## **PUBLIC DISCLOSURE COPY**

Form **990** 

# **Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

2024

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

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

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

Open to Public Inspection

A	For the	2024 calend	dar year, or tax year beginning	, 20	24, and end	ling			, 20		
В	Check if	applicable:	C Name of organization THE SEM	IINAR NETWORK, INC.				D Emple	oyer identification number		
	Address	change	Doing business as STAND TOO	SETHER TRUST					46-3508366		
	Name ch	ange	Number and street (or P.O. box if	mail is not delivered to street addre	ess)	Room/	'suite	<b>E</b> Teleph	none number		
	Initial ret	urn	4201 WILSON BLVD.			(	0800		(703) 214-7118		
	Final retu	rn/terminated	City or town, state or province, co	ountry, and ZIP or foreign postal co	de						
	Amended	d return	ARLINGTON, VA 22203					<b>G</b> Gross	receipts \$ 172,644,390		
	Applicati	on pending	F Name and address of principal offi	cer: DEREK JOHNSON			H(a) Is this a grou	up return fo	or subordinates? Yes Vo		
			SAME AS C ABOVE			[1	H(b) Are all sul	bordinat	es included?  Yes  No		
ı	Tax-exer	npt status:	✓ 501(c)(3)	) (insert no.)	1) or 527	,	If "No," at	tach a li	st. See instructions.		
J	Website	: N/A		·	•		H(c) Group exe	emption	number		
K	Form of c	organization: 🗸	Corporation Trust Associate	tion Other	L Year of form	mation:	2013	M State	of legal domicile: DE		
Р	art I	Summa	ry				·				
	1	Briefly des	cribe the organization's missi	on or most significant activ	ities: STAN	ND TO	GETHER TR	UST PI	ROVIDES SUPPORT		
e		TO A GROV	WING NETWORK OF SOCIAL E	NTREPRENEURS - THOSE T	ACKLING TH	НЕ МА	JOR CHALL	ENGES	OF OUR TIME		
Activities & Governance	(CONTINUED ON SCHEDULE O)										
/err	2	Check this	box [] if the organization di	scontinued its operations of	r disposed	l of mo	ore than 25°	% of it	s net assets.		
ő	3	Number of	voting members of the gove	rning body (Part VI, line 1a)				3	4		
∞ಶ	4	Number of	independent voting member	s of the governing body (Pa	art VI, line 1	lb) .		4	3		
ties	5	Total numb	oer of individuals employed in	n calendar year 2024 (Part \	/, line 2a)			5	47		
Ξ̈	6	Total numb	per of volunteers (estimate if r	necessary)				6	0		
Ac	7a	Total unrela	ated business revenue from F	Part VIII, column (C), line 12				7a	309,450		
	b	Net unrelat	ted business taxable income	from Form 990-T, Part I, lin	e 11			7b	51,120		
							Prior Year		Current Year		
ø	8	Contributio	ons and grants (Part VIII, line	1h)			57,55	58,542	152,781,944		
Revenue	9 Program service revenue (Part VIII, line 2g)								81,537		
ě	10	Investment	t income (Part VIII, column (A)	), lines 3, 4, and 7d)			(182,847)		12,592,399		
ш	11	Other revei	nue (Part VIII, column (A), line	es 5, 6d, 8c, 9c, 10c, and 1	le)		1,227,174		7,188,510		
	12	Total reven	ue-add lines 8 through 11 (m	nust equal Part VIII, column	(A), line 12)		58,66	64,952	172,644,390		
			d similar amounts paid (Part I)				142,44	18,974	132,473,446		
	14	Benefits pa	aid to or for members (Part IX	, column (A), line 4)							
S	15	Salaries, ot	ther compensation, employee b	penefits (Part IX, column (A),	lines 5-10)		3,87	75,256	5,699,716		
Expenses	16a	Profession	al fundraising fees (Part IX, co	0	0						
χbe	b	Total fundr	raising expenses (Part IX, colu								
Ш	1		enses (Part IX, column (A), line				11,09	98,451	20,508,309		
	18	Total exper	nses. Add lines 13-17 (must	equal Part IX, column (A), li	ne 25) .		157,42		158,681,471		
	19	Revenue le	ess expenses. Subtract line 1	8 from line 12			(98,75	7,729)	13,962,919		
Net Assets or Fund Balances						Begi	nning of Curre	nt Year	End of Year		
set	20		ts (Part X, line 16)				307,65	58,606	303,757,058		
A Y	21		, ,				69,93	35,379	71,522,280		
			or fund balances. Subtract li	ne 21 from line 20			237,72	23,227	232,234,778		
	art II		re Block								
			<ul> <li>I declare that I have examined this r</li> <li>Declaration of preparer (other than</li> </ul>						my knowledge and belief, it is		
	0, 0011001	, and complete	o. Dociaration of proparor (other than	omesi, ie saesa en an imermaten	or willon propi	aror riac	l	<b>,</b> .			
e:	~ ~										
Sig	_	Signature					Date				
не	ere		H HEUER, TREASURER								
			rint name and title	D	ı	<u> </u>	<u> </u>	-	DTIN		
Pa	iid	1	e preparer's name	Preparer's signature		Date	<b>I</b>	Check [	if PTIN		
	epare	r MICHAEL						self-emp	7 00402004		
	e Onl	Y Firm's nan							irm's EIN 44-0160260		
		Firm's add		SUITE 1700, KANSAS CITY, M		246	Phone	no.	(816) 221-6300		
IVIa	v the IH	so discuss t	this return with the preparer s	snown apove / See instructi	ons	_			. Ves No		

Form 990 (2024) Page **2** 

Part I	Statement of Program Service Accomplishments  Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	STAND TOGETHER TRUST FUNDS INITIATIVES THAT SUPPORT BOTTOM-UP SOLUTIONS BY EMPOWERING PEOPLE
	THROUGH KEY INSTITUTIONS LIKE BUSINESS, COMMUNITIES, EDUCATION, AND GOVERNMENT.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O.
	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$151,881,221 including grants of \$132,473,446 ) (Revenue \$81,537 )
	STAND TOGETHER TRUST CONNECTS SOCIAL ENTREPRENEURS AND POLICY INNOVATORS WITH RESOURCES-FUNDING,
	INCUBATION, TALENT, AND STRATEGIC SUPPORT-TO ACCELERATE THEIR IMPACT AND ADDRESS THE ROOT CAUSES  OF OUR COUNTRY'S TOUGHEST CHALLENGES.
4b	(Code:) (Expenses \$including grants of \$) (Revenue \$)
4c	(Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$ ) (Revenue \$ )
4e	Total program service expenses 151,881,221

Part IV	Checklist of Required Schedules			
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			res	NO
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	~	
2 3	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I </i>	2	<b>V</b>	
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	3		<u>/</u>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	4		~
6	assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III 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	5 6		<i>V</i>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		<i>v</i>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," complete Schedule D, Part III	8		_
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV			
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10		\( \times \)
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X, as applicable.			
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	~	
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	_	
С	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		_
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If</i> "Yes," <i>complete Schedule D, Part IX</i>	11d	~	
e f	Did the organization report an amount for other liabilities in Part X, line 25? <i>If</i> "Yes," <i>complete Schedule D, Part X</i> 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>	11e	<i>v</i>	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		_
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	~	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		~
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		~
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	4.415		
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? <i>If "Yes," complete Schedule F, Parts II and IV</i>	14b	•	
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? <i>If "Yes," complete Schedule F, Parts III and IV.</i>	15 16	<b>/</b>	<b>V</b>
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? <i>If "Yes," complete Schedule G, Part I.</i> See instructions	17		·
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		·
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		·
20a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a		~
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	~	

Part I	V Checklist of Required Schedules (continued)		-	
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	~	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	,	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		,
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		_
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		,
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	250		
20	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		V
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	07		
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule	27		V
	L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i> "Yes," complete Schedule L, Part IV	28a		_
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		~
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		_
29	Did the organization receive more than \$25,000 in noncash contributions? <i>If "Yes," complete Schedule M</i>	29	~	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified		-	
	conservation contributions? If "Yes," complete Schedule M	30		~
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		~
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		,
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	~	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	24	ا ر ا	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	34 35a	\( \triangle \)	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	-	-	
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	~	
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2 </i>	36		,
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	07		
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and	37		<i>'</i>
Dort	19? Note: All Form 990 filers are required to complete Schedule O	38	<b>'</b>	
Part	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			
_			Yes	No
_	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
b C	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
•	reportable gaming (gambling) winnings to prize winners?	10		

Part	V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return  2a 47			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	~	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	~	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O .	3b	~	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		~
b	If "Yes," enter the name of the foreign country			
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	_		4
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		V
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5b 5c		<i>V</i>
c 6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	30		
ou	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		~
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			
7	Organizations that may receive deductible contributions under section 170(c).	6b		
7 a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
u	and services provided to the payor?	7a		~
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		_
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		~
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		~
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		~
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	•		
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, 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			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
_ b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	-		
13 a	Section 501(c)(29) qualified nonprofit health insurance issuers.  Is the organization licensed to issue qualified health plans in more than one state?	13a		
a	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.	100		
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		~
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O.	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		-
16	If "Yes," see the instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		~
.0	If "Yes," complete Form 4720, Schedule O.	10		
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person, engage in any 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 (2024) Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a Part VI response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year . . . 1a 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. Enter the number of voting members included on line 1a, above, who are independent . 1b 3 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 V 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 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 6 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b V Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a 8b 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 . . . . .

Yes No **10a** Did the organization have local chapters, branches, or affiliates? 10a If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a **b** 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 policy? *If "No," go to line 13* 12a Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c 13 13 Did the organization have a written document retention and destruction policy? 14 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official . . . . . . 15a Other officers or key employees of the organization . . . . . . . . . . . . . . . 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement 16a / b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the Section C. Disclosure

List the states with which a copy of this Form 990 is required to be filed AL, AR, CA, FL, (CONTINUED ON SCHEDULE O)

✓ Upon request

State the name, address, and telephone number of the person who possesses the organization's books and records.

(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

HENRICH HEUER, 4201 WILSON BLVD, SUITE 0800, ARLINGTON, VA 22203, (703) 214-7118

Another's website

and financial statements available to the public during the tax year.

Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)

Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy,

Other (explain on Schedule O)

17

18

19

20

Own website

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

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# 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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

Check this box if neither the organization nor	r any relate	d org	aniz			ompe	nsa	ted any current	otticer, director,	or trustee.
	(C)									
(A)	(B)	/de m			ition			(D)	(E)	(F)
Name and title	Average					e than o i is both		Reportable	Reportable	Estimated amount
	hours per week	officer and a director/truste				tor/trust		compensation from the	compensation from related	of other compensation
	(list any	or o	Ins	Officer	Se .	Hig	Former	organization (W-2/	organizations (W-2/	
	hours for	Individual trustee or director	Institutional trustee	icer	Key employee	Highest compensated employee	mer	1099-MISC/	1099-MISC/	organization and
	related organizations	or a	ona		lblo.	ee cor		1099-NEC)	1099-NEC)	related organizations
	below	rust	Ē		yee	npe				
	dotted line)	ee	stee			nsat				
						ed				
(1) RUSSELL GREENE	50.0									
SENIOR FELLOW, ECONOMIC PROGRESS	0.0					~		215,967	0	24,649
(2) ADAM MILLSAP	50.0									
SENIOR FELLOW, ECONOMIC PROGRESS	0.0					~		211,788	0	22,371
(3) VIKRANT REDDY	50.0									
SENIOR FELLOW, CONSTITUTIONALLY LIMITED GOVERNMENT	0.0					~		200,120	0	12,511
(4) NICOLE GORDAN	50.0									
PROGRAM OFFICER, CONSTITUTIONALLY LIMITED GOVERNMENT	0.0					~		169,156	0	30,033
(5) MICHAEL WILT	50.0									
PROGRAM OFFICER, CONSTITUTIONALLY LIMITED GOVERNMENT	0.0					~		169,591	0	7,638
(6) DALE GIBBENS	1.0									
DIRECTOR	6.0	~						0	7,093	0
(7) BRIAN HOOKS	1.0									
DIRECTOR	4.0	~						0	0	0
(8) CHARLES CHASE KOCH	1.0									
DIRECTOR	6.0	~						0	0	0
(9) DAVID L ROBERTSON	1.0									
DIRECTOR	3.0	~						0	0	0
(10) DEREK JOHNSON	1.0									
EXECUTIVE DIRECTOR	2.0			~				0	0	0
(11) HENRICH HEUER	1.0									
TREASURER	5.0			~				0	0	0
(12) WESTON EDWARDS	1.0									
SECRETARY	5.0			~				0	0	0
(13)	<u> </u>									
(14)										

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B)  Average hours per week (list any hours for related organizations below dotted line)	bo office or directo	unles	Pos neck ss pe	rson	e than or is or employee	an	(D)  Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Report compen from re organizatio 1099-N 1099-N	able sation lated ns (W-2/	o com fr	(F) ted amo f other oensatio om the ization a organiza	on and
(15)			ee			ated							
(16)													
(17)													
(18)													
(19)													
(20)													
(21)													
(22)													
(23)													
(24)													
(05)													
(25)													
1b Subtotal								966,622		7,093		97	7,202
c Total from continuation sheets to Part	•							0		0			0
d Total (add lines 1b and 1c)			IOSE					966,622 the received mor	 e than \$1	7,093	of	97	7,202
reportable compensation from the organi			.000	, 1101	·ou	above	,, <b></b>	20	o triari φ i	00,000	O1		
<ul> <li>3 Did the organization list any former of employee on line 1a? If "Yes," complete of the standard organization and related organizations.</li> </ul>	S <i>chedule J</i> sum of re	for si	uch ble d	<i>indi</i> com	ividu nper	<i>ual</i> nsatio	. · n a		 nsation fr	 om the	3	Yes	No 🗸
<ul><li>individual</li><li>5 Did any person listed on line 1a receive of for services rendered to the organization?</li></ul>									tion or inc		5	V	·
Section B. Independent Contractors  1 Complete this table for your five high compensation from the organization. Report													
(A) Name and business add	· · · · ·							(B) Description of serv			(C) Compens		
HARVEY-CLEARY BUILDERS, 6710A ROCKLEDGE DF		BET	4EQI	י בר	MD 1	20817	CC	ONSTRUCTION	rices		Compens	4,599	115
STAND TOGETHER CHAMBER OF COMMERCE, 4201 WILSON							_	MINISTRATIVE S	ERVICES			1,296	

Name and business address	Description of services	Compensation
HARVEY-CLEARY BUILDERS, 6710A ROCKLEDGE DR, SUITE 430, BETHESDA, MD 20817	CONSTRUCTION	4,599,415
STAND TOGETHER CHAMBER OF COMMERCE, 4201 WILSON BLVD., STE 0900, ARLINGTON, VA 22203	1,296,289	
STAND TOGETHER COMMUNICATIONS, 4201 WILSON BLVD., STE 0900, ARLINGTON, VA 22203	1,023,742	
TYTON PARTNERS, 100 FRANKLIN STREET, SUITE 404, BOSTON, MA 02110	RESEARCH SERVICES	325,000
OTJ ARCHITECTS INC, 580 WATER ST SW, STE 300, WASHINGTON, DC 20024	ARCHITECTURAL SERVICES	287,994
2 Total number of independent contractors (including but not limited to	those listed above) who	
received more than \$100,000 of compensation from the organization	7	
		200

## Part VIII Statement of Revenue

		Check if Schedule	Осо	ntains a re	spon	se or note to an	y line in this Pa	ırt VIII .   .   .		
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
is, is	1a	Federated campaig	ns .		1a					
Contributions, Gifts, Grants, and Other Similar Amounts	b	Membership dues			1b					
ع و	С	Fundraising events			1c					
Ţ,	d	Related organization			1d	113,000,000				
	e	Government grants			1e	, ,				
in,	f	All other contribution								
i i		and similar amounts no			1f	39,781,944				
p g	q	Noncash contribution	ons in	cluded in						
e di	Ū	lines 1a-1f			1g	\$ 9,051,546				
an Go	h	Total. Add lines 1a-					152,781,944			
					-	Business Code	102,101,011			
e l	2a	SERVICE REVENUE				900099	81,537	81,537		
ا کے	b							31,331		
gram Ser Revenue	C									
E S	d									
gra Re	u _									
Program Service Revenue	f	All other program se					0	0	0	0
-	g	Total. Add lines 2a-					81,537		J	
	3						21,001			
	3 Investment income (including dividends, other similar amounts)					3,147,795			3,147,795	
	4	Income from investr	nent o	of tax-exem	od ta	nd proceeds	· · ·			
	5	Danielika -			-	·				
				(i) Real		(ii) Personal				
	6a	Gross rents	6a	6.87	0,303	. ,				
	b	Less: rental expenses	6b	-,-	0					
	c	Rental income or (loss)		6.87	0,303	0				
	d	Net rental income o					6,870,303			6,870,303
	7a	Gross amount from	(	(i) Securit		(ii) Other				
		sales of assets								
		other than inventory	7a	9,44	4,604					
ø	b	Less: cost or other basis								
Revenue		and sales expenses .	7b		0					
eve	С	Gain or (loss)	7c	9,44	4,604	0				
	d	Net gain or (loss)					9,444,604			9,444,604
Other		Gross income from	m fu	ndraising						
Б		events (not including		J						
		of contributions rep	porte	d on line						
		1c). See Part IV, line	e 18		8a					
	b	Less: direct expens	es .		8b					
	С	Net income or (loss)	) from	n fundraisin	g eve	nts				
	9a	Gross income f								
		activities. See Part I	IV, lin	e 19 .	9a					
	b	Less: direct expens	es .		9b					
		Net income or (loss)			tivitie	s				
	10a	Gross sales of ir		•						
		returns and allowan			10a					
	b	Less: cost of goods			10b					
	С	Net income or (loss)	) from	sales of in	vento	-				
Sn						Business Code				
e e	11a	PARTNERSHIP INCO	OME			901101	309,450	0	309,450	0
lan en	b	OTHER INCOME				900099	8,757	0	0	8,757
scellaneo Revenue	С									
Miscellaneous Revenue	d	All other revenue			•		0	0	0	0
_	e	Total. Add lines 11a					318,207			
	12	Total revenue. See	instr	uctions .			172,644,390	81,537	309,450	19,471,459

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# Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).	
Chack if Schodula O contains a response or note to any line in this Part IV	-

	Check if Schedule O contains a response	or note to any line	in this Part IX .		
	ot include amounts reported on lines 6b, 7b, o, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21 .	132,021,756	132,021,756		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	371,690	371,690		
3	Grants and other assistance to foreign	,	·		
	organizations, foreign governments, and				
	foreign individuals. See Part IV, lines 15 and 16	80,000	80,000		
4	Benefits paid to or for members	22,222	22,222		
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above to disqualified				
•	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
-	1	4.050.704	4 404 407	405.077	
7 8	Other salaries and wages	4,656,784	4,191,107	465,677	
J	section 401(k) and 403(b) employer contributions	200 222	040.045	20.000	
_	, , , , , , , , , , , , , , , , , , , ,	233,680	210,312	23,368	
9	Other employee benefits	444,152	399,737	44,415	
10	Payroll taxes	365,100	328,590	36,510	
11	Fees for services (nonemployees):				
а	Management				
b	Legal				
С	Accounting	145,220		145,220	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
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.) .	4,606,329	1,014,336	3,591,398	595
12	Advertising and promotion	147,727	98,101	49,626	
13	Office expenses	14,038	6,955	7,083	
14	Information technology				
15	Royalties				
16	Occupancy	6,497,758	5,847,983	649,775	
17	Travel	337,333	337,333		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .	2,381,669	1,809,997	571,672	
20	Interest	2,479		2,479	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .	5,734,656	5,161,190	573,466	
23	Insurance	5,922		5,922	
24	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
	' '				
a	IMPAIRMENT LOSS	300,000	0	300,000	0
b	TAXES	296,036	0	296,036	0
C	BAD DEBT EXPENSE	39,142	2,134	37,008	0
d					
e	All other expenses	0	0	0	0
25	Total functional expenses. Add lines 1 through 24e	158,681,471	151,881,221	6,799,655	595
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)				
					Form <b>990</b> (2024)

## Part X Balance Sheet

		Check if Schedule O contains a response or not		<b>(A)</b> Beginning of year		(B) End of year
	1	Cash—non-interest-bearing		1,339,061	1	2,791,321
	2	Savings and temporary cash investments		15,093,433	2	75,585,022
	3	Pledges and grants receivable, net		12,351,000	3	11,659,500
	4	Accounts receivable, net	-	504,252	4	797,714
	5	Loans and other receivables from any current or for trustee, key employee, creator or founder, substantial	rmer officer, director, al contributor, or 35%			
		controlled entity or family member of any of these pe		0	5	0
	6	Loans and other receivables from other disqualified under section 4958(f)(1)), and persons described in s		0	6	0
S	7	Notes and loans receivable, net		300,000	7	0
Assets	8	Inventories for sale or use	<u> </u>	0	8	
As	9	Prepaid expenses and deferred charges	-	369,530	9	637,218
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a				
	b	Less: accumulated depreciation 10th		38,790,785	10c	45,798,647
	11			69,990,705	11	9,073,530
	12	Investments—other securities. See Part IV, line 11.	_	125,051,365	12	112,748,336
	13	Investments—program-related. See Part IV, line 11.		0	13	0
	14	Intangible assets	-	0	14	
	15	Other assets. See Part IV, line 11		43,868,475	15	44,665,770
	16	Total assets. Add lines 1 through 15 (must equal line		307,658,606	16	303,757,058
	17	Accounts payable and accrued expenses		48,261	17	86,262
	18	Grants payable		5,093,666	18	1,246,038
	19	Deferred revenue	-		19	
	20	Tax-exempt bond liabilities	-		20	
	21	Escrow or custodial account liability. Complete Part	-		21	
Liabilities	22	Loans and other payables to any current or for trustee, key employee, creator or founder, substantia controlled entity or family member of any of these pe		00		
.iak	00		L	750,000	22	0
_	23	Secured mortgages and notes payable to unrelated to	·	750,000	23	0
	24 25	Unsecured notes and loans payable to unrelated thir Other liabilities (including federal income tax, paya parties, and other liabilities not included on lines 17-of Schedule D	ables to related third -24). Complete Part X	04.040.450	24	70 400 000
	26			64,043,452		70,189,980
ses	26	Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check hand complete lines 27, 28, 32, and 33.	ere 🗸	69,935,379	26	71,522,280
an	07			246 724 007	27	044 700 447
Bal	27 28			216,731,097 20,992,130	28	211,799,447 20,435,331
Net Assets or Fund Balances	20	Organizations that do not follow FASB ASC 958, cand complete lines 29 through 33.		20,992,130	20	20,435,331
o	29	Capital stock or trust principal, or current funds		0	29	
ts	30	Paid-in or capital surplus, or land, building, or equipr		0	30	
SSE	31	Retained earnings, endowment, accumulated income		0	31	
t A	32	Total net assets or fund balances	· ·	237,723,227	32	232,234,778
Se	33	Total liabilities and net assets/fund balances		307,658,606	33	303,757,058
				201,000,000		Form <b>990</b> (2024)

Form **990** (2024)

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Part	XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI				. 🗸	
1	Total revenue (must equal Part VIII, column (A), line 12)		1	72,64	4,390	
2	Total expenses (must equal Part IX, column (A), line 25)	158,681,47°		1,471		
3						
4						
5	Net unrealized gains (losses) on investments		(1	19,709	9,383)	
6	Donated services and use of facilities					
7	Investment expenses					
8	Prior period adjustments					
9	Other changes in net assets or fund balances (explain on Schedule O)			25	8,015	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	32, column (B))		2	32,23	4,778	
Part	XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
				Yes	No	
1	1 Accounting method used to prepare the Form 990:   Cash Accrual Other  If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		~	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiler	<u> </u>			Ť	
	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	~		
-	If "Yes," check a box below to indicate whether the financial statements for the year were audited of	on a				
	separate basis, consolidated basis, or both.					
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight	ht of				
	the audit, review, or compilation of its financial statements and selection of an independent accountant? . 2c					
	If the organization changed either its oversight process or selection process during the tax year, explain Schedule O.	n on				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in	า the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		~	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b			

Form **990** (2024)

## **SCHEDULE A** (Form 990)

**Public Charity Status and Public Support** Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

Employer identification number

THE	SEMINAR NETWORK, INC.					46-35	08366	
Pai	t I Reason for Public Cha	rity Status. (Al	l organizations mus	t comple	ete this p	oart.) See instructi	ons.	
The o	organization is not a private found		,		-	,		
1	A church, convention of church					0(b)(1)(A)(i).		
2	A school described in <b>section</b>		,		•			
3	A hospital or a cooperative ho							
4	A medical research organizati	•	onjunction with a hosp	oital desc	ribed in s	section 170(b)(1)(A)	III). Enter the	
_	hospital's name, city, and stat							
5	An organization operated for section 170(b)(1)(A)(iv). (Com		college or university	owned o	r operate	ed by a government	ai unit describ	ea in
6	☐ A federal, state, or local gover							
7	An organization that normally			port from	a gover	nmental unit or fron	n the general p	oublic
	described in section 170(b)(1							
8	A community trust described			,				
9	☐ An agricultural research organ or university or a non-land-gra							
	university:	ant conege or agr	iculture (see instruction	ons). Ente	r the nan	ie, city, and state of	the college of	
10	☐ An organization that normally	receives (1) more	e than 331/3% of its su	pport fro	m contrib	outions, membership	fees, and gro	 SS
	receipts from activities related	l to its exempt fu	nctions, subject to ce	rtain exc	eptions; a	and (2) no more than	33 <sup>1</sup> /3% of its	
	support from gross investmen acquired by the organization a	after June 30. 197	related business taxal 75. See <b>section 509(a</b>	ole incom a <b>)(2)</b> . (Cor	ie (iess se nplete Pa	ection 511 tax) from art III.)	businesses	
11	An organization organized and							
12	☐ An organization organized and	operated exclusi	vely for the benefit of,	to perfor	m the fun	ctions of, or to carry	out the purpos	ses of
	one or more publicly supporte							Check
	the box on lines 12a through 1	2d that describes	the type of supporting	g organiza	ation and	complete lines 12e,	12f, and 12g.	
a	_ ;;							ving
	the supported organization					he directors or trust	ees of the	
	supporting organization. Y	-	•					
b	_ ;;							
	control or management of organization(s). <b>You must</b>				persons	that control or man	age the suppor	rtea
_	Type III functionally integ	-	•		onnootio	a with and function	ully intograted	with
С	its supported organization						any integrated	vvilii,
d								
	that is not functionally inte						d an attentiver	ness
	requirement (see instruction	,	•		-			
е							e II, Type III	
	functionally integrated, or	• •	tionally integrated sup	oporting (	organizat	ion.		
	Enter the number of supported Provide the following information	-						
g	(i) Name of supported organization	(ii) EIN	(iii) Type of organization		rganization	(v) Amount of monetary	(vi) Amount o	of.
	(i) Name of supported organization	(11) (11)	(described on lines 1–10	listed in you	ur governing	support (see	other support (	
			above (see instructions))	docu	ment?	instructions)	instructions)	)
				Yes	No			
(A)								
(A)								
(B)								
(C)								
(D)								
/ <b>C</b> \								
(E)								
Toto								

Schedule A (Form 990) 2024 Page 2

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2020 **(b)** 2021 (c) 2022 (d) 2023 **(e)** 2024 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . 57,558,542 152,512,444 103,923,447 286,341,797 63,661,557 663,997,787 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 0 The value of services or facilities furnished by a governmental unit to the organization without charge . . . . 0 **Total.** Add lines 1 through 3 103.923.447 286.341.797 63.661.557 57.558.542 152.512.444 4 663.997.787 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) . . . . 273,267,944 **Public support.** Subtract line 5 from line 4 390,729,843 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2020 **(b)** 2021 (c) 2022 (d) 2023 (e) 2024 (f) Total 7 103,923,447 286,341,797 63,661,557 57,558,542 152,512,444 Amounts from line 4 . . . . . . 663,997,787 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources . . . . . . . . 108,488 80,842 292,229 1,213,439 10,018,098 11,713,096 9 Net income from unrelated business activities, whether or not the business is regularly carried on . . . . . . 0 0 142,492 27.752 53.313 223,557 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . . . . . . . 0 0 5,800 8,757 14,557 **Total support.** Add lines 7 through 10 675,948,997 11 Gross receipts from related activities, etc. (see instructions) . . . . . . . . . . . . . . . . . . 12 338.808 13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Section C. Computation of Public Support Percentage 57.80 % Public support percentage for 2024 (line 6, column (f), divided by line 11, column (f)) . . . . . 14 15 Public support percentage from 2023 Schedule A, Part II, line 14 . . . . . . . . . . . . . . . . . 331/3% support test - 2024. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this 331/3% support test - 2023. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check 17a 10%-facts-and-circumstances test - 2024. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported b 10%-facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported 

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

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Schedule A (Form 990) 2024 Page **3** 

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

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

Secti	on A. Public Support			, , ,		,	
Calen	dar year (or fiscal year beginning in)	(a) 2020	<b>(b)</b> 2021	(c) 2022	(d) 2023	<b>(e)</b> 2024	(f) Total
1	Gifts, grants, contributions, and membership fees		. ,	. ,	. ,	,	
_	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	<b>Total.</b> Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
•	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
	line 6.)						
Secti	on B. Total Support						
	dar year (or fiscal year beginning in)	(a) 2020	<b>(b)</b> 2021	(c) 2022	(d) 2023	<b>(e)</b> 2024	(f) Total
9	Amounts from line 6		, ,	. ,	, ,		
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties, and income from similar sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
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 on						
12	Other income. Do not include gain or						
14	loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First 5 years. If the Form 990 is for the	•			-		. , . ,
	organization, check this box and stop he						
	on C. Computation of Public Suppor					1.5	
15	Public support percentage for 2024 (line 8						%
16 Sooti	Public support percentage from 2023 Sch	nedule A, Part	III, line 15 .			16	%
	on D. Computation of Investment In			avilina 40. a - l		47	0/
17	Investment income percentage for 2024 (			•	. ,,		<u>%</u>
18	Investment income percentage from 2023						% and line
19a	33 <sup>1</sup> /3% support tests—2024. If the organ 17 is not more than 33 <sup>1</sup> /3%, check this box						
b	33 <sup>1</sup> /3% support tests—2023. If the organiz		-	-		_	_
ט	line 18 is not more than 33 <sup>1</sup> / <sub>3</sub> %, check this						
20	<b>Private foundation.</b> If the organization di		=		-		_
	iodiidaioii ii tilo organization di	a . iot oiloon a	~ 3/1 UII U I T	,			

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

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

All Supporting Organizations

ecti	on A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)			
	purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in <b>Part VI</b> , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?			
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5b 5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited	00		
	by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in <b>Part VI</b> .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity			
	with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
8	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).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in <b>Part VI</b> .	9a		
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in <b>Part VI</b> .	9b		
С	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 <b>Part VI</b> .	9c		
l0a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated	-		
	supporting organizations)? If "Yes," answer line 10b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	10b		

Schedule A (Form 990) 2024 Page 5 Part IV **Supporting Organizations** (continued) Yes No Has the organization accepted a gift or contribution from any of the following persons? a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization? 11a **b** A family member of a person described on line 11a above? 11b c 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 Section 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 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 Section C. Type II Supporting Organizations Yes No Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s). 1 Section D. All Type III Supporting Organizations Yes No Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? 1 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s), or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). 2 By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard. 3 Section E. Type III Functionally Integrated Supporting Organizations Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). ☐ The organization satisfied the Activities Test. *Complete line 2 below.* The organization is the parent of each of its supported organizations. *Complete line 3 below.* The organization supported a governmental entity. Describe in **Part VI** how you supported a governmental entity (see instructions). 2 Activities Test. Answer lines 2a and 2b below. Yes No Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities. 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 Parent of Supported Organizations. Answer lines 3a and 3b below. a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI. 3a

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

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				. 490
Part	V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	jan	izations	
1	☐ Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ			
Sect	ion A—Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B-Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C-Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functional (see instructions).	ally	integrated Type III suppor	ting organization

Schedule A (Form 990) 2024 Page 7

Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D-Distributions **Current Year** Amounts paid to supported organizations to accomplish exempt purposes 1 2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity 2 3 Administrative expenses paid to accomplish exempt purposes of supported organizations Amounts paid to acquire exempt-use assets 4 5 5 Qualified set-aside amounts (prior IRS approval required - provide details in Part VI) Other distributions (describe in Part VI). See instructions. 6 6 7 Total annual distributions. Add lines 1 through 6. 8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. 8 9 Distributable amount for 2024 from Section C, line 6 9 10 10 Line 8 amount divided by line 9 amount (ii) (iii) Section E—Distribution Allocations (see instructions) **Underdistributions Distributable Excess Distributions** Pre-2024 Amount for 2024 Distributable amount for 2024 from Section C, line 6 Underdistributions, if any, for years prior to 2024 (reasonable cause required - explain in Part VI). See instructions. Excess distributions carryover, if any, to 2024 **a** From 2019 . . . . . From 2020 **c** From 2021 **d** From 2022 **e** From 2023 Total of lines 3a through 3e Applied to underdistributions of prior years Applied to 2024 distributable amount Carryover from 2019 not applied (see instructions) Remainder. Subtract lines 3g, 3h, and 3i from line 3f. Distributions for 2024 from Section D, line 7: Applied to underdistributions of prior years Applied to 2024 distributable amount Remainder. Subtract lines 4a and 4b from line 4. Remaining underdistributions for years prior to 2024, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions. Remaining underdistributions for 2024. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. Excess distributions carryover to 2025. Add lines 3j and 4c. Breakdown of line 7: Excess from 2020 . . . Excess from 2021 . . . Excess from 2022 . . . Excess from 2023 . . . Excess from 2024 . . .

Schedule A (Form 990) 2024 Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part Part VI III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

## Part VI

**Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Return Reference - Identifier	Explanation
SCHEDULE A, PART III, LINE 1 - COLUMN A - UNUSUAL GRANTS	2024 CHANGE IN VALUE OF UNUSUAL GRANTS RECEIVED \$269,500.

Return Reference - Identifier	turn Reference - Identifier Explanation						
SCHEDULE A, PART II,	Description	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
LINE 10 - OTHER INCOME	(1) OTHER INCOME	0	0	0	5,800	8,757	14,557
	Total	0	0	0	5,800	8,757	14,557

NOT SUBJECT TO PUBLIC DISCLOSURE – All information in this schedule (including dollar amounts) is protected against public disclosure because, directly and in combination with other information available in the 990 or elsewhere, it reasonably

identifies contributors and discloses taxpayer return information.

# Schedule B (Form 990)

(Rev. January 2025)
Department of the Treasury
Internal Revenue Service

Name of the organization

## **Schedule of Contributors**

Attach to Form 990, 990-EZ, or 990-PF. Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

**Employer identification number** 

THE SEMINAR NETWORK, INC. 46-3508366 Organization type (check one): Filers of: Section: Form 990 or 990-EZ 501(c)( ) (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation ☐ 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation ☐ 501(c)(3) taxable private foundation Check if your organization is covered by the **General Rule** or a **Special Rule**. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filling Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions 

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

2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

NOT SUBJECT TO PUBLIC DISCLOSURE – All information in this schedule (including dollar amounts) is protected against public disclosure because, directly and in combination with other information available in the 990 or elsewhere, it reasonably identifies contributors and discloses taxpayer return information.

Schedule B (Form 990) (Rev. 1-2025)

age **2** 

Name of org	ganization IAR NETWORK, INC.		Employer identification number 46-3508366
Part I	Contributors (see instructions). Use duplicate con	pies of Part I if additional space	is needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	Name, address, and ZIP + 4	Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	Name, address, and ZIP + 4	Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person

Schedule B (Form 990) (Rev. 1-2025)

age 3

Name of orç	ganization NAR NETWORK, INC.	Employer identification number 46-3508366	
Part II	Noncash Property (see instructions). Use duplicate copie	es of Part II if additional	space is needed.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		   \$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		   \$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		   \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		   \$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		   \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		   \$	

NOT SUBJECT TO PUBLIC DISCLOSURE - All information in this schedule (including dollar amounts) is protected against

public disclosure because, d	frectly and in combination with other information available in the 990 or eisewhere, it re-	asonabiy
	identifies contributors and discloses taxpayer return information.	
Schedule B (Form 990) (Rev. 1-2025)		Pag

Name of organization **Employer identification number** THE SEMINAR NETWORK, INC 46-3508366 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) \$ Use duplicate copies of Part III if additional space is needed. (a) No. (b) Purpose of gift (c) Use of gift (d) Description of how gift is held from Part I Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (c) Use of gift (b) Purpose of gift (d) Description of how gift is held fŕom Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (c) Use of gift (b) Purpose of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

# SCHEDULE D (Form 990)

(Rev. January 2025)

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.

OMB No. 1545-0047

Open to Public Inspection

	of the organization	Employer identification number
	SEMINAR NETWORK, INC.	46-3508366
Par	Organizations Maintaining Donor Advised Fur	
	Complete if the organization answered "Yes" on	
		(a) Donor advised funds (b) Funds and other accounts
1	Total number at end of year	
2	Aggregate value of contributions to (during year) .	
3	Aggregate value of grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors	in writing that the assets held in donor advised
	funds are the organization's property, subject to the organization	
6	Did the organization inform all grantees, donors, and donor	
	only for charitable purposes and not for the benefit of the	lonor or donor advisor, or for any other purpose
	conferring impermissible private benefit?	· · · · · · · · · · · · · · · · · · ·
Par	t II Conservation Easements	
ı aı	Complete if the organization answered "Yes" on	Form 990 Part IV line 7
1	Purpose(s) of conservation easements held by the organization	
•		ducation)
	Protection of natural habitat	☐ Preservation of a certified historic structure
2	Preservation of open space	find concernation contribution in the form of a concernation
2	Complete lines 2a through 2d if the organization held a quali easement on the last day of the tax year.	
		Held at the End of the Tax Year
а		<u>2a</u>
b	Total acreage restricted by conservation easements	
С	Number of conservation easements on a certified historic str	
d	Number of conservation easements included on line 2c acq	
	_	
3	Number of conservation easements modified, transferred,	
	the organization during the tax year	
4	Number of states where property subject to conservation ea	
5	Does the organization have a written policy regarding the	e periodic monitoring, inspection, handling of
	violations, and enforcement of the conservation easements i	t holds?
6	Staff and volunteer hours devoted to monitoring, inspecting	ng, handling of violations, and enforcing
	conservation easements during the year	
7	Amount of expenses incurred in monitoring, inspecting	
	, , , ,	\$
8	Does each conservation easement reported on line 2d above	e satisfy the requirements of section 170(h)(4)(B)
	(i) and section 170(h)(4)(B)(ii)?	
9	In Part XIII, describe how the organization reports conservat	on easements in its revenue and expense statement and balance
	sheet, and include, if applicable, the text of the footnote to the	ne organization's financial statements that describes the
	organization's accounting for conservation easements.	
Part	t III Organizations Maintaining Collections of Art,	Historical Treasures, or Other Similar Assets
	Complete if the organization answered "Yes" on	
	, ,	58, not to report in its revenue statement and balance sheet works
	· · · · · · · · · · · · · · · · · · ·	public exhibition, education, or research in furtherance of public
	service, provide in Part XIII the text of the footnote to its fina	
b	•	58, to report in its revenue statement and balance sheet works of
b		c exhibition, education, or research in furtherance of public service,
	provide the following amounts relating to these items.	, or morning oddodnom, or resourch in farther affect of public service,
	· · · · · · · · · · · · · · · · · · ·	•
	(i) Revenue included on Form 990, Part VIII, line 1	· · · · · · · · · · · · · · · · · · ·
_	(ii) Assets included in Form 990, Part X	
2		I treasures, or other similar assets for financial gain, provide the
	following amounts required to be reported under FASB ASC	<del>-</del>
а		
b	Assets included in Form 990, Part X	\$

Part	Organizations Maintaining	Collections of	Art, His	torical 1	Treasures,	or Ot	her Similar As	sets (continued)
3	Using the organization's acquisition, a collection items (check all that apply).							
а	☐ Public exhibition				or exchange			
b	☐ Scholarly research		е	Other				
С	☐ Preservation for future generations							
4	Provide a description of the organizat XIII.	tion's collections	and expl	ain how t	hey further t	he org	janization's exen	npt purpose in Part
5	During the year, did the organization assets to be sold to raise funds rather							ar 🗌 Yes 🗌 No
Part	Escrow and Custodial Arra Complete if the organization 990, Part X, line 21.		" on For	m 990, F	Part IV, line	9, or	reported an an	nount on Form
1a	· · · · · · · · · · · · · · · · · · ·			-				ot
b	If "Yes," explain the arrangement in Pa	art XIII and compl	ete the fo	ollowing ta	able.			
	· · · · · · · · · · · · · · · · · · ·	•					A	mount
С	Beginning balance					10	;	
d	Additions during the year					1d		
е	Distributions during the year					1e		
f	Ending balance					1f		
2a	Did the organization include an amour	nt on Form 990, P	art X, line	21, for e	scrow or cu	stodia	account liability	? 🗌 Yes 🗌 No
b	If "Yes," explain the arrangement in Pa	art XIII. Check her	e if the e	xplanatio	n has been p	orovide	ed in Part XIII .	<u> </u>
Par	t V Endowment Funds							
	Complete if the organization	answered "Yes	on For	m 990, F	Part IV, line	10.		
		(a) Current year	<b>(b)</b> Pri	or year	(c) Two years	back	(d) Three years back	(e) Four years back
1a	Beginning of year balance							
b	Contributions							
С	Net investment earnings, gains, and losses							
d	Grants or scholarships							
е	Other expenditures for facilities and programs							
f	Administrative expenses							
g	End of year balance							
2	Provide the estimated percentage of t	he current year er	nd baland	e (line 1g	, column (a))	) held	as:	•
а	Board designated or quasi-endowmer	nt	%					
b	Permanent endowment	%						
С	Term endowment %							
	The percentages on lines 2a, 2b, and	2c should equal 1	00%.					
3a	Are there endowment funds not in the	e possession of the	ne organi	zation tha	at are held a	ınd ad	ministered for th	е
	organization by:							Yes No
	(i) Unrelated organizations?							3a(i)
	(ii) Related organizations?							3a(ii)
b	If "Yes" on line 3a(ii), are the related or	rganizations listed	d as requi	red on So	chedule R?			3b
4	Describe in Part XIII the intended uses	of the organization	on's end	owment fo	unds.			
Part	VI Land, Buildings, and Equip	ment						
	Complete if the organization	answered "Yes	on For	m 990, F	Part IV, line	11a.	See Form 990,	Part X, line 10.
	Description of property	(a) Cost or o		(b) Cost of	or other basis		Accumulated	(d) Book value
		(investm	nent)	(0	ther)	de	epreciation	
1a	Land							
b	Buildings							
С	Leasehold improvements				45,362,976		3,972,208	41,390,768
d	Equipment				6,965,003		2,723,843	4,241,160
е	Other				166,719		0	166,719
Total.	Add lines 1a through 1e. (Column (d) n		90, Part	X, line 10	c. column (B	)) .		45,798,647

ities
í

(a) Description of security or category (including name of security)	<b>(b)</b> Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A) PARTNERSHIP INVESTMENTS III	15,055,045	END OF YEAR MARKET VALUE
(B) PARTNERSHIP INVESTMENTS IV	34,460,851	END OF YEAR MARKET VALUE
(C) PARTNERSHIP INVESTMENTS V	30,632,078	END OF YEAR MARKET VALUE
(D) PARTNERSHIP INVESTMENTS VI	609,000	END OF YEAR MARKET VALUE
(E) PARTNERSHIP INVESTMENTS VII	17,065,603	END OF YEAR MARKET VALUE
(F) PARTNERSHIP INVESTMENTS X	6,283,964	END OF YEAR MARKET VALUE
(G) PARTNERSHIP INVESTMENTS XI	2,000,000	END OF YEAR MARKET VALUE
(H) PARTNERSHIP INVESTMENTS XII	6,641,795	END OF YEAR MARKET VALUE
Total. (Column (b) must equal Form 990, Part X, line 12, col. (B))	112,748,336	
Part VIII Investments – Program Related Complete if the organization answered "Yes" on Form	m 990, Part IV, lin	e 11c. See Form 990, Part X, line 13.
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		

## Part IX Other Assets

Total. (Column (b) must equal Form 990, Part X, line 13, col. (B)) . . .

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) BENEFICIAL INTEREST IN REMAINDER TRUST	7,774,331
(2) RIGHT-OF-USE ASSET	36,891,439
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 15, col. (B))	44,665,770

#### Part X Other Liabilities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1.	(a) Description of liability	(b) Book value
(1) Federal income taxes		
(2) DUE TO RELATED PARTIES		1,012,172
(3) LEASE LIABILITY		69,177,808
(4)		
(5)		
(6)		
_(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Pa	rt X, line 25, col. (B))	70,189,980

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII.

Part			r Return
	Complete if the organization answered "Yes" on Form 990		
1	Total revenue, gains, and other support per audited financial statements	s	1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	0-	
a	Net unrealized gains (losses) on investments		-
b	Recoveries of prior year grants		-
C C	Other (Describe in Part XIII.)		+
d e	Add lines 2a through 2d		2e
3	Subtract line <b>2e</b> from line <b>1</b>		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	i	3
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)		-
C	Add lines <b>4a</b> and <b>4b</b>		4c
5	Total revenue. Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, lin		_
	XII Reconciliation of Expenses per Audited Financial State		
	Complete if the organization answered "Yes" on Form 990		
1	Total expenses and losses per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
С	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
е	Add lines 2a through 2d		2e
3	Subtract line <b>2e</b> from line <b>1</b>		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIII.)		
c	Add lines <b>4a</b> and <b>4b</b>		4c
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, I	ine 18.)	5
	Supplemental Information e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a a	and 1: Dort IV lines 1h and 2	b. Dort V. line 4: Dort V. line
	t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this par		
	TATEMENT	it to provide any additionari	morniation.
OLL O	TATLIVLINI		

Pa	rt	X	П

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

Return Reference - Identifier	Explanation
LINE 2 - FIN 48 (ASC 740)	UNCERTAIN TAX POSITIONS ARE RECOGNIZED IF IT IS MORE LIKELY THAN NOT, BASED ON THE TECHNICAL MERITS, THAT THE TAX POSITION WILL BE REALIZED OR SUSTAINED UPON AN EXAMINATION BY THE RELEVANT TAX AUTHORITY. NO AMOUNTS HAVE BEEN RECORDED AT DECEMBER 31, 2024, WITH RESPECT TO UNCERTAIN TAX POSITIONS.

# SCHEDULE F (Form 990)

(Rev. January 2025)

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

Attach to Form 990.

**Statement of Activities Outside the United States** 

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

THE SEMINAR NETWORK, INC.

Employer identification number 46-3508366

Par	General Information Form 990, Part IV, line		ties Outside	the United States. Com	plete if the organization a	answered "Yes" or
1	For grantmakers. Does the other assistance, the grante award the grants or assistance	es' eligibility	/ for the gran		selection criteria used to	✓ Yes □ No
2	For grantmakers. Describe outside the United States.	in Part V the	e organization	's procedures for monitorin	g the use of its grants an	d other assistance
3	Activities per Region. (The fo	llowing Part	I, line 3 table o	can be duplicated if addition	al space is needed.)	
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
	NORTH AMERICA (CANADA & MEXICO ONLY)			GRANTMAKING		00,000
(1)						80,000
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
(10)						
(11)						
(12)						
(13)						
(14)						
(15)						
(16)						
(17)						
3a	Subtotal	0	0			80,000
b	Total from continuation sheets to Part I	0	0			0
С	Totals (add lines 3a and 3b)	0	0			80,000

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. 1 (a) Name of (b) IRS code (c) Region (d) Purpose of (e) Amount of (f) Manner of (g) Amount of (h) Description (i) Method of section and EIN cash grant organization grant cash noncash of noncash assistance valuation (if applicable) (book, FMV, disbursement assistance appraisal, other) NORTH AMERICA **GENERAL** EFT (CANADA & MEXICO **OPERATING** 80,000 (1) ONLY) (2) (3) (4) (5) (6) (7) (8) (9) (10)(11) (12) (13)(14)(15) (16)

_	Enter total number of recipient organizations listed above that are recognized as chantles 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	1
3	Enter total number of other organizations or entities	0

Schedule F (Form 990) (Rev. 1-2025)

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.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

## Part IV Foreign Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	☐ Yes	☑ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	☐ Yes	✓ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)	☐ Yes	<b>☑</b> 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	<b>☑</b> 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	✓ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)	☐ Yes	☑ No

## 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.

Return Reference - Identifier	Explanation
SCHEDULE F, PART I, LINE 2 - PROCEDURES FOR MONITORING USE OF GRANT FUNDS	THE GRANT AWARD LETTERS PROHIBIT THE GRANTEE FROM USING THE GRANT FUNDS FOR LOBBYING AND POLITICAL PURPOSES, AND MAY REQUIRE THE GRANTEE TO FURNISH A REPORT TO THE ORGANIZATION DESCRIBING THE CHARITABLE AND EDUCATIONAL ACTIVITIES IN CONNECTION WITH THE ORGANIZATION'S EDUCATIONAL PROGRAMS FULFILLED BY THE USE OF GRANT FUNDS.
SCHEDULE F, PART II, LINE 1 - METHOD USED TO ACCOUNT FOR EXPENDITURES ON ORG'S FINANCIAL STATEMENTS	NORTH AMERICA (CANADA & MEXICO ONLY) - ACCRUAL

# SCHEDULE I (Form 990)

(Rev. December 2024)

Department of the Treasury Internal Revenue Service

Name of the organization

# 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 instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

THE SEMINAR NETWORK, INC.	46-3508366						
Part I General Information of	on Grants and	Assistance				1	
<ol> <li>Does the organization maintain and the selection criteria used</li> <li>Describe in Part IV the organization</li> <li>Part II Grants and Other Assent IV, line 21, for any</li> </ol>	to award the gra ation's procedur sistance to Do	ants or assistance res for monitoring mestic Organiz	? the use of grant fur ations and Dom	nds in the United lestic Governm	States.  ents. Complete if	the organization	
1 (a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistan	1 ', '
(1) SEE ATTACHED 4201 WILSON BLVD., ARLINGTON, VA 22203 (2)	N/A		131,967,634				VARIOUS
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
2 Enter total number of section 5	501(c)(3) and gov	rernment organiza	tions listed in the l	ine 1 table			219
3 Enter total number of other org	ganizations listed	I in the line 1 table					3

Schedule I (Form 990) (Rev. 12-2024)

(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 assistar
DUCATIONAL PROGRAMS	101	371,690			
Supplemental Information. Pro	vide the information re	equired in Part I. lin	e 2: Part III. colum	⊥ n (b): and anv other additi	onal information.
Supplemental Information. Pro				(-),	

Part	۱۱	/
------	----	---

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

Return Reference - Identifier	Explanation
SCHEDULE I, PART I, LINE 2 - PROCEDURES FOR MONITORING USE OF GRANT FUNDS	THE ORGANIZATION PROVIDED GRANTS TO THE ABOVE-MENTIONED ENTITIES IN FURTHERANCE OF THE ORGANIZATION'S CHARITABLE AND EDUCATIONAL MISSION, INCLUDING BY ENABLING INDIVIDUALS WORKING AT (AND SELECTED BY) CERTAIN GRANTEES TO ATTEND THE ORGANIZATION'S CLASSROOM EDUCATIONAL PROGRAMS AS STUDENTS. THE GRANT ET PROHIBIT THE GRANTEE FROM USING THE GRANT FUNDS FOR LOBBYING AND POLITICAL PURPOSES, AND MAY REQUIRE THE GRANTEE TO FURNISH A REPORT TO THE ORGANIZATION DESCRIBING THE CHARITABLE AND EDUCATIONAL ACTIVITIES IN CONNECTION WITH THE ORGANIZATION'S EDUCATIONAL PROGRAMS FULFILLED BY THE USE OF GRANT FUNDS. ALL GRANTS WERE MADE PURSUANT TO THE REQUIREMENT THAT THEY BE EXPENDED EXCLUSIVELY FOR 501(C)(3) PURPOSES. THE ORGANIZATION REVIEWS RECIPIENT'S FORM 990, IRS TAXEXEMPTION LETTER, AND VALIDATES THE RECEIPEINT'S TAX ID NUMBER.

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

(Rev. January 2025)

Department of the Treasury Internal Revenue Service Name of the organization

THE SEMINAR NETWORK, INC.

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.

Open to Public Inspection

Employer identification number

46-3508366

OMB No. 1545-0047

<b>Part</b>	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)			
b	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			
	explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 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 survey 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		~
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		1
C	Participate in or receive payment from an equity-based compensation arrangement?	4c		~
	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 VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the revenues of:			
а	The organization?	5a		~
b	Any related organization?	5b		~
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
а	compensation contingent on the net earnings of:  The organization?	6a		1
a b	Any related organization?	6b		1
b	If "Yes" on line 6a or 6b, describe in Part III.	OD		
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III	7	,	
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject		-	
0	to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe			
	in Part III	0		<b>/</b>
		8		
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
J	Regulations section 53.4958-6(c)?	a		

Schedule J (Form 990) (Rev. 1-2025)

### 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 ar		1099-NEC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation	
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)–(D)	in column (B) reported as deferred on prior Form 990	
RUSSELL GREENE	(i)	195,967	20,000	0	12,000	12,649	240,616	0	
1 SENIOR FELLOW, ECONOMIC PROGRESS	(ii)	0	0	0	0	0	0	0	
ADAM MILLSAP	(i)	211,788	0	0	12,785	9,586	234,159	0	
2 SENIOR FELLOW, ECONOMIC PROGRESS	(ii)	0	0	0	0	0	0	0	
VIKRANT REDDY	(i)	200,120	0	0	12,000	511	212,631	0	
SENIOR FELLOW, CONSTITUTIONALLY LIMITED 3 GOVERNMENT	(ii)	0	0	0	0	0	0	0	
NICOLE GORDAN	(i)	134,156	35,000	0	10,500	19,533	199,189	0	
PROGRAM OFFICER, CONSTITUTIONALLY LIMITED 4 GOVERNMENT	(ii)	0	0	0	0	0	0	0	
MICHAEL WILT	(i)	154,591	15,000	0	0	7,638	177,229	0	
PROGRAM OFFICER, CONSTITUTIONALLY LIMITED  5 GOVERNMENT	(ii)	0	0	0	0	0	0	0	
	(i)								
6	(ii)								
	(i)								
7	(ii)								
	(i)								
8	(ii)								
	(i)								
9	(ii)								
	(i)								
10	(ii)								
	(i)								
11	(ii)								
	(i)								
12	(ii)								
	(i)								
13	(ii)								
	(i)								
14	(ii)								
	(i)								
15	(ii)								
	(i)								
16	(ii)								

Part III

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

Return Reference - Identifier	Explanation
	INCENTIVE COMPENSATION IS BASED ON EXTRAORDINARY EFFORTS AND SERVICES PROVIDED TO THE ORGANIZATION, NOT BASED ON FINANCIAL RESULTS OF THE ORGANIZATION.

#### **SCHEDULE M** (Form 990)

#### Noncash Contributions

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Complete if the organizations answered "Yes" on Form 990, Part IV, line 29 or 30. Attach to Form 990.

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

Open to Public Inspection

Name of the organization Employer identification number THE SEMINAR NETWORK, INC. 46-3508366 **Types of Property** (c) (a) (b) (d) Noncash contribution Check if Number of contributions or Method of determining amounts reported on noncash contribution amounts applicable items contributed Form 990, Part VIII, line 1g 1 Art-Works of art . . . . . 2 Art—Historical treasures . . . 3 Art—Fractional interests . . 4 Books and publications . . 5 Clothing and household goods . . . . . . . . . 6 Cars and other vehicles . . . 7 Boats and planes . . . . 8 Intellectual property . . . . 9 Securities—Publicly traded . . . 11 888,291 | MARKET VALUE Securities-Closely held stock . 8.163.255 MARKET VALUE 10 3 Securities—Partnership, LLC, 11 or trust interests 12 Securities-Miscellaneous . . 13 Qualified conservation contribution—Historic structures . . . . . . . . 14 Qualified conservation contribution—Other 15 Real estate-Residential . . . 16 Real estate—Commercial . . Real estate—Other . . . . 17 18 Collectibles . . . . . . 19 Food inventory . . . . . . 20 Drugs and medical supplies . . 21 Taxidermy . . . . . . 22 Historical artifacts . . . 23 Scientific specimens . . . . 24 Archeological artifacts . . . 25 26 Other (\_\_\_\_\_) 27 Other (\_\_\_\_\_) 28 Other ( Number of Forms 8283 received by the organization during the tax year for contributions for 29 which the organization completed Form 8283, Part V, Donee Acknowledgement . . . . . . Yes No 30a During the year, did the organization receive by contribution any property reported on Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be 30a v **b** If "Yes," describe the arrangement in Part II. Does the organization have a gift acceptance policy that requires the review of any nonstandard 31 31 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a

If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked,

If "Yes," describe in Part II.

describe in Part II.

33

Part II

**Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference - Identifier	Explanation
SCHEDULE M, PART I - COLUMN B	THE NUMBER IN COLUMN B REPRESENTS THE NUMBER OF CONTRIBUTIONS.

# SCHEDULE O (Form 990)

(Rev. January 2025)

Department of the Treasury Internal Revenue Service

### Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization
THE SEMINAR NETWORK, INC.

Employer identification number
46-3508366

Return Reference - Identifier	Explanation	
FORM 990, PART I, LINE 1 - BRIEF MISSION	IN A BROAD RANGE OF SOCIAL AND ECONOMIC ISSUES AND WORKS TO EMPOW TOOLS AND SUPPORT NEEDED TO MAKE A FAR GREATER IMPACT TO HELP PEO THEIR LIVES.	
FORM 990, PART VI, LINE 2 - FAMILY/BUSINESS RELATIONSHIPS AMONGST INTERESTED PERSONS	DALE GIBBENS, BRIAN HOOKS, HENRICH HEUER, DEREK JOHNSON AND WESTON BUSINESS RELATIONSHIP	N EDWARDS -
FORM 990, PART VI, LINE 6 - CLASSES OF MEMBERS OR STOCKHOLDERS	THE ORGANIZATION HAS A CLASS A MEMBER WITH THE RIGHTS STATED IN THE INCORPORATION AND BYLAWS.	ARTICLES OF
FORM 990, PART VI, LINE 7A - MEMBERS OR STOCKHOLDERS ELECTING MEMBERS OF GOVERNING BODY	IN ACCORDANCE WITH THE BYLAWS, CLASS A MEMBERS HAVE THE POWER TO ELECTION OF DIRECTORS.	RATIFY THE
FORM 990, PART VI, LINE 7B - DECISIONS REQUIRING APPROVAL BY MEMBERS OR STOCKHOLDERS	THE VOTING MEMBERS HAVE THE POWER AND VOTING RIGHTS TO DO THE FOLI A. TO RATIFY THE ELECTION OF DIRECTORS OR REMOVING DIRECTORS, WITH C B. TO APPOINT THE CHAIR OF THE BOARD OF DIRECTORS; C. TO DETERMINE THE BOARD OF DIRECTORS' SIZE, SUBJECT TO LIMITATIONS; D. TO APPROVE ANY MAJOR TRANSACTION APPROVED BY THE BOARD; AND E. TO APPOINT A NEW CLASS A MEMBER, IN THE EVENT OF THE PENDING DISSOWINDING-UP OF THE CLASS A MEMBER.	OR WITHOUT CAUSE;
FORM 990, PART VI, LINE 11B - REVIEW OF FORM 990 BY GOVERNING BODY	AN INDEPENDENT ACCOUNTING FIRM PREPARED AND REVIEWED THE FORM 990 THE 990 ALONG WITH ALL REQUIRED SCHEDULES IS THEN PROVIDED TO INTERI AND LEGAL COUNSEL FOR REVIEW. ALL QUESTIONS ARE ADDRESSED AND ANY ARE MADE, IF NECESSARY.	NAL MANAGEMENT
FORM 990, PART VI, LINE 12C - CONFLICT OF INTEREST POLICY	THE OFFICERS AND DIRECTORS ARE COVERED UNDER THE CONFLICT OF INTEF ORGANIZATION'S LEGAL COUNSEL REVIEWS TRANSACTIONS FOR POTENTIAL CONTEREST. THE ORGANIZATION RECENTLY UPDATED ITS CONFLICT OF INTEREST DIRECTORS, OFFICERS, AND KEY EMPLOYEES AND EACH OF THEM ACKNOWLED POLICY.	ONFLICTS OF T POLICY FOR
FORM 990, PART VI, LINE 17 - STATES WITH WHICH A COPY OF THIS FORM 990 IS REQUIRED TO BE FILED	GA, HI, IL, KS, KY, MA, MD, ME, MI, MN, MS, NC, ND, NH, NJ, NM, OH, PA, RI, SC, TN	, UT, VA, WV
FORM 990, PART VI, LINE 19 - REQUIRED DOCUMENTS AVAILABLE TO THE PUBLIC	THE ORGANIZATION MAKES ALL REQUIRED DISCLOSURES AVAILABLE TO THE PIREGULATIONS.	UBLIC UNDER IRS
FORM 990, PART XI, LINE 9 -	(a) Description	(b) Amount
OTHER CHANGES IN NET ASSETS OR FUND BALANCES	CHANGE IN VALUE OF BENEFICIAL INTEREST	155,868
	REFUND OF GRANT FUNDS	411,597
	PARTNERSHIP LOSS TOTAL	- 309,450 <b>258,015</b>
	IVIAL	230,013

### **SCHEDULE R** (Form 990) (Rev. January 2025)

**Related Organizations and Unrelated Partnerships** 

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Attach to Form 990.

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

OMB No. 1545-0047

**Open to Public** Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

**Employer identification number** THE SEMINAR NETWORK, INC. 46-3508366

Part I Identification of Disregarded Entities. Complete if the o	rganization answered "Yes	s" on Form 990, Pa	art IV, line 33.		
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) UNIVERSITY FUND, LLC (82-4502984) 4201 WILSON BLVD., STE 0800, ARLINGTON, VA 22203	PROJECTS	DE	6,641,795	8,568,479	STT
(2) ICTLL1 LLC (92-4001233) PO BOX 5004, WICHITA, KS 67201	EDUCATION	DE	8,757	7,841,146	STT
(3) STT EVENTS, LLC (88-1794359) 4201 WILSON BLVD., STE 0800, ARLINGTON, VA 22203	EVENTS	DE	0	0	STT
(4)					
(5)					
(6)					

Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had Part II one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section cont	g) 512(b)(13) rolled tity?
						Yes	No
(1) STAND TOGETHER FELLOWSHIPS (27-4967732)	EDUCATION	DE	501(C)(3)	2	N/A		~
4201 WILSON BLVD, SUITE 0800, ARLINGTON, VA 22203			, , , ,				
(2) CHARLES KOCH FOUNDATION (48-0918408)	GRANT MAKING	KS	501(C)(3)	PF	STFEL	V	
4201 WILSON BLVD, SUITE 0800, ARLINGTON, VA 22203	-						
(3) BELIEVE IN PEOPLE, INC (47-3175931)	GRANT MAKING	DE	501(C)(4)		STFEL	~	
PO BOX 5004, WICHITA, KS 67201	-						
(4) STAND TOGETHER FOUNDATION (27-3197768)	PUBLIC CHARITY	DE	501(C)(3)	7	STFEL	~	
4201 WILSON BLVD, SUITE 0800, ARLINGTON, VA 22203	-						
(5) KNOWLEDGE AND PROGRESS FUND, INC. (54-1899251)	GRANT MAKING	KS	501(C)(3)	PF	STFEL	~	
PO BOX 2256, WICHITA, KS 67201							
(6) KEY CHANGE, INC. (83-3116152)	GRANT MAKING	DE	501(C)(4)		STFEL	~	
P.O. BOX 5004, WICHITA, KS 67201	-						
(7) (SEE STATEMENT)	_						

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under	(f) Share of total income	(g) Share of end-of- year assets	Disprope alloca	ortionate	Gene mana parti	ral or aging	(k) Percentage ownership
		country)		sections 512-514)			Yes	No	Yes	No	
(1) (SEE STATEMENT)											
(2)											
(3)											
(4)											
(5)											
(6)											
(7)											

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	Section s cont ent	(i) 512(b)(13) rolled tity?
								Yes	No
(1)(SEE STATEMENT)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

Yes No

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

### Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

1	During the tax year, did the organization engage in any of the following transactions with one					
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1a	V
b	Gift, grant, or capital contribution to related organization(s)				1b 🗸	
С	Gift, grant, or capital contribution from related organization(s)			[	1c 🗸	
d	Loans or loan guarantees to or for related organization(s)			[	1d	~
е	Loans or loan guarantees by related organization(s)			[	1e	V
f	Dividends from related organization(s)				1f	<b>'</b>
g	Sale of assets to related organization(s)				1g	~
h	Purchase of assets from related organization(s)				1h	<b>'</b>
i	Exchange of assets with related organization(s)				1i	<b>'</b>
j	Lease of facilities, equipment, or other assets to related organization(s)				1j	<b>'</b>
k	3				1k	~
I	Performance of services or membership or fundraising solicitations for related organization(s)				11	~
	Performance of services or membership or fundraising solicitations by related organization(s)				1m	~
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n	~
0	Sharing of paid employees with related organization(s)				10	~
р	Reimbursement paid to related organization(s) for expenses				1p	<b>~</b>
q	Reimbursement paid by related organization(s) for expenses				1q	~
r	Other transfer of cash or property to related organization(s)				1r	<b>/</b>
S	Other transfer of cash or property from related organization(s)				1s	
2	If the answer to any of the above is "Yes," see the instructions for information on who must co	•	iding covered relation	snips and transaction	n thresh	olds.
	<b>(a)</b> Name of related organization	<b>(b)</b> Transaction	<b>(c)</b> Amount involved	(d) Method of determining	ı amount ir	wolved
	Name of related organization	type (a-s)	Amount involved	Method of determining	anount II	ivoiveu
	TAND TOCETHED FOUNDATION			CASH PAYMENT		
(1)	TAND TOGETHER FOUNDATION	В	500,000	CASH FATIVIENT		
	TAND TOGETHER FOUNDATION			CASH PAYMENT		
(2)	TAND TOOL TILLY CONDATION	С	50,000,000	S. SHI MILIT		
	HARLES KOCH CHARITABLE FUND	_		CASH PAYMENT		
(3)		С	63,000,000			
	TVL3 LLC		04.000.000	CASH PAYMENT		
(4)		В	21,220,000			
	TAND TOGETHER FELLOWSHIPS	В	F00 000	CASH PAYMENT		
(5)		В	500,000			
	RUST VENTURES AI FUND LP	В	4,500,000	CASH PAYMENT		
(6)		D	4,500,000			

### Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

Name, address	<b>(a)</b> , and EIN of entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	unrelated, excluded	Are all sec 501	e) partners ction (c)(3) zations?	(f) Share of total income	(g) Share of end-of-year assets	Disprop	n) ortionate tions?	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene	i) ral or aging ner?	(k) Percentage ownership
				sections 512—514)	Yes	No			Yes	No		Yes	No	
(1)														
(2)														
(3)														
(4)														
(5)														
(6)														
(7)														
(8)														
(9)														
(10)														
(11)														
(12)														
(13)														
(14)														
(15)														
(16)														

# Part II

#### Identification of Related Tax-Exempt Organizations (continued)

(a) Name, address and EIN of related organization	<b>(b)</b> Primary Activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	512(b	ection o)(13) ed entity?
						Yes	No
(7) CHARLES KOCH CHARITABLE FUND (85-4058882) 4201 WILSON BLVD, SUITE 0800, ARLINGTON, VA 22203	GRANT MAKING	DE	501(C)(3)	PF	STFEL	<b>✓</b>	
(8) CHASE KOCH FOUNDATION, INC (83-1697305) P.O. BOX 5004, WICHITA, KS 57201	GRANT MAKING	DE	501(C)(3)	PF	STFEL	✓	
(9) MOVEMENT MUSICK, INC. (87-3066900) PO BOX 5004, WICHITA, KS 67201	GRANT MAKING	DE	501(C)(4)		STFEL	<b>✓</b>	
(10) CENTER FOR CLASSICAL LIBERAL EDUCATION, INC. (93-2828797) 4201 WILSON BLVD, SUITE 0800, ARLINGTON, VA 22203	PUBLIC EDUCATION	DE	501(C)(3)	2	STFEL	✓	

(a) Name, address and EIN of related organization	(b) Primary Activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income related, unrelated, excluded from tax under sections 512-514	(f) Share of total income	(g) Share of end-of-year assets	Dispo tion alloc s	rópor ate ation	(i) Code V - UBI amount in box 20 of Schedule K- 1 (Form	Gen	ieral or aging	(k) Percentage ownership
							Yes	No	1065)	Yes	No	
(1) STVL3, LLC (85-2667830) 4201 WILSON BLVD., SUITE 0900, ARLINGTON, VA 22203	INVESTMENTS	DE	STT	EXCLUDED	1,023,286	32,767,619		>	0		>	75.33
(2) TRUST VENTURES AI FUND LP (93-3965712) 2028 E BEN WHITE BLVD #240-3636, AUSTIN, TX 78741		DE	STT	EXCLUDED	70,862	6,318,406		<b>\</b>	0		<b>\</b>	99.79
(3) 1888 NPO FUND, LLC PO BOX 5004, WICHITA, KS 67201	INVESTMENTS	KS	NA	N/A	N/A	N/A			N/A			N/A

# Part IV

#### Identification of Related Organizations Taxable as a Corporation or Trust (continued)

(a) Name, address and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C-corp, S-corp or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	512(b	o)(13) rolled
								Yes	No
(1) PBM CENTER, INC. (81-4065996) 4201 WILSON BLVD., SUITE 0800, ARLINGTON, VA 22203	CONSULTING	DE	N/A	C CORPORATION	N/A	N/A	N/A	>	
(2) CHARITABLE REMAINDER TRUST (1)	CHARITABLE TRUST	VA	N/A	TRUST	N/A	N/A	N/A		✓
(3) WHITE ALBUM INC. (99-2705177) PO BOX 20585, WICHITA, KS 67208	HOLDING COMPANY	DE	STFEL	C CORPORATION	N/A	N/A	N/A	<b>✓</b>	

Name of Organization	Address of Organization	EIN	Code Section	Amount of Cash Grant	Purpose
Ohio State University	901 Woody Hayes Drive Columbus OH 43210	31-6025986	501(c)(1)	25,000.00	General Operating
Technology Policy Institute	409 12th Street SW Suite 700 Washington DC 20024	20-5835776	501(c)(3)	80,000.00	General Operating
National School Choice Awareness Foundation Inc	18117 Biscayne Blvd #2509 Aventura FL 33160	87-2081402	501(c)(3)	97,870.00	General Operating
University of Texas at Austin	110 Inner Campus Drive Stop K5300 Austin TX 78712	74-6000203	501(c)(3)	5,700.00	General Operating
Greater Horizons	1055 Broadway Blvd, St 130 Kansas City MO 64105	20-0849590	501(c)(3)	900,000.00	General Operating
San Juan Diego Institute	410 E Southern Ave Phoenix AZ 85040	03-0500912	501(c)(3)	150,000.00	General Operating
College of the Holy Cross	1 College St Worcester MA 01610	04-2103558	501(c)(3)	108,000.00	General Operating
Harvard University	President and Fellows of Harvard College P.O Box 415649 C	04-2103580	501(c)(3)	303,500.00	General Operating
Tufts University	80 George StMedford, MA 02155-5519	04-2103634	501(c)(3)	131,668.75	General Operating
American Institute for Economic Research	250 Division Street P.O. Box 1000 Great Barrington MA 0123	04-2121305	501(c)(3)	50,000.00	General Operating
Per Scholas, Inc.	804 East 138th Street Bronx NY 10454	04-3252955	501(c)(3)	650,000.00	General Operating
Foundation for Individual Rights in Education Inc	510 Walnut Street, Suite 1250 Philadelphia PA 19106	04-3467254	501(c)(3)	6,100,811.22	General Operating
Rising Tide Capital	PO Box 10188 PMB 56701 Newark NJ 07101-3188	11-3720098	501(c)(3)	355,000.00	General Operating
Carnegie Endowment for International Peace	1779 Massachusetts Ave, NW Washington DC 20036	13-0552040	501(c)(3)	214,600.00	General Operating
Council on Foreign Relations	58 East 68th Street New York NY 10065	13-1628168	501(c)(3)	50,000.00	General Operating
Philanthropy Roundtable	1730 M Street NW, Suite 601 Washington DC 20036	13-2943020	501(c)(3)	431,800.00	General Operating
Urban Justice Center	40 Rector St. , 9th Fl. New York NY 10006	13-3442022	501(c)(3)	180,000.00	General Operating
Rockefeller Philanthropy Advisors	6 West 48th Street 10th Floor New York NY 10036	13-3615533	501(c)(3)	2,808,333.00	General Operating
The Children's Scholarship Fund	8 West 38th Street, Suite 804 New York NY 10018	13-4002189	501(c)(3)	50,000.00	General Operating
New York University	19 W 4th St New York NY 10012	13-5562308	501(c)(3)	50,000.00	General Operating
Foundation For Economic Education	1819 Peachtree Rd. NE, Suite 300 Atlanta GA 30309	13-6006960	501(c)(3)	155,675.00	General Operating
Union College (NY)	807 Union St Schenectady NY 12308	14-1338580	501(c)(3)	160,000.00	General Operating
Moral Courage Project	550 Vanderbilt Ave Apt 1401Brooklyn, NY 11238-4296	20-2035406	501(c)(3)	300,000.00	General Operating
Parents For Educational Freedom of North Carolina	3100 Smoketree Ct, Suite 501 Raleigh NC 27604	20-2754466	501(c)(3)	50,000.00	General Operating
Curriki	Curriki 20660 Stevens Creek Boulevard/332 Cupertino CA 9	20-3478467	501(c)(3)	7,500.00	General Operating
Center for Medicine in the Public Interest	757 3rd Avenue, 20th Floor New York NY 10017	20-4321812	501(c)(3)	75,000.00	General Operating
Platte Institute for Economic Research	6910 Pacific Street #216Omaha, NE 68106	20-8809060	501(c)(3)	105,000.00	General Operating
World Relief	7 E. Baltimore St Baltimore MD 21202	23-6393344	501(c)(3)	833,000.00	General Operating
Cato Institute	1000 Massachusetts Ave NW Washington DC 20001	23-7432162	501(c)(3)	1,893,491.71	General Operating
National Philanthropic Trust	165 Township Line Rd Suite 1200 Jenkintown PA 19046	23-7825575	501(c)(3)	2,666,667.33	General Operating
Clayton Christensen Institute	92 Hayden Ave Lexington MA 02421	26-0264045	501(c)(3)	410,000.00	General Operating
Foundation for Excellence in Education	PO Box 10691 215 S Monroe St Ste 110 Tallahassee FL 323	26-0615175	501(c)(3)	1,021,670.77	General Operating
Live the Solution DBA Earn to Learn	6336 N Oracle Rd Ste 326Tucson, AZ 85704-5457	26-1151754	501(c)(3)	250,000.00	General Operating
Khan Academy	PO Box 1630 Mountain View CA 94042	26-1544963	501(c)(3)	5,758,860.00	General Operating
Pelican Institute	400 Poydras St Fl 30 New Orleans LA 70130	26-1704791	501(c)(3)	125,000.00	General Operating
Palmetto Promise Institute	PO Box 12676Columbia, SC 29211-2676	26-3077338	501(c)(3)	50,000.00	General Operating
R Street Institute	1212 New York Ave. NW suite 900 Washington DC 20005	26-3477125	501(c)(3)	215,907.69	General Operating
The Contingent	809 North Russell Street, Suite 203 Portland OR 97227	26-4224606	501(c)(3)	150,000.00	General Operating
Edward Charles Foundation	269 South Beverly Dr Ste 338 Beverly Hills CA 90212	26-4245043	501(c)(3)	2,225,000.00	General Operating
The American Ideas Institute	The American Conservative 910 17th Street, NW Washingto		501(c)(3)	600,000.00	General Operating
Reach Institute for School Leadership	1221 Preservation Park Way Oakland CA 94612	27-1274290	501(c)(3)	950,000.00	General Operating
Families Empowered	3900 Essex Lane Houston Texas 77027	27-1912105	501(c)(3)	51,550.00	General Operating
eduInnovation Total	616 Southwest 293rd Street Federal Way WA 98023	27-2643961	501(c)(3)	123,500.00	General Operating
Companies for Causes	1899 L Street NW Suite 850 Washington DC DC 20036	27-2808532	501(c)(3)	200,000.00	General Operating
Stand Together Foundation	4201 Wilson Blvd Suite 0800 Arlington VA 22203	27-3197768	501(c)(3)	500,000.00	General Operating
TechFreedom	#409 110 Maryland Ave NE Washington DC 20002	27-3567814	501(c)(3)	280,000.00	General Operating

Stand Together Fellowships	4201 Wilson Blvd Arlington VA 22203	27-4967732	501(c)(3)	500,000.00	General Operating
University Hospitals	11100 Euclid Avenue Cleveland OH 44106	34-0714775	501(c)(3)	400,000.00	General Operating
University of Chicago	1643 W. Berwyn Chicago IL 60640	36-2177139	501(c)(3)	169,375.00	General Operating
Federalist Society	1776 I Street NW, Suite 300 Washington DC 20006	36-3235550	501(c)(3)	1,210,000.00	General Operating
Foster America	1452 Dorchester Ave Ste 4Dorchester, 02122	38-4011253	501(c)(3)	75,000.00	General Operating
Foundation for Government Accountability	15275 Collier Blvd Suite 201-279 Naples FL 34119	45-2637507	501(c)(3)	240,000.00	General Operating
Libertas Institute	2183 W Main St Suite A102 Lehi UT 84043	45-5254794	501(c)(3)	137,400.00	General Operating
The Niskanen Center Inc	820 First Street Northeast, Suite 675 Washington DC 20002			220,000.00	General Operating
Third Sector	6 Liberty Square #2319Boston, MA 02109	46-1301032	501(c)(3)	135,000.00	General Operating
Center for Open Science	210 Ridge McIntire Road Charlottesville VA 22903	46-1496217	501(c)(3)	25,000.00	General Operating
	200 Summit Drive Suite 140 Burlington MA 01803	46-1496217	501(c)(3)	3,000,000.00	
Populace Inc			501(c)(3)		General Operating
Empire Center for Public Policy	PO Box 7113 Albany NY 12224 38274 Alfalfa Court Hamilton VA 20158	46-1987418	501(c)(3)	34,600.00	General Operating
Institute for the American Worker		46-3062521	501(c)(3)	550,000.00	General Operating
Education Design Lab	1200 18th St NW Suite 710 Washington DC 20036	46-4248042	501(c)(3)	12,500.00	General Operating
The Reform Alliance	411 S Victory St Ste 202Little Rock, AR 72201	47-2573670	501(c)(3)	50,000.00	General Operating
The 74 Media, Inc.	222 Broadway Fl 19 New York NY 10038	47-2788684	501(c)(3)	318,000.00	General Operating
Committee to Unleash Prosperity, Inc.	9008 Belmart RdPotomac, MD 20854		501(c)(3)	30,000.00	General Operating
Movement Forward	2072 Defoors Ferry Road Suite L1 Atlanta GA 30318	47-3766842	501(c)(3)	150,000.00	General Operating
Archbridge Institute	1367 Connecticut Avenue Northwest, Suite 200 Washington		501(c)(3)	30,000.00	General Operating
Bill of Rights Institute	1310 North Courthouse Road Suite 620 Arlington VA 22201	48-0891418	501(c)(3)	4,212,170.00	General Operating
Youth Entrepreneurs dba Empowered	4111 E 37th St N Wichita KS 67220	48-1187886	501(c)(3)	3,187,819.90	General Operating
American Legislative Exchange Council	2900 Crystal Drive, 6th Floor Arlington VA 22202		501(c)(3)	297,400.00	General Operating
Johns Hopkins University	347 Gilman Hall Baltimore MD 21218	52-0595110	501(c)(3)	271,762.00	General Operating
Ethics & Public Policy Center, Inc.	1730 M ST NW STE 910 Washington DC 20036-4548	52-1162185	501(c)(3)	100,000.00	General Operating
Committee for a Responsible Federal Budget	1900 M Street NW Suite 850 Washington DC 20036	52-1231278	501(c)(3)	200,000.00	General Operating
Americans for Prosperity Foundation	1310 N. Courthouse Rd. Suite 700 Arlington VA 22201	52-1527294	501(c)(3)	745,504.44	General Operating
Tax Foundation	1325 G Street, NW, Suite 950 Washington DC 20045	52-1703065	501(c)(3)	45,000.00	General Operating
Becket Fund for Religious Liberty	1919 Pennsylvania Ave NW, Suite 400 Washington DC 2000	52-1858532	501(c)(3)	290,000.00	General Operating
Center for Democracy & Technology	1401 K Street NW, Suite 200 Washington DC 20005	52-1905358	501(c)(3)	220,000.00	General Operating
Phoenix Center for Advanced Legal & Economic Public Policy	5335 Wisconsin Ave, NW Suite 440 Washington DC 20015	52-2079266	501(c)(3)	120,000.00	General Operating
NACDL Foundation for Criminal Justice	1660 L St NW Fl 12 Washington DC 20036	52-2289169	501(c)(3)	468,900.00	General Operating
The Brookings Institution	1775 Massachusetts Ave NW Washington DC 20036	53-0196577	501(c)(3)	50,000.00	General Operating
Catholic University of America	620 Michigan Ave NE Washington DC 20064	53-0196583	501(c)(3)	1,000,000.00	General Operating
The George Washington University	1957 E Street, NW Washington DC 20052	53-0196584	501(c)(3)	100,000.00	General Operating
American Enterprise Institute	1789 Massachusetts Avenue, NW Washington DC 20036	53-0218495	501(c)(3)	1,330,000.00	General Operating
Virginia Tech Foundation	University Gateway Center 902 Prices Fork Road Blacksburg	54-0721690	501(c)(3)	25,000.00	General Operating
Mercatus Center, Inc	3434 Washington Blvd, 4th Floor Arlington VA 22201	54-1436224	501(c)(3)	71,730.00	General Operating
George Mason University Foundation	4400 University Dr., MS 1A3 Fairfax VA 22030-4444	54-1603842	501(c)(3)	82,462.80	General Operating
Clemson University Foundation	155 Old Greenville Highway, Suite 105 Clemson SC 29631	57-0426335	501(c)(3)	150,000.00	General Operating
State Policy Network	1655 North Fort Myer Drive Arlington VA 22209	57-0952531	501(c)(3)	1,125,000.00	General Operating
Southeastern Legal Foundation Inc	560 West Crossville Road, Suite 104 Roswell GA 30075	58-1247027	501(c)(3)	35,000.00	General Operating
Georgia Center for Opportunity	333 Research Court Suite 210 Norcross GA 30092	58-1928520	501(c)(3)	675,000.00	General Operating
Georgia Public Policy Foundation Inc	3200 Cobb Galleria Parkway Suite 214 Atlanta GA 30339	58-1943161	501(c)(3)	145,000.00	General Operating
Florida State University Foundation	2010 Levy Avenue B-300 PO Box 3062739 Tallahassee FL 3.	59-6152180	501(c)(3)	40,273.00	General Operating
Bipartisan Policy Center	1225 Eye Street NW Suite 1000 Washington DC 20005	73-1628382	501(c)(3)	440,000.00	General Operating
William Marsh Rice University	PO Box 1892 Ctr Ms-521 Houston TX 77251-1892	74-1109620	501(c)(3)	85,000.00	General Operating
Texas Public Policy Foundation	901 Congress Ave Austin TX 78701	74-2524057	501(c)(3)	1,645,000.00	General Operating
Southern Methodist University	3140 Dyer Street MS #261 Dallas TX 75275	75-0800689	501(c)(3)	50,000.00	General Operating
AERO	417 Roslyn RdRoslyn Heights, NY 11577	80-0619017	501(c)(3)	150,000.00	General Operating
Adopt the Arts Foundation	CA	80-0671089	501(c)(3)	285,000.00	General Operating
Property and Environment Research Center	2048 Analysis Dr. Ste. A Bozeman MT 59718	81-0393444	501(c)(3)	500,000.00	General Operating
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Institute for Gebiald Affairs  - 145 St. Avenues 150 Floor New York NY 10510 - 151 St. 1950 S	Defense Priorities Foundation	1 Thomas Circle NW Washington DC 20005	81-0714113	501(c)(3)	2,262,994.71	General Operating
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udcial Education Institute         113 Colonnade Avenue Lexington W 24450         84-474832         501(6)(3)         180,000.00         General Operating down Your School           Acey Your School         4940 East Sunnyside of Poststadiale AZ 85254         84-6012487         501(6)(3)         180,000.00         General Operating down Your School           Vectorial Common Foundation         PO Box 320344 Flowcood MS 39232         85-1385749         501(6)(3)         150,000.00         General Operating School Mark Wichita KS 6704           Recidivizine         1322 Webster Street Stuice 100 (20 adkand CA 94612)         85-2085734         501(6)(3)         2,000,000.00         General Operating Schoolhouse World           Schoolhouse World         3790 EL Camino Real Unit PMB 544 Palo Alto CA 94306         85-301725         501(6)(3)         2,000,278.00         General Operating Schoolhouse World           4 lake It Movement         828 W 6th Street Austin TX 78703         85-3470837         501(6)(3)         50,000,00         General Operating Palas Revision World Willing School World Willing School Report Palas Revision World Re						
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Make It Movement   828 W 6th Street Austin TX 78703   85-3470837   501(c)(3)   50,000.00   General Operating					, and the second	
Sarry Goldwater Institute for Public Policy Research   500 E Coronado Rd Phoenix AZ 85004   86-0597661   501(c)(3)   950,000.00   General Operating						
The Cicero Research  907 S. Congress Avenue Austin TX 78704  86-1325445  501(c)(3)  3,363,320.00  General Operating Arizona State University Foundation  300 E. University Dr. Tempe AZ 85281  86-6051042  87-2508858  501(c)(3)  2,000,000.00  General Operating Paragon Health Institute  4201 Wilson Boulevard, Suite 0805 Arlington VA 22203  87-2508858  501(c)(3)  2,000,000.00  General Operating Paragon Health Institute  1880 Century Park East, Suite 1600  Los Angeles CA 9006 87-3874242  501(c)(3)  330,000.00  General Operating Paragon Health Institute  90 Box 901 Ventura, CA 93002-0901  87-3986761  501(c)(3)  501(c)(3)  500,000.00  General Operating Paragon Health Institute  90 Box 901 Ventura, CA 93002-0901  87-3986761  501(c)(3)  501(c)(3)  500,000.00  General Operating Paragon Health Institute  90 Box 901 Ventura, CA 93002-0901  88-2168677  501(c)(3)  501(c)(3)  500,000.00  General Operating Paragon Health Institute  90 General Operating Paragon					·	•
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ovine and Young Foundation  1880 Century Park East, Suite 1600 Los Angeles CA 90067 87-3874242  501(c)(3) 330,000.00 General Operating nvestor Choice Advocates Network  PO Box 901Ventura, CA 93002-0901 87-3986761 501(c)(3) 250,000.00 General Operating Natible to All 340 S. Lemon Ave., #6413 Walnut CA 91789 88-2132239 501(c)(3) 800,000.00 General Operating National Parkway Quincy MA 02169 88-2166877 501(c)(3) 492,400.00 General Operating National Parkway Operating National Parkway Pittsburgh PA 15227 88-2536665 501(c)(3) 25,000.00 General Operating National Parkway Operating National Parkway Pittsburgh PA 15227 88-2536665 501(c)(3) 25,000.00 General Operating National Parkway Pittsburgh PA 15227 88-2536665 501(c)(3) 50,000.00 General Operating National Parkway Pittsburgh PA 15227 88-2536665 501(c)(3) 50,000.00 General Operating National Parkway Pittsburgh PA 15227 88-2536665 501(c)(3) 50,000.00 General Operating National Parkway Pittsburgh PA 15227 88-2536665 501(c)(3) 50,000.00 General Operating National Parkway Pittsburgh PA 15227 88-2536665 501(c)(3) 50,000.00 General Operating National Parkway Pittsburgh PA 15227 88-2536665 501(c)(3) 50,000.00 General Operating National Parkway Pittsburgh PA 15227 88-2536665 501(c)(3) 50,000.00 General Operating National Parkway Pittsburgh PA 15227 88-2536665 501(c)(3) 50,000.00 General Operating National Parkway Pittsburgh PA 15227 88-250665 501(c)(3) 50,000.00 General Operating National Parkway Pittsburgh PA 15227 88-250665 501(c)(3) 50,000.00 General Operating National Parkway Pittsburgh PA 15227 88-250665 501(c)(3) 50,000.00 General Operating National Parkway Pittsburgh PA 15227 88-250665 501(c)(3) 50,000.00 General Operating National Parkway Pittsburgh PA 15227 88-250665 501(c)(3) 50,000.00 General Operating Parkway Pittsburgh PA 15227 88-250665 501(c)(3) 50,000.00 General Operating Parkway Pittsburgh PA 15227 88-250665 501(c)(3) 50,000.00 General Operating Parkway Pittsburgh PA 15227 88-250665 501(c)(3) 50,000.00 General Operating Parkway Pittsburgh PA 15227 88-250665	·	2 1			·	•
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Reformers Academy  11 Thomas Burgin Parkway Quincy MA 02169  38-2166877  501(c)(3)  492,400.00  General Operating PA Families for Education Choice  350 Towne Square Way Pittsburgh PA 15227  88-2536665  501(c)(3)  25,000.00  General Operating Policy Center, Inc dba Mountain States Policy Center  P.O. Box 2639 Coeur d'Alene ID 83816  88-2607055  501(c)(3)  50,000.00  General Operating Policy Innovation Center  430 First Street SE, Suite 2 Washington DC 20003  93-2029728  501(c)(3)  50,000.00  General Operating Policy Innovation Center  430 First Street SE, Suite 2 Washington DC 20003  93-2029728  501(c)(3)  501(c)(3)  50,000.00  General Operating Policy Innovation Center  430 First Street SE, Suite 2 Washington DC 20003  93-2029728  501(c)(3)  501(c)(3)  50,000.00  General Operating Policy Innovation Center  430 First Street SE, Suite 2 Washington DC 20003  93-2029728  501(c)(3)  501(c)(3)  500,000.00  General Operating Policy Innovation Center  430 First Street SE, Suite 2 Washington DC 20003  93-2029728  501(c)(3)  501(c)(3)  500,000.00  General Operating Policy Innovation Center  430 First Street SE, Suite 2 Washington DC 20003  93-2029728  501(c)(3)  501(c)(3)  500,000.00  General Operating Policy Innovation Center  430 First Street SE, Suite 2 Washington DC 20003  93-2029728  501(c)(3)  501(c)(3)  500,000.00  General Operating Policy Innovation Center  430 First Street SE, Suite 2 Washington C 20003  93-2029728  501(c)(3)  501(c)(3)  500,000.00  General Operating Policy Innovation Center  430 First Street SE, Suite 2 Washington C 20003  93-2029728  501(c)(3)  501(c)(3)  500,000.00  General Operating Policy Innovation Center  430 First Street SE, Suite 2 Washington C 20003  93-2029728  501(c)(3)  501(c)(3)  500,000.00  General Operating Policy Innovation Center  440 First Street SE, Suite 2 Washington C 20003  93-2029728  501(c)(3)  501		· · · · · · · · · · · · · · · · · · ·			·	
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Mountain States Policy Center, Inc dba Mountain States Policy Center    P.O. Box 2639 Coeur d'Alene ID 83816   88-2607055   501(c)(3)   50,000.00   General Operating States Policy Innovation Center   430 First Street SE, Suite 2 Washington DC 20003   93-2029728   501(c)(3)   1,100,000.00   General Operating Public Health Data Laboratory Institute   55 Southeast 2nd Avenue Suite 1R Delray Beach FL 33444   93-2221473   501(c)(3)   500,000.00   General Operating Public Health Data Laboratory Institute   PO Box 53 Logan UT 84322   93-2592059   501(c)(3)   5,720,600.00   General Operating States Clara University   500 El Cam Real Santa Clara CA 95053-0385   94-1156617   501(c)(3)   625,700.00   General Operating Institute for Humane Studies   3434 Washington Boulevard, 1st Floor Arlington VA 22201   94-1623852   501(c)(3)   2,680,000.00   General Operating Pacific Legal Foundation   555 Capitol Mall, Suite 1290 Sacramento CA 95814   94-2197343   501(c)(3)   1,273,436.63   General Operating Pacific Research Institute   101 Montgomery St, Ste 1300 San Francisco CA 94104   94-2528433   501(c)(3)   1,273,436.63   General Operating Pacific Research Institute   201 Broadway 4th Floor Oakland CA 94612   94-3311628   501(c)(3)   1,500,000.00   General Operating Pacific Research Candidation   201 Broadway 4th Floor Oakland CA 94612   94-3311628   501(c)(3)   1,500,000.00   General Operating Pacific Research Candidation   201 Broadway 4th Floor Oakland CA 94612   94-3311628   501(c)(3)   68,560.94   General Operating Pacific Research Candidation   PO Box 2138 1776 Main St Santa Monica CA 90407-2138   95-1958142   501(c)(3)   400,000.00   General Operating Policy Floor Candidation   PO Box 2138 1776 Main St Santa Monica CA 90407-2138   95-1958142   501(c)(3)   400,000.00   General Operating Policy Floor Candidation   PO Box 2138 1776 Main St Santa Monica CA 90407-2138   95-1958142   501(c)(3)   400,000.00   General Operating Policy Floor Candidation   PO Box 2138 1776 Main St Santa Monica CA 90407-2138   95-1958142   501(c)(3)					· ·	
Conomic Policy Innovation Center		·			·	
Public Health Data Laboratory Institute         55 Southeast 2nd Avenue Suite 1R Delray Beach FL 33444         93-2221473         501(c)(3)         500,000.00         General Operating           Abundance Institute         PO Box 53 Logan UT 84322         93-2592059         501(c)(3)         5,720,600.00         General Operating           Khan Schools Network         1200 Villa Street Suite 100 Mountain View CA 94041         93-2673296         501(c)(3)         1,890,434.00         General Operating           Santa Clara University         500 EL Cam Real Santa Clara CA 95053-0385         94-1156617         501(c)(3)         625,700.00         General Operating           Institute for Humane Studies         3434 Washington Boulevard, 1st Floor Arlington VA 22201         94-1623852         501(c)(3)         2,680,000.00         General Operating           Pacific Legal Foundation         555 Capitol Mall, Suite 1290 Sacramento CA 95814         94-2197343         501(c)(3)         1,273,436.63         General Operating           Pacific Research Institute         101 Montgomery St, Ste 1300 San Francisco CA 94104         94-2528433         501(c)(3)         200,000.00         General Operating           Great Schools         2201 Broadway 4th Floor Oakland CA 94612         94-3311628         501(c)(3)         1,500,000.00         General Operating           University of Southern California         3670 Trousdale Parkway St					· ·	
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Khan Schools Network         1200 Villa Street Suite 100 Mountain View CA 94041         93-2673296         501(c)(3)         1,890,434.00         General Operating           Santa Clara University         500 El Cam Real Santa Clara CA 95053-0385         94-1156617         501(c)(3)         625,700.00         General Operating           Institute for Humane Studies         3434 Washington Boulevard, 1st Floor Arlington VA 22201         94-1623852         501(c)(3)         2,680,000.00         General Operating           Pacific Legal Foundation         555 Capitol Mall, Suite 1290 Sacramento CA 95814         94-2197343         501(c)(3)         1,273,436.63         General Operating           Pacific Research Institute         101 Montgomery St, Ste 1300 San Francisco CA 94104         94-2528433         501(c)(3)         200,000.00         General Operating           GreatSchools         2201 Broadway 4th Floor Oakland CA 94612         94-3311628         501(c)(3)         1,500,000.00         General Operating           University of Southern California         3670 Trousdale Parkway Ste 308 Brg Hall - 308 Mc-0804 Log         95-1642394         501(c)(3)         400,000.00         General Operating           Rand Corporation         PO Box 2138 1776 Main St Santa Monica CA 90407-2138         95-1958142         501(c)(3)         400,000.00         General Operating	-				· ·	
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University of Southern California         3670 Trousdale Parkway Ste 308 Brg Hall - 308 Mc-0804 Los 95-1642394         501(c)(3)         68,560.94         General Operating           Rand Corporation         PO Box 2138 1776 Main St Santa Monica CA 90407-2138         95-1958142         501(c)(3)         400,000.00         General Operating					· ·	
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	University of Southern California	,			·	
Reason Foundation 5737 Mesmer Avenue Los Angeles CA 90230 95-3298239 501(c)(3) 1,078,846.16 General Operating	Rand Corporation				· ·	·
	Reason Foundation	5737 Mesmer Avenue Los Angeles CA 90230	95-3298239	501(c)(3)	1,078,846.16	General Operating

KaiPod Foundation	24 Druid Hill RdNewton, MA 02461	99-0753808	501(c)(3)	150,000.00	General Operating
Khan Lab School	703 East Douglas Avenue Wichita KS 67202	99-1079468	501(c)(3)	883,173.50	General Operating
Adam Valve Foundation	4201 Wilson Boulevard STE 900 Arlington VA 22203	99-1291620	501(c)(3)	2,000,000.00	General Operating
The Human Potential L.A.B. Inc.	PO Box 2579New Preston Marble Dale, CT 06777	99-1643026	501(c)(3)	200,000.00	General Operating
George Mason University Foundation	4400 University Dr Fairfax VA 22030	54-1603842	501(c)(3)	10,000.00	General Operating
Elevate USA	5310 Ward Road Suite G-05 Arvada Colorado 80002	46-3637392	501(c)(3)	25,000.00	General Operating
Moving Picture Institute	375 Greenwhich Street New York NY 10013	20-3237801	501(c)(3)	11,200.00	KAP
Information Technology and Innovation Foundation dba ITIF	700 K St NW Suite 600 Washington DC 20001	20-4403497	501(c)(3)	10,884.61	KAP
American Consumer Institute	P.O. Box 2161 Reston VA 20195	20-8601897	501(c)(3)	34,000.00	KAP
Benevolence Farm	4265 Thompson Mill Rd Graham NC 27253	26-3685507	501(c)(3)	8,400.00	KAP
The Buckeye Institute for Public Policy Solutions	·	31-1278593	501(c)(3)	62,130.77	KAP
University of Notre Dame	Notre Dame IN 46556	35-0868188	501(c)(3)	62,434.23	KAP
EdChoice Inc	111 Monument Circle Suite 2650 Indianapolis IN 46204	35-1978359	501(c)(3)	513,500.00	KAP
Mackinac Center for Public Policy	PO Box 568 140 W Main St Midland MI 48640	38-2701547	501(c)(3)	421,400.00	KAP
Illinois Policy Institute	190 S. LaSalle Street #1630 Chicago IL 60603	41-2057028	501(c)(3)	9,900.00	KAP
Center for Growth and Opportunity	3525 Old Main Hill Logan UT 84322	45-3564310	501(c)(3)	395,317.69	KAP
The Last Mile	717 Market Street, Suite 100 San Francisco CA 94103	46-2899930	501(c)(3)	71,478.30	KAP
Reimagine ATL Inc.	100 Flat Shoals Ave. Atlanta Georgia 30316	46-5278779	501(c)(3)	7,238.46	KAP
Cardinal Institute for West Virginia Policy	Ţ	47-1932521	501(c)(3)	61,600.00	KAP
The Policy Circle	4347 W Northwest Highway Suite 130 PMB #228 Dallas TX 7		501(c)(3)	15,900.00	KAP
National Taxpayers Union Foundation	112 C Street NW suite 650 Washington DC 20001	52-1122683	501(c)(3)	576,538.47	KAP
Institute on Religion and Democracy	1023 15th St NW Ste 200Washington, DC 20005	52-1265221	501(c)(3)	14,576.92	KAP
Center for Individual Rights	1100 CONNECTICUT AVE NW STE 625 Washington DC 200		501(c)(3)	12,000.00	KAP
Stimson Center	1211 Connecticut Avenue NW 8th Floor Washington DC 200		501(c)(3)	993,354.33	KAP
America's Future Foundation		52-1040938		9,000.00	KAP
Independent Women's Forum	1875 I Street, NW Suite 500 Washington DC 20006	54-1670627	501(c)(3)	12,900.00	KAP
The James Madison Institute for Public Policy	100 N Duval St Tallahassee FL 32301	59-2811908	501(c)(3)	22,800.00	KAP
Institute for Energy Research	1155 15th Street, NW #900 Washington 20005	76-0149778	501(c)(3)	33,775.00	KAP
**			501(c)(3)		KAP
Eurasia Group Foundation	21 W 26th St Fl 3New York City, NY 10010-1003 220 Allison St NW Apt 105 Washington DC 20011	81-1614189	501(c)(3)	15,887.50	KAP
Young Voices The One America Movement	4450 Mitchellville Rd #1021 Bowie MD 20716	81-2593815	501(c)(3)	22,400.00	KAP
		84-5006315	501(c)(3)	12,000.00	
Frontier Institute Inc	P.O. Box 5104 Helena MT 59604	85-0998465	501(c)(3)	85,200.00	KAP
Iron Light Labs	300 S Riverside Plaza Suite 1625 Chicago IL 60606	86-1206324	501(c)(3)	19,000.00	KAP
Deuce Community Inc	110 Lincoln Blvd. Venice CA 90291	86-3301178	501(c)(3)	12,469.23	KAP
Defense of Freedom Institute for Policy Studies	1765 Duke St Alexandria VA 22314	87-1196853	501(c)(3)	20,750.00	KAP
Tides Center	1012 Torney Avenue San Francisco CA 94129	94-3213100	501(c)(3)	519,000.00	General Operating
International Crisis Group	1629 K St Ste 450 Washington DC 20006	52-5170039	501(c)(3)	900,000.00	General Operating
End It For Good, Inc.	P. O. Box 170 Ridgeland MS 39158	83-3778569	501(c)(3)	100,000.00	General Operating
Lucy Burns Institute	Ballotpedia c/o The Lucy Burns Institute Madison WI 53703		501(c)(3)	107,500.00	General Operating
Patients Rising		47-5016851	501(c)(3)	200,000.00	General Operating
50CAN, Inc.	1380 Monroe St NW, #413 Washington DC 20010	27-3069592	501(c)(3)	400,000.00	General Operating
Alliance Defending Freedom	15100 N 90th Street Scottsdale AZ 85260	54-1660459	501(c)(3)	100,000.00	General Operating
Friends of the Children		93-1300690	501(c)(3)	10,000.00	General Operating
The Future of Free Speech	2817 West End Avenue #126-629 Nashville TN 37203	92-1415119	501(c)(3)	225,000.00	General Operating
Social Impact Commons	6370 Church Road Philadelphia PA 19151	35-2599700	501(c)(3)	8,250.00	General Operating
Yes In My Back Yard	2261 Market Street STE 10416San Francisco, CA 94114	32-0610451	501(c)(3)	50,000.00	General Operating
CrossPurpose	3050 Richard Allen Court Denver CO 80205	46-3862392	501(c)(3)	100,000.00	General Operating
Oklahoma Council of Public Affairs	1401 N. Lincoln Blvd. Oklahoma City OK 73104	73-1436375	501(c)(3)	95,000.00	General Operating
Pepperdine University	24255 Pacific Coast Hwy Malibu CA 90263-4819	95-1644037	501(c)(3)	50,000.00	General Operating
Manhattan Institute for Policy Research	52 Vanderbilt Ave New York NY 10017	13-2912529	501(c)(3)	700,000.00	General Operating
The Institute for Peace & Diplomacy	1530 Key Boulevard Arlington VA 22209	87-2476711	501(c)(3)	100,000.00	General Operating

Carnegie Mellon University	5000 Forbes Ave Pittsburgh PA 15213-3890	25-0969449	501(c)(3)	8,000.00	General Operating
Middle States Association of Colleges and Schools	3819-33 Chestnut Street Suite 310 Philadelphia PA 19104	23-2786118	501(c)(3)	155,270.00	General Operating
U.S. Chamber of Commerce Foundation	1615 H St NW Washington DC 20062	46-1561597	501(c)(3)	100,000.00	General Operating
Utah Fits All	300 11800 South Draper UT 84020	85-2895545	501(c)(3)	75,000.00	General Operating
Americans Federation for Children Growth Fund	5950 Berkshire Lane Suite 325 Dallas TX 75225	52-2111508	501(c)(3)	125,000.00	General Operating
Commonwealth Foundation	225 State St Ste 302 Harrisburg VA 17101	23-2473845	501(c)(3)	50,000.00	General Operating
ASU Prep Global Academy	300 E University Dr # 210Tempe, AZ 85281	82-1019991	501(c)(3)	100,000.00	General Operating
The Breakthrough Institute	2054 University Avenue Suite 500 Berkeley CA 94704	81-4526660	501(c)(3)	250,000.00	General Operating
The Optima Foundation Inc	3369 Pine Ridge Road Suite 204 Naples FL 34109	82-3745515	501(c)(3)	25,000.00	General Operating
Duke University	81 Beverly Dr Durham NC 27707	56-0532129	501(c)(3)	10,000.00	General Operating
Intermountain Health	36 S State Street Salt Lake City UT 84111	80-0225150	501(c)(3)	200,000.00	General Operating
Harbor Fund	3865 Wasatch Boulevard #130 Salt Lake City UT 84109	99-2068497	501(c)(3)	65,000.00	General Operating
Stanford University	450 Serra Mall Stanford CA 94305	94-1156365	501(c)(3)	500,000.00	General Operating
Love Thy Neighbor Community Development And Opportunity Corp.	P.O. Box 2217 Purcellville VA 20134	11-3658341	501(c)(3)	73,168.00	General Operating
Endeavor - Miami	2751 North Miami Avenue Suite 7 Miami FL 33127	46-3605872	501(c)(3)	35,000.00	General Operating
LIFT Inc	999 North Capitol Street Northeast Suite 310 Washington D	52-2168409	501(c)(3)	150,000.00	General Operating
Safe Families for Children Alliance	4300 West Irving Park Road Chicago IL 60641	45-3194102	501(c)(3)	178,000.00	General Operating
The Phoenix	2239 Champa Street Denver CO 80205	20-4648043	501(c)(3)	2,731,000.00	General Operating
Urban Specialists Inc	1401 Botham Jean Boulevard Dallas TX 75215	82-4320380	501(c)(3)	100,000.00	General Operating
National Association of Manufacturers	733 10th Street Northwest, Suite 700 Washington DC 20001	13-1084330	501(c)(6)	325,000.00	General Operating
Vine and Fig Tree Institute I, Inc.	207 WEST 25TH STREET FLOOR 9 New York, NY 10001-715	99-2090467	501(c)(3)	3,000,000.00	General Operating
Hearst Media Services Connecticut, LLC	301 Merritt 7 Suite 1 Norwalk CT 06902	13-3920860		9,080.00	MJF
Microschool Solutions	2514 East Golden Street Mesa AZ 85213	99-4480100		50,000.00	General Operating

Total 131,967,633.80

#### PUBLIC DISCLOSURE COPY

990-T

# **Exempt Organization Business Income Tax Return**

OMB No. 1545-0047 (and proxy tax under section 6033(e)) For calendar year 2024 or other tax year beginning \_\_\_\_\_\_, 2024, and ending \_\_\_\_\_\_, 20 Go to www.irs.gov/Form990T for instructions and the latest information. Department of the Treasury Do not enter SSN numbers on this form as it may be made public if your organization is an 501(c)(3). Internal Revenue Service Name of organization ( Check box if name changed and see instructions.) D Employer identification number Check box if address changed. THE SEMINAR NETWORK, INC. 46-3508366 **Print** Number, street, and room or suite no. If a P.O. box, see instructions. E Group exemption number **B** Exempt under section or (see instructions) **v** 501( **C** )( 3 ) 4201 WILSON BLVD., 0800 Type 408(e) 220(e) City or town, state or province, country, and ZIP or foreign postal code 530(a) F Check box if 408A ARLINGTON, VA 22203 an amended return. 529(a) 529A C Book value of all assets at end of year . . . . 303 757 058 G Check organization type 

501(c) corporation □ 501(c) trust □ 401(a) trust □ Other trust □ State college/university 6417(d)(1)(A) Applicable entity H Check if filing only to claim Credit from Form 8941 Refund shown on Form 2439 Elective payment amount from Form 3800 During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? 

Yes If "Yes," enter the name and identifying number of the parent corporation The books are in care of (SEE STATEMENT) Telephone number (703) 214-7118 **Total Unrelated Business Taxable Income** 1 Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions) 1 57.911 2 2 3 3 57,911 4 4 Charitable contributions (see instructions for limitation rules) . . . . . . . . . . . . . . . . . . 5,791 5 Total unrelated business taxable income before net operating losses. Subtract line 4 from line 3 . . . 5 52.120 6 6 0 7 Total of unrelated business taxable income before specific deduction and section 199A deduction. 7 52,120 8 Specific deduction (generally \$1,000, but see instructions for exceptions) . . . . . . . . . . . . . 8 1.000 9 Trusts. Section 199A deduction. See instructions . . . . . . . . . . 9 0 10 10 1.000 11 **Unrelated business taxable income.** Subtract line 10 from line 7. If line 10 is greater than line 7, 11 51,120 Part II **Tax Computation** Organizations taxable as corporations. Multiply Part I, line 11, by 21% (0.21) . . . . . . . . 1 10,735 Trusts taxable at trust rates. See instructions for tax computation. Income tax on the amount on 2 Part I, line 11, from: Tax rate schedule or Schedule D (Form 1041) . . . . . . . . . . . 2 3 3 0 Amount from Form 4255, Part I, line 3, column (q) . . . . . . 0 4a 4b 0 5 5 0 6 Tax on noncompliant facility income. See instructions . . . . 6 0

7	Total. Add lines 3 through 6 to line 1 or 2, whichever applies	7	10,735
Part	III Tax and Payments		
1a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) . 1a 0		
b	Other credits (see instructions)		
С	General business credit. Attach Form 3800 (see instructions)		
d	Credit for prior-year minimum tax (attach Form 8801 or 8827) 1d		
е	Total credits. Add lines 1a through 1d	1e	0
2	Subtract line 1e from Part II, line 7	2	10,735
3a	Amount from Form 4255, Part I, line 3, column (r) (see instructions) 3a		
b	Amount due from Form 8611		
С	Amount due from Form 8697		
d	Amount due from Form 8866		
е	Other amounts due (see instructions)		
f	Total amounts due. Add lines 3a through 3e	3f	0
4	<b>Total tax.</b> Add lines 2 and 3f (see instructions). ☐ Check if includes tax previously deferred under		
	section 1294. Enter tax amount here	4	10,735
	1 <b>5</b> 1 11 A 1 M 11 11 11 11 11 11 11 11 11 11 11 11		5 000 T (000 t)

Part	Tax and Payments (continued)					
5	Current net 965 tax liability paid from Form 965-A, Part II,	column (k)		5		0
6a	Payments: Preceding year's overpayment credited to the	` '	ia 113,93	0		
b	Current year's estimated tax payments. Check if see	•				
	applies		bb	0		
С	Tax deposited with Form 8868	6	ic	0		
d	Foreign organizations: Tax paid or withheld at source (see		id	0		
е	Backup withholding (see instructions)	•	ie	0		
f	Credit for small employer health insurance premiums (atta		Sf .	0		
g	Elective payment election amount from Form 3800	· · · · · · · · · · · · · · · · · · ·	ig	0		
h	Payment from Form 2439		<u> </u>	0		
i	Credit from Form 4136		Si Si	0		
i	Other (see instructions)		Sj .	0		
7	<b>Total payments.</b> Add lines 6a through 6j		·	7	1	13,930
8	Estimated tax penalty (see instructions). Check if Form 22	20 is attached		8		0
9	Tax due. If line 7 is smaller than the total of lines 4, 5, and			9		0
10	Overpayment. If line 7 is larger than the total of lines 4, 5	and 8, enter amount ove	rpaid	10	10	03,195
11	Enter the amount of line 10 you want: Credited to 2025 e	stimated tax	53,195 <b>Refunded</b>	11		50,000
Part	V Statements Regarding Certain Activities and	Other Information (se	e instructions)			
1	At any time during the 2024 calendar year, did the organi	zation have an interest in	or a signature or ot	her autho	ority Yes	No
	over a financial account (bank, securities, or other) in a fo		•		_	
	FinCEN Form 114, Report of Foreign Bank and Financial	Accounts. If "Yes," enter	the name of the for	eign coui	ntry	
	here					V
2	During the tax year, did the organization receive a distribution	from, or was it the grantor	of, or transferor to, a	foreign tru	ust?	~
	If "Yes," see instructions for other forms the organization	may have to file.		_		
3	Enter the amount of tax-exempt interest received or accru	ed during the tax year .	\$			
4	Enter available pre-2018 NOL carryovers here \$	. Do not include	any post-2017 NO	L carryov	er	
	Enter available pre-2018 NOL carryovers here \$ shown on Schedule A (Form 990-T). Don't reduce the N	OL carryover shown here	by any deduction	reported	on	
	Part I, line 6.					
5	Post-2017 NOL carryovers. Enter the Business Activity Co					
	the amounts shown below by any NOL claimed on any Sch	nedule A, Part II, line 17, fo	r the tax year. See i	nstructior	ns.	
	Business Activity Code	Availa	ble post-2017 NOL	_ carryove	er	
	901101	\$		390,	513	
		\$				
		\$				
		\$				
6a	Reserved for future use					
b	Reserved for future use					
Part	V Supplemental Information					
Provid	e any additional information. See instructions.					
	Under penalties of perjury, I declare that I have examined this return, in	cluding accompanying schedule	s and statements and to	the best o	f my knowle	dge and
Sign	belief, it is true, correct, and complete. Declaration of preparer (other tha	. , ,			•	
_					S discuss this	
Here		TREASURER			eparer showr	
	Signature of officer Date	Title		(SEE ILISUUC	ctions)? 🗹 <b>Ye</b>	s ⊔NO

Date

Preparer's signature

1201 WALNUT STREET SUITE 1700, KANSAS CITY, MO 64106-2246

Title

Date

Signature of officer

**Paid** 

Preparer

**Use Only** 

Print/Type preparer's name

Firm's name FORVIS MAZARS, LLP

MICHAEL ENGLE

P00482834

44-0160260

PTIN

Check if self-employed

Firm's EIN

Phone no.

#### **SCHEDULE A** (Form 990-T)

### **Unrelated Business Taxable Income** From an Unrelated Trade or Business

OMB No. 1545-0047

Department of the Treasury

Go to www.irs.gov/Form990T for instructions and the latest information.

Department of the Treasury Internal Revenue Service	Do not enter SSN numbers on this form as it ma			Open to P 501(c)(3)	ublic Insp Organizat	ection for ions Only
A Name of the organizati	on		B Employer iden	tification	numbe	r
THE SEMINAR NETWOR	rk, inc.		46-	-3508366	1	
C Unrelated business	activity code (see instructions)	901101	<b>D</b> Sequence:	1	of	1

#### **E** Describe the unrelated trade or business QUALIFIED PARTNERSHIP INVESTMENTS Part I **Unrelated Trade or Business Income** (A) Income (B) Expenses (C) Net 1a Gross receipts or sales 0 c Balance Less returns and allowances 0 1c Cost of goods sold (Part III, line 8) . . . . . . . . . . . 2 2 0 Gross profit. Subtract line 2 from line 1c. . . . . 3 3 0 0 Capital gain net income (attach Schedule D (Form 1041 or Form 1120)). See instructions . . . . . . . . . . . . 4a 0 0 Net gain (loss) (Form 4797) (attach Form 4797). See 4b 0 0 Capital loss deduction for trusts . . . . . . 4c 5 Income (loss) from a partnership or an S corporation (attach statement) . . . . . . . . . . . . . . . . . . 5 309,450 309.450 Rent income (Part IV) . . . . . . . . . . . . . . . . . 6 6 0 0 7 7 Unrelated debt-financed income (Part V) . . . . . 0 0 0 8 Interest, annuities, royalties, and rents from a controlled 8 0 0 0 Investment income of section 501(c)(7), (9), or (17) 9 organizations (Part VII) . . . . . . . . . . . . . . . 0 9 0 0 10 Exploited exempt activity income (Part VIII) . . . . . . 10 0 0 0 11 Advertising income (Part IX) . . . . . . . . . . . . . . 11 0 0 0 12 12 0 0 Other income (see instructions; attach statement) . . . . Total. Combine lines 3 through 12 . . \_ . . . . 13 13 309.450 309.450 Deductions Not Taken Elsewhere. See instructions for limitations on deductions. Deductions must be Part II directly connected with the unrelated business income. Compensation of officers, directors, and trustees (Part X) . . . . 0 1 0 2 Salaries and wages . . . . . . . . . . . . . . . . 2 3 3 0 4 Bad debts . . . . . . . . . . . . . . . . . 4 0 5 5 0 Interest (attach statement). See instructions . . . . 6 6 12,515 7 Depreciation (attach Form 4562). See instructions . . . . . . . . . 8 Less depreciation claimed in Part III and elsewhere on return . . . 0 8b 0 9 0 10 0 Contributions to deferred compensation plans . . . . . 10 0 11 11 12 0 12 Excess exempt expenses (Part VIII) . . . . . . . . . 13 Excess readership costs (Part IX) . . . . . . . . . . . . . . 13 0 14 7,380 14 Total deductions. Add lines 1 through 14 . . . . . . . . 15 15 19,895 Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, 16 16 289.555 17 17 231,644 Unrelated business taxable income. Subtract line 17 from line 16 . . . 57,911 18

Schedule A (Form 990-T) 2024 Page 2 Part III Cost of Goods Sold Enter method of inventory valuation 

6	<b>Total.</b> Add lines 1 through 5				0
7	Inventory at end of year				0
8 9	Cost of goods sold. Subtract line 7 from line 6. I				
	Do the rules of section 263A (with respect to property and Rent Income (From Real Property and				on?   Yes   No
1	Description of property (property street address,  A  B  C  D  D  D	city, state, ZIP code)	Check if a dual-us		s.
		Α	В	С	D
2	Rent received or accrued				
а	From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)				
b	From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income) .				
С	Total rents received or accrued by property. Add lines 2a and 2b, columns A through D				
3	Total rents received or accrued. Add line 2c, column	ns A through D. Enter	nere and on Part I, I	ine 6, column (A)	0
4	Deductions directly connected with the income in lines 2a and 2b (attach statement)				
5	Total deductions. Add line 4, columns A through	n D. Enter here and o	n Part I, line 6, colu	ımn (B)	0
Par	t V Unrelated Debt-Financed Income (se	e instructions)			
	A			C	
2	Gross income from or allocable to debt-financed property	A	ь	<u> </u>	
3	Deductions directly connected with or allocable to debt-financed property				
а	Straight line depreciation (attach statement)				
b c	Other deductions (attach statement) Total deductions (add lines 3a and 3b, columns A through D)				
4	Amount of average acquisition debt on or allocable to debt-financed property (attach statement)				
5	Average adjusted basis of or allocable to debt-financed property (attach statement)				
6 7	Divide line 4 by line 5	%	%	%	%
8	Total gross income (add line 7, columns A throu	ugh D). Enter here and	d on Part I, line 7, c	column (A)	0
9	Allocable deductions. Multiply line 3c by line 6				
10	<b>Total allocable deductions.</b> Add line 9, columns	_			0
11	Total dividends — received deductions include	ed in line 10		<u></u>	0
				Sche	edule A (Form 990-T) 20

Schedule A (Form 990-T) 2024 Page \$

	le A (Form 990-1) 2024						Page 3
Part	Interest, Annuit	ies, Royaltie	s, and Rents	s Fro		<b>ganizations</b> (see instru	ictions)
					Exempt Co	ntrolled Organizations	
•	Name of controlled organization	2. Employer identification number	3. Net unrela income (los (see instruction	s)	Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	6. Deductions directly connected with income in column 5
(1)							
(2)							
(3)							
(4)							
					1	I	1
	7. Taxable income	inco	unrelated me (loss) structions)	9	Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10
(1)							
(2)							
(3)							
(4)							
Total						Add columns 5 and 10. Enter here and on Part I, line 8, column (A).	
Part	VII Investment Inc	ome of a Sec	ction 501(c)(7	7), (9	), or (17) Organiza	ation (see instructions)	
	1. Description of income		nt of income	c	3. Deductions directly connected attach statement)	4. Set-asides (attach statement)	5. Total deductions and set-asides (add columns 3 and 4)
(1)							
(2)							
(3)							
(4)							
		Enter here and on Part I,		Add amounts in column 5. Enter here and on Part I, line 9, column (B).			
	<u>ls .</u>		0				0
Part			ncome, Othe	r Th	an Advertising In	<b>come</b> (see instructions	3)
1	Description of exploited						
2						art I, line 10, column (A)	2
3	. ,					Enter here and on Part I,	3
4	<ul> <li>line 10, column (B)</li></ul>						4
5	Gross income from acti						5
6	Expenses attributable t	•					6
7		es. Subtract li	ne 5 from line (	6, but	do not enter more	than the amount on line	7 0
							<u> </u>

	le A (Form 990-1) 2024					Page
	Advertising Income				P. L. P. L. P.	
1	Name(s) of periodical(s). Check box if re	-	•		olidated basis.	
	A ∐ B □					
	C					
	D 🗆					
Enter	amounts for each periodical listed above	in the co	rresponding colum	n.		
			Α	В	С	D
2	Gross advertising income					
а	Add columns A through D. Enter here a	nd on Pa	rt I, line 11, column	(A)		
3	Direct advertising costs by periodical					
а	Add columns A through D. Enter here a	nd on Pa	rt I, line 11, column	(B)		
4	Advertising gain (loss). Subtract line 3 ft 2. For any column in line 4 showing complete lines 5 through 8. For any co- line 4 showing a loss or zero, do not co- lines 5 through 7, and enter -0- on line 8	a gain, olumn in omplete				
5 6 7	Readership costs	 ess than 5 is less				
8	Excess readership costs allowed deduction. For each column showing a line 4, enter the lesser of line 4 or line 7	gain on				
а	Add line 8, columns A through D. En					on
	Part II, line 13		· · · · · ·			
Par	t X Compensation of Officers, Di	rectors	, and Trustees (S	see instruction	1	
	1. Name		<b>2.</b> Title		3. Percentage of time devoted to business	<ol> <li>Compensation attributable to unrelated business</li> </ol>
(1)					%	
(2)					%	
(3)					%	
(4)					%	
Tota	I Enter here and an Part II line 1					
	II. Enter here and on Part II, line 1 .  XI Supplemental Information (see	instru	ctions)			
Гаг	Supplemental information (36	e iristi u	Ctions			

Return Reference - Identifier	Explanation
BOOK CARE - NAME AND ADDRESS	HENRICH HEUER, 4201 WILSON BLVD. SUITE 0800, ARLINGTON, VA 22203

**Additional Information** 

Form 990T

Form 990T Part I, Line 4

Charitable Contributions

Year Generated	Amount Generated	Amount Used in Prior Years	Amount Used in Current Year	Amount Converted to NOL	Amount Remaining	Contribution Carryover Expires
2021	57,229,788	19,139	0		57,210,649	2026
2022	113,535,633	0	0		113,535,633	2027
2023	139,900,401	0	0		139,900,401	2028
2024	131,688,386	0	5,791		131,682,595	2029
Totals	442,354,208	19,139	5,791	0	442,329,278	

# Schedule A - Part I, Line 5

Income (loss) from Partnership and S Corporations

Name of Partnership	Share of gross income	Share of deductions	Gain or loss
QUALIFIED PARTNERSHIP INVESTMENTS			
(1) INCOME (LOSS) FROM PARTNERSHIP INVESTMENTS	349,924	40,474	309,450
Total	349,924	40,474	309,450

Sche	ماريام	۸ D	ort II	1.3	200
ocne	aurez	A - P	511 L		пео

Taxes and Licenses

Description	Amount		
QUALIFIED PARTNERSHIP INVESTMENTS			
(1) STATE TAX EXPENSE	12,515		

Sched		Λ [	art l	ino '	1 /
SCHE	aule /	A - I	all	 ше	14

Other Deductions

Description	Amount			
QUALIFIED PARTNERSHIP INVESTMENTS				
(1) ACCOUNTING FEES	7,380			

# Schedule A - Part II, Line 17

Deduction for net operating loss arising in tax years beginning on or after January 1, 2018

Year Generated	Amount Generated	Converted Contributions	Amount Used in Prior Years	Amount Used in Current Year	Amount Remaining			
QUALIFIED PARTNERSHIP INVESTMENTS								
2022	518,302		127,789	231,644	158,869			
Totals	518,302	0	127,789	231,644	158,869			

#### **SCHEDULE D** (Form 1120)

**Capital Gains and Losses** 

OMB No. 1545-0123

0

Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-H, 1120-IC-DISC, 1120-L, 1120-ND, 1120-PC, 1120-POL, 1120-REIT, 1120-RIC, 1120-SF, or certain Forms 990-T. Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form1120 for instructions and the latest information. Name **Employer identification number** THE SEMINAR NETWORK, INC. 46-3508366 Did the corporation dispose of any investment(s) in a qualified opportunity fund during the tax year? . ☐ Yes 🗸 No If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss. Part I Short-Term Capital Gains and Losses – Assets Held One Year or Less See instructions for how to figure the amounts to enter on (g) Adjustments to gain (h) Gain or (loss) (d) the lines below or loss from Form(s) Subtract column (e) from Proceeds Cost 8949, Part I, line 2, column (d) and combine This form may be easier to complete if you round off cents to (or other basis) (sales price) column (g) the result with column (a) whole dollars. 1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, 0 leave this line blank and go to line 1b 1b Totals for all transactions reported on Form(s) 8949 with Box A checked . 0

0 0 5.893 with **Box C** checked 0 4 Short-term capital gain from installment sales from Form 6252, line 26 or 37. 4 5 Short-term capital gain or (loss) from like-kind exchanges from Form 8824 . 5 **6** Unused capital loss carryover (attach computation) 6 0) 5,893 7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column h Long-Term Capital Gains and Losses—Assets Held More Than One Year

See instructions for how to figure the amounts to enter on the (g) Adjustments to gain (h) Gain or (loss) (d) lines below or loss from Form(s) Subtract column (e) from Proceeds Cost 8949, Part II, line 2, column (d) and combine This form may be easier to complete if you round off cents to (or other basis) (sales price) column (a) the result with column (a) whole dollars. 8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, 0 leave this line blank and go to line 8b 8b Totals for all transactions reported on Form(s) 8949 with **Box D** checked 0 9 Totals for all transactions reported on Form(s) 8949 with **Box E** checked 0 10 Totals for all transactions reported on Form(s) 8949 0 with **Box F** checked 0 0 (53,827)11 Enter gain from Form 4797, line 7 or 9 11 12 Long-term capital gain from installment sales from Form 6252, line 26 or 37. 12 13 Long-term capital gain or (loss) from like-kind exchanges from Form 8824 13 **14** Capital gain distributions (see instructions) 14 (53,827)15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column h 15 Summary of Parts I and II 16 Enter excess of net short-term capital gain (line 7) over net long-term capital loss (line 15) 16 0

0 17 Net capital gain. Enter excess of net long-term capital gain (line 15) over net short-term capital loss (line 7) 17 18 Add lines 16 and 17. Enter here and on Form 1120, page 1, line 8, or the applicable line on other returns . 18 0

**Note:** If losses exceed gains, see *Capital Losses* in the instructions.

2 Totals for all transactions reported on Form(s) 8949

3 Totals for all transactions reported on Form(s) 8949

with **Box B** checked

# Form **8949**

# **Sales and Other Dispositions of Capital Assets**

File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

Go to www.irs.gov/Form8949 for instructions and the latest information.

OMB No. 1545-0074

2024

Attachment
Sequence No. 12A

Department of the Treasury Internal Revenue Service Name(s) shown on return

Name(s) shown on return
THE SEMINAR NETWORK, INC.

Social security number or taxpayer identification number

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

**Short-Term.** Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2.

**Note:** You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

(A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)

(B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS

(C) Short-term transactions	not reported	to you on F	orm 1099-B				
(a) Description of property (Example: 100 sh. XYZ Co.)	Mo day vr) dis	(c) Date sold or	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis See the <b>Note</b> below and see <i>Column</i> (e) in the separate instructions.	See the separate instructions.		(h) Gain or (loss) Subtract column (e)
		disposed of (Mo., day, yr.)			(f) Code(s) from instructions	<b>(g)</b> Amount of adjustment	from column (d) and combine the result with column (g).
FROM K-1 INVESTMENTS				•		•	F002
			0	0		0	5893
2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box 6).	al here and incl is checked), <b>lin</b>	ude on your le 2 (if Box B	0	0		0	5893

**Note:** If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column* (g) in the separate instructions for how to figure the amount of the adjustment.

Form 8949 (2024) Attachment Sequence No. 12A

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side THE SEMINAR NETWORK, INC.

Social security number or taxpayer identification number 463508366

Before you check Box D. E. or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

#### Part II

Long-Term. Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1.

Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

( <b>D</b> ) Long-term transactions	reported on	Form(s) 1099	9-B showing bas	is was reported	to the IRS (	see <b>Note</b> above	)
(E) Long-term transactions				is <b>wasn't</b> report	ed to the IF	RS	
(F) Long-term transactions	not reported	to you on Fo	rm 1099-B				
(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis See the <b>Note</b> below and see <i>Column</i> (e) in the separate instructions.	See the separate instructions.		(h) Gain or (loss) Subtract column (e)
					(f) Code(s) from instructions	<b>(g)</b> Amount of adjustment	from column (d) and combine the result with column (g).
FROM K-1 INVESTMENTS							
			0	0		0	(53,827)
2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D, line 8b (if Box D above above is checked). or line 10 (if Box D above is checked).	I here and incl is checked), <b>lin</b>	lude on your ne 9 (if Box E	0	0		0	(53,827)

Note: If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

above is checked), or line 10 (if Box F above is checked) .