, endowment, accumulated income, or other funds . 31 32 32 8.285,773 7,496,471 33 Total liabilities and net assets/fund balances . . 7,496,471 8,285,773

TOTAL S	au (2018)	<u>r</u>	age 12
Par	t XII Reconciliation of Net Assets		
	Check if Schedule O contains a response or note to any line in this Part XI	<u> </u>	. 🗆
1	Total revenue (must equal Part VIII, column (A), line 12)	1,0	08,106
2	Total expenses (must equal Part IX, column (A), line 25)	6	95,138
3	Revenue less expenses. Subtract line 2 from line 1	3	12,968
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	7,4	96,471
5	Net unrealized gains (losses) on investments	2	44,188
8	Donated services and use of facilities		0
7	Investment expenses		0
8	Prior period adjustments		0
9	Other changes in net assets or fund balances (explain on Schedule O)	2	32,146
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line		
	32, column (B))	8,2	<u>85,773</u>
Part	32, column (B))		
	Check if Schedule O contains a response or note to any line in this Part XII	<i>.</i> .	<u>. O</u>
		Yes	No
1	Accounting method used to prepare the Form 990:	<b>经过滤</b>	孫終
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
20		2a	TO STATE OF
28	Were the organization's financial statements compiled or reviewed by an independent accountant?	THE CORPORATION OF THE PERSON	32000.0
	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	2b	
b	Were the organization's financial statements audited by an independent accountant?		21 (C. KALESE
	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:  Separate basis Consolidated basis Both consolidated and separate basis		
	— · — — — — — — — — · · · · · · · · · ·		THEFT
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	
	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	За	,
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	36	

#### SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

# **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

2019

Open to Public Inspection

Employer identification number

	ent Work Development Foundation						68187	
Pa							ons.	
The	organization is not a private found		•		-	-	Î~	1 /
1	A church, convention of chur						12	1
2								
3								
4	A medical research organizat	•	conjunction with a hos	pital des	cribed in	section 170(b)(1)(A)	(III). Ent	er the
_	hospital's name, city, and sta							···
5	An organization operated for section 170(b)(1)(A)(iv). (Cor		college or university	owned	or operat	ed by a governmen	tal unit (	described ir
6 7	☐ A federal, state, or local gove ☐ An organization that normally						n the ge	neral public
•	described in section 170(b)(		,	Double 18	•		_	-
8	A community trust described							11
9	An agricultural research orga- or university or a non-land-gr university:							
10	An organization that normally receipts from activities relate support from gross investment acquired by the organization	d to its exempt fu nt income and ur	inctions—subject to c irelated business taxa	ertain ex ble incor	ceptions, ne (less s	and (2) no more that ection 511 tax) from	n 33¹/₃%	6 of its
11	An organization organized an		•		-	•		
12	☐ An organization organized and	•	•	-			my out t	ha numneas
12	of one or more publicly supp							
	Check the box in lines 12a thr							
a	☐ Type I. ∧ supporting orga	_	• • • • • • • • • • • • • • • • • • • •		_	•		-
_	the supported organizatio	•	-	-		•		
	supporting organization.	• • •	• • • •					
þ	☐ Type II. A supporting orga	inization supervis	sed or controlled in co	nnection	with its	supported organizati	on(s), by	/ having
	control or management of organization(s). You must	the supporting of	organization vested in	the same				_
C	☐ Type III functionally inte	grated. A suppor	ting organization ope	rated in c			ally integ	rated with,
d	its supported organization  Type ill non-functionally		•		-	, ,	ated or	sanization/e\
u	that is not functionally into	grated. The orga	inization generally mu	st satisfy	a distribi	ution requirement an		
_	requirement (see instruction	•	· · · · · ·	-				
e	Check this box if the orga functionally integrated, or						il, Type	<b>∍ III</b>
1	Enter the number of supported	organizations .					[	
g	Provide the following Information	n about the supp	ported organization(s).	•			_	
	(i) Name of supported organization	(ii) EIN	(III) Type of organization (described on lines ?-10 above (see instructions))	listed in yo	organization ur governing iment?	(v) Amount of monetary support (see instructions)	other e	tmount of upport (see ructions)
				Yes	No			
(A)								
(B)								<del></del>
					ļ			<del></del>
(C)							···	
(D)								
E)								
<b>Fotal</b>		自獲多項的。例如	(2) 新华·汉·新亚州	1.98 M. C.	是不能			

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.)

Sect	ion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not			°	l	İ	
	include any "unusual grants.")	260,162	336,452	364,497	414,194	449,249	1,874,554
2	Tax revenues levied for the						
	organization's benefit and either paid			,		]	
	to or expended on its behalf	0		) o	l c	ol ol	0
3	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge	1 0	1 0	ol o	l 0	ol o	0
4	Total. Add lines 1 through 3	260,162	336,452	364,497	414,194	449,249	1,874,554
5	The portion of total contributions by	聖朝的知识	<b>《全学》。《李</b> 斯·	派的政策的概念	<b>的"不是"</b>	是是是是首位	
_	each person (other than a	Profession in	PARTITION OF THE PARTY OF THE P	<b>阿拉斯斯</b>			
	governmental unit or publicly			100000000000000000000000000000000000000			
	supported organization) included on				of the second		
	line 1 that exceeds 2% of the amount			ACTO STANCE			
	shown on line 11, column (f)	Language to the street of	STATE OF THE STATE	200 300 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Contract the first of the		
6	Public support. Subtract line 5 from line 4		對海鄉鄉世齡	3537.376	Carried Strain	<b>《图·特别的》</b>	1,874,554
Sect	on B. Total Support						
Caler	idar year (or fiscal year beginning in) 🕨	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	<b>(e)</b> 2019	(f) Total
7	Amounts from line 4	260,162	336,452	364,497	414,194	449,249	1,874,554
8	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties, and income from	1				[	
	similar sources	318,272	327,602	291,026	411,131	462,291	1,810,322
9	Net income from unrelated business						
	activities, whether or not the business	l					
	is regularly carried on	0	0	O	0	0	0
10	Other income. Do not include gain or						
	loss from the sale of capital assets					}	
	(Explain in Part VI.)	(12)7	(1,411)	(1,757)	(191)	(3,541)	(6,773)
11				经验证证的	を変すった。		3,678,103
12	Gross receipts from related activities, etc			· · · · ·		12	48,107
13	First five years, if the Form 990 is for the						
	organization, check this box and stop he			<del></del>	· · · · ·		· · <b>&gt;</b> 🗆
	on C. Computation of Public Suppor					· <u></u>	<del></del>
14	Public support percentage for 2019 (line		-	1, column (f))		14	51 %
15	Public support percentage from 2018 Sch	•	•			15	52 %
16a	331/3% support test—2019. If the organi	zation did not	check the box	con line 13, an	id line 14 is 33	31/3% or more, o	check this
<b>L</b>	box and stop here. The organization qua						
þ	331/3% support test—2018. If the organithis box and stop here. The organization						
4=							
17a	,						
	10% or more, and if the organization me						
	Part VI how the organization meets the "			_	•	• -	
	_						
þ	10%-facts-and-circumstances test—26						
	15 is 10% or more, and if the organiza	tion meets the	e "facts-and-c	ircumstances"	_test, check t	this box and st	top here.
	Explain in Part VI how the organization n						
46	supported organization						
18	Private foundation. If the organization di						
	instructions	<u> </u>		<u> </u>		<u> </u>	▶ []

Part	Support Schedule for Organiz	etlere Dese	albed in Cont	E00(a)(0)			- rayo c
Part	(Complete only if you checked t					d to qualific	nder Part II
	If the organization fails to qualify						nuer Fait is.
Cook	in the organization rails to qualifi ion A. Public Support	y under the te	sis listed be	ow, piease c	ompiete Part	11.)	
	idar year (or fiscal year beginning in)	(-) 001E	(F) 0016	(-) 0017	(A) 0010	(-) 0010	/ M Total /
		(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services 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 7a	<b>Total.</b> Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons			c			
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						
8	Add lines 7a and 7b						
	on B. Total Support						
	dar year (or fiscal year beginning in)	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	<b>(e)</b> 2019	(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.	1					
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
C	Add lines 10a and 10b	/	7				
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)			5			
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for the organization, check this box and stop he	re		d, third, fourth	, or fifth tax ye	ar as a section	n 501(c)(3) ▶ □
	on C. Computation of Public Suppor	t Percentag	е				
15	Public support percentage for 2019 (line to	3, column (f), d	ivided by line	3, column (f))		15	%
16	Public support percentage/from 2018 Sch			<u></u> .		16	%
Secti	on D. Computation of Investment In	come Perce	ntage				
17	Investment income percentage for 2019 (	line 10c, colun	nn (f), divided b	y line 13, colu	mn (f))	17	%
18	Investment income percentage from 2018	Schedule A, I	Part III, line 17			18	%
19a	331/3% support tests-2019. If the organi	ization did not	check the box	on line 14, ar	nd line 15 is mo		
b	17 is not more than 331/3%, check this box 331/3% support tests—2018. If the organiz line 18 is not more than 331/3%, check this t	ation did not c	heck a box on	line 14 or line 1	9a, and line 16	is more than 3	31/3%, and
	,		<del></del>				···

# Part IV Supporting

**Supporting Organizations** 

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

	Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete F	Part V.)					
Sect	ection 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 <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.		Yes	No			
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 <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2					
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a					
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 <b>Part VI</b> when and how the organization made the determination.	3b					
C	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(8) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3c					
<b>4</b> a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.	4a					
ь	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b					
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 <b>Part VI</b> 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.	4 <b>c</b>					
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in <b>Part VI</b> , 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).	5a					
b	<b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b	žķ.				
6 6	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.	5c					
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	7					
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8					
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 <b>Part VI</b> .	9a					
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in <b>Part VI</b> .	9b					
C	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in <b>Part VI.</b>	9c		124.754 124.754			
10a	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.	10a					
Ь	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to		W.T.				

determine whether the organization had excess business holdings.)

10b

Part	IV Supporting Organizations (continued)			
		PT-V II I	Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			极系
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	樂縣		1330
_	below, the governing body of a supported organization?	11a		
Þ	• • • • • • • • • • • • • • • • • • • •	11b		<b>↓</b>
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		<u>.                                    </u>
Sect	ion B. Type I Supporting Organizations		V	
	Did the directors tructors or membership of one or more consected arranged by the form the contract	1168855	Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's 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			學家
	controlled the organization's activities. If the organization had more than one supported organization,	遠親		
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported	300.20		
	organizations and what conditions or restrictions, if any, applied to such powers during the tex year.	1	C11287445Y	619 FR
2	Did the organization operate for the benefit of any supported organization other than the supported	Was.	100	
_	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.	2	edense.	1,425,94,634
Sect	ion 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	34		31 33
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control		1	
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1	W.C. W.	2000
Secti	on 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			深級
	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 (27)	127 A18A	छरन द प
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 <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).	<b>展於</b>	鄉屬	
•		2	. (क्रांस स्टब्स	Receive
3	By reason of the relationship described in (2), 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		7.70	
	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.	<b>國際</b>	<b>1972</b>	in The
Sacti	on E. Type III Functionally Integrated Supporting Organizations	3		
1			Mana	
a	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see I The organization satisfied the Activities Test. Complete line 2 below.	nstruc	uons	ij.
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
c	The organization is the parent of each of its supported organizations. Complete line 3 below.  The organization supported a governmental entity. Describe in Part VI how you supported a government entity (	'aaa ina	den sadi	onal
2	Activities Test. Answer (a) and (b) below.			
_ _a	• • • • • • • • • • • • • • • • • • • •	130% To	100	STATE OF
	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 <b>Part Vi identify</b>		<b>深對</b>	
	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.	2a		16.37.18
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	# 32 T R	09.3	NATE OF
_	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			遊遊
	reasons for the organization's position that its supported organization(s) would have engaged in these	200		
	activities but for the organization's involvement.	2b	105.174	MESH.
3	Parent of Supported Organizations. Answer (a) and (b) below.	NEWS S	E TO THE	<b>FEER</b>
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	激烈		经数
-	trustees of each of the supported organizations? Provide details in Part VI.	3a	TICHEN !	vertige?
ь	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each		SH	AND F
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b	rik 25	34.74°65

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functional Part V	gan	izations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organization.			
Section A—Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or		Į.	
maintenance of property held for production of income (see instructions)	6	<u> </u>	
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B—Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):	02.0		
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	10		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other	1		
factors (explain in detail in Part VI):	溪		
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 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		<del></del>
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C—Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 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	THE PERSON NAMED IN	
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-functional instructions).	y int	egrated Type III supporting	organization (see

Part	Y Type III Non-Functionally integrated 509(a)(	al authorities organi	izations (continued)				
Sect	ion D—Distributions			Current Year			
1	Amounts paid to supported organizations to accomplish	exempt purposes		<u> </u>			
2		empt purposes of supp	orted				
	organizations, in excess of income from activity						
3	Administrative expenses paid to accomplish exempt purp	poses of supported orga	anizations				
4	Amounts paid to acquire exempt-use assets						
5_	Qualified set-aside amounts (prior IRS approval required)						
6	Other distributions (describe in Part VI). See instructions.	·	<u></u>				
8	Distributions to attentive supported organizations to whice (provide details in <b>Part VI</b> ). See instructions.	ch the organization is re	sponsive				
9	Distributable amount for 2019 from Section C, line 6						
10	Line 8 amount divided by line 9 amount	<del></del>					
Sect	ion E—Distribution Allocations (see instructions)	(ī) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019			
1	Distributable amount for 2019 from Section C, line 6						
2	Underdistributions, if any, for years prior to 2019						
	(reasonable cause required—explain in Part VI). See						
	instructions.		The state to the second state of the second state of the second s				
3_	Excess distributions carryover, if any, to 2019						
<u>a</u>	From 2014						
<u> </u>	From 2015						
<u> </u>	From 2016						
<u>d</u>	From 2017						
<u>е</u>	From 2018						
<u> </u>	Total of lines 3a through e						
<u>g</u> _	Applied to underdistributions of prior years Applied to 2019 distributable amount			Name of the second seco			
<u>h</u>	Carryover from 2014 not applied (see instructions)						
	Remainder. Subtract lines 3g, 3h, and 3i from 3f.	<del></del>					
4	Distributions for 2019 from						
•	Section D, line 7: \$						
а	Applied to underdistributions of prior years		A CANAL WARMS AND DONE OF A MICHAEL CAN				
b	Applied to 2019 distributable amount			The set of a statement and set are			
C	Remainder, Subtract lines 4a and 4b from 4.	32.32. 1 33. 144.00.00.00.00.00.00.00.00.00					
5	Remaining underdistributions for years prior to 2019, 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 2019. Subtract lines 3h						
	and 4b from line 1. For result greater than zero, explain in						
	Part VI. See Instructions.						
7	Excess distributions carryover to 2020. Add lines 3j						
	and 4c.						
8	Breakdown of line 7:	<b>建设,不是一个工程</b>					
a	Excess from 2015	<b>西斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯斯</b>	的研究于大学的特别				
Ь	Excess from 2016		<b>建筑</b> 公司 (1997年)				
C	Excess from 2017		學的學學學學	はなる。			
d	Excess from 2018	日的語言。這樣的問					
6	Excess from 2019		高数是"是"以"我"的"是"。 第一				

Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See Instructions.)
Part II, Line	10
These amo	unts are attributable to the revenue generated from the sales of Real Purpose of Life Publications which is a part of
Student Wo	ork Development Foundation, Inc. The revenue generated from the sales of Real Purpose of Life Publications is used
with colleg	e and university students as well as churches across the country to spread the Word of Christ.
~***********	
	•••••••••••••••••••••••••••••••••••••••
	***************************************
*******	
	,
	·
	***************************************
	g

#### SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

# **Supplemental Financial Statements**

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

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

OMB No. 1545-0047

2019

Open to Public Inspection

Employer identification number

Stude	nt Work Development Foundation, Inc.	51-0168187				
Pai			or Accounts.			
	Complete if the organization answered '	'Yes" on Form 990, Part IV, line 6.				
		(a) Donor advised funds	(b) Funds and other accounts			
1	Total number at end of year	,				
2	Aggregate value of contributions to (during year) .					
3	Aggregate value of grants from (during year)					
4	Aggregate value at end of year					
5	Did the organization inform all donors and donor funds are the organization's property, subject to the					
6	Did the organization inform all grantees, donors, a					
•	only for charitable purposes and not for the benef					
			· · · — —			
Par	Conservation Easements.					
	Complete if the organization answered "	Yes" on Form 990, Part IV, line 7.				
1	Purpose(s) of conservation easements held by the	organization (check all that apply).				
	Preservation of land for public use (for example, recre	eation or education) 🔲 Preservation of	a historically important land area			
	Protection of natural habitat	☐ Preservation of	a certified historic structure			
_	Preservation of open space					
2	Complete lines 2a through 2d if the organization he	ld a qualified conservation contribution				
	easement on the last day of the tax year.		Held at the End of the Tax Year			
8			. 2a			
b	Total acreage restricted by conservation easements Number of conservation easements on a certified h					
d	Number of conservation easements included in (					
<b>u</b>	historic structure listed in the National Register .	c) acquired and 7/25/00, and not of	. 2d			
3	Number of conservation easements modified, trans	sferred, released, extinguished, or term				
•	tax year ▶	,	a.c. c, c.c c.g			
4	Number of states where property subject to conser	vation easement is located ►				
5	Does the organization have a written policy reg					
	violations, and enforcement of the conservation eas					
6	Staff and volunteer hours devoted to monitoring, inspec	ting, handling of violations, and enforcing	conservation easements during the year			
-	Amount of annual to annual to an air in the state of					
7	Amount of expenses incurred in monitoring, inspectin	g, nandling of violations, and enforcing co	onservation easements during the year			
8		Old) above entire the very income of a				
0	Does each conservation easement reported on line and section 170(h)(4)(B)(ii)?	c(a) above satisfy the requirements of se	Yes No			
9	In Part XIII, describe how the organization reports of					
	balance sheet, and include, if applicable, the text of	the footnote to the organization's finan				
	organization's accounting for conservation easement	nts.				
Part			ther Similar Assets.			
	Complete if the organization answered "	Yes" on Form 990, Part IV, line 8.				
1a	If the organization elected, as permitted under FAS					
	of art, historical treasures, or other similar assets					
	service, provide in Part XIII the text of the footnote t					
þ	If the organization elected, as permitted under FAS	B ASC 958, to report in its revenue sta	atement and balance sheet works of			
	art, historical treasures, or other similar assets held provide the following amounts relating to these item		arch in furtherance of public service,			
			▶ €			
	(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,					
-	following amounts required to be reported under FA	SB ASC 958 relating to these items:	<u> </u>			
a	Revenue included on Form 990, Part VIII, line 1 . Assets included in Form 990, Part X		▶ \$			
b	Assets included in Form 990, Part X		<b>&gt;</b> \$			

Page 2	
--------	--

Par	Organizations Maintaining	Collections of	Art, His	storical	Treasures	, or O	ther Similar As	sets (con	tinued)
3	Using the organization's acquisition, collection items (check all that apply):		ther reco	ords, ched	ck any of th	e follov	ving that make s	ignificant u	ise of its
8	☐ Public exhibition		đ	☐ Loan	or exchang	je progi	am		
b	Scholarly research		e	☐ Other	r		*****		
C	☐ Preservation for future generations	<b>.</b>							
4	Provide a description of the organization.	tion's collections	and exp	ain how t	they further	the org	janization's exem	ipt purpos	e in Part
5	During the year, did the organization assets to be sold to raise funds rather								□ No
Par	IV Escrow and Custodial Arra								
. <u>.</u>	Complete if the organization 990, Part X, Ilne 21.	answered "Yes	on Fo	rm 990, I	Part IV, line	e 9, or	reported an am	ount on F	orm
1a	Is the organization an agent, trustee, included on Form 990, Part X?							t 🔲 Yes	□ No
Ь	If "Yes," explain the arrangement in Pa	art XIII and compl	ete the f	ollowing t	abie:				
						<u> </u>	<del></del>	nount	
C	Beginning balance					1c	+		
d	Additions during the year					1d			
0	Distributions during the year					1e			
f	Ending balance					1f			
2a h	If "Yes," explain the arrangement in Pa								
	V Endowment Funds.	art Air. Oneck ner	<del>•           </del>	Apianano	ii iias Deeli	provide	d On Fait Air .	<u> </u>	<del></del> -
	Complete if the organization	answered "Yes	" on Fo	m 990. F	Part IV. line	e 10.			
		(a) Current year		or year	(c) Two year		(d) Three years back	(e) Four ye	ars back
1a	Beginning of year balance				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		<u> </u>		
ь	Contributions	,							
C	Net investment earnings, gains, and losses								
đ	Grants or scholarships								
8	Other expenditures for facilities and programs								
f	Administrative expenses								
g	End of year balance							<u> </u>	
2	Provide the estimated percentage of the		nd baland	:e (line 1g	ı, column (a)	) held a	ıs:		
a	Board designated or quasi-endowmen	nt 🕨	_%						
b	Permanent endowment	%							
C	Term endowment ▶%	0	000/						
2-	The percentages on lines 2a, 2b, and 2	•		41 11					
3 <b>a</b>	Are there endowment funds not in the organization by:	possession of tr	ie organi	zation the	at are neid a	and adr	ninistered for the	Ye	s No
	(i) Unrelated organizations							3a(i)	140
	(ii) Related organizations							3a(ii)	
b	If "Yes" on line 3a(ii), are the related or	ganizations listed	as requi	red on So	hedule R?			3b	+
4	Describe in Part XIII the intended uses								
Part				- <u>-</u>			· ·	· · · · · · · · · · · · · · · · · · ·	
	Complete if the organization	answered "Yes"	on For	m 9 <del>9</del> 0, F	Part IV, line	11a. S	See Form 990, F	art X, line	e 10.
	Description of property	(a) Cost or of (investme			r other basis ther)		ccumulated preciation	(d) Book va	alue
18	Land							1,	948,198
Þ	Buildings								
C	Leasehold improvements								
d	Equipment								
•	Other			<u> </u>					
otal.	Add lines 1a through 1e. (Column (d) m	iust equal Form 99	90. Part 🕽	t, column	(B). line 10/	C.) .	<b>.</b> .	1.	948.198

Part VII	Investments—Other Securities.  Complete if the organization answered "Yes" on For	rm 990 Part IV lin	e 11b. See Form	990 Part X line 12
	(a) Description of security or category (including name of security)	(b) Book value	(c) Meth	od of valuation: of-year market value
(1) Financial	I derivatives			
	held equity interests	5,187,168	End of Year Market	Value
(3) Other				
(A)				<del></del>
(B)				
(C)				
(D) (E)				<u> </u>
(F)				
(G)				
(H)		٥		
	mn (b) must equal Form 990, Part X, col. (B) line 12.) . ▶	5,187,168		
Part VIII	Investments—Program Related.			
	Complete if the organization answered "Yes" on For	m 990, Part IV, lin		
	(a) Description of investment	(b) Book value		ed of valuation: if-year market value
(1)				
(2)				
(3)	<del></del>			
(4)				
(5)				
(6)				
(8)				
(9)				
Total. (Colui	mn (b) must equal Form 990, Part X, col. (B) line 13.) .	0		
Part IX	Other Assets.			
	Complete if the organization answered "Yes" on For	m 990, Part IV, line	e 11d. See Form 9	
	(a) Description			(b) Book value
<u>(1)</u> (2)				
(3)	,			· · · · · · · · · · · · · · · · · · ·
(4)				
(5)		3		
(6)				
(7)				
(8)				
(9)			<del></del> -	
Part X	mn (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities.	• • • • • • •		0
	Complete if the organization answered "Yes" on For- line 25.	m 990, Part IV, line	11e or 11f. See	Form 990, Part X,
1.	(a) Description of liability			(b) Book value
(1) Federal in	come taxes			
(2)				
(3)				
(4) (5)			·	
<u>(6)</u>		<del></del>		
(7)			• • • • • • • • • • • • • • • • • • • •	
(8)				
(9)				
	nn (b) must equal Form 990, Part X, col. (B) line 25.)			0
	uncertain tax positions. In Part XIII, provide the text of the footnot liability for uncertain tax positions under FASB ASC 740. Check			

F	ao	A	4

Par	XI Reconciliation of Revenue per Audited Financial Statement		Return.
	Complete if the organization answered "Yes" on Form 990, I	Part IV, line 12a.	
1	Total revenue, gains, and other support per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	8	
a	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
ď	Other (Describe in Part XIII.)	2d	
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	ĺ	
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
ь	Other (Describe in Part XIII.)	4b	
	Add lines 4a and 4b		1 4c
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line		5
Part			
	Complete if the organization answered "Yes" on Form 990, F		
1	Total expenses and losses per audited financial statements		11
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		2723
a	Donated services and use of facilities	2a	
ь	Prior year adjustments	2b	1 1
c	Other losses	2c	
ď		2d	
	Add lines 2a through 2d		20
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	<b></b>	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
	Add lines 4a and 4b		46
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line		5
Part	XIII Supplemental Information.	<del></del>	<u> </u>
	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	4: Part IV, lines 1b and 2b	p; 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 t	to provide any additional in	formation.
	•••••••••••••••••••••••••••••••••••••••		
	••••••		
	**************************************		
		0	
		0	
		0	
		0	
		0	
		0	

Schedule D (For	n 990) 2019	Page 5
Part XIII	n 990) 2019 Supplemental Informati	n (continued)
		+
********		
	***************************************	
	<u></u>	
		100 pt 40 pt
		1 4 1 1 1 4 1 5 1 5 1 5 1 5 1 7 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	P84, 4	
		<u>ن</u>
	· · · · · · · · · · · · · · · · · ·	
•••••		
	***************************************	
		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~

#### SCHEDULE F (Form 990)

## **Statement of Activities Outside the United States**

OMB No. 1545-0047 2019

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

Open to Public

Department of the Treasury Internal Revenue Service

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

Inspection

Employer identification number Name of the organization Student Work Development Foundation, Inc. 51-0168187 Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b. 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to ☑ Yes □ No 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. 3 Activitles per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (c) Number of (a) Region (b) Number (d) Activities conducted in the (e) if activity listed in (d) is (f) Total employees, agents, and of offices in region (by type) (such as, expenditures for a program service, describe specific type of service(s) in the region fundraising, program services, investments, grants to recipients the region and investments independent in the region contractors in the region located in the region) (1) Europe Grant Making 0 113,576 (2) (3) (4)(5) (8) (7) (8) (9) (10)(11)(12)(13)(14)(15) (16) (17)Subtotal . . . . . . 0 0 113,576 b Total from continuation sheets to Part I . . . . 0 0 0

0

0

c Totals (add lines 3a and 3b)

113,576

Schedule F (Form 990) 2019

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. Part II

	(if applicable)		i in	,	disbursement	assistance	O TO COM TO SERVICE LANGE	(book, FMV, appraisal, other)
(4)		Europe	General Support	113,576	113,576 Electronically Transfe	0		
<b>(2)</b>								
<b>la</b>								
161								
(6)								
10								
0								
(0)								
(B)								
(1)								
<b>M</b>								
(13)						e		
(61)								
(49)								
(6)								
(63)								
	nber of recipier for which the g	rt organizations list	Enter total number of recipient organizations listed above that are recognized as charities by the forby the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	ognized as charities 1501(c)(3) equivaler	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ▶	y, recognized as ta	x-exempt ▼	_
3 Enter total nur	nber of other or	Enter total number of other organizations or entities	ties		• • • • • • • • • • • • • • • • • • • •		<b>A</b>	

Schedule F from 890) 2019

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.

Part III can be duplicated if additional space is needed.

Page	4

Part	lV Foreign Forms		
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 Instructions for Form 926)	Yes	☑ 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 Instructions for Forms 3520 and 3520-A; don't file with Form 990)	☐ Yes	☑ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)	☐ Yes	☑ 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? If "Yes," 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 Instructions for Form 8621)	☐ Yes	☑ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	☐ Yes	<b>☑</b> No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)	☐ Yes	☑ No

Dart !	7

Supplemental Information	Supr	leme	ntal Ini	format	ion
--------------------------	------	------	----------	--------	-----

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 1, Line 2
Student Work Development Foundation, Inc. grants funds only to foreign organizations similar in purpose to Student Work Develoment
Foundation, Inc., which are recoggnized as being charities by the foreign country and/or tax exempt by IRS. Student Work Development
Foundation, Inc., does not monitor the use of the funds by each foreign charitable organization but it does request that any foreign
charitable organization that Student Work Development foundation, Inc., makes grants to provide it with periodic reports as to how
the grant is being used in order to insure that such funds are being used for purposes similar to that of Student Work Development
Foundation, Inc. Student Work Development foundation, Inc., also make reasonable efforts to monitor the charitable or tax exempt
status of the foreign organization it grants funds to.
o

# SCHEDULE (Form 990)

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Open to Public Inspection

► Go to www.irs.gov/Form990 for the latest information. ► Attach to Form 990.

2019

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service		▼ Go to v	► Attach to Form 990. Go to www.ins.gov/Form990 for the latest information.	Form 990. 10 for the latest trifi	ormation.		Open to Public Inspection
Name of the organization						Employ	Employer identification number
Š	dation, inc.					<del></del>	51-0168187
Para General Informat	General Information on Grants and Assistance	Assistance					
1 Does the organization maintain records to substantiate the	aintain records to sub		int of the grants or	assistance, the g	rantees' eligibility fo	amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and	
ure selection criteria used to award the grants of assistance?  2 Describe in Part IV the organization's procedures for monitori	d to award the grants ganization's procedur	or assistance? es for monitoring	se? toring the use of grant funds in the United States.	nds in the United	States.		· · · · · · · · · · · · · · · · · · ·
Part II Grants and Other Part IV, line 21, for	Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	mestic Organiz received more th	ations and Dom an \$5,000. Part	estic Governm can be duplica	ents. Complete if	the organization ansvoace is needed.	Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.
1 (a) Name and address of organization or government	NG (2)	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal,	(g) Description of noncest assistance	(h) Purpose of grant
(1) OK Baptist Collegiate Ministries 1203 Elm Ave. Norman. OK 73072	Tes 73.062188		179 063	ľ			
(2) SWDF-Seminary P O Box 2100, Norman, OK 73070			000,70				General Support
(3) Trinity Baptist Church			001/16				General Support
901 N Peters, Norman, OK 73069	73-0658201		141,931				General Support
(5)							
(9)							
<u>D</u>		w				ย	
(8)							
(6)							
(10)							
(11)							
(12)	j 1						
<ul> <li>Enter total number of section 501(c)(3) and government organizations listed in the line 1 table</li> <li>Enter total number of other organizations listed in the line 1 table</li> </ul>	ttion 501(c)(3) and gover organizations listed	emment organizat in the line 1 table	tions listed in the li	ne 1 table			E 4
For Paperwork Reduction Act Notice, see the instructions for Form 890.	ice, see the Instruction	s for Form 990.		3	Cat. No. 50055P		Schedule I (Form 990) (2019)

Schedule I (F	Form 990) (2019)
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) Number of recipients	(c) Amount of oash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncesh assistance
2					
8					
4					
S					
9					
L		<u>-</u>			
Student Work Development Foundation, Inc., grants funds only to organizations similar in purpose to Student Work Development Foundation, Inc., grants funds only to organizations similar in purpose to Student Work Development Foundation, Inc., grants funds only to organizations similar in purpose to Student Work Development Foundation, Inc., grants funds only to organizations similar in purpose to Student Work Development Foundation, Inc., grants funds only to organizations similar in purpose to Student Work Development Foundation, Inc., grants and grants are	TO INTORMATION I	equired in Part I, IIn	e 2; Part III, column to Student Work Deve	(b); and any other additi	onal information.
recognized as being tax-exempt by the IRS. Student Work Development Foundation, Inc., does not monitor the use of the funds by such charitable organization	k Development Fou	ndation, inc., does not	monitor the use of the	funds by such charitable or	janization
but it does request that any charitable organization that Student	Student Work Devel	opment Foundation, In	c., makes grants to pro	Work Development Foundation, Inc., makes grants to provide it with periodic reports as to how	as to how
the grant is being used in order to insure that such funds are being used for purposes similar to that of Student Work Development Foundation, Inc. Student	are being used for	purposes similar to th	at of Student Work Dev	elopment Foundation, Inc. S	itudent
Work Development foundation, Incl. also make reasonable efforts to monitor the tax-exempt status of the organization it grants funds to.	le efforts to monito	r the tax-exempt status	of the organization it	grants funds to.	
	9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9				
			1 0 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		

Schadule I (Form 990) (2019)

#### **SCHEDULE J** (Form 990)

Department of the Treasury

Internal Revenue Service Name of the organization **Compensation Information** 

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
 ► Attach to Form 990.
 ► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

**Employer Identification number** 

Student Work Development Foundation, Inc. 51-0168187 **Questions Regarding Compensation** No Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. First-class or charter travel ☐ Housing allowance or residence for personal use ☐ Travel for companions Payments for business use of personal residence ☐ Tax Indemnification and gross-up payments Health or social club dues or initiation fees ☐ Discretionary spending account Personal services (such as maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or relmbursement or provision of all of the expenses described above? If "No," complete Part III to Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the Items checked on line 2 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. ☐ Compensation committee ☐ Written employment contract ☐ Independent compensation consultant ☐ Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: **4a** Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b c Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: 5a Any related organization? 5b · · · · · · · · · · · · · If "Yes" on line 5a or 5b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, dld the organization pay or accrue any compensation contingent on the net earnings of: 6а If "Yes" on line 6a or 6b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe If "Yes" on line 8, dld the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? 

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

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 (RAIL-AIII) for each listed individual must equal the total amount of Form 990. Part VII. Section A. line 1a annitrable column (D) and (E) amounts for that Individual

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	or eac	h listed individual mu	st equal the total amo	ount of Form 990, Pa	rt VII, Section A, line 1	a, applicable colum	ו (D) and (E) amounts (D) ו	for that Individual.
		(B) Breakdown of	W-2 and/or 1099-MIS	SC compensation	(C) Rettrement and	(D) Nontexable	(E) Total of columns	(F) Companisation
(A) Name and Title		(I) Base compensation	(II) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(a)-(a)(a)	in column (B) reported as deferred on prior Form 990
Max D Barrett	8	21,500	1 3	O	0	8	21.500	0
1President	8	0	## 1 4 4 1 1 4 1 4 4 4 4 4 4 4 4 4 4 4 4		0	0	0	
Pete Jackson	8	0	0	O	0	0	0	0
2Vice-President	8	0	0	0		0	0	0
Charlle Anne Cooksey	8	60,240	0	0	O	Ó	60,240	0
3Treasure	€	0		0		0	0	0_
Jennifer Slatter	€ :	0	0	0	0	0	0	C
4Secretary	ε	0		0		O	0	0
Charles Yohn	E	O	0	0	Ö	O	Ö	0
6Board Member	€	0		0	0	O	0	0
Dillion Pospisii	€	0	0	0	0	D	0	0
6Board Member	<b>a</b>	0		0	O	0	Ö	
John Hill	8	O	0	0	0	0	0	0
7Board Member	3	0		0	0	0	0	0
Michael Steward	8	48,065	0	0	0	O	48,065	0
8Key Employee	€	0	0	0		0	Ó	0
	8							
6	€							
3	8			v				0
10	E							
	8							
11	<b>E</b>							
	€ :							
12	€ 6							
;	8	000000000000000000000000000000000000000						774 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
13	€ 5							
	3 8							
14								
;	8							
QL	3 5							
16	3 8							
						,		

Schedule J (Form 990) 2019

#### **SCHEDULE 0** (Form'990 or 990-EZ)

### 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 990-EZ.

Department of the Treasury Internal Revenue Service Name of the organization

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

Open to Public Inspection Employer identification number

OMB No. 1545-0047

Student Work Development Foundation, Inc.	ø	51-0168187
Part III 4d Other Program Services Student Work Development Foundation	ation, inc. provides assistance to i	
the U. S. such as Connexxion Campus Ministries located in Europe to e		
Lord Jesus Christ and disciple them in the Word of God.		
Part VI, Governance Management and Disclosure, Section B, Line 11a at	nd Line 11b	
Student Work Development Foundation, Inc., provides the return prepar	er with a draft version for the Form	n 990 with all supporting
documentation for review, The return preparer: (1) reviews the Form 990	with all supporting docurmention	, (2) makes any changes
thereto, and (3) provides Student Work Development Foundation, Inc., w	rith the revised version of the Form	n 990 for Its review.
Student Work Development Foundation, Inc. distributes the revised ver-	sion of the Form 990 to the Preside	ent and Vice-President
and Board Members for review. If there are no changes to the Form 990,	then Student Work Development I	oundation, Inc. delivers
a final version of the Form 990 to an officer of Student Work Developme	nt Foundation, Inc. with signature	authority for his or her
signature. If there are changes to the Form 990, then the return preparer	makes such changes and provide	s Student Work Development
Fountaion, Inc. with a revised version of the Form 990 for review, approv	al and signature.	
Part VI, Governance, Management and Disclosure, Section C, Line 19		
Student Work Development Foundation, Inc. makes its governing docum	ents and financial statements ava	liable to the public by
providing members of the public with copies of any of these documents	upon request.	
Part XI Reconciliation of Net Assets, Line 9		
This change is the result of income and gain on investments and negotia	ble debt instruments.	
	8	

Schedule O (Form 990 or 990-EZ) (2018)	Page 2
Name of the organization	Employer identification number
	, x
	,,^^,u
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
6	
	, to a a
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	<u> </u>
***************************************	
	A
***************************************	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	, , , , , , , , , , , , , , , , , , ,