Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2021 Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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.

For the 2021 calendar year, or tax year beginning 07/01/21, and ending 06/30/22C Name of organization D Employer identification number Check if applicable: Address change Grace School of Theology Doing business as 76-0690847 Name change Number and street (or P.O. box if mail is not delivered to street address) 877-476-8674 3705 College Park Dr., Ste 140 Initial return Final return/ City or town, state or province, country, and ZIP or foreign postal code terminated The Woodlands TX 77384-4894 6,167,472 G Gross receipts\$ Amended return Name and address of principal officer: H(a) Is this a group return for subordinates? Yes Application pending Dave Anderson 3705 College Park Dr. H(b) Are all subordinates included? TX 77384-4894 If "No," attach a list. See instructions The Woodlands **X** 501(c)(3) (insert no.) 4947(a)(1) or Tax-exempt status: www.gsot.edu Website: H(c) Group exemption number ▶ L Year of formation: 260 X Corporation Form of organization: Association Other > M State of legal domicile: Part I Summarv 1 Briefly describe the organization's mission or most significant activities: To develop spiritual leaders in every nation who can theath Activities & Governance love of Christ, a love that cannot be earned and cannot be 2 Check this box ▶ if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) 8 4 Number of independent voting members of the governing body (Part VI, line 1b) 74 5 Total number of individuals employed in calendar year 2021 (Part V, line 2a) 5 **6** Total number of volunteers (estimate if necessary) 6 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a **b** Net unrelated business taxable income from Form 990-T, Part I, line 1 **Prior Year Current Year** 3,697,145 3,572,560 **8** Contributions and grants (Part VIII, line 1h) 2,585,600 **9** Program service revenue (Part VIII, line 2g) 2,331,340 10 Investment income (Part VIII, column (A), lines 3, 4, and 74) -295 9,551 9,607 11 Other revenue (Part VIII, column (A), lines 5, 6d, 80, 10c, and 11e) 6,038,036 6,167,472 12 Total revenue – add lines 8 through 11 (must equal Pail VIII, column (A), line 12) 1,952,624 2,251,577 13 Grants and similar amounts paid (Part IX, column (1) lines 1-3) **14** Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee binefits (Part IX, column (A), lines 5-10) 3,014,064 16aProfessional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part /X, column (D), line 25) ▶ 17 Other expenses (Part IX, column (A) lines 11a–11d, 11f–24e) 962,416 1,096,227 6,097,103 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 5,929,104 70,369 19 Revenue less expenses Surtract line 18 from line 12 108,932 69 Beginning of Current Year End of Year 1,343,724 1,962,026 20 Total assets (Part X, line 16) 420,300 968,233 21 Total liabilities (Part X, line 26) 22 Net assets or fund balances. Subtract line 21 from line 20 923,424 993,793 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Signature of officer Sign Here Daniel LaBry VP-Adv & Operations Type or print name and title PTIN Print/Type preparer's name Preparer's signature Check Paid Dave Moja Dave Moja 05/15/23 self-employed P00747006 **Preparer** David C. 84-5108762 Firm's name Moja, CPA Firm's EIN **Use Only** PO Box 531 321-258-9907 Reidsville, GA 30453 May the IRS discuss this return with the preparer shown above? See instructions X Yes No For Paperwork Reduction Act Notice, see the separate instructions. Form **990** (2021)

m 990 (2021) Grace School of		<u>6-0690847</u>	Page 2
art III Statement of Program Ser Check if Schedule O contain	rvice Accomplishments ns a response or note to any line i	in this Part III	
Briefly describe the organization's mission:			
o develop spiritual le ove of Christ, a love			
•			
Did the organization undertake any significan	t program services during the year which w	were not listed on the	
prior Form 990 or 990-EZ?			Yes X No
If "Yes," describe these new services on Sch Did the organization cease conducting, or ma		any program	
services?	ike significant changes in now it conducts,	any program	Yes X No
If "Yes," describe these changes on Schedule	e O.		100 110
Describe the organization's program service expenses. Section 501(c)(3) and 501(c)(4) or the total expenses, and revenue, if any, for each	accomplishments for each of its three largerganizations are required to report the amo	· -	-
	97,979 including grants of \$	2,251,577) (Revenue \$	
ducation (Christian):	<u>.</u>		
e offer several differ	ent programs in Bibl	e Theology and Chr	ıstıan
inistry: attended by a	pproximately 830 stu	dents in the U.S.	and
nternationally. e offer undergraduate,	andusts and docto	na Odognoo naognom	
ertificate programs in	aluding: courses and	/or concentration	s and in Biblo
xposition, theology, a			III PIDIE
aposition, theorogy, a	ind chiliscian miniso.		
•		,	
	\(\)		
(Code:) (Expenses \$	including grants of \$) (Revenue \$	
/A	•, 6		
	ن		
· · · · · · · · · · · · · · · · · · ·			
			
· ····································			
~ ^ ^			
(Code:) (Expenses \$	including grants of \$) (Revenue \$	
/A			
• • • • • • • • • • • • • • • • • • • •			
• • • • • • • • • • • • • • • • • • • •			
Other program services (Describe on Schedu	ıle O.)		
	uding grants of \$) (Revenue \$)
Total program service expenses	5.197.979	, ,	,

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		v	
2	complete Schedule A Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
3	candidates for public office? If "Yes," complete Schedule C, Part I	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
•	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		x
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, o			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule B, Parts VI,			
	VII, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	X	
b	Did the organization report an amount for investments—other securities in Part X-line 12, that is 5% or more			l
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D. Part VII	11b		X
С	Did the organization report an amount for investments—program related a Part X, line 13, that is 5% or more			.,
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part 15, that is 5% or more of its total assets	44.1	3 2	
	reported in Part X, line 16? If "Yes," complete Schedule D. Fart IX	11d		
e e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	<u> </u>	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	11f		x
12a		111		
12a	Schedule D, Parts XI and XII	12a	Х	
h		120		
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "I lo" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	X	
14a	Did the expenization maintain affice ampleyage 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, invesment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	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		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			<u>_</u> _
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		<u> </u>

						Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individual	luals c	on				
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III				22	X	<u> </u>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the						
	organization's current and former officers, directors, trustees, key employees, and highest compens	ated					
	employees? If "Yes," complete Schedule J				23	X	<u> </u>
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more th		.				
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer	lines .	24b				
	through 24d and complete Schedule K. If "No," go to line 25a				24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception				24b		├─
С	Did the organization maintain an escrow account other than a refunding escrow at any time during to	ne yea	aı		24c		
ч	to defease any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year	 r2			24d		<u> </u>
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an experience of the organization o		 hen	 ofit	24u		
2 5a	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	10033	DCII	1	25a		x
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person	in a r	 rior		200		1
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or						
	If "Vas." complete Schedule I. Part I.			18	25b		x
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to	nv cu	rren				
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35			-			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II				26		x
27	Did the organization provide a grant or other assistance to any current or former officer, director, true	stee,	key				
	employee, creator or founder, substantial contributor or employee thereof, a grant selection commit	tee	·				
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of the	nese					
	persons? If "Yes," complete Schedule L, Part III				27		X
28	Was the organization a party to a business transaction with one of the following parties (see the Sc	hedule	e L,				
	Part IV, instructions for applicable filing thresholds, conditions, and exceptions):						
а	A current or former officer, director, trustee, key employee, creator of four der, or substantial contrib	utor?	lf				
	"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		X
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b	? If					۱
	"Yes," complete Schedule L, Part IV				28c		X
29	Did the organization receive more than \$25,000 in ron-cast contributions? If "Yes," complete Sche		И		29		X
30	Did the organization receive contributions of art, historical freasures, or other similar assets, or qualities and the contributions of art, historical freasures, or other similar assets, or qualities and the contributions of art, historical free assets, or qualities and the contributions of art, historical free assets, or qualities and the contributions of art, historical free assets, or qualities and the contributions of art, historical free assets, or qualities and the contributions of art, historical free assets, or qualities and the contributions of art, historical free assets, or qualities and the contributions of art, historical free assets, or qualities and the contributions of art, historical free assets and the contribution and the contribution are also asset as a contribution and the contribution and the contribution are also as a contribution and a contribution are also as a contribution and a contribution are a contribution a	itied					
	conservation contributions? If "Yes," complete Schedule M				30	<u> </u>	X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete School Did the organization call and because of the party and the organization call and because of the party and the organization call and the organization		N, F	'aπ I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes complete Schedule N, Part II	ί,			22		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Re				32		
33	and and 201 7701 2 and 201 770 22 5 "Van " annual of Cabadula D. Bort I	Ū			33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Pa	art II	 III		- 33		<u> </u>
J -7	or IV, and Part V, line 1				34		Х
35a	Did the appropriation because the description of the first transfer of the first transfe				35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with						Ī
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, lii				35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-char						
	related organization? If "Yes," complete Schedule R, Part V, line 2				36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization						
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule F	R, Part	· VI		37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, line	s 11b	and	d			
	19? Note: All Form 990 filers are required to complete Schedule O.				38	X	
Pa	art V Statements Regarding Other IRS Filings and Tax Compliance						
	Check if Schedule O contains a response or note to any line in this Par	<u>t V .</u>				<u></u>	
		I	۔ ا			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a	_	251	_		
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	_ ()			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and				_		
	reportable gaming (gambling) winnings to prize winners?		<u></u> .		1c	1	1

Form 990 (2021) Grace School of Theology

76-0690847

Page 5

Pa	art V Statements Regarding Other IRS Filings and Tax Compliance (contin	ued)		Yes	No
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 return2	a 74			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns	s?	2b	X	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.				
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule C)	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other au	uthority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial	account)?	4a	Х	
b	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 Ac	counts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	on?	5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	4			
	organization solicit any contributions that were not tax deductible as charitable contributions?		6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	s or	l		
_	gifts were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).	() Y			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for go	oods			.
	and services provided to the payor?	/	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for voich it was	i	7.		v
ا م	required to file Form 8282? If "Yes," indicate the number of Forms 8282 filed during the year 70		7c		X
d	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit cor		7e		X
f	Did the organization receive any furids, directly of indirectly, to pay premiums of a versional benefit contract. Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract.		7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Forr		7g		X
9 h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		7h		X
8	Sponsoring organizations maintaining donor advised funds. Dial at lonor advised fund maintaine				
	sponsoring organization have excess business holdings at any time during the year?	a 2, a	8		
9	Sponsoring organizations maintaining donor advised fulder				
а	Did the sponsoring organization make any taxable distributions under section 4966?		9a		
b	Did the sponsoring organization make a distribution to a do nor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations. Enter:				
а	Initiation fees and capital contributions included on Part VIII, line 12)a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities)b			
11	Section 501(c)(12) organizations. Emer:				
а	Gross income from members or shareholders 11	la			
b	Gross income from other sources. (No not net amounts due or paid to other sources				
	against amounts due or received i om them.)				
12a			12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	2b	_		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
а	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.				
b	Enter the amount of reserves the organization is required to maintain by the states in which	1			
	the organization is licensed to issue qualified health plans				
C	Enter the amount of reserves on hand	•	44-		v
14a			14a		X
b 45	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule		14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remunera		4.		v
	excess parachute payment(s) during the year?		15		X
16	If "Yes," see instructions and file Form 4720, Schedule N.	200mo?	16		X
10	Is the organization an educational institution subject to the section 4968 excise tax on net investment in If "Yes," complete Form 4720, Schedule O.	icone?	10		<i>4</i> 2
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in				
• •	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		17		
	If "Yes," complete Form 6069.				
	,				

Form 990 (2021) 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 **1a** 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 any other officer, director, trustee, or key employee? X 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? 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? 7a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members X stockholders, or persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? 8b X Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Did the organization have local chapters, branches, or affiliates? 10a X **b** If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 9 to all members of its governing body before filing the form? X 11a b Describe on Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest police? If "No," go to line 13 12a b Were officers, directors, or trustees, and key employers required to disclose annually interests that could give rise to conflicts? 12b X c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was dome 12c Did the organization have a written whis lebic ver policy? 13 13 Did the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 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 15a or 15b, a scribe the process on Schedule O. See instructions. Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a X 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 > 20 Daniel LaBry 3705 College Park Dr The Woodlands

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, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

Check this box if neither the org		•				ation	cor	mpensated any current of	icer, director, or trustee.	
(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	box	ι, unle	ss pe	ition more rson i irecto	than o is both or/trusted Highest compensated employee	an ee)	(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
(1)Dave Anderson Trustee/President	40.00	v	9	>		ъ		\$169,025	0	90 927
(2) Fred Chay	40.00	X		X		$ \cdot $	<u>^</u>	0 21 69,023	0	89,837
Manager	0.00					\mathbf{x}	~	106,992	0	26,000
(3) Daniel LaBry	0.00				-			100,332		20,000
_	40.00			,	\					
VP-Adv & Operations	0.00			X	13			107,657	0	3,900
(4)Mark Albers										
Vice Chair/Treasurer	1.00	x		X				o	0	0
(5) Glenn Darby	0.00	6	/			\vdash			0	0
(o) Greini Barby	1.00									
Chairman/Trustee	0.00	X		х				0	0	0
(6) Tim Dunn	1									
	1.00									
Trustee	0.00	X						0	0	0
(7) Tracy Marshall	1									
Птисто	1.00	v							0	0
Trustee (8) Scott McEwen	0.00	X						0	0	<u> </u>
(6) SCOCC MCEWell	1.00									
Trustee	0.00	x						0	0	0
(9) David Nichols										
•	1.00									
Trustee	0.00	X						0	0	0
(10)Dian Sustek										
<u> </u>	1.00									_
Trustee	0.00	X				$\vdash \vdash$		0	0	0
(11)Robert Tebow	1.00									
Trustee	0.00	x						0	0	0
	0.00	122	l .							

	(A) Name and title	(B) Average hours per week	box	Position (do not check more than on box, unless person is both a officer and a director/trusted					(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated of oth compens	er	
		(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	organizations (W-2/ 1099-MISC/ 1099-NEC)	from t organizati related orga	on and	s
										60			
										C)04			
									30				
								^	0				
					•		()						
1b c	Subtotal Total from continuation sh		 So	ctio			Y .	>	383,674		11	9,7	737
d	Total (add lines 1b and 1c)				Y		 	<u> </u>	383,674		11	9,7	737
2	Total number of individuals (in reportable compensation from	ncluding but not n the organizatio	l'mit	ed to	o the	se li	sted	abo	ove) who received more that	an \$100,000 of			
3	Did the organization list any f		$\overline{\nabla}$		uete	o k	ov or	nnla	ovec or highest componed	tod		Yes	No
	employee on line 1a? If "Yes,	" complete Sche	dule	J fo	r su	ch ir	ndivid	dual			3		X
4	For any individual listed on lin organization and related organization	ne ra, is the sum nizations greate	r tha	epoi in \$1	table 150,0	e coi)00?	mper * <i>If "</i> Y	nsat ′es,	tion and other compensation of complete Schedule J for a	on from the such			
5	individual	1a receive or ac	 crue	con	 npen	satio	on fro	 om a	any unrelated organization	or individual	4	Х	
<u></u>	for services rendered to the cition B. Independent Contrac		Yes,	" co	mple	te S	chec	lule	J for such person		. 5		X
1	Complete this table for your fi	ive highest comp	pens	ated	linde	eper	ndent	cor	ntractors that received mor	re than \$100,000 of			
		nization. Report of (A) If business address	comp	oens	atior	1 for	the o	cale 		ithin the organization's tax year (B) stion of services		(C)	tion
	ivame and	Dusiness address							Descrip	otion of services	Co	mpensa	tion
								\vdash					
_													
2	Total number of independent received more than \$100,000	contractors (inc of compensation	iudir n fro	ig bu om th	ıt no ne or	t IIM gan	ıted 1 izatio	o th on ▶	nose listed above) who ▶	0			

Part V		chedule O co	ntains	a response or n	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
≝ 1a	Federated campaig	ns	1a					
	Membership dues		1b					
c کا	Fundraising events		1c					
<u>a</u> d	Related organization	ns	1d					
<u> </u>	Government grants (contrib	utions)	1e					
S f	 All other contributions, gifts. 	, grants,	1f	3,572,560				
Ĕ a	and similar amounts not inc Noncash contributions inclu		11	3,312,300	4			
	lines 1a-1f							
튭 h	Total. Add lines 1a-	-1f		<u></u>	3,572,560			
				Business Coo				
2a	Tuition and f	ees		61160	0 2,585,600	2,585,600		
Revenue c d								
c G	;							
∯ d	l					\rightarrow		
е								
f	f All other program se				0.505.600			
	Total. Add lines 2a-				2,585,600			
3			nds, inte		0.05	.()		
١.	other similar amoun			············	-295			-295
4	Income from investr					Y		
5	Royalties							
		(i) Real		(ii) Personal	5			
6a	Gross rents 6	1						
b	Less: rental expenses 6k			•				
l c	Rental inc. or (loss) 60							
l d	Net rental income o Gross amount from	`			<i></i>			
	sales of assets	(i) Securitie	es	(ii) Other	_			
, .	other than inventory 78	1			_			
B	Less: cost or other			\ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\				
3	basis and sales exps. 7k				_			
(C	· /		- (<u> </u>				
	Net gain or (loss) Gross income from fun			<u> </u>				
o oa		idraising events	X	•				
	(not including \$	od on line	17					
	of contributions reported 1c). See Part IV, line 1		ا ۵٫					
	Less: direct expense		8a 8b		_			
- 1	Net income or (loss		$\overline{}$					
	Gross income from		I EVENIE	· · · · · · · · · · · · · · · · · · ·				
Ja	activities. See Part		9a					
h	Less: direct expens		9b		_			
	Net income or (loss			<u> </u>				
	Gross sales of inver		T T	·····				
'00	returns and allowan	=	10a					
h	Less: cost of goods		10b					
	: Net income or (loss		$\overline{}$	•				
		,	. J. 11.01 y	Business Cod	e			
υ 11a	Other revenue			90000				9,607
i b	*	·						2,30.
Revenue b c d					1			
ᇫ	All other revenue				1			
	Total. Add lines 11a				9,607			
	Total revenue. See				6,167,472	2,585,600	0	9,312

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

Seci	Check if Schedule O contains a res			mpiete column (A).	
Do 1	not include amounts reported on lines 6b, 7		(B)	(C)	(D)
	9b, and 10b of Part VIII.	b, (A) Total expenses	Program service expenses	Management and	Fundraising expenses
1	Grants and other assistance to domestic organizations		expenses	general expenses	expenses
•	and domestic governments. See Part IV, line 21				
2					
_	individuals. See Part IV, line 22	1,761,382	1,761,382		
3		1,701,302	1,701,302		
3	organizations, foreign governments, and				
	foreign individuals. See Part IV, lines 15 and 16	490,195	490,195		
4	Benefits paid to or for members	450,155	190/195		
5					
	trustees, and key employees	370,419	274,128	59,678	36,613
6	Compensation not included above to disqualified	3.0,120		/1.5	30,020
•	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)			()	
7	Other salaries and wages	1,974,294	1,461,076	318,074	195,144
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	404,586	299,424	65,182	39,990
11	Fees for services (nonemployees):	,		, -	
	Management				
	Legal		AY		
	Accounting				
	Lobbying		~?		
	Professional fundraising services. See Part IV, line 1	7			
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O.)	78 306	70,844	5,806	1,656
12	Advertising and promotion	24,211	4,797	18,313	1,101
13	Office expenses	9,789	8,385	1,099	305
14	Information technology	3/14,359	280,046	73,808	20,505
15	Royalties	Y			
16	Occupancy	336,139	325,289	8,492	2,358
17	Travel	72,074	69,748	1,821	505
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	8,767	6,432	2,335	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization _	46,218	33,911	12,307	
23	Insurance	11,279	11,279		
24					
	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.)	40-00-	404 000		
а	Other	135,085	101,053	26,633	7,399
b					
С					
d					
	All other expenses	0.007.100			
	Total functional expenses. Add lines 1 through 24e	6,097,103	5,197,979	593,548	305,576
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ if following SOP 98-2 (ASC 958-720)				

				(A)	T	(B)
				Beginning of year		End of year
1	Cash—non-interest-bearing			508,406	1	560,529
2	Savings and temporary cash investments				2	
3	Pledges and grants receivable, net			350,000	3	300,000
4	Accounts receivable, net			213,031	4	67,415
5	Loans and other receivables from any current or fo					
	trustee, key employee, creator or founder, substant					
	controlled entity or family member of any of these p				5	
6	Loans and other receivables from other disqualified					
	under section 4958(f)(1)), and persons described in				6	
7	· · · · · · · · · · · · · · · · · · ·				7	
8	Inventories for sale or use				8	
9	Prepaid expenses and deferred charges				9	
10	a Land, buildings, and equipment: cost or other				7	
	basis. Complete Part VI of Schedule D	10a	925,546			
k	Less: accumulated depreciation	10b	709,651	108 208	10c	215,895
11					11	
12	,				12	
13	1 3			•	13	
14				/	14	
15	Other assets. See Part IV, line 11			164,079	15	818,187
16				1,343,724		1,962,020
17				28,739	17	34,979
18				100 101	18	F1 0.00
19	Deferred revenue			197,191	19	51,067
20			\.U		20	
21	Escrow or custodial account liability. Complete Par				21	
22	, ,					
	trustee, key employee, creator or founder, substant	/	or 35%			
l	controlled entity or family member of any of these				22	
23				104 270	23	104 075
24	- '	ird parties		194,370	24	194,977
25	()					
	parties, and other liabilities not included or lines 17 of Schedule D	-24). Complete	Part X			607 010
				420 200	25	687,210
26	111111111	V		420,300	26	968,233
	Organizations that follow FASB ASC 958, chec	k nere 🔼				
	and complete lines 27, 28, 3°, and 33.			022 424		002 703
27				923,424	27	993,793
28			<u> </u>		28	
	Organizations that do not follow FASB ASC 95	8, cneck nere				
1	and complete lines 29 through 33. Capital stock or trust principal, or current funds				- n	
00	Labilal Stock of Itilst brincinal of cliffent flinds				29	
29		mont for -1	l l			
30	Paid-in or capital surplus, or land, building, or equip	ment fund			30	
1	Paid-in or capital surplus, or land, building, or equip Retained earnings, endowment, accumulated incor	oment fund ne, or other fun	ds	923,424	31	993,793

Form **990** (2021)

Forr	n 990 (2021) Grace School of Theology 76-0690847			Pag	ge 12
Pa	art XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI	<u> </u>			X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	6,16	57,	<u>472</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	6,09)7 ,	103
3	Revenue less expenses. Subtract line 2 from line 1	3	•	70,:	369
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	92	23,4	424
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))	10	99	93,	<u> 793</u>
Pa	art XII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII				
		7		Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other	7_			
	If the organization changed its method of accounting from a prior year or checked "Other," explain on			1	
	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 compile 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 were a idited on a				
	separate basis, consolidated basis, or both:			1	
	X Separate basis Consolidated basis Both consolidated and separate basis				
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of				
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	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 required to undergo an audit or audits as set forth in the

b If "Yes," did the organization undergo the required a udit or undergo! If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits

RUDIIC

Single Audit Act and OMB Circular A-133?

3b Form **990** (2021)

3a

X

SCHEDULE A (Form 990)

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. Employer identification number

OMB No. 1545-0047

Open to Public Inspection

Name of the organization Grace School of Theology Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

76-0690847

Pa	art I	Reas	on for Public Charity	/ Status. (All organizatio	ns mus	t comp	lete this part.) See instr	uctions.
The	orga	nization is not	t a private foundation becau	se it is: (For lines 1 through 12	, check o	nly one b	ox.)	
1		A church, co	nvention of churches, or as	sociation of churches described	d in secti	on 170(b	o)(1)(A)(i).	
2	X	A school des	scribed in section 170(b)(1)	(A)(ii). (Attach Schedule E (Fo	rm 990).))		
3		A hospital or	a cooperative hospital serv	ice organization described in s	ection 1	70(b)(1)(A)(iii).	
4	П	A medical re	search organization operate	ed in conjunction with a hospital	l describe	ed in sec t	tion 170(b)(1)(A)(iii). Enter th	e hospital's name,
		city, and stat	e:					
5		An organizat	ion operated for the benefit	of a college or university owner	d or oper	ated by a	governmental unit described	in
	ш	=	(b)(1)(A)(iv). (Complete Pa	=		,		
6				governmental unit described in	section	170(b)(1))(A)(v).	
7		An organizat	ion that normally receives a	substantial part of its support f				olic
8			section 170(b)(1)(A)(vi). (vi)	Complete Part II.) 170(b)(1)(A)(vi). (Complete Pa	art II.)			
9	Н	-		scribed in section 170(b)(1)(A	-	rated in c	oniunction with a land-grant c	ollege
		or university university:	or a non-land-grant college	of agriculture (see instructions). Enter th	ne name,	city, and state of the college of	or
10		receipts from support from	n activities related to its exe gross investment income a	1) more than 33 1/3% of its sup mpt functions, subject to certain and unrelated business taxable 30, 1975. See section 509(a) (2)	n exception	ons; and ess secti	2) to more than 331/3% of its on 511 tax) from businesses	
11			_	exclusively to test for public sa			-	
12	H	_	=	exclusively for the benefit of, to				rooses of
		one or more	publicly supported organiza	tions described in section 509	(2)(1) or	section	509(a)(2). See section 509(a)(3). Check
				scribes the type of supporting				
	а			perated, supervised, or controllower to regularly appoint or elec-				giving
				complete Part IV, Sections A		ity or the	directors of trustees of the	
	b			upervised or controlled in conn		h its supi	ported organization(s), by hav	ina
		control o	r management of the suppo	rting organization vested in the				
	_			e Part IV. Sections A and C.				ــــا د ناط
	С	its suppo	orted organization(s) (see in	supporting organization operatestructions). You must comple	ted in cor	/, Section v	ns A, D, and E.	u wiui,
	d			ed A supporting organization o				
				organization generally must s				eness
				must complete Part IV, Secti				
	е	Check th	ils box if the organization re	ceived a written determination f on-functionally integrated suppo	trom the I	RS that II	is a Type I, Type II, Type III	
	f		mber of supported organiza		nung orga	arnzation.		
	g			he supported organization(s).				
(i)		e of supported	(ii) EIN	(iii) Type of organization	(iv) Is the	organization	(v) Amount of monetary	(vi) Amount of
• • •		ganization	y	(described on lines 1–10		ur governing	support (see	other support (see
				above (see instructions))		ment?	instructions)	instructions)
					Yes	No		
(A)								
/D \								
(B)								
(C)								
(D)								
(E)								
Γota								
· Ula								

Schedule A (Form 990) 2021

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.)

Sec	tion A. Public Support		,	to noted poloti	, p	,	
Cale	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	4,206,756	4,660,234	3,973,335	3,697,145	3,572,560	20,110,030
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4 5	Total. Add lines 1 through 3 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)	4,206,756	4,660,234	3,973,335	3,697,145	3,572,560	20,110,030
6	Public support. Subtract line 5 from line 4						20,110,030
	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7	Amounts from line 4	4,206,756	4,660,234	3,973,335	3,697,145	3,572,560	20,110,030
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources		94			-295	-201
9	Net income from unrelated business activities, whether or not the business is regularly carried on		15,158		8,551	8,607	32,616
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)		S				
11	Total support. Add lines 7 through 10		7				20,142,445
12	Gross receipts from related activities, etc					12	7,008,732
13	First 5 years. If the Form 990 is for the o	rganization's first, s	second, third, fourt	h, or fifth tax year	as a section 501	(c)(3)	
	organization, check this box and stop he						
Sec	tion C. Computation of Public						
14	Public support percentage for 2021 (line	o, column (f) divide	d by line 11, colum	nn (f))			99.84%
15	Public support percentage from 2021 Sc						99.88%
16a	33 1/3% support test—2021. If the orga				33 1/3% or more	e, check this	
_	box and stop here . The organization qua	•					> X
b	33 1/3% support test—2020. If the orga				15 is 33 1/3% or	more, check	
	this box and stop here . The organization						▶ ∟
17a	10%-facts-and-circumstances test—20	=					
	10% or more, and if the organization mee		· ·		•		
							> _
b	10%-facts-and-circumstances test—20	-					
	15 is 10% or more, and if the organization			•	•	•	
	in Part VI how the organization meets the	facts-and-circums	tances test. The o	rganization qualifi	es as a publicly s	upported	
	organization						▶ ∟
18	Private foundation. If the organization d						
	instructions						▶ ∟

Schedule A (Form 990) 2021 Grace School of Theology

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

	•	` '\ '
(Complete only	if you checked the bo	x on line 10 of Part I or if the organization failed to qualify under Part II.
If the organization	on fails to qualify unde	er the tests listed below, please complete Part II.)

Sec	tion A. Public Support	quality under	the tests lister	a below, picas	e complete i a	art II.)	
	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and membership fees	(4) 2011	(2) 2010	(6) 2010	(4) 2020	(6) 2021	(i) rotal
•	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge					8	
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons				70	Y	
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			, e			
С	Add lines 7a and 7b			~ `			
8	Public support. (Subtract line 7c from						
	line 6.)			G			
	tion B. Total Support					T	
	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources.		5				
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975		,				
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried or	,,					
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the or	ganization's first,	second, third, fou	ırth, or fifth tax yea	ar as a section 50	1(c)(3)	
	organization, check this box and stop her	e					
Sec	tion C. Computation of Public S						
15	Public support percentage for 2021 (line 8	, column (f), divid	ded by line 13, colu	umn (f))		15	%
16	Public support percentage from 2020 School					16	%
Sec	tion D. Computation of Investme						
17	Investment income percentage for 2021 (I	ine 10c, column ((f), divided by line	13, column (f))		17	%
	nvestment income percentage from 2020 S						%
19a	33 1/3% support tests—2021. If the orga	anization did not o	check the box on I				
	17 is not more than 33 1/3%, check this bo	ox and stop here	. The organization	n qualifies as a pu	blicly supported o	organization	▶ ∟
b	33 1/3% support tests—2020. If the orga	anization did not o	check a box on line	e 14 or line 19a, a	nd line 16 is more	e than 33 1/3%, and	
	line 18 is not more than 33 1/3%, check th	is box and stop i	here. The organiz	ation qualifies as	a publicly support	ed organization	▶ ∟
20	Private foundation. If the organization di	d not check a box	x on line 14, 19a, o	or 19b, check this	box and see instr	uctions	

Part IV

Schedule A (Form 990) 2021

Supporting Organizations

(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).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2) 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 organization")? "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- Did the organization support any foreign supported organization that does not have an in a determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what a ntro s the organization used to ensure that all support to the foreign supported organization was used ex rusively for section 170(c)(2)(B)
- Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Partyl, 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 supported organization part of a class already designated in the organization's organizing docume
- 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 or anizations, (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 of anization's supported organizations? If "Yes," provide detail in Part VI.
- Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section (3)(5)), 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).
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 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 disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- Was the organization subject to the excess business holdings rules of section 4943 because of section 10a 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
1		
2		
3a		
3b		
3c		
4a		
4b		
4c		
5a		
5b 5c		
6		
7		
8		
9a 9b		
9c		
10a		
10b Schedule A		
chedule A	(Form 9	90) 2021

Schedule A (Form 990) 2021

Paı	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 on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c,			
	provide detail in Part VI.	11c		
Sect	ion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sect	ion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a major to of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Par VI how control			
	or management of the supporting organization was vested in the same persons that convolled or managed			
Cast	the supported organization(s).	1		<u> </u>
Seci	ion D. All Type III Supporting Organizations			NI.
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		Yes	No
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trusters extent (i) appointed or elected by the supported			
2	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous vorking relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have			
3	a significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sect	ion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction	 ns).		
а	The organization saus fee the Activities Test. Complete line 2 below.	-/		
b	The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see ins	structio	ns).	
2	Activities Test. Answer 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? <i>If "Yes," then in Part VI identify</i>			
	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 on line 2a, above, constitute activities that, but for the organization's			
-	involvement, one or more of the organization's supported organization(s) would have been engaged in? If			
	"Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would			
	have engaged in these activities but for the organization's involvement.	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 Part VI.	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 Part VI the role played by the organization in this regard.

3b

Page 5

Part V Type III Non-Functionally Integrated 509(a)(3) Supporti		ations	047 Page 0
1 Check here if the organization satisfied the Integral Part Test as a qualifying tru). See
instructions. All other Type III non-functionally integrated supporting organizat			
Section A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection			
of gross income or for management, conservation, or 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		
Section B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see		())	
instructions for short tax year or assets held for part of year):		.05	
a Average monthly value of securities	1a /		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	Ød ,		
e Discount claimed for blockage or other factors	7		
(explain in detail in Part VI):	^`\		
Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by 0.035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C – Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, column A)	1		
2 Enter 0.85 of line 1.	2		
3 Minimum asset amount for prior year (rom 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. Subtrac line 5 from line 4, unless subject to			
emergency temporary, et. ction (see instructions).	6		
7 Check here if the current year is the organization's first as a non-functionally interest (see instructions).	egrated Type I	II supporting organizatio	n
			chadula A (Farm 000) 202

Schedule A (Form 990) 2021

Type III Non-Functionally Integrated 509(a)(3) Supporting

76-0690847

Schedule A (Form 990) 2021

Part V Type III I

Page **7**

Pai	Type III Non-Functionally integrated 509(a)(3)) Supporting Organi	zations (continued)	
Sec	tion D – Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exempt purp	oses		
2	Amounts paid to perform activity that directly furthers exempt purpose	es of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purposes of sup	ported organizations		
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required—provide de	etails in Part VI)		
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the organizations	zation is responsive		
	(provide details in Part VI). See instructions.			
9_	Distributable amount for 2021 from Section C, line 6			
10	Line 8 amount divided by line 9 amount		A	
Sec	tion E – Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2021	(iii) Distributable Amount for 2021
1_	Distributable amount for 2021 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2021 (reasonable cause required–explain in Part VI). See instructions.		\mathcal{O}	
3_	Excess distributions carryover, if any, to 2021	0		
	From 2016	,0		
	From 2017			
	From 2018	A > '		
	From 2019	6		
	From 2020			
	Total of lines 3a through 3e			
	Applied to underdistributions of prior years			
	Applied to 2021 distributable amount) '		
<u> </u>	Carryover from 2016 not applied (see instructions)			
	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2021 from Section D, line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2021 distributable amount			
	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2021, if			
	any. Subtract lines 3g and 4a fron line 2. For result			
	greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2021 Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2022. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
	Excess from 2017			
	Excess from 2018			
	Excess from 2019			
	Excess from 2020			

Schedule A (Form 990) 2021

Schedule A (For	m 990) 2021	Grace	School	of Theolog	У	76-0690847	Page 8
Part VI	Supplemental In III, line 12; Part IV B, lines 1 and 2; I 3a, and 3b; Part V	formation. I /, Section A, Part IV, Sect /, line 1; Par	Provide the lines 1, 2, 3 ion C, line 1 to V, Section	explanations requals, 3c, 4b, 4c, 5a, 1; Part IV, Section B, line 1e; Part \	uired by Part II, lind , 6, 9a, 9b, 9c, 11a , D, lines 2 and 3; I	e 10; Part II, line 17a c , 11b, and 11c; Part I\ Part IV, Section E, line 5, 6, and 8; and Part \	or 17b; Part /, Section es 1c, 2a, 2t
						N 3	
					~ (.)	
				<i>C</i>			
				10			
				.0'			
			• (5			
			- 7				
			ل				
			•				
		X)					
	Q						

Schedule B (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

► Attach to Form 990 or Form 990-PF.

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

OMB No. 1545-0047

2021

Grace School of Theology

Employer identification number

76-0690847

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						
	covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See						
General Rule	5						
	A O T						
	iling Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000						
	property) from any one contributor. Complete Parts I and II. See instructions for determining a						
contributor's total cor	ntributions.						
Special Rules							
X For an organization of	described in section 501(c)(3) fills of orm 990 or 990-EZ that met the 331/3% support test of the						
	ctions 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or						
	ed from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or						
	t on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.						
	described in Sectio 1501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one						
=	e year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific,						
	al pur loses for for the prevention of cruelty to children or animals. Complete Parts I (entering						
"N/A" in column (b) in	ns ead of the contributor name and address), II, and III.						
For an organization of	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one						
	e year, contributions exclusively for religious, charitable, etc., purposes, but no such						
-	more than \$1,000. If this box is checked, enter here the total contributions that were received						
	n <i>exclusively</i> religious, charitable, etc., purpose. Don't complete any of the parts unless the						
= -	s to this organization because it received <i>nonexclusively</i> religious, charitable, etc., contributions						
totaling \$5,000 or mo							
_	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it /, 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						
	et the filing requirements of Schedule B (Form 990).						

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.

2021
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 4 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? 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 a historically important land area Preservation of land for public use (for example, recreation or education) 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 of 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 in 2c d Number of conservation easements included in (c) acquired after 7/25/00 and not on a historic structure listed in the National Register 2d Number of conservation easements modified, transferred released extinguished, or terminated by the organization during the Number of states where property subject to conseptation easement is located ▶ 4 Does the organization have a written policy regarding the reriodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to morntoring, 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 easemen 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 how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, "applicable, 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 2 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	Collections of Art	, Historical Treasure	es, or Other Similar A	ssets (continued)
3	Using the organization's acquisition, accessic collection items (check all that apply):	on, and other records, che	ck any of the following tha	t make significant use of its	
а	Public exhibition	d Loan or	r exchange program		
b		e Other .			
С					
4	Provide a description of the organization's co	llections and explain how	they further the organization	on's exempt purpose in Part	
_	XIII.			,	
5	During the year, did the organization solicit or				□ vaa □ Na
P	assets to be sold to raise funds rather than to art IV Escrow and Custodial Arra		the organization's collectic	יוונ	Yes No
	Complete if the organization		Form 990. Part IV. lii	ne 9. or reported an ar	mount on Form
	990, Part X, line 21.	anonorou ree en		no o, or roportod arrar	mount on roun
1a	Is the organization an agent, trustee, custodia	an or other intermediary fo	or contributions or other as	sets not	
					Yes No
b	If "Yes," explain the arrangement in Part XIII a				
					Amount
С	Beginning balance			16	
d	Additions during the year			1d	
e	Distributions during the year			1e	
1	Ending balance	000 Dart V line 04 fe			Yes No
	□ Did the organization include an amount on Fo □ If "Yes," explain the arrangement in Part XIII.			*	
	art V Endowment Funds.	Check here it the explana	ition has been provided of	Part XIII	
	Complete if the organization	answered "Yes" on	Form 990, Part W, lin	ne 10.	
	- 1) Prior year (c) Two ye		ck (e) Four years back
1a	Beginning of year balance		C		
	Contributions		7		
С	Net investment earnings, gains, and	^			
	losses				
	Grants or scholarships).		
е	Other expenditures for facilities and	.49			
	programs				
	Administrative expenses	\ \ \ \			
9 2	End of year balance Provide the estimated percentage of the curre	ent year and balance (line	1g, column (a)) hold as:		
	Board designated or quasi-endowment	%	rg, coluinii (a)) neid as.		
	Permanent endowment ► 4%				
	Term endowment ▶ %	Y			
	The percentages on lines 2a, 2b, and 2c, hou	ıld equal 100%.			
3a	Are there endowment funds not in the posses	sion of the organization th	nat are held and administe	red for the	
	organization by:				Yes No
	(i) Unrelated organizations				3a(i)
	(ii) Related organizations				3a(ii)
b	If "Yes" on line 3a(ii), are the related organiza				3b
4 	Describe in Part XIII the intended uses of the		nt funds.		
	art VI Land, Buildings, and Equi Complete if the organization		Form 000 Part IV/ liv	ne 11a See Form 000	Part Y line 10
	Description of property	(a) Cost or other basis	(b) Cost or other basis	(c) Accumulated	(d) Book value
	Decempion of property	(investment)	(other)	depreciation	(a) Book value
	Land				
b	Buildings				
c	: Leasehold improvements		124,404	118,399	6,005
	Equipment		614,138		58,252
е	Other		187,004	35,366	151,638
Tota	al. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part X, co	olumn (B), line 10c.)		215,895

Schedule D (F	form 990) 2021 Grace School of Theo	ology	76-0690847	Page 3
Part VII	Investments - Other Securities.			
	Complete if the organization answered "Yes"	on Form 990, Part IV,	line 11b. See Form 990,	Part X, line 12.
	(a) Description of security or category	(b) Book value	(c) Method of val	uation:
	(including name of security)		Cost or end-of-year m	arket value
(1) Financial	derivatives			
	ld equity interests			
/Λ\				
/D)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
	n (b) must equal Form 990, Part X, col. (B) line 12.)	·	41	
Part VIII	Investments – Program Related.			
	Complete if the organization answered "Yes"	on Form 990. Part IV.	line 11c. See Form 990.	Part X. line 13.
	(a) Description of investment	(b) Book value	Method of val	
		.,	Cost or end-of-year m	arket value
(1)			1	
(2)				
(3)				
(4)			/	
(5)				
(6)		A W		
(7)				
(8)		1 29		
(9)		1 ()		
_ ' '	n (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX	Other Assets.			
	Complete if the organization answered "Yes"	on Form 990 Part IV	line 11d See Form 990	Part X line 15
	(a) Description			(b) Book value
(1)	Due from affiliates			661,808
(2)	Prepaid expenses			140,200
(3)	Security deposit			15,642
(4)	Other			537
(5)	A A A			
(6)				
(7)				
(8)	1			
(9)				
	n (b) must equal Form 990, Part X, col. (B) line 15.)		•	818,187
Part X	Other Liabilities.			020/201
	Complete if the organization answered "Yes"	on Form 990 Part IV	line 11e or 11f See Forr	n 990 Part X
	line 25.		,	,
1.	(a) Description of liability			(b) Book value
	income taxes			
	rred grant revenue			687,210
(3)				,
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	n (b) must equal Form 990, Part X, col. (B) line 25.)		N	687,210
· Juli (Colulli	(D) IIIIC 20.)			301,210

Schedule D (Form 990) 2021 Grace School of Theology		76-069084	7	Page 4
Part XI Reconciliation of Revenue per Audited Financial State	tements V	Vith Revenue per	Retu	rn.
Complete if the organization answered "Yes" on Form 99				
1 Total revenue, gains, and other support per audited financial statements			1	4,406,090
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a Net unrealized gains (losses) on investments	. 2a			
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	4 406 000
3 Subtract line 2e from line 1			3	4,406,090
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		1 761 200		
b Other (Describe in Part XIII.)	4b	1,761,382		1 761 202
c Add lines 4a and 4b			4c 5	1,761,382
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Part XII Reconciliation of Expenses per Audited Financial Sta				6,167,472
Part XII Reconciliation of Expenses per Audited Financial Sta Complete if the organization answered "Yes" on Form 99			er Ke	eturn.
)	4,335,721
1 Total expenses and losses per audited financial statements2 Amounts included on line 1 but not on Form 990, Part IX, line 25:				4,333,721
	2a			
a Donated services and use of facilities b Prior year adjustments	2b			
b Prior year adjustments	2c			
c Other losses d Other (Describe in Part XIII.)	2d C	> .		
e Add lines 2a through 2d)	2e	
3 Subtract line 2e from line 1			3	4,335,721
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.)	2 4b	1,761,382		
o Add lines 4e and 4h	·	,	4c	1,761,382
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	6,097,103
Part XIII Supplemental Information.				
Provide the descriptions required for Part II, lines 3, 5, and 9; Part II Lines 1a and 4; Part III	art IV, lines 1	b 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 prov				
Part XI, Line 4b - Revenue Amounts Includ	ded on	Return - Ot	her	
Scholarships			\$	1,761,382
. •				
Part XII, Line 4b - Expense Amounts Inclu	ided on	Return - O	the:	r
Scholarships			Ş	1,761,382
X				
Y				
·				
•				

Schedule D (Form 990) 202	1 Grace	School o	of Theolog	ſУ	76-06908	347	Page 5
Part XIII	Supplem	ental Inforr	nation (contin	of Theolog nued)				
							7	
						. 01	•	
						(
					~			
						Y		
					~ ~ ~ ~			
				.0				
				کاپند				
				. 5				
)				
				Y				
			• ()					
			_\\\					
			O .y					
			V					
			O))					
		\sim						

SCHEDULE E

(Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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 2021

Open to Public Inspection

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	
	· · · · · · · · · · · · · · · · · · ·			
4	Does the organization maintain the following?			
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	х	
b	Records documenting that scholarships and other financial assistance are awarded on a racially 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 more spice, use Part II.	4d	Х	
5	Does the organization discriminate by race in any way with respect to:			
а	Students' rights or privileges?	5a		X
b	Admissions policies?	5b		X
С	Employment of faculty or administrative staff?	5c		x
d	Scholarships or other financial assistance?	5d		х
е	Educational policies?	5e		х
f	Use of facilities?	5f		x
	Athletia programa?	F		v
g	Athletic programs?	5g		X
h	Other extracurricular activities? If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.	5h		X
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		X
_	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	_	v	

Schedule E (Form 990) 2021		Grace School of Theology 76-069						Page 2
Part II	Supplemental Information applicable. Also provide any	1. Provide	the explanati	ons re	equired by Part I, lines			Ğ
						\sim		
						~0}		
					92			
					5			
					<u> </u>			
			.,6)				
			O,					
		. ()						
•								
)						
	Q^{∞}							
•	Y							

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.

► Attach to Form 990.

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

2021
Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number

Grace School of Theology 76-0690847

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on

Foi	rm 990, Part IV, line	14b.			
1 For grantma	kers. Does the organi	zation maintain record	ds to substantiate the amount of	its grants and	
other assistar	nce, the grantees' eligi	bility for the grants or	assistance, and the selection cr	riteria used to	
	ants or assistance?	-			X Yes No
_					
_		V the organization's	procedures for monitoring the us	se of its grants and other assistance	
outside the U	nited States.				
3 Activities per	Region. (The following	Part I, line 3 table ca	n be duplicated if additional spa	ace is needed.)	
(a) Region	(b) Number	(c) Number of	(d) Activities conducted in the	(e) If activity listed in (d) is	(f) Total
	of offices in the region	employees, agents, and	region (by type) (such as, fundraising, program services,	a program service, describe specific type of	expenditures for and investments
	the region	independent	investments, grants to recipients	service(s) in the region	in the region
		contractors in the region	located in the region)		
Asia		<u> </u>			
(1)	1	1	Ministry	Grants	490,19
(-)					
(2)					
(2)					
(3)			^		
(3)					
(4)				´	
(4)			5		
(E)			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
(5)			10		
(4)			CY		
(6)					
			. 5		
(7)			7.4		
		4) /		
(8)					
(9)		•			
		11			
(10)	A				
[11]					
[12]					
	Y				
(13)					
(14)					
(15)					
•					
(16)					
(17)					
3a Subtotal	1	1			490,19
b Total from continuation					, -
sheets to Part I					
c Totals (add					
lines 2s and 2h)	1	1			400 101

Schedule F (Form 990) 2021 Grace School of Theology 76-0690847 Page 2

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990 Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. (i) Method of 1 (a) Name of (b) IRS code (c) Region (d) Purpose of (e) Amount of (f) Manner of (g) Amount of (h) Description valuation (book, FMV, organization section and EIN grant cash grant cash noncash of noncash assistance appraisal, other) (if applicable) disbursement assistance 490,195 Ministry Wire & Cash (1) (3) (5) (9) (10) (11) (12) (13) (14) (15) (16)2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter 3 Enter total number of other organizations or entities Schedule F (Form 990) 2021 Schedule F (Form 990) 2021 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 (e) Manner of (f) Amount of (g) Description recipients cash grant cash noncash of noncash assistance disbursement assistance appraisal, other) (10) (11) (12) (13) (14) (15) (16) (17) (18)

1 6	i creight offile		
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 Certain 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 Roycott Report (see Instructions for Form 5713; don't file with Form 990)	Yes	X No
	o isch	Schedule F (Forr	n 990) 202
	Rillin		

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.

information. Coo motivatione.
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 monthly based on actual cash
requirements. Recipients have an online financial/bookkeeping system where
monthly reports are generated. The financial records are also audited by
an independent auditor.
Part I, Line 3 - Activities per Region
Region Expenditures Investments
Asia \$ 490,195 \$ 0
10
C^{V}
C
Q^{∞}
Y

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

Employer identification number Name of the organization Grace School of Theology 76-0690847 **General Information on Grants and Assistance** Part I 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990 Part II Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (a) Name and address of organization (d) Amount of cash Method of valuation (e) Amount of (h) Purpose of grant (b) EIN (a) Description of noncash assistance or government grant or assistance noncash assistance if applicable) (1) (2) (3) (4)(5) (6) (7)(9) 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

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

chedule I (Form 990) (2021) Grace School	l of Theology	7	6-0690847		Page 2
Part III Grants and Other Assistance	to Domestic Individ	duals. Complete if th	e organization ansv	vered "Yes" on Form 990,	
Part III can be duplicated if add (a) Type of grant or assistance	(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
Scholarships	1098	1,761,382			
2				.1	
3				07	
1			<u> </u>	Ox	
5)	
3			9,6		
7					
Part IV Supplemental Information. Pr	ovide the information	required in Part I, li	2: Part III, colum	n (b); and any other additi	onal information.
Part I, Line 2 - Procedure Students to be awarded by					
the form of scholarships a	and discounts	which are ar	oplied direc	tly to	
student accounts.					
	C	J			
_	3 ~				

SCHEDULE J (Form 990) Compensation Information

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

► Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
 ► Attach to Form 990.

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

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number

OMB No. 1545-0047

Open to Public

Inspection

Grace School of Theology 76-0690847

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form			
	990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
h	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment			
	or reimbursement or provision of all of the expenses described above? If "No," complete Part III to			
		1b		
	explain	IU		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by a			
2				
	directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line	•		
	1a?	2		
_				
3	Indicate which, if any, of the following the organization used to establish the compensation of the			
	organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a			
	related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation curvey or study			
	Form 990 of other organizations Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in or receive payment from a supplemental non, unified retirement plan?	4b		X
	Participate in or receive payment from an equity-bases compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a–c, list the persons and provide the applicable amounts for each item in Part III.			
	• ()			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5–9.			
5	For persons listed on Form 990, Part VIII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the revenue of:			
а	The organization?	5a		X
	Any related organization?	5b		Х
	If "Yes" on line 5a or 5b, lescribe in Part III.	-		
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
-	compensation contingent on the net earnings of:			
а	The organization?	6a		х
	Any related organization?	6b		X
-	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed			
-	1 1 1 1 1 1 5 100 KW 11 1 1 1 D 1 II	7		x
8	were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject			
•	to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe			
		8		х
	in Part III	,		
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
,	Regulations section 53.4958-6(c)?	9		
	1.0gailation 5 500tion 50.7000-0[0]:	J		

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

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

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

(A) Name and Title		(B) Breakdown of W-2 (i) Base compensation	and/or 1099-MISC and/or 1 (ii) Bonus & incentive compensation	(iii) Other reportable compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)–(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
Dave Anderson	(i)	169,025	0	_	23,093	66,744	258,862	
Trustee/President	(ii)	0	0) C	0	0		
	(i)							
	(ii) (i)				303			
	(ii)							
	(i)							
	(ii)			0				
	(i)				Y			
	(ii) (i)			———				
	(ii)							
	(i)			5				
	(ii)		A (
	(i)							
	(ii)							
	(ii)							
	(i)		17					
	(ii)							
	(i)							
	(ii)	·• ·						
	(ii)							
	0	7						
	(ii)	Y						
	(11)							
	(ii)							
	(i)							
	(ii)							

Schedule J (Form 990) 2021

additional information.	dditional information.	Il Supplemental Information the information, explanation, or		b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part	II. Also complete this
		additional information.	, , - , - , - , - , - , - , - , - , - ,		,
	COVID- CO				
				·	
				∠ 1	
				······································	
				A -	
				A Y	
			A		
				O	
				, 	
			. 6		
			4) '		
Q 1012			• ()		
7 0,	Q ¹ O ²		\		
7					
			4)		
	y		··· X ······		
			y		

SCHEDULE O (Form 990)

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.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ.

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

Open to Public

Grace School of Theology 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 employees. 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's Process to Review Form 990 Form 990 is prepared by an outside CPA firm and is reviewed by management prior to filing. Form 990, Part VI, Line 12c - inforcement 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 before any transaction is proposed. All directors and officers must reviewed by the Board of Directors to determine if such conflicts exist. 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	internal revenue del vice	Go to www.irs.gov/Forms90 for the latest information.	mspection
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 employees. 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's Process to Review Form 990 Form 990 is prepared by an outside CPA firm 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 membe and officer. The Organization's policy is a duty to disclose agreement to the Board of Directors before any transaction is proposed. All directors and officers must reviewed by the Board of Directors to determine if such conflicts exist. If any financial interest regarding compensation is found from member, that member is precluded from voting on matters pertaining to that member's compensation.	Name of the organization	Grace School of Theology	
The Seminary employs a CPEO as the employer for all employees. 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's Process to Review Form 990 Form 990 is prepared by an outside CPA firm and is reviewed by management prior to filing. Form 990, Part VI, Line 12c - inforcement 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 before any transaction is proposed. All directors and officers must review their outside business or professional interests. Interests are reviewed by the Board of Directors to determine if such conflicts exist. 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 V, Line 4b - Financial Accounts in For	
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's Process to Review Form 990 Form 990 is prepared by an outside CPA firm and is reviewed by management prior to filing. Form 990, Part VI, Line 12c = inforcement 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 before any transaction is proposed. All directors and officers must review their outside business or professional interests. Interests are reviewed by the Board of Directors to determine if such conflicts exist. 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 3 - Management Delegated	
management officials. Grace Asia, Inc. has administrative duties. Form 990, Part VI, Line 11b - Organization's process to Review Form 990 Form 990 is prepared by an outside CPA firm 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 before any transaction is proposed. All directors and officers must review their outside business or professional interests. Interests are reviewed by the Board of Directors to determine if such conflicts exist. If any financial interest regarding compensation is found from member, that member is precluded from voting on matters pertaining to that member's compensation.	The Semina:	ry employs a CPEO as the employer for all e	employees.
Form 990, Part VI, Line 11b - Organization a process to Review Form 990 Form 990 is prepared by an outside CPA firm and is reviewed by management prior to filing. Form 990, Part VI, Line 12c = inforcement 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 before any transaction is proposed. All directors and officers must review their outside business or professional interests. Interests are reviewed by the Board of Directors to determine if such conflicts exist. If any financial interest regarding compensation is found from member, that member is precluded from voting on matters pertaining to that member's compensation.	Amounts on	Form 990, Part IX, Line 11a represent com	ensition to
Form 990 is prepared by an outside CPA firm and is reviewed by management prior to filing. Form 990, Part VI, Line 12c = inforcement 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 before any transaction is proposed. All directors and officers must review their outside business or professional interests. Interests are reviewed by the Board of Directors to determine if such conflicts exist. If any financial interest regarding compensation is found from member, that member is precluded from voting on matters pertaining to that member's compensation.	management	officials. Grace Asia, Inc. has administr	cative duties.
Form 990 is prepared by an outside CPA firm and is reviewed by management prior to filing. Form 990, Part VI, Line 12c = inforcement 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 before any transaction is proposed. All directors and officers must review their outside business or professional interests. Interests are reviewed by the Board of Directors to determine if such conflicts exist. 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 12c = inforcement 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 before any transaction is proposed. All directors and officers must review their outside business or professional interests. Interests are reviewed by the Board of Directors to determine if such conflicts exist. 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 11b - Organization's Process	to Review Form 990
Form 990, Part VI, Line 12c - Anforcement 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 before any transaction is proposed. All directors and officers must veview their outside business or professional interests. Interests are reviewed by the Board of Directors to determine if such conflicts exist. 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 is	s prepared by an outside CPA firm and is re	eviewed by management
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 before any transaction is proposed. All directors and officers must review their outside business or professional interests. Interests are reviewed by the Board of Directors to determine if such conflicts exist. If any financial interest regarding compensation is found from member, that member is precluded from voting on matters pertaining to that member's compensation.	prior to f	iling.	
and officer. The Organization's policy is a duty to disclose agreement to the Board of Directors before any transaction is proposed. All directors and officers must review their outside business or professional interests. Interests are reviewed by the Board of Directors to determine if such conflicts exist. 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 12c - Enforcement of Conflict	s Policy
the Board of Directors before any transaction is proposed. All directors and officers must review their outside business or professional interests. Interests are reviewed by the Board of Directors to determine if such conflicts exist. If any financial interest regarding compensation is found from member, that member is precluded from voting on matters pertaining to that member's compensation.	Annual disc	closure of conflict of interest is complete	ed by each board membe
and officers must review their outside business or professional interests. Interests are reviewed by the Board of Directors to determine if such conflicts exist. If any financial interest regarding compensation is found from member, that member is precluded from voting on matters pertaining to that member's compensation.	and office	r. The Organization's policy is a duty to o	disclose agreement to
Interests are reviewed by the Board of Directors to determine if such conflicts exist. If any financial interest regarding compensation is found from member, that member is precluded from voting on matters pertaining to that member's compensation.	the Board	of Directors before any transaction is prop	oosed. All directors
conflicts exist. If any financial interest regarding compensation is found from member, that member is precluded from voting on matters pertaining to that member's compensation.	and office	rs must review their outside business or pr	rofessional interests.
from member, that member is precluded from voting on matters pertaining to that member's compensation.	Interests	are reviewed by the Board of Directors to d	letermine if such
that member's compensation.	conflicts	exist. If any financial interest regarding	compensation is found
	from membe	r, that member is precluded from voting on	matters pertaining to
Form 990, Part VI, Line 15b - Compensation Process for Officers	that member	r's compensation.	
Form 990, Part VI, Line 15b - Compensation Process for Officers			
	Form 990, 1	Part VI, Line 15b - Compensation Process fo	or Officers

Association of Theological Schools. The process included board approval

Benchmarking was provided by accreditors TRACS and The

Schedule O (Form 990) 2021

Name of the organization Grace School of Theology	76-0690847
with the action recorded in board minu	tes.
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	\$ -1,761,382
Scholarships	\$ 1,761,382
	-C1
. 60	
7,7C	
	Page 1 of 1