Department of the Treasury Internal Revenue Service

# Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public.

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

OMB No. 1545-0047 2020 Open to Public Inspection

<u>A</u>	For the 2020	calendar year, or tax year beginnin $rak{07}/01/20$ , and ending $rak{06}/30/20$	21	_	
В	Check if applicable:	C Name of organization		D Employe	r identification number
	Address change	Grace School of Theology			
$\overline{\Box}$	Name change	Doing business as		76-0	690847
	·	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephon	
	Initial return	3705 College Park Dr., Ste 140		877-	<u>476-8674                                    </u>
	Final return/ terminated	City or town, state or province, country, and ZIP or foreign postal code			
$\Box$		The Woodlands TX 77384-4894		<b>G</b> Gross rec	eipts\$ 6,038,036
Щ	Amended return	F Name and address of principal officer:		_	
	Application pending	Dave Anderson	H(a) Is this a g	roup return for	subordinates Yes X No
		3705 College Park Dr.	H(b) Are all su	bordinates inc	luded? Yes No
		The Woodlands TX 77384-4894	If "No	," attach a list.	See instructions
$\overline{}$	Tax-exempt status:			.1	
÷		ww.gsot.edu	H(a) Croup av		
<u>J</u>			H(c) Group ex		
	Form of organization		Year of formation: 2	ZOT)	State of legal domicile: <b>TX</b>
F	T	ımmary		1	
_		escribe the organization's mission or most significant activities:		<b>J</b>	
ဥ		levelop spiritual leaders in every nation who can			bout the
Jar	love	of Christ, a love that cannot be earned and can	no be lo	ost.	
Governance					
8	2 Check th	is box ▶ if the organization discontinued its operations or disposed of more bar	75% of its ne	t assets	
		of voting members of the governing body (Part VI, line 1a)		3	9
Ś	4 Number			4	8
ij	4 Number	of independent voting members of the governing body (Part VI, line 1b)			
Activities &	5 Total nu	mber of individuals employed in calendar year 2020 (Part V, line 2a)		5	65
Ac		mber of volunteers (estimate if necessary)		6	8
		related business revenue from Part VIII, column (C), line 12		7a	0
	<b>b</b> Net unre	lated business taxable income from Form 990-T, Part Lline 11		7b	0
			Prior Ye		Current Year
ē	8 Contribu	tions and grants (Part VIII, line 1h)		3,335	3,697,145
Revenue	<b>9</b> Program	service revenue (Part VIII, line 2g)	2,65	8,443	2,331,340
ě	10 Investme	ent income (Part VIII, column (A), lines 3, 4 and 7			0
œ	11 Other re	venue (Part VIII, column (A), lines 5, 6d, 8c, 5c, 16c, and 11e)	1	8,055	9,551
		enue – add lines 8 through 11 (must/equal Part VIII, column (A), line 12)		9,833	6,038,036
		nd similar amounts paid (Part IX, column (A), lines 1–3)		8,251	1,952,624
		paid to or for members (Part IX, column, A), line 4)		-,	0
"		other compensation, employee benefits (Part IX, column (A), lines 5–10)	2 63	0,759	3,014,064
Expenses	15 Salaries	outer compensation, employee benefits (Part IX, Column (A), lines 5–10)	2,03	0,139	<u> </u>
en	16aProlessi	onal fundraising fees (Part IX, Olumn (A), line 11e)			<u> </u>
×	<b>b</b> lotal fur	draising expenses (Pan X, o lumn (D), line 25) ▶ 244,202	1 66	4 100	0.60 41.6
ш	17 Other ex	penses (Part IX, column (A viines 11a–11d, 11f–24e)	1,66	4,100	962,416
		penses. Add lines 12–17 (must equal Part IX, column (A), line 25)		3,110	5,929,104
<del>_</del>	19 Revenue	e less expenses. Subtract line 18 from line 12		6,723	108,932
Net Assets or	3		Beginning of Cu		End of Year
sset	20 Total as:	***************************************		6,106	1,343,724
\$5.	21 Total lial	pilities (Nart X, line 26)		1,614	420,300
Ž	22 Net asse	ts or fund balances. Subtract line 21 from line 20	81	4,492	923,424
		gnature Block			
L	Inder penalties of	perjury, I declare that I have examined this return, including accompanying schedules and st	atements, and to	the best of	mv knowledge and belief, it
		complete. Declaration of preparer (other than officer) is based on all information of which prep			, ,
Qi,	gn 🕨 🖥	ignature of officer		Date	
	9   <u>′</u>		l ° 0		
не	ere		lv & Ope	ratio	ns
		ype or print name and title	1 _		
_		e preparer's name Preparer's signature	Date	Check	if PTIN
Pa	Dave I	Moja Dave Moja	05/16	5/22 self-em	· · · · · · · · · · · · · · · · · · ·
Pre	eparer Firm's na	me > Moja & Company		Firm's EIN	84-2519698
Us	e Only	P.O. Box 531			
	Firm's ac	D-1-111- CD 204E2		Phone no.	321-258-9907
Ma		ss this return with the preparer shown above? See instructions			X Yes No
	., II to aloou				22 103 140

Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III  Briefly describe the organization's mission:  To develop spiritual leaders in every nation who can teach others about 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.  Did the organization cease conducting, or make significant changes in how it conducts, any program services?  If "Yes," describe these changes on Schedule O.  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.	
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(Code: ) (Expenses \$ 5,398,218 including grants of \$ 1,952,624 ) (Revenue \$	)
ducation (Christian):	
e offer several different programs in Bible Theo ogy and Christian	
inistry: attended by approximately 830 students in the U.S. and nternationally.	
offer undergraduate, graduate, and doctoral degree programs and	
ertificate programs including: courses and or concentration in Bible	 <b>A</b>
sposition, theology, and Christian ministry skills.	<del>.</del>
6	
Code: ) (Expenses \$ including grants of \$ ) (Revenue \$	)
/A	
<b>y</b>	
• 6	
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Code: (Extrenses \$ including grants of \$ ) (Revenue \$	)
'A	
······································	
Other program services (Describe on Schedule O.)	
Other program services (Describe on Schedule O.) (Expenses \$ including grants of\$ ) (Revenue \$ )	

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
_	complete Schedule A	1	X	
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	_		v
4	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	4		
3	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
Ū	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		х
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		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes."			
	complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, se ve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted and downwents			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schoolule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, ine 10? If "Yes,"			
	complete Schedule D, Part VI	11a	X	
b	Did the organization report an amount for investments—other securities in rtx, line 12, that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Fart VII	11b		X
С	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in PartX line 15, that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule P Part IX	11d	X	77
e	Did the organization report an amount for other liabilities in part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated in ancial statements for the tax year include a footnote that addresses	11f		v
122	the organization's liability for uncertain tax positions order FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete</i>	111		X
12a	Schedule D, Parts XI and XII	12a	Х	
h	Was the organization included in co-solic sted, independent audited financial statements for the tax year? If	120	Λ	
b	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
13	Is the organization a school describe in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	X	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	X	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, Livesment, and program service activities outside the United States, or aggregate			
	foreign investments, alued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	X	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
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		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u> </u>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X

Form 990 (2020) Grace School of Theology 76-0690847 Page 4 Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on 22 X Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 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 X 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 X through 24d and complete Schedule K. If "No," go to line 25a 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 X 25a b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prig year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 900-⊟ X If "Yes," complete Schedule L, Part I 25b 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% X controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Par II 26 Did the organization provide a grant or other assistance to any current or former officer, died or dustee, 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 X persons? If "Yes," complete Schedule L, Part III 27 Was the organization a party to a business transaction with one of the following ties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions A current or former officer, director, trustee, key employee, creator of founder, or substantial contributor? If "Yes," complete Schedule L, Part IV 28a X b A family member of any individual described in line 28a? If "Yes, complete Schedule L, Part IV 28b A 35% controlled entity of one or more individuals and/or or anizations described in lines 28a or 28b? If 28c X "Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 ip non-ash contributions? If "Yes," complete Schedule M 29 29 Did the organization receive contributions of arth storical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 Did the organization liquidate, terminate, or issolve and cease operations? If "Yes," complete Schedule N, Part I 31 Did the organization sell, exchange, dispose of for transfer more than 25% of its net assets? If "Yes," X complete Schedule N, Part II 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7 01-3 If "Yes," complete Schedule R, Part I X 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, 34 X or IV, and Part V, line1 34 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? X 35a If "Yes" to line 35a, 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 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable X 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 X and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and X 19? Note: All Form 990 filers are required to complete Schedule O. Statements Regarding Other IRS Filings and Tax Compliance Part V Check if Schedule O contains a response or note to any line in this Part V Yes No 77 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable

Did the organization comply with backup withholding rules for reportable payments to vendors and

reportable gaming (gambling) winnings to prize winners?

Statements Regarding Other IRS Filings and Tax Compliance (continued) No Yes 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return X If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) Did the organization have unrelated business gross income of \$1,000 or more during the year? X 3a If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, X a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country ▶ **Philippines** See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? X 5a 5a Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b If "Yes" to line 5a or 5b, did the organization file Form 8886-T? Does the organization have annual gross receipts that are normally greater than \$100,000, and did the X organization solicit any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions of gifts were not tax deductible? 6b Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods X and services provided to the payor? 7a If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b Did the organization sell, exchange, or otherwise dispose of tangible personal property to which it was X required to file Form 8282? If "Yes," indicate the number of Forms 8282 filed during the year \_\_\_\_\_ Did the organization receive any funds, directly or indirectly, to pay premium personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f If the organization received a contribution of qualified intellectual present dig the organization file Form 8899 as required? 7g h If the organization received a contribution of cars, boats, airplanes or other vehicles, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the 8 sponsoring organization have excess business holdings at anytime during the year? Sponsoring organizations maintaining donor advised funds 9 Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a tonor, donor advisor, or related person? b 10 Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 10a Gross receipts, included on Form 990, Pal VIII line 12, for public use of club facilities b Section 501(c)(12) organizations. Enter Gross income from members or share, olders 11a Gross income from other sources (D) not net amounts due or paid to other sources against amounts due or received nom them.) 11b Section 4947(a)(1) pon xem x charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount or tax-exempt interest received or accrued during the year Section 501(c)(29) valified nonprofit health insurance issuers. 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. 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 13b **c** Enter the amount of reserves on hand X Did the organization receive any payments for indoor tanning services during the tax year? 14b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 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? X If "Yes," see instructions and file Form 4720, Schedule N. X Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.

Form 990 (2020) Grace School of Theology 76-0690847 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 9 Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. 8 Enter the number of voting members included on line 1a, above, who are independent 1b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with X any other officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors, trustees, or key employees to a management company or other person? X 3 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? b Are any governance decisions of the organization reserved to (or subject to approval by) members stockholders, or persons other than the governing body? X Did the organization contemporaneously document the meetings held or written actions und arken during the year by the following: The governing body? 8a Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who the organization's mailing address? If "Yes," provide the names and addresses on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code., No **10a** Did the organization have local chapters, branches, or affiliates? 10a X If "Yes," did the organization have written policies and procedures gove ning the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b Has the organization provided a complete copy of this Form 590 to all members of its governing body before filling the form? X 11a Describe in Schedule O the process, if any, used by the Arganization to review this Form 990. Did the organization have a written conflict of interest p licy of "No," go to line 13 X 12a Were officers, directors, or trustees, and key employees equired to disclose annually interests that could give rise to conflicts? 12b X c Did the organization regularly and consistently monity and enforce compliance with the policy? If "Yes," X describe in Schedule O how this was done 12c Did the organization have a written whistle lower policy? 13 13 Did the organization have a written locul ent retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability sata, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official X 15a Other officers or key employees of the organization X 15b If "Yes" to line 15 or 15b, describe the process in Schedule O (see instructions). Did the organization evest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? Х 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ None Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website **X** Upon request Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records

Daniel LaBry
The Woodlands

3705 College Park Dr

TX 77384-4894 713-897-8024

#### Form 990 (2020) Grace School of Theology

76-0690847

Page **7** 

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

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

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

- **1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See 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.

(A) Name and title	(B) Average hours per week (list any	CC    Position     (do not check more than one box, unless person is both an officer and a director/trustee)				is both	an	( <b>D</b> )  Reportable  compensation  from the  organization	Refortabl comp nsation from related orgalizations	(F) Estimated amount of other compensation from the	
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	W-2/(099-MISC)	organization and related organizations	
(1)Mark Albers	1 00										
Vice Chair/Treasurer	1.00	X		X					0	0	
(2) Dave Anderson	0.00	Λ		Λ			<u> </u>	()	<u> </u>	<u> </u>	
(=,====================================	40.00										
Trustee/President	0.00	X		X				0	0	0	
(3)Glenn Darby				•	(						
Chairman/massahaa	1.00								0	0	
Chairman/Trustee (4) Tim Dunn	0.00	X		-	_>			0	0	0	
(4) 11111 Duilli	1.00				1						
Trustee	0.00	X	7					0	0	0	
(5) Tracy Marshall	• •										
Trustee/Director	0.00	x						o	0	0	
(6) Scott McEwen	<b>1</b>	Λ						<u> </u>	<u> </u>	0	
(0) 20000 110211011	1.00										
Trustee	0.00	X						0	0	0	
(7) David Nickols											
	1.00										
Trustee /	0.00	X						0	0	0	
(8)Dian Sustek	1.00										
Trustee	0.00	X						0	0	0	
(9) Robert Tebow	0.00	Λ						<u> </u>	<u> </u>	0	
(9)1102010 102011	1.00										
Trustee	0.00	X						0	0	0	
(10)Daniel LaBry											
	40.00										
VP-Adv & Operations	0.00	1	1	X	l	1		0	0	0	

Forr	n 990 (20	20) Grace S	School of	Th	ec	10	ду	•		76-069	0847	Page
Pa	art VII	Section A. Office	cers, Directors, T	rust	ees,	Key	Em	ploy	ees/	, and Highest Compens	ated Employees (continu	ıed)
	(A) (B)  Name and title  Average hours per week (list any		bo	x, unle	Posi check r ess per nd a di	ition more rson	is both	an ee)	(D)  Reportable compensation from the organization	(E)  Reportable compensation from related organizations	(F) Estimated amount of other compensation from the	
			hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	organization and related organizations
											2	3
				-							Co	
				-						< e		
				-						cy,		
				-					<b>^</b>	0		
				-		•		<u>)                                    </u>				
1b	Subtota	al							<b></b>			
С	Total fr	om continuation	sheets to Part VI	I, Sd	tio	n A			<b>&gt;</b>			
d		add lines 1b and				<del>\</del>	<u></u>	1:-4-	<u> </u>		H #400 000 f	
2		ble compensation				NO IN	ose	iiste	u ar	pove) who received more	ınan \$100,000 oi	
3	employ	ee on line 1a? <i>If "</i> '	Yes," complei. Sci	hedu	le J	for su	uch	indiv	ridua	loyee, or highest compens		Yes No
4 5	organiz individu	ation and related o	organizations grea	ter th	nan S	\$150,	,000	)? If	"Yes	ation and other compensa s," complete Schedule J fo any unrelated organization	or such	4 X
	for serv	rices rendered to the	ne organization? I							e J for such person		5 X
		idependent Conti										
1										ontractors that received mendar year ending with or	within the organization's	tax year.
		Name	(A) e and business address							Descrip	(B) tion of services	( <b>C</b> ) Compensation
	Total nu	umber of independ	lent contractors (ir	nclud	ing t	out no	ot lir	nited	l to t	those listed above) who		
- ·		d more than \$100,									0	Form <b>99</b> 0 (20)

12	art V	Check if Schedule O cor	ntains a	a response	or no	ote to any line in	this Part VIII		
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts nts	1a	Federated campaigns	1a						
3ra iou	b	Membership dues	1b						
ts, (	c	Fundraising events	1c						
ag	d	Related organizations	1d						
in:	e	Government grants (contributions)	1e	1,654,	762				
ior	f	All other contributions, gifts, grants,		•					
the the		and similar amounts not included above	1f	2,042,	383				
EG.	q	Noncash contributions included in lines 1a-1f	1g \$						
Contributions, Gifts, Grants and Other Similar Amounts	h	Total. Add lines 1a–1f			<b>•</b>	3,697,145			
				Busines	s Code			B	
e	2a	Tuition and fees		611	L600	2,331,340	2,331,340		
Program Service Revenue	b								
n Sen	С								
Rev	d								
o_ _	е								
_	f	All other program service revenue							
	g	Total. Add lines 2a–2f			<b>•</b>	2,331,340	<del></del>		
	3	Investment income (including divide							
		other similar amounts)							
	4	Income from investment of tax-exem					<b>*</b>		
	5	Royalties	<u> </u>						
		(i) Real		(ii) Personal		2			
	_	Gross rents 6a Less: rental expenses 6b							
		Less: rental expenses 6b  Rental inc. or (loss) 6c							
	d	NI-4			$\neg$	, 7			
		Gross amount from (i) Securitie		(ii) Othe	-	/			
		sales of assets			7				
ě	b	other than inventory Less: cost or other							
eni	~	basis and sales exps. <b>7b</b>	<b>-</b>	( )'					
Other Revenue	С	Gain or (loss) 7c	1						
er		Net gain or (loss)		····	<b>•</b>				
돥		Gross income from fundraising events		)					
Ū		(not including \$							
		of contributions reported on line 1c)							
		See Part IV, line 18	8a						
	b	Less: direct expenses	8b						
	С	Net income or (loss) from fundraising	g events	S	<b>&gt;</b>				
	9a	Gross income from gaining activities.							
		See Part IV, line 19	9a						
	b	Less: direct expenses	9b						
		Net income or (loss) from gaming ac	tivities		•				
	10a	Gross sales of inventory, less							
		returns and allowances	10a						
		Less: cost of goods sold	10b						
_		Net income or (loss) from sales of in	ventory		<b>&gt;</b>				
Miscellaneous Revenue	۱.,				s Code	0			0
ne Tue	11a	Other revenue			0004	9,551			9,551
ella	b								<u> </u>
Re	C ,	All other revenue							
Σ		All other revenue				9,551			
	•	Total revenue. See instructions				6,038,036	2,331,340	0	9,551

# Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all column

	Check if Schedule O contains a resp			comprete column (r.y.	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C)  Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations		·	,	,
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	1,456,910	1,456,910		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16	495,714	495,714		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,			.1	
_	trustees, and key employees				
6	Compensation not included above to disqualified			<b>47</b>	
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	0 505 717	0.050.050	064	142 002
7	Other salaries and wages	2,595,717	2,259,850	191,964	143,903
8	Pension plan accruals and contributions (include				
•	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	418,347	365,259	23,091	30,097
10	Payroll taxes Fees for services (nonemployees):	410,347	363,234	23,091	30,091
11			<b>4 Y</b>		
a	Management				
b c					
d	Accounting Lobbying		2		
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
q					
9	(A) amount, list line 11g expenses on Schedule O.)	64.254	58,030	1,946	4,258
12	Advertising and promotion	21.897	21,628		4,258 269
13	Office expenses	\$,631	6,283	250	98
14	Information technology	363,871	296,792	34,617	32,462
15	Royalties		,	,	,
16	Occupancy	304,122	248,058	28,933	27,131
17	Travel	<b>J</b> 31,494	31,069	425	
18	Payments of travel or entertainmen, expenses	3			
	for any federal, state, or local public on cials				
19	Conferences, conventions, and meetings	1,274	1,138	75	61
20	Interest				
21	Payments to affiliates				
22	Depreciation, depretion, and amortization	47,447 13,378	39,610 13,378	3,902	3,935
23	Insurance	13,378	13,378		
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.)	100 000	104 500	1 401	1 000
a	Other	108,068	104,599	1,481	1,988
b					
C					
d	All other expenses				
e 25	All other expenses	5,929,104	5,398,218	286,684	244,202
25 26	Total functional expenses. Add lines 1 through 24e  Joint costs. Complete this line only if the	3,323,104	3,390,210	200,004	234,202
<u> -</u> U	organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here   if following SOP 98-2 (ASC 958-720)   if				

					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash—non-interest-bearing			344,506	1	508,406
	2	Savings and temporary cash investments			,	2	,
	3	Pledges and grants receivable, net	920,000	3	350,000		
	4	Accounts receivable, net			104,661	4	213,031
	5	Loans and other receivables from any current or fo	ormer officer. d	irector.	- ,	_	- /
		trustee, key employee, creator or founder, substar					
		controlled entity or family member of any of these				5	
	6	Loans and other receivables from other disqualifie					
ts		under section 4958(f)(1)), and persons described i		6			
Assets	7	Notes and loans receivable, net				7	
ğ	8	Inventories for sale or use					
	9	Prepaid expenses and deferred charges		9			
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	771,641	- A ( )	<b>&gt;</b>	
	b	Less: accumulated depreciation	10b	663,433	119,712	10c	108,208
	11	Investments—publicly traded securities				11	
	12	Investments—other securities. See Part IV, line 11				12	
	13	Investments—program-related. See Part IV, line 1	1		0.	13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			137,227	15	164,079
	16	<b>Total assets.</b> Add lines 1 through 15 (must equal	line 33)		1,626,106	16	1,343,724
	17	Accounts payable and accrued expenses			208,231	17	28,739
	18	Grants payable		<u></u>		18	
	19	Deferred revenue			62,021	19	197,191
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete Pa				21	
ies	22	Loans and other payables to any current or former					
Ħ		trustee, key employee, creator or founder, substar					
Liabilities		controlled entity or family member of any of these	persons			22	
_		Secured mortgages and notes payable to unrelate			F.41 2.60	23	104 270
	24	Unsecured notes and loans payable to unrelated to			541,362	24	194,370
	25	Other liabilities (including federal income tax, pa					
		parties, and other liabilities not included in lines 1	7-24). Complet	te Part X			
		of Schedule D			011 614	25	420 200
	26	Total liabilities. Add lines 17 th ough 25	<b>v</b>		811,614	26	420,300
es		Organizations that follow FASB, SC 958, chec	k nere 🔼				
anc		and complete lines 27, 2c, 32, and 33.  Net assets without done restrictions			914 402	07	022 424
3al	27 28	Not assets with dense restrictions			814,492	27	923,424
<u>Б</u>	28	Net assets with donor restrictions  Organizations that do not follow FASB ASC 95			28		
Ī		and complete lines 29 through 33.	b, check here				
Net Assets or Fund Balances	29	Capital stock or trust principal, or current funds				29	
ets	30	Paid-in or capital surplus, or land, building, or equi	nment fund			30	
\SS	31	Retained earnings, endowment, accumulated inco		undo		31	
¥.	32				814,492		923,424
	J-2	Total liabilities and net assets/fund balances			1,626,106		1,343,724

Form **990** (2020)

Pa	art XI Reconciliation of Net Assets			
	Check if Schedule O contains a response or note to any line in this Part XI			X
1	Total revenue (must equal Part VIII, column (A), line 12)	6,03	38,0	<u> 36</u>
2	Total expenses (must equal Part IX, column (A), line 25)	5,92	29,:	104
3	Revenue less expenses. Subtract line 2 from line 1	10	)8,9	<u>932</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	81	4,4	<u>492</u>
5	Net unrealized gains (losses) on investments 5			
6	Donated services and use of facilities 6			
7	Investment expenses 7			
8	Prior period adjustments			
9	Other changes in net assets or fund balances (explain on Schedule O)			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line			
	32, column (B)) 10	92	23,4	<u> 124</u>
Pa	art XII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII			
			Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other	_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			
	Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	. 2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or			
	reviewed on a separate basis, consolidated basis, or both:			
	Separate basis Consolidated basis Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year we're audited on a			
	separate basis, consolidated basis, or both:			
	X Separate basis Consolidated basis Both consolidated and separate basis			
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			l
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	. 2c	X	
	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 requirer to undergo an audit or audits as set forth in the			l
	Single Audit Act and OMB Circular A-133?	3a	X	<del> </del>
b	If "Yes," did the organization undergo the required audi or a dits? If the organization did not undergo the			
	required audit or audits, explain why on Schedul O and describe any steps taken to undergo such audits	. 3b	X	
		Form	₁ <b>ઝ</b> 90	(2020)

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

Department of the Treasury Internal Revenue Service

# **Public Charity Status and Public Support**

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

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Grace School of Theology

Employer identification number 76-0690847

			01400 0000	_ 000_09;				<del></del>
Pa	art l	l Reas	on for Public Charit	<b>y Status.</b> (All organizatio	ons mus	st comp	lete this part.) See instr	uctions.
The	orga	nization is no	ot a private foundation beca	use it is: (For lines 1 through 1	I2, check	only one	box.)	
1		A church, co	onvention of churches, or a	ssociation of churches describe	ed in <b>sec</b>	tion 170	(b)(1)(A)(i).	
2	X	A school des	scribed in section 170(b)(1	)(A)(ii). (Attach Schedule E (F	orm 990	or 990-E	Z).)	
3		A hospital or	r a cooperative hospital ser	vice organization described in	section	170(b)(1	)(A)(iii).	
4	П	A medical re	esearch organization opera	ted in conjunction with a hospit	tal descril	bed in <b>se</b>	ction 170(b)(1)(A)(iii). Enter	the hospital's name,
		city, and stat	te:					
5		An organizat	tion operated for the benefi	t of a college or university own	ed or ope	erated by	a governmental unit describ	ęd in
	_	section 170	(b)(1)(A)(iv). (Complete Pa	art II.)				7
6		A federal, st	ate, or local government or	governmental unit described i	n <b>sectio</b> i	n 170(b)(	1)(A)(v).	7
7			tion that normally receives section 170(b)(1)(A)(vi).	a substantial part of its suppor (Complete Part II.)	t from a g	governme	ental unit or from the gane al p	oublic
8				170(b)(1)(A)(vi). (Complete F	Part II.)			
9	П	-	·	escribed in section 170(b)(1)(	-	erated in	conjunction with a land-grant	college
		or university university:	or a non-land-grant colleg	e of agriculture (see instruction	ıs). Enter	the nam	e, city, and etate of the colleg	e or
10		receipts fron	n activities related to its exe	(1) more than 33 1/3% of its sempt functions, subject to certal and unrelated business taxable	ain excep	tions; and	d (2) no more than 331/3% of	its
		acquired by	the organization after June	30, 1975. See <b>section 509(a)</b>	(2). (Con	nple. Pa	irt III.)	3
11				d exclusively to test for public				
12	П			d exclusively for the benefit of,				ourposes
		of one or mo	ore publicly supported orga	nizations described in <b>section</b>	509(a)/1	or <b>sect</b>	ion 509(a)(2). See section 5	09(a)(3).
		Check the bo	ox in lines 12a through 12d	that describes the type of sup	porting o	rganizati	on and complete lines 12e, 12	2f, and 12g.
	а			perated, supervised, or contro				y giving
				ower to regularly appoint or ele		ority of th	e directors or trustees of the	
			= =	complete Part IV Sections A				
	b			supervised of column in con				
		control o	or management of the supp	orting organization vested in the Part IV, Sections A and C.	ne same p	persons t	hat control or manage the sup	oported
	_			supporting o ganization opera	atad in aa	nnootion	with and functionally integra	tod with
	С	its suppo	orted organization(s) (see in	nstruction. You must complete	ete Part	IV. Secti	ons A. D. and E.	ieu wiiri,
	d			A supporting organization				nization(s)
				he organization generally must				
		requirem	nent (see instructions).	must complete Part IV, Sect	tions A a	ınd D, ar	d Part V.	
	е	Check th	nis box if the organization r	ceived a written determination	n from the	IRS tha	t it is a Type I, Type II, Type I	II
	_			on-functionally integrated supp	porting or	ganizatio	n.	
	f		mber of support d organization					
	g			the supported organization(s).	1			
(i)		e of supported	(ii) PlN	(iii) Type of organization (described on lines 1–10		organization ur governing		(vi) Amount of other support (see
	Oig	gariization		above (see instructions))		ment?	instructions)	instructions)
			<b>Y</b>		Yes	No	ŕ	,
(A)								
` '								
(B)								
(C)								
. ,								
(D)								
. ,								
(E)								
Γota	ı							

Schedule A (Form 990 or 990-EZ) 2020

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2016 **(b)** 2017 (c) 2018 (d) 2019 (e) 2020 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 3,413,583 4,206,756 4,660,234 3,973,335 3,697,145 19,951,053 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 ..... 3,413,583 4,206,756 4,660,234 3,973,335 145 19,951,053 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 from line 4 19,951,053 Section B. Total Support Calendar year (or fiscal year beginning in) (**d**) 2019 (a) 2016 (b) 2017 (c) 2018 (e) 2020 (f) Total Amounts from line 4 3,413,583 4,206,756 3,973,335 3,697,145 19,951,053 Gross income from interest, dividends, payments received on securities loans. rents, royalties, and income from 94 similar sources Net income from unrelated business activities, whether or not the business 15,458 8,551 24,009 is regularly carried on ..... Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) ..... 11 **Total support.** Add lines 7 through 10 19,975,156 12 Gross receipts from related activities, etc. (see in structions) 12 4,423,132 13 First 5 years. If the Form 990 is for the organization surst, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here-Section C. Computation of Public Support Percentage Public support percentage for 2020 (line column (f) divided by line 11, column (f)) 14 99.88% 14 Public support percentage from 2019 chedule A, Part II, line 14 33 1/3% support test—2020. the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization b 33 1/3% support test 2019. The organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stor hers**. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circ instances test—2020. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 10%-facts-and-circumstances test—2019. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported

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

18

Page 3

Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

Sec	tion A. Public Support			•			
Caler	ndar year (or fiscal year beginning in)	(a) 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) 2020	(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					1	
5	The value of services or facilities furnished by a governmental unit to the organization without charge					6,	
6	Total. Add lines 1 through 5					, ,	
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year			(	<b>ರ</b>		
C	Add lines 7a and 7b			~ ~			
8	<b>Public support.</b> (Subtract line 7c from line 6.)						
Sec	tion B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2016	(b) 2 17	<b>(c)</b> 2018	(d) 2019	(e) 2020	(f) Total
9	Amounts from line 6	(0) = 0.10	(1)/2	(0) = 0.10	(0, 2010	(0) = 0 = 0	(-)
10a		•_	50				
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	0	<b>Y</b>				
С	Add lines 10a and 10b	<u> </u>					
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	<u> </u>					
12	Other income. Do not include gain o loss from the sale of capital assets (Explain in Part VI.)						
13	<b>Total support.</b> (Add in es 9.10c, 11, and 12.)						
14	First 5 years. If the Frm 990 is for the co	organization's firs	t, second, third, fo	ourth, or fifth tax y	ear as a section 5	01(c)(3)	
	organization, check this box and stop he						· · · · · · · · · · · · · · · · · · ·
Sec	tion C. Computation of Public S						
15	Public support percentage for 2020 (line						%
16 Car	Public support percentage from 2019 Scl					16	%_
	tion D. Computation of Investm			- 40 l (f\)		47	0/
17 19 In	Investment income percentage for 2020					10	%
	vestment income percentage from 2019 S 33 1/3% support tests—2020. If the org				 15 is more than 3'		%
19a	17 is not more than 33 1/3%, check this b						▶ □
b	33 1/3% support tests—2019. If the org	-	-			-	
-	line 18 is not more than 33 1/3%, check t						
20	Private foundation. If the organization d	-	_			-	

#### **Supporting Organizations** Part IV

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

### Section A. All Supporting Organizations

- Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer 3a lines 3b and 3c below.
- Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and b satisfied the public support tests under section 509(a)(2)? If "Yes." describe in Part VI when and how the organization made the determination.
- Did the organization ensure that all support to such organizations was used exclusively for section 170(o purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- Was any supported organization not organized in the United States ("foreign supported organiza "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign b supported organization? If "Yes." describe in Part VI how the organization had such control despite being controlled or supervised by or in connection with its supported organizations
- Did the organization support any foreign supported organization that does not have as IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what court is the organization used to ensure that all support to the foreign supported organization was used e longery for section 170(c)(2)(B)
- Did the organization add, substitute, or remove any supported organization 5a during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detai 🍅 🏞 🚺, 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).
- Type I or Type II only. Was any added or substituted sup orted organization part of a class already designated in the organization's organizing document?
- Substitutions only. Was the substitution the result of an event beyond the organization's control? С
- 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.
- Did the organization provide gran, loan, compensation, or other similar payment to a substantial contributor (as defined in section 495(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).
- Did the organization hake 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).
- Was the organization controlled directly or indirectly at any time during the tax year by one or more 9a disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- Did one or more disgualified 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 Part VI.
- 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 Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
  - Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

		Yes	No
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	3b		
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Schedu	ule A (Form 990 or 990-EZ) 2020 Grace School of Theology 76-069084	17		Page <b>5</b>
Par	t IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in lines 11b and	44-		
<b>L</b>	11c below, the governing body of a supported organization?	11a		
	A family member of a person described in line 11a above?  A 35% controlled entity of a person described in line 11a or 11b above? If "Ves" to line 11a, 11b, or 11a, provide	11b		
С	A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in <b>Part VI</b> .	11c		
Sect	ion B. Type I Supporting Organizations	110		
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supporte	ď		
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sect	on C. Type II Supporting Organizations			
	7.1		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in art VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
Soct	the supported organization(s). ion D. All Type III Supporting Organizations	1		
Seci	ion b. All Type III Supporting Organizations		Yes	Na
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		162	No
•	organization's tax year, (i) a written notice describing the type and an ount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed at of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date or potitication, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	-		
	organization(s) or (ii) serving on the governing body of a sypported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in line 2, a cye, did the organization's supported organizations have			
	a significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the 1 x year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sect	on E. Type III Functionally-integrated Supporting Organizations			
1	Check the box next to the me hod hat the organization used to satisfy the Integral Part Test during the year (see instruct	ions).		
a	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization in the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a governmental entity (see	instruc		
2	Activities Test. An over lines 2a and 2b below.		Yes	No
а	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>			
	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		
b	Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement,	Za		
D	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. <i>Answer lines 3a and 3b below.</i>	_~		
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No," provide details in <b>Part VI.</b>	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
_	of its supported organizations? If "Yes," describe in <b>Part VI</b> the role played by the organization in this regard.	3b		

Sched	ule A (Form 990 or 990-EZ) 2020 Grace School of Theology		76-0690	847	Page <b>6</b>
Pai	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting O	rgan	izations		
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on	Nov.	20, 1970 (explain in <b>Part</b>	VI). See	
	instructions. All other Type III non-functionally integrated supporting organizations in	must c	complete Sections A throu	gh E.	
Sec	tion A – Adjusted Net Income		(A) Prior Year	` '	ent Year onal)
1	Net short-term capital gain	1			
2	Recoveries of prior-year distributions	2			
3	Other gross income (see instructions)	3			
4	Add lines 1 through 3.	4			
5	Depreciation and depletion	5			
6	Portion of operating expenses paid or incurred for production or collection of				
	gross income or for management, conservation, or maintenance of property				
	held for production of income (see instructions)	6			
7	Other expenses (see instructions)	7			
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8			
Sec	tion B – Minimum Asset Amount		(A) Prior X ar		ent Year onal)
1	Aggregate fair market value of all non-exempt-use assets (see		7 ( ) 7		
	instructions for short tax year or assets held for part of year):				
a	Average monthly value of securities	1a			
k	Average monthly cash balances	1b			
C	: Fair market value of other non-exempt-use assets	10			
	Total (add lines 1a, 1b, and 1c)	1			
•	Discount claimed for blockage or other factors				
	(explain in detail in <b>Part VI</b> ):				
2	Acquisition indebtedness applicable to non-exempt-use assets	2			
3	Subtract line 2 from line 1d.	3			
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater arround),				
	see instructions).	4			
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5			
6	Multiply line 5 by 0.035.	6			
7	Recoveries of prior-year distributions	7			
8	Minimum Asset Amount (add line 7 to line 6)	8			
Sec	tion C – Distributable Amount			Curre	nt Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1			
2	Enter 0.85 of line 1.	2			
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3			
4	Enter greater of line 2 or line 3.	4			
5	Income tax imposed in prior year	5			
6	Distributable Amount. Subtract line 5 from line 4, unless subject to				
	emergency temporary reduction, see instructions).	6			
					· · · · · · · · · · · · · · · · · · ·

current war is the organization's first as a non-functionally integrated Type III supporting organization

Schedule A (Form 990 or 990-EZ) 2020

Par	t V Type III Non-Functionally Integrated 509(a)(3)	) Supporting Organ	izations (continued)	
Sect	ion D – Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exempt pur			
2	Amounts paid to perform activity that directly furthers exempt purpos	ses of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purposes of su	pported organizations		
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required—provide of	details in <b>Part VI</b> )		
6	Other distributions (describe in <b>Part VI</b> ). See instructions.			
7	<b>Total annual distributions.</b> Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the organ	nization is responsive		
	(provide details in <b>Part VI</b> ). See instructions.			
9	Distributable amount for 2020 from Section C, line 6		1	
10	Line 8 amount divided by line 9 amount	l I		
Sect	ion E – Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pri -202	(iii) Distributable Amount for 2020
1	Distributable amount for 2020 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2020 (reasonable cause required– <i>explain in Part VI</i> ). See instructions.			
3	Excess distributions carryover, if any, to 2020	.(/	1	
	From 2015	A	<del>,</del>	
	From 2016	A Y		
	From 2017	AY		
	From 2018			
	From 2019	20		
f	Total of lines 3a through 3e			
	Applied to underdistributions of prior years			
h	Applied to 2020 distributable amount	7		
i	Carryover from 2015 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2020 from			
	Section D, line 7:			
а	Applied to underdistributions of prior years			
b	Applied to 2020 distributable amount			
С	Remainder. Subtract lines 4a and 4 from line 4.			
5	Remaining underdistributions for years prior to 2020, if			
	any. Subtract lines 3g and 4a from the 2. For result			
	greater than zero, explain in Fart 1. See instructions.			
6	Remaining underdistributions is: 2020 Subtract lines 3h			
	and 4b from line 1. For result creater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2021. Add lines 3j and 4c.			
8	Breakdown of line 7:			
а	Excess from 2016			
b	Excess from 2017			
С	Excess from 2018			
d	Excess from 2019			
е	Excess from 2020			

Schedule A (Form 990 or 990-EZ) 2020

Schedule A (Fo	rm 990 or 990-EZ) 2020	Grace Schoo	l of Theolog	ay .	76-0690847	Page 8
Part VI	Supplemental Inf	formation. Provide the	he explanations red	quired by Part II, lin	76-0690847 le 10; Part II, line 17a	or 17b; Part
	III, line 12; Part IV	, Section A, lines 1, 2	2, 3b, 3c, 4b, 4c, 5a	a, 6, 9a, 9b, 9c, 11	a, 11b, and 11c; Part l' Part IV, Section E, lind	V, Section
	3a. and 3b: Part V	/. line 1: Part V. Sect	ion B. line 1e: Part	V. Section D. lines	5, 6, and 8; and Part	V. Section E
	lines 2, 5, and 6. A	Also complete this pa	art for any additiona	al information. (See	instructions.)	
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	<b>y</b>					

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service Name of the organization

#### Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

**Employer identification number** 

76-0690847 Grace School of Theology Organization type (check one): Filers of: Section: Form 990 or 990-EZ **X** 501(c)( 3 ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the Qeneral Rule and a Special Rule. See instructions. **General Rule** g the year, contributions totaling \$5,000 For an organization filing Form 990, 990-EZ, or 990-PF that receive or more (in money or property) from any one contributor. Complete Pars I and II. See instructions for determining a contributor's total contributions. **Special Rules** X For an organization described in section 501(c) filing Form 990 or 990-EZ that met the 33<sup>1</sup>/<sub>3</sub>% support test of the regulations under sections 509(a)(1) and 170(b)(1) (vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

contributor, during the year, tal contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational pun oses, or for the prevention of cruelty to children or animals. Complete Parts I (entering

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one

contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year

contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such

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

"N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in sec

Schedule B (Form 990, 990-EZ, or 990-PF) (2020)

#### **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

## Supplemental Financial Statements

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

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

Open to Public

Inspection

Name of the organization Employer identification number Grace School of Theology 76-0690847 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year ..... Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Yes Part II **Conservation Easements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education Preservation or a historically important land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements 2a **b** Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included it 2c d Number of conservation easements included in (c) acquired after 7/25/65, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation ear ement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easily ents it holds? Staff and volunteer hours devoted to monitoming, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii) In Part XIII, describe book the diganization reports conservation easements in its revenue and expense statement and balance sheet, and include, mapplicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X.

Pa	art III Organizations Maintaining Collec	tions of Art	, Historical Treasures	, or Other Similar As	sets (continued)
3	Using the organization's acquisition, accession, and o collection items (check all that apply):				,
а			r exchange program		
b		e Other			
C					
4	Provide a description of the organization's collections XIII.	and explain nov	w they further the organization	n's exempt purpose in Par	Į.
5		donations of ar	t historical treasures or othe	r eimilar	
3	During the year, did the organization solicit or receive assets to be sold to raise funds rather than to be mair				☐ Yes ☐ No
Pa	art IV Escrow and Custodial Arrangeme		Title organization 3 concettor	·	103 140
	Complete if the organization answe		Form 990, Part IV, line	e 9, or reported an an	nount on Form
10	990, Part X, line 21.		far aantributiana ar athar aaa	ata nat	
та	Is the organization an agent, trustee, custodian or oth included on Form 990, Part X?	•		ets not	Yes No
h	If "Yes," explain the arrangement in Part XIII and com		 na tahle:		l res l NO
	Tes, explain the arrangement in rate XIII and com	piete trie followi	ng table.	-4 <del>-7-</del>	Amount
С	Beginning balance				
d	Additions during the year			1d	
е	Distributions during the year			1e	
f	Ending balance			1f	
	Did the organization include an amount on Form 990,	Part X, line 21,	for escrow or custodial accou		Yes No
	If "Yes," explain the arrangement in Part XIII. Check h	ere if the explar	nation has been project or	Part XIII	
Pa	art V Endowment Funds.	rad "Vaa" an	Form 000 Tart I/ line	. 10	
	Complete if the organization answe		) Prior year c) Two years I		(e) Four years back
12	Beginning of year balance	i year (b	(c) Two years I	dack (u) Three years back	(e) Four years back
h	Contributions		~		
c	Net investment earnings, gains, and	<b>A</b>			
	losses				
d	Grants or scholarships		1		
е		. 6			
	programs				
f	Administrative expenses	/>_			
g	End of year balance	<i>)</i>			
2	Provide the estimated percentage of the current year	end balance (lin	ie 1g, column (a)) held as:		
	Board designated or quasi-endowment ►  Permanent endowment ►  %	%			
	Term endowment ▶ %				
·	The percentages on lines 2a, 2b, and 2c should equa	I 100%			
3a	Are there endowment funds not in the possession of t		that are held and administere	ed for the	
	organization by:	o.ga <u>_</u> a			Yes No
	(i) Unrelated organizations				3a(i)
	(ii) Related organizations				3a(ii)
b	If "Yes" on line 3a(ii), are the related organizations list				3b
4	Describe in Part XIII the intended uses of the organization		ent funds.		
Pa	art VI Land, Buildings, and Equipment.		E 000 D (IV/I'	44 0 5 000	D 1 V 1 10
	Complete if the organization answer				
		st or other basis nvestment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
10	Lland		(Salot)	35p.33idilo11	
	Buildings				
	: Leasehold improvements		124,404	117,649	6,755
	Equipment		604,331	517,802	86,529
	Other		42,906	27,982	14,924
Tota	al. Add lines 1a through 1e. (Column (d) must equal For	rm 990, Part X.		, <b>b</b>	108,208

Part VII	Investments – Other Securities.	- 5 000 Dort IV	/ line 44h Con Farm 000	Dowl V line 40
	Complete if the organization answered "Yes" o			
	(a) Description of security or category	(b) Book value	(c) Method of va	
	(including name of security)		Cost or end-of-year r	narket value
(1) Financial				
	eld equity interests			
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)			A	
(H)				
	n (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII	Investments – Program Related.		<b>A</b>	
Part VIII		n Form OOO Dort IV	/ line 11e (20 To 100)	Dort V line 12
	Complete if the organization answered "Yes" o			
	(a) Description of investment	(b) Book value	(c) Method of va	
			Cost or end-of-year r	narket value
(1)				
(2)			<u> </u>	
(3)		. •		
(4)		. 1		
(5)				
(6)		. 1		
(7)		6		
(8)				
(9)	<b>*</b>			
	n (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX	Other Assets.			
raitix	Complete if the organization answered "Yes" of	Earm 000 Part IV	/ line 11d See Form 00/	Dart V line 15
		II FUIII 990, Fait IV	7, line 11d. See Form 990	
	(a) Description			(b) Book value
(1)	Prepaid expenses			145,457
(2)	Security deposit			15,642
(3)	Other			2,980
(4)				
(5)	• • •			
(6)	11.			
(7)				
(8)	<b>***</b>			
(9)				
	n (b) must equal Form 390, Part X, col. (B) line 15.)		•	164,079
Part X	Other Lia lilities.			201/0/3
raitA	Complex if the organization answered "Yes" or	n Form 000 Part IV	/ line 11e or 11f See Fo	rm 000 Part X
	line 25.	iii oiiii 990, i ait i	7, III C 1 1 C OI 1 11. OCC 1 C	iiii 330, i ait X,
				(h) Daalassalas
1.	(a) Description of liability			(b) Book value
	income taxes			
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	n (b) must equal Form 990, Part X, col. (B) line 25.)		<b>.</b>	
	uncertain tax positions. In Part XIII, provide the text of the fo	ontrote to the organizati	on's financial statements that re	enorts the
-	liability for uncertain tax positions under FASB ASC 740. Cl	•		
organizations	navinty for uncertain tax positions under FASD ASC 740. Cl	ICCV HEIGH HILE TEXT OF IL	ie iootiiote nas been provided i	ιι ι αιι ΛΙΙΙ

Schedule D (Form 990) 2020 Grace School of Theology		76-069084	7	Page 4
Part XI Reconciliation of Revenue per Audited Financial State				
Complete if the organization answered "Yes" on Form 99	90, Part IV	′, line 12a.		
1 Total revenue, gains, and other support per audited financial statements			1	4,581,126
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a Net unrealized gains (losses) on investments	2a			
<b>b</b> Donated services and use of facilities	2b			
c Recoveries of prior year grants	2c			
d Other (Describe in Part XIII.)	2d			
e Add lines 2a through 2d			2e	
3 Subtract line 2e from line 1			3	4,581,126
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
a Investment expenses not included on Form 990, Part VIII, line 7b		1 156 010		
<b>b</b> Other (Describe in Part XIII.)	4b	1,456,910		1 456 010
c Add lines 4a and 4b			4c	1,456,910
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)				6,038,036
Part XII Reconciliation of Expenses per Audited Financial Sta			e Reg	urn.
Complete if the organization answered "Yes" on Form 99		, line 12a.	<del></del>	4,472,194
1 Total expenses and losses per audited financial statements			7	4,4/2,194
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:	ا ءو ا			
a Donated services and use of facilities				
b Prior year adjustments	2D			
c Other losses	2d			
d Other (Describe in Part XIII.)	20		2e	
<ul><li>e Add lines 2a through 2d</li><li>3 Subtract line 2e from line 1</li></ul>		• · · · · · · · · · · · · · · · · · · ·	3	4,472,194
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:				
a Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b Other (Describe in Part XIII.)	4b	1,456,910		
c Add lines 4a and 4b	1		4c	1,456,910
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Port I, line 18.)			5	5,929,104
Part XIII Supplemental Information.				
Provide the descriptions required for Part II, lines 3, 5, and 9; Part III lines 1a and 4; F	Part IV, lines	1b and 2b; Part V, line	4; Part	X, line
2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to pro				
Part XI, Line 4b - Revenue Alounts Includ			her	
Scholarships			\$	1,456,910
•				
Part XII, Line 4b - Expense Amounts Inclu	ided or	n Return - C	ther	<u>.</u>
<b>(V)</b>				
Scholarships			Ş	1,456,910
*				
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•				

Page 4

Schedule D (F	Form 990) 2020	Grace	School	of Theo: tinued)	logy	76-06	90847	Page <b>5</b>
Part XIII	Suppleme	ntal Inforn	nation (con	tinued)				
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#### **SCHEDULE E**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Schools

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2020

Open to Public Inspection

#### Name of the organization Grace School of Theology

Employer identification number 76-0690847

Pa	art i		YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	1	х	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	Х	
3	Has the organization publicized its racially nondiscriminatory policy on its primary publicly accessible Internet homepage at all times during its taxable year in a manner reasonably expected to be noticed by visitors to the homepage, or through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain. If you need more space, use Part II Posted on website	3	X	
	> () Y			
4	Does the organization maintain the following?			
а	Records indicating the racial composition of the student body, faculty, and administrative standard composition of the student body.	4a	X	
b	Records documenting that scholarships and other financial assistance are awarded on a recially nondiscriminatory basis?	4b	х	
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4c	х	
d	Copies of all material used by the organization or on its behalf to solicit contributions?  If you answered "No" to any of the above, please explain. If you need mire s, ace, use Part II.	4d	Х	
	······································			
5	Does the organization discriminate by race in any way with per to:			
а	Students' rights or privileges?	5a		Х
b	Admissions policies?	5b		х
С	Employment of faculty or administrative st ff?	5c		х
d	Scholarships or other financial assistance:	5d		х
е	Educational policies?	5e		х
f	Use of facilities?	5f		Х
g	Athletic programs?	5g		X
h	Other extracurricular activities?	5h		х
	If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.			
6a	Does the organization receive any financial aid or assistance from a governmental agency?	6a		Х
b	Has the organization's right to such aid ever been revoked or suspended?	6b		Х
_	If you answered "Yes" on either line 6a or line 6b, explain on Part II.			
7	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Part II	7	Х	

Part II	Supplemental Information. Provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also provide any other additional information. See instructions.
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	<b>y</b>
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#### SCHEDULE F (Form 990)

Statement of Activities Outside the United States

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

► Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. ► Attach to Form 990. 2020

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

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

Employer identification number 76-0690847

Da	art I Ge		n on Activities			ojuo4 /
Pa		rm 990, Part IV, line		Outside the United State	<b>35.</b> Complete ii the organiz	alion answered res on
1				cords to substantiate the amount	of its grants and	
			ibility for the grants	or assistance, and the selection	criteria used to	
	award the gr	ants or assistance?				X Yes No
2	_		V the organization	's procedures for monitoring the	use of its grants and other ass	sistance
	outside the U	Jnited States.				.1
3	Activities per	Region. (The following	g Part I, line 3 table	can be duplicated if additional s	pace is needed.)	
	(a) Region	(b) Number of offices in	(c) Number of employees,	(d) Activities conducted in the region (by type) (such as,	(e) If activity listed in (d) is a program service	(f) Total expenditures for
		the region	agents, and independent	fundraising, program services, investments, grants to recipients	describe specific type service(s) if the region	and investments in the region
			contractors in the region	located in the region)		
As	sia					
(1)		1		1 Ministry	Grants	495,714
(2)						
(2)						
(3)				^		
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(4)						
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(11)		X	),			
(12)						
(13)						
		7				
(14)						
(15)						
(13)						
(16)						
(17)	ubtotal	1		1		495,714
	otal from continuation			-		493,714
	neets to Part I					
	otals (add					

495,714

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
				Ministry	495,714	Wire & Cas	h 🔏		
(1)									
<b>/2</b> \						A.	7)		
(2)							<del>\</del>		
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(15)			~ ×						
(16)		4							
	nter total number of re	ecipient organization	ns livied above th	nat are recognized as charities by	the foreign country, recog	nized as a tax			
				grantee or counsel has provided a				<b>&gt;</b>	
3 Er	nter total number of o	ther organizations o	r entities					<b>&gt;</b>	

Schedule F (Form 990) 2020 Grace School of Theology 76-0690847 Page 3

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. (h) Method of valuation (book, FMV, (a) Type of grant or assistance (b) Region (c) Number of (d) Amount of (g) Description (e) Manner of (f) Amount of of noncash assistance recipients cash grant cash noncash disbursement assistance appraisal, other) (10) (11) (12) (13) (14) (15) (16) (17) (18)

Part IV 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	X	No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X	No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? 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	X	No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? 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	X	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 Critain Foreign Partnerships (see Instructions for Form 8865)	Yes	X	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 Poveott Report (see Instructions for Form 5713; don't file with Form 990)	Yes	X	No
	isch.	Schedule F (Form	1 990	) 2020
	Rijoji			

# Part V Supplemental Information

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

Part I, Line 2 - Procedures for Monitoring	the Use of Grant Funds
Recipients prepare an annual budget which	is reviewed and approved by the
Grace School of Theology Board of Trustees	when the annual GSOT budget is
presented. Budgeted funding is released me	onthly based on actual cash
requirements. Recipients have an online f	inancial/bookkeeping system where
monthly reports are generated. The finance	ial records are also audited by
an independent auditor.	
Part I, Line 3 - Activities per Region	
Region	Expenditures Investments
Asia	495,714 \$ 0
10	
Cy	
<b>₩</b>	
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SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

# Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Grace School of Th	eology				-06908 <b>47</b>	
Part I General Information on Grants an	d Assistance			<i>λ</i> 1		
<ul> <li>Does the organization maintain records to substantiate the selection criteria used to award the grants or assis</li> <li>Describe in Part IV the organization's procedures for material part IV for any recipient that</li> </ul>	tance? nonitoring the use of grant Domestic Organization	funds in the United Sta	ites. c Governments. Complete	it the organization	X Yes	No 990
1 (a) Name and address of organization or government	(b) EIN (c) IRC section (if applicable	(d) Amount of cash	(e) Amount of non cash assistance (f) Me hod of victor (book, FMV, apother)		(h) Purpose of grant or assistance	
(1)			10 N			
(2)			(),			
(3)		10				
(4)	•	SC,				
(5)	O	*				
(6)	C					
(7)	0)					
(8)						
(9)						
2 Enter total number of section 501(c)(3) and government	t organizations listed in th	 e line 1 table	<u> </u>		<b>•</b>	
3 Enter total number of other organizations listed in the l	=				• •	
For Paperwork Reduction Act Notice, see the Instruction	ns for Form 990.				Schedule I (Form 990	) (2020)

				Page 2
		ne organization ans	wered "Yes" on Form 990	, Part IV, line 22.
<u>itional space is need</u>	ed.			
(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
629	1,456,910		4	
		Y		
ovide the information	n required in Part I, I	ire 🤁 Part III, colun	nn (b); and any other addi	tional information.
es for Monito	ring the Ule	of Grant Fu	ınds	
grants are s	creened by t	he school.	Grants are in	
and discounts	which are a	pplied direc	ctly to	
	<b>)</b>			
	Y			
VO <sub>Y</sub>				
	to Domestic Individitional space is need  (b) Number of recipients  629  ovide the information as for Monito	to Domestic Individuals. Complete if the itional space is needed.  (b) Number of cash grant  629 1,456,910  ovide the information required in Part I, I as for Monitoring the Use grants are screened by the itional space is needed.	to Domestic Individuals. Complete if the organization ansitional space is needed.  (b) Number of cash grant (d) Amount of noncash assistance  629 1,456,910  ovide the information required in Part I, line 2; Part III, columns for monitoring the Use of Grant Fungrants are screened by the school.	to Domestic Individuals. Complete if the organization answered "Yes" on Form 990 itional space is needed.  (b) Number of (c) Amount of (d) Amount of recipients cash grant noncash assistance FMV, appraisal, other)

SCHEDULE O (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.

2020

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or 990-EZ.

Open to Public

Inspection ► Go to www.irs.gov/Form990 for the latest information. Employer identification number Name of the organization Grace School of Theology 76-0690847 Form 990, Part V, Line 4b - Financial Accounts in Foreign Countries Philippines Form 990, Part VI, Line 3 - Management Delegated The Seminary employs a CPEO as the employer for all employer Amounts on Form 990, Part IX, Line 11a represent compensation to management officials. Grace Asia, Inc. has administrative duties. Form 990, Part VI, Line 11b - Organization 3 rocess to Review Form 990 Form 990 is prepared by an outside CPA fram and is reviewed by management prior to filing. Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy Annual disclosure of conflict of interest is completed by each board member and officer. The Organization's policy is a duty to disclose agreement to the Board of Directors pefore any transaction is proposed. All directors and officers must review their outside business or professional interests. reviewed by the Board of Directors to determine if such conflicts ex st. If any financial interest regarding compensation is found from member, that member is precluded from voting on matters pertaining to that member's compensation. Form 990, Part VI, Line 15b - Compensation Process for Officers Benchmarking was provided by accreditors TRACS and The

Association of Theological Schools. The process included board approval

Schedule O (Form 990 or 990-EZ) 2020	Page <b>2</b>
Name of the organization	Employer identification number 76-0690847
Grace School of Theology	/0-009084/
with the action recorded in board minut	ces.
Form 990, Part VI, Line 19 - Governing	Documents Disclosure Explanation
Available upon request.	
Form 990, Part XI, Line 9 - Other Chang	ges in Net Assets Explanation
Scholarships	\$ -1,456,910
Scholarships	\$ 1,456,910
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