Return of Organization Exempt From Income Tax

OMB No. 1545-0047

20

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

Department of the Treasury Internal Revenue Service Do not enter social security numbers on this form as it may be made public.

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

Open to Public Inspection

22

A	For the	2022 calen	dar year, or tax year beginning 01/01/2022 and ending		12/31/2	2022							
в	Check if	applicable:	C Name of organization GLOBAL OUTREACH FOUNDATION			D Emplo	oyer identification number						
	Address	change	Doing business as				20-0593285						
	Name ch	nange	Number and street (or P.O. box if mail is not delivered to street address)	Room/	'suite	E Teleph	ione number						
	Initial ret	turn	PO Box 1213			720-389-6465							
	Final return/terminated City or town, state or province, country, and ZIP or foreign postal code												
	Amende	d return	Estes Park, CO 80517			G Gross	receipts \$ 551,813						
	Applicat	pplication pending F Name and address of principal officer: Shannon Coenen H(a) Is this a group return for subc											
		PO Box 1213, Estes Park, CO 80517 H(b) Are all subordinates included? Yes											
<u> </u>	Tax-exe	mpt status:	✓ 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527	I	f "No," attach	n a list. Se	e instructions.						
J	Website	www.glo	baloutreachfoundation.org	I	H(c) Group ex	emption	number						
к	Form of o	organization: 🗸	Corporation Trust Association Other L Year of form	nation:	2004	M State	of legal domicile: CO						
Ρ	art I	Summa	ry										
	1	Briefly des	cribe the organization's mission or most significant activities: GOF f	f urth e	rs the gosp	el of Je	sus Christ through						
S		evangelisn	n, discipleship & training, education, and humanitarian projects.										
Activities & Governance													
veri	2	Check this	box \square if the organization discontinued its operations or disposed of	of mo	ore than 25	% of it	s net assets.						
ĝ	3	Number of	voting members of the governing body (Part VI, line 1a)			3	4						
ŏ	4	Number of	independent voting members of the governing body (Part VI, line 1k	b) .		4	3						
ties	5	Total numb	per of individuals employed in calendar year 2022 (Part V, line 2a)			5	2						
tivi	6	Total numb	per of volunteers (estimate if necessary)	/)									
Ac	7a	Total unrel	ated business revenue from Part VIII, column (C), line 12			7a	0						
	b	Net unrelat	ed business taxable income from Form 990-T, Part I, line 11			7b	0						
			Prior Year		Current Year								
e	8	Contributio	ons and grants (Part VIII, line 1h)		6	05,303	551,777						
nue	9	Program se	ervice revenue (Part VIII, line 2g)			0	0						
Revenue	10	Investment	income (Part VIII, column (A), lines 3, 4, and 7d)			3	15						
ш	11	Other reve	nue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			0	21						
	12	Total reven	ue-add lines 8 through 11 (must equal Part VIII, column (A), line 12)		6	05,306	551,813						
	13	Grants and	I similar amounts paid (Part IX, column (A), lines 1–3)		2	96,114	462,650						
	14	Benefits pa	aid to or for members (Part IX, column (A), line 4)			0	0						
ŝ	15	Salaries, ot	her compensation, employee benefits (Part IX, column (A), lines 5–10)		1	07,124	105,051						
en se	16a	Profession	al fundraising fees (Part IX, column (A), line 11e)			0	0						
Expenses	b	Total fundr	aising expenses (Part IX, column (D), line 25)										
ш	17	Other expe	enses (Part IX, column (A), lines 11a–11d, 11f–24e)			85,391	106,867						
	18		nses. Add lines 13–17 (must equal Part IX, column (A), line 25)	4	88,629	674,568							
	19	Revenue le	ess expenses. Subtract line 18 from line 12		1	16,677	-122,755						
Net Assets or Fund Balances				Begi	nning of Curre	ent Year	End of Year						
set	20		s (Part X, line 16)		2	94,636	171,412						
t As	21		ties (Part X, line 26)			2,223	1,754						
Ϋ́ς	22		or fund balances. Subtract line 21 from line 20		2	92,413	169,658						
Pa	art II	Signatu	re Block										

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign	Signature of officer	Date	Date						
H	Shannon Coenen, President Type or print name and title								
Paid	Print/Type preparer's name	Preparer's signature	Preparer's signature			Check if self-employed	PTIN		
Preparer Use Only		Firm's EIN							
Use Only	Firm's address	Phone no.							
May the IRS	S discuss this return with the pre	parer shown above? See instruct	tions				Yes	🗌 No	
For Paperwe	ork Reduction Act Notice, see the	separate instructions.	Ca	at. No. 11282Y			Form 9	90 (2022)	

orm 99	0 (2022) Page 2
Part	
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	Global Outreach Foundation furthers the gospel of Jesus Christ through evangelism, discipleship & training, education, and humanitarian projects.
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
	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.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
a	(Code:) (Expenses \$ 455,543 including grants of \$ 422,379) (Revenue \$ 0)
	MISSIONARY SUPPORT Financially supported 13 missionary couples' living and ministry costs. Missionaries served 7,260
	people across 18 nations in Africa, Asia, Europe, North America and South America.
b	(Code:) (Expenses \$ 171,139 including grants of \$ 26,877) (Revenue \$)
	OUTREACH Held evangelistic meetings, worship services, youth camps, video conferences, pastor trainings, distributed food to
	vulnerable adults and children, and rescued individuals from human trafficking. Program services were held in 18 countries across
	Africa, Asia, Europe, North America, and South America.
c	(Code:) (Expenses \$18,726 including grants of \$13,394) (Revenue \$0)
	EDUCATION Supported costs of classroom supplies, education services, food, and medicine for more than 380 vulnerable
	youth in Africa and Asia.
1d	Other program services (Describe on Schedule O.)
	(Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)
4e	Total program service expenses 645,408

Form 99	0 (2022)		I	Page 3
Part	V Checklist of Required Schedules			
	Is the experimetion described in section $501(a)(2)$ at $4047(a)(1)$ (other than a private foundation)? If "Vec "		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	~	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	~	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		~
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		~
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		~
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	6		~
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		~
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	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? <i>If "Yes," complete Schedule D, Part IV</i>	9		~
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		~
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		~
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? <i>If "Yes," complete Schedule D, Part VII</i>	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? <i>If "Yes," complete Schedule D, Part VIII</i>	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 "Yes," complete Schedule D, Part IX</i>	11d		~
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		~
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f		~
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 b	Did the organization maintain an office, employees, or agents outside of the United States? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	14a	~	
-	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	14b	~	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15		~
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV.</i>	16	~	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <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? <i>If "Yes," complete Schedule G, Part III</i>	19		~
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		~
b 21	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? <i>If "Yes," complete Schedule I, Parts I and II</i>	21		~

Form 9	90 (2022)			Page 4
Part	V Checklist of Required Schedules (continued)		1	
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	Yes	No
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? <i>If "Yes," complete Schedule J</i> .	22		~
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 c	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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? <i>If "Yes," complete Schedule L, Part I</i>	24d 25a		~
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I.	25b		~
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26		~
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		~
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i> "Yes," <i>complete Schedule L, Part IV</i>	28a		~
b c	A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i> A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>	28b 28c		~ ~
29 30	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	29 30		~ ~
31 32	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	31 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? <i>If "Yes," complete Schedule R, Part I</i>	33		~
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		~
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)? 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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35a 35b		~
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		~
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		~
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O	38	~	
Part	V 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
1a b c	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable15Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable110Did the organization comply with backup withholding rules for reportable paymentsto vendors and	-		
	reportable gaming (gambling) winnings to prize winners?	1c	~	

Form 99			F	Page 5					
Part			Yes	No					
	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 2								
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?								
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		~					
	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	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?								
	b If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).								
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		~					
С									
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the								
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		~					
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b							
7	Organizations that may receive deductible contributions under section 170(c).								
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods								
	and services provided to the payor?	7a							
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b							
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was								
	required to file Form 8282?	7c							
	If "Yes," indicate the number of Forms 8282 filed during the year	-							
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7e 7f							
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g							
-	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	79 7h							
	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the								
	sponsoring organization have excess business holdings at any time during the year?								
	Sponsoring organizations maintaining donor advised funds.								
	Did the sponsoring organization make any taxable distributions under section 4966?	9a							
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b							
	Section 501(c)(7) organizations. Enter:								
	Initiation fees and capital contributions included on Part VIII, line 12								
ь 11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b Section 501(c)(12) organizations. Enter:								
a	Gross income from members or shareholders								
	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								
	Section 501(c)(29) qualified nonprofit health insurance issuers.								
а	Is the organization licensed to issue qualified health plans in more than one state?	13a							
Ŀ	Note: See the instructions for additional information the organization must report on Schedule O.								
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans								
	the organization is licensed to issue qualified health plans 13b Enter the amount of reserves on hand 13c								
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		~					
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		-					
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or								
	excess parachute payment(s) during the year?	15		~					
	If "Yes," see the instructions and file Form 4720, Schedule N.								
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		~					
	If "Yes," complete Form 4720, Schedule O.								
	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	(2022)
------	-----	--------

Part	Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. Check if Schedule O contains a response or note to any line in this Part VI	See in	nstruc	tions			
Secti	on A. Governing Body and Management						
1a	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. 1a						
ь 2							
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? .	3		~			
4 5 6 7a	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? . Did the organization have members or stockholders?	4 5 6 7a		ン ン ン ン			
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		~			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:						
a b 9	The governing body?	8a 8b 9	ン ン	~			
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Rever	iue C	ode.)				
10-		40-	Yes	No			
10a b	Did the organization have local chapters, branches, or affiliates?	10a 10b					
11a b	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe on Schedule O the process, if any, used by the organization to review this Form 990.	11a	~				
12a	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>	12a	v				
b c	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe on Schedule O how this was done.</i>	12b 12c	~				
13	Did the organization have a written whistleblower policy?	13	~				
14	Did the organization have a written document retention and destruction policy?	14	~				
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?						
а	The organization's CEO, Executive Director, or top management official	15a		~			
b	Other officers or key employees of the organization	15b		~			
16a	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		~			
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b					
Secti	on C. Disclosure		ı	ı			
17 18	List the states with which a copy of this Form 990 is required to be filed <u>co</u> Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990- (3)s only) available for public inspection. Indicate how you made these available. Check all that apply.	T (sec	tion (501(c			
	V Own website V Another's website V Upon request O Other (explain on Schedule O)						

19	Describe on Schedule O whether (and if so, how) the organization	made its governing documents, conflict of interest policy,
	and financial statements available to the public during the tax year.	

20 State the name, address, and telephone number of the person who possesses the organization's books and records. Shannon Coenen, (720)389-6465

Form 990 (2022)

Page **6**

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

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

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

• List all of the organization's **current** officers, directors, trustees (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 any related organization compensated any current officer, director, or trustee.

				(0	C)					
(A)	(B)				ition			(D)	(E)	(F)
Name and title	Average					e than o is both		Reportable	Reportable	Estimated amount
	hours					or/trust		compensation	compensation	of other
	per week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/ 1099-MISC/ 1099-NEC)	from related organizations (W-2/ 1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
Shannon Coenen	40.00									
President	0.00	~		~				30,000	0	0
Salvador Villagran	2.00	1								
Treasurer	0.00	~		~				0	0	0
Shelley Jones	2.00	1								
Secretary	0.00	~		~				0	0	0
Steven Ferrante	2.00									
Director	0.00	~						0	0	0
·		-								
		-								
		-								
		-								
		-								
		-								
										Faura 000 (0000)

Part	VII Section A. Officers, Directors, 1	rustees,	Key I	Emj	ploy	yee	s, an	d⊦	lighest Compe	nsated E	mplo	yees (c	ontin	ued)
	(A) Name and title	(B) Average hours	officer and a director/trust						(D) Reportable compensation	(E) Reporta compensa	ation	Estimat of	other	
		per week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/ 1099-MISC/ 1099-NEC)	from rela organization 1099-MI 1099-NI	s (W-2/ SC/			and
			-											
			-											
			-											
			-											
			-											
			-											
			-											
1b	Subtotal		1	•					30,000		0			0
c d									30,000		0			0
2	Total number of individuals (including reportable compensation from the organi		limite	ed t	o t	hos	e list	ed	above) who re 0	eceived m	nore t	han \$1	00,00	0 0 [.]
3	Did the organization list any former of employee on line 1a? <i>If "Yes," complete</i> s							•	loyee, or highes				Yes	No
4	For any individual listed on line 1a, is the organization and related organizations individual .	sum of regreater th	portal an \$ ⁻	ble (150,	con 000	npei)? <i>[</i>	nsatio f "Yes	n a s,"	nd other compe complete Schee	nsation fro	m the			<u> </u>
5	Did any person listed on line 1a receive of for services rendered to the organization?	r accrue co	ompe	nsat	tion	fro	m any	' un	related organiza	tion or indi		4 5		~ ~
Secti 1	on B. Independent Contractors Complete this table for your five high compensation from the organization. Repo													
	(A) Name and business add	· ·							(B) Description of serv			(C) Compensa		
Vone														
2	Total number of independent contracto	ve (in elu div						-	and listed show					

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									

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to ar	y line in this Pa	art VIII]
							_

				1		
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
ts,	1a	Federated campaigns 1a	0			
Contributions, Gifts, Grants, and Other Similar Amounts	b	Membership dues 1b	0			
ይ ይ	с	Fundraising events	0			
, ts,	d	Related organizations 1d	0			
Gif İlar	e	Government grants (contributions) 1e	0			
in s,	f	All other contributions, gifts, grants,	<u> </u>			
r S	•	and similar analysis not included above	-			
the	~	Noncash contributions included in	<u>//</u>			
₫ Ē	g					
u pu	_	-5 +	0			
o e	h	Total. Add lines 1a-1f	551,777			
		Business Code				
ice	2a					
S e	b					
jram Ser Revenue	С					
E S	d					
ng ng	е					
Program Service Revenue	f	All other program service revenue	0	0	0	0
u	g	Total. Add lines 2a–2f .	0		0	
	3	Investment income (including dividends, interest, an	-			
	5	other similar amounts)		45	•	_
		-	15	15	0	0
	4	Income from investment of tax-exempt bond proceeds	0		0	0
	5	Royalties	0	0	0	0
		(i) Real (ii) Personal	_			
	6a	Gross rents 6a 0	0			
	b	Less: rental expenses 6b 0	0			
	С	Rental income or (loss) 6c 0	0			
	d	Net rental income or (loss)	0	0	0	0
	7a	Gross amount from (i) Securities (ii) Other				
		sales of assets	-			
		other than inventory 7a				
	b	Less: cost or other basis	_			
ň	~	and sales expenses . 7b				
Revenue	•		0			
Re	C		0			
<u> </u>	d	Net gain or (loss)				
Othe	8a	Gross income from fundraising				
0		events (not including \$0				
		of contributions reported on line				
		1c). See Part IV, line 18 8a				
	b	Less: direct expenses 8b				
	С	Net income or (loss) from fundraising events				
	9a	Gross income from gaming				
		activities. See Part IV, line 19 . 9a				
	b	Less: direct expenses 9b	_			
	-	Net income or (loss) from gaming activities				
		Gross sales of inventory, less				
	ivu	returns and allowances 10a				
	h	100	-			
		· · · · · · · · · · · · · · · · · · ·				
	c	Net income or (loss) from sales of inventory				
sn		Business Code				
e e	11a					
scellanec Revenue	b					
le v	С					
Miscellaneous Revenue	d	All other revenue	21	21	0	0
Σ	е	Total. Add lines 11a-11d	21			
	12	Total revenue. See instructions	551,813	36	0	0
						Form 990 (2022)

	00 (2022) IX Statement of Functional Expenses				Page 10
	n 501(c)(3) and 501(c)(4) organizations must complete	ete all columns. All o	other organizations i	must complete colun	nn (A).
000000	Check if Schedule O contains a response				
	t include amounts reported on lines 6b, 7b, , 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	1,451	1,451	5	
2	Grants and other assistance to domestic individuals. See Part IV, line 22	421,514	421,514		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	39,685	39,685		
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	0	0	15,000	0
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0	0	0	0
7 8	Other salaries and wages	74,500	67,300	7,200	0
	section 401(k) and 403(b) employer contributions)	0	0	0	0
9 10 11	Other employee benefits	0 551	0	0 551	0
а	Management . <th.< td=""><td>0</td><td>0</td><td>0</td><td>0</td></th.<>	0	0	0	0
b C		0	0	0	0
d e f	Lobbying	0 0 0	0	0	0 0 0
g	Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.)	0	0	0	0
12 13	Advertising and promotion	0 68,423	0 64,062	0 4,361	0
14 15	Information technology	1,273 0	0	1,273 0	0 0
16	Occupancy	0	0	0	0
17 18	Travel	35,398	35,214	184	0
19	Conferences, conventions, and meetings	0	0	0	0
20 21	Interest	0	0 0	0	0 0
22 23	Depreciation, depletion, and amortization .	0	0 1,182	0 591	0
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 b					
c d					
е 25	All other expenses	0 674,568	0 645,408	0 29,160	0
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 990 (2022)

	n 990 (20				Page 11
P	art X				_
		Check if Schedule O contains a response or note to any line in this Pa	(A) Beginning of year		
	1	Cash-non-interest-bearing	246,518	1	120,861
	2	Savings and temporary cash investments	48,118	2	50,551
	3	Pledges and grants receivable, net	0	3	0
	4	Accounts receivable, net	0	4	0
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	6	controlled entity or family member of any of these persons Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)	0	5	0
<i>(</i> 0	7		0	6 7	0
Assets	7	Notes and loans receivable, net	0	8	0
Ass	8 9	Prepaid expenses and deferred charges	0	0 9	0
	9 10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a	U	9	0
	b	Less: accumulated depreciation	0	10c	
	11	Investments – publicly traded securities	0		0
	12	Investments—other securities. See Part IV, line 11	0		0
	13	Investments – program-related. See Part IV, line 11	0		0
	14	Intangible assets	0	14	0
	15	Other assets. See Part IV, line 11	0		0
	16	Total assets. Add lines 1 through 15 (must equal line 33)	294,636		171,412
	17	Accounts payable and accrued expenses	2,223	17	1,754
	18	Grants payable	0	18	0
	19	Deferred revenue	0	19	0
	20	Tax-exempt bond liabilities	0	20	0
Liabilities	21 22	Escrow or custodial account liability. Complete Part IV of Schedule D . Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%	0	21	0
bili		controlled entity or family member of any of these persons	0	22	0
Lia	23	Secured mortgages and notes payable to unrelated third parties	0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X			
		of Schedule D	0	25	
	26	Total liabilities. Add lines 17 through 25	2,223	26	1,754
Fund Balances		Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.			
ala	27	Net assets without donor restrictions		27	
B	28	Net assets with donor restrictions		28	
r Func		Organizations that do not follow FASB ASC 958, check here is and complete lines 29 through 33.			
Net Assets or	29	Capital stock or trust principal, or current funds	0	29	0
ĕt	30	Paid-in or capital surplus, or land, building, or equipment fund	0	30	0
Ass	31	Retained earnings, endowment, accumulated income, or other funds .	292,413	31	169,658
et ,	32	Total net assets or fund balances	292,413	32	169,658
z	33	Total liabilities and net assets/fund balances	294,636	33	171,412

Form **990** (2022)

	00 (2022)			Pa	age 1
Par	XI Reconciliation of Net Assets				г
	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			1,81
2	Total expenses (must equal Part IX, column (A), line 25)	2			4,56
3	Revenue less expenses. Subtract line 2 from line 1	3			2,75
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		29	2,41
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))	10		16	9,65
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	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," ex	cplain	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 con				
	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 audi	ted or			
	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 over	ersiaht	of		
Ŭ	the audit, review, or compilation of its financial statements and selection of an independent accounta				
	If the organization changed either its oversight process or selection process during the tax year, ex				
	Schedule O.	Apiaini			
20	As a result of a federal award, was the organization required to undergo an audit or audits as set fo	rth in t	ho		
Ja	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?				
k					~
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not und required audit or audits, explain why on Schedule O and describe any steps taken to undergo such a				
	required addit or addits, explain why on Schedule O and describe any steps taken to undergo such a	iuuns .	3b		

Form **990** (2022)

SCHEDULE A (Form 990)

Public Charity Status and Public Support

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

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

Open to Public	
Inspection	

Name of the organization

Employer identification number

GLOBAL C	OUTREACH FOUNDATION		20-0593285
Part I	Reason for Public Charity Status. (Al	I organizations must complete the	is part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990).)
- 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
- 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state:
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 9 An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:
- 10 ✓ An organization that normally receives (1) more than 33¹/₃% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33¹/₃% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B.
 - **b** Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C.
 - c Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E.
 - d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V.
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f $\;$ Enter the number of supported organizations $\;$. $\;$.

g Provide the following information about the supported organization(s).

3		0 ()																																																																																																								
(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	listed in your governing		listed in your governing		listed in your governing		listed in your governing		listed in your governing		listed in your governing		listed in your governing		listed in your governing		listed in your governing		listed in your governing		listed in your governing		listed in your governing		listed in your governing		listed in your governing		listed in your governing		listed in your governing		listed in your governing		listed in your governing		listed in your governing		listed in your governing		listed in your governing		listed in your governing		listed in your governing		listed in your governing		listed in your governing		listed in your governing		listed in your governing		listed in your governing		listed in your governing		listed in your governing		listed in your governing		listed in your governing		listed in your governing		listed in your governing		listed in your governing		listed in your governing		listed in your governing		listed in your governing		listed in your governing		listed in your governing		listed in your governing		listed in your governing		listed in your governing		listed in your governing		listed in your governing		listed in your governing		listed in your governing		listed in your governing		listed in your governing		listed in your governing		listed in your governing		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No																																																																																																						
(A)																																																																																																										
(B)																																																																																																										
(C)																																																																																																										
(D)																																																																																																										
(E)																																																																																																										
Total																																																																																																										

Part IISupport Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under
Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Secti	on A. Public Support								
Calen	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total		
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")								
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf								
3	The value of services or facilities furnished by a governmental unit to the organization without charge								
4	Total. Add lines 1 through 3								
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)								
6	Public support. Subtract line 5 from line 4								
	on B. Total Support		1		1	1			
	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total		
7	Amounts from line 4								
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources								
9	Net income from unrelated business activities, whether or not the business is regularly carried on								
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)								
11	Total support. Add lines 7 through 10								
12	Gross receipts from related activities, etc					12			
13	First 5 years. If the Form 990 is for the organization, check this box and stop he on C. Computation of Public Support	re				ear as a sectio			
<u>3ecu</u> 14	Public support percentage for 2022 (line 6	-		11 column (f))		14	%		
14	Public support percentage from 2022 (inter Public support percentage from 2021 Sch					15	<u> </u>		
16a	33 ¹ / ₃ % support test—2022. If the organization qua	ization did not	check the box	k on line 13, ai	nd line 14 is 3	3 ¹ /3% or more,	check this		
b	331 /3% support test—2021. If the organi this box and stop here . The organization								
17a	7a 10%-facts-and-circumstances test-2022. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization.								
b	10%-facts-and-circumstances test — 20 15 is 10% or more, and if the organizatio in Part VI how the organization meets the organization	on meets the fa e facts-and-cir	acts-and-circu	mstances test,	, check this bo	ox and stop he	re . Explain		
18	Private foundation. If the organization of instructions						x and see		

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			<i>/</i> 1	•	,	
Calen	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and membership fees						
•	received. (Do not include any "unusual grants.")	295,681	486,433	582,310	605,303	551,777	2,521,504
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	0	0	0	0	0	0
3	Gross receipts from activities that are not an unrelated trade or business under section 513	0	0	0	0	0	0
4	Tax revenues levied for the						
-	organization's benefit and either paid to or expended on its behalf	0	0	0	0	0	0
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge	0	0	0	0	0	0
6	Total. Add lines 1 through 5.	295,681	486,433	582,310	605,303	551,777	2,521,504
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons	0	0	0	0	0	0
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	0	0	0	0	0	0
С	Add lines 7a and 7b	0	0	0	0	0	0
8	Public support. (Subtract line 7c from						
.	line 6.)						2,521,504
	on B. Total Support	() 0010	(1) 0010	() 0000	(1) 0001	() 0000	
Calen 9	dar year (or fiscal year beginning in) Amounts from line 6	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9 10a	Amounts from line 6	295,681	486,433	582,310	605,303	551,777	2,521,504
IVa	payments received on securities loans, rents,						
	royalties, and income from similar sources .	0	0	0	0	0	0
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975	0	0	0	0	0	0
С	Add lines 10a and 10b	0	0	0	0	0	0
11	Net income from unrelated business						
	activities not included on line 10b, whether						
	or not the business is regularly carried on	0	0	0	0	0	0
12	Other income. Do not include gain or loss from the sale of capital assets						
	(Explain in Part VI.)	0	0		0	0	0
13	Total support. (Add lines 9, 10c, 11,	U	0	0	0	0	0
	and 12.)	295,681	486,433	582,310	605,303	551,777	2,521,504
14	First 5 years. If the Form 990 is for the						
	organization, check this box and stop he	re					· · · 🔲
	on C. Computation of Public Suppor	-					
15	Public support percentage for 2022 (line 8						100 %
16	Public support percentage from 2021 Sch					16	100 %
	on D. Computation of Investment In				(0)		
17	Investment income percentage for 2022 (-			0 %
18	Investment income percentage from 2021 33 ¹ / ₃ % support tests-2022. If the organ						0 %
19a	17 is not more than $33^{1}/_{3}$ %, check this box						
b	33 ¹ / ₃ % support tests – 2021. If the organiz	-	-	-		-	
~	line 18 is not more than $33^{1/3}$ %, check this l						
20	Private foundation. If the organization di	-	-	-			
	.			. , , -			(Form 990) 2022

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Yes No

1

2

3a

3b

3c

4a

4b

4c

5a

5b 5c

6

7

8

9a

9b

9c

10a

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.

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

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

- 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
- **a** The organization satisfied the Activities Test. Complete **line 2** below.
- **b** The organization is the parent of each of its supported organizations. *Complete line 3 below.*
- c 🗌 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.
- **a** Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in **Part VI identify those supported organizations and explain** how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in **Part VI** the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. *Answer lines 3a and 3b below.*
- **a** Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If "Yes" or "No," provide details in Part VI.*
- **b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in Part VI the role played by the organization in this regard.*

Yes No

1

2

1

3

2a

2b

3a

3b

Yes No

Yes No

Part	V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	gani	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ			ions A through E.
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-function	allv i	ntegrated Type III suppo	rting organization

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization 7 (see instructions).

Schedule A (Form 990) 2022

Schedu	le A (Form 990) 2022			Page 7			
Part	V Type III Non-Functionally Integrated 509(a)(3	B) Supporting Organi	zations (continued)				
Sect	on D-Distributions			Current Year			
1	Amounts paid to supported organizations to accomplish e	exempt purposes	1				
2	Amounts paid to perform activity that directly furthers exe	empt purposes of suppo	orted				
	organizations, in excess of income from activity	2					
3	Administrative expenses paid to accomplish exempt purp	inizations 3					
4	Amounts paid to acquire exempt-use assets						
5	Qualified set-aside amounts (prior IRS approval required-						
	Other distributions (describe in Part VI). See instructions.						
	Total annual distributions. Add lines 1 through 6.						
0	8Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.8						
9	Distributable amount for 2022 from Section C, line 6		9				
10	Line 8 amount divided by line 9 amount		10				
Sect	on E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2022	(iii) Distributable Amount for 2022			
1	Distributable amount for 2022 from Section C, line 6						
2	Underdistributions, if any, for years prior to 2022 (reasonable cause required — <i>explain in Part VI</i>). See instructions.						
3	Excess distributions carryover, if any, to 2022						
а	From 2017						
b	From 2018						
C	From 2019						
d	From 2020						
e	From 2021						
f	Total of lines 3a through 3e						
<u> </u>	Applied to underdistributions of prior years						
<u>h</u>	Applied to 2022 distributable amount						
i	Carryover from 2017 not applied (see instructions)						
	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.						
4	Distributions for 2022 from Section D, line 7: \$						
а	Applied to underdistributions of prior years						
b	Applied to 2022 distributable amount						
C	Remainder. Subtract lines 4a and 4b from line 4.						
5	Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.						
6	Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in</i> Part VI . See instructions.						
7	Excess distributions carryover to 2023. Add lines 3j and 4c.						
8	Breakdown of line 7:						
а	Excess from 2018						
b	Excess from 2019						
С	Excess from 2020						
d	Excess from 2021						
e	Excess from 2022						

Schedule A (Form 990) 2022

Part VISupplemental 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.)

SCHEDULE F	
(Form 990)	

Statement of Activities Outside the United States

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

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

Internal Revenue Service
Name of the organization

Department of the Treasury

Inspection Employer identification number 20-0593285

OMB No. 1545-0047

2022

Open to Public

GLOBAL OUTREACH FOUNDATION

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

- **2** For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional 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
(1)	South Asia	0	1	Program Services	Education, Outreach	5,700
(2)	East Asia and the Pacific	0	3	Program Services	Missionary Support, Educat	14,298
(3)	Sub-Saharan Africa	0	2	Program Services	Education, Outreach	19,687
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
(10)						
(11)						
(12)						
(13)						
(14)						
(15)						
(16)						
(17)						
3a	Subtotal					
b	Total from continuation sheets to Part I					
С	Totals (add lines 3a and 3b)	0	6			39,685

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

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

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)	-								
2 3	exempt 501(c	c)(3) organization	by the IRS, or for	isted above that are which the grantee or ities	counsel has provid	ed a section 501(c)(3) equivalency letter	🕨	

Schedule F (Form 990) 2022

Page **2**

Part III

(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) Classroom supplies and educat	South Asia	1	5,700	Wire Transfer	0	N/A	N/A
(2) Evangelistic youth camp	East Asia and the Pacific	1	6,748	Wire Transfer	0	N/A	N/A
(3) Missionary Support	East Asia and the Pacific	1	4,050	Wire Transfer	0	N/A	N/A
(4) Classroom supplies and educat	East Asia and the Pacific	1	3,500	Wire Transfer	0	N/A	N/A
(5) Classroom supplies and educat	Sub-Saharan Africa	1	749	Wire Transfer	0	N/A	N/A
(6) Evangelistic outreach and tuitio	Sub-Saharan Africa	1	18,938	Wire Transfer	0	N/A	N/A
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

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.

Schedule F (Form 990) 2022

Page	4
------	---

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

Schedule F (Form 990) 2022

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.

Schedule F, Part I, Line 2 - MONITORING USE OF FUNDS All foreign recipients are selected and overseen by an approved Global Outreach Foundation missionary. All funds given to grant recipients are only to be used for specified program services. Grant recipients						
must submit periodic reports and receipts to the supervising missionary for review. Any expenses not in accordance with the guidelines						
and/or disapproved by the missionary must be reimbursed immediately.						

	EDULE I		Grants and	l Other Assis	tance to Org	anizations,			OMB No.	1545-0047
For	m 990)	Grants and Other Assistance to Organizations, Governments, and Individuals in the United States								22
		С	omplete if the orga	nization answered		Part IV, line 21 or 2	2.			
	ment of the Treasury I Revenue Service		Go to w	Attach to ww.irs.gov/Form99	Form 990. 0 for the latest info	rmation.				o Public ection
	of the organization							Employer	identification num	
GLO	BAL OUTREACH FOUNDATION								20-0593285	
	t General Information	n on Grants and	Assistance							
1	Does the organization maint the selection criteria used to			-	-	rantees' eligibility	-			No
2	Describe in Part IV the orgar	nization's procedu	res for monitoring	the use of grant fu	inds in the United	States.				
Par	t II Grants and Other A Part IV, line 21, for an								ered "Yes" on	Form 990,
1 (a	a) Name and address of organization or government	(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 noncash assista		(h) Purpose of or assista	•
(1)		-								
(2)		-								
(3)		-								
		-								
(5)		-								
(6)		-								
(7)		_								
(8)		_								
(9)										
(10)										
(11)										
(12)		-								

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

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

Schedule I (Form 990) 2022

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.						
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance	
1 Missionary Support	6	418,330	0	N/A	N/A	
2 Evangelistic outreach materials	3	3,184	0	N/A	N/A	
3						
4						
5						
6						
7						
Part IV Supplemental Information. Provide	the information i	required in Part I, lin	e 2; Part III, columr	(b); and any other addit	ional information.	
Schedule I, Part I, Line 2 - Recipients must submit period	dic reports of activi	ties and accomplishme	nts. Recipients receivi	ng greater than \$600 receive	a Form 1099 reporting total grant	
amounts and are responsible to report living and ministry costs on their personal taxes per IRS regulations. Funds not used according to granted purposes must be reimbursed						
immediately.			<u>.</u>	······································		

Schedule I (Form 990) 2022

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

(Form 990)	Complete to provide information for responses to specific questions of Form 990 or 990-EZ or to provide any additional information.	on	20 22
	Attach to Form 990 or Form 990-EZ.		pen to Public
Department of the Treasury Internal Revenue Service	Go to www.irs.gov/Form990 for the latest information.		spection
Name of the organization	·	Employer identifica	
GLOBAL OUTREACH	FOUNDATION	20-05	93285
Form 990, Part VI, Sec	tion A, Line 1a - VOTING RIGHTS Per bylaws, the President "shall be a non-votin	g member except t	o break a tie
vote of the Board of D		<u></u>	
Form 990, Part VI, Sec	tion B, Line 11b - REVIEW OF FORM 990 Once the Form 990 is prepared, it is pre	sented to the Boar	d of Directors
	ed meeting or via email for review and approval prior to submission to the IRS.		
Form 990, Part VI, Sec	tion B, Line 12c - CONFLICT OF INTEREST Each Board member is responsible to	o disclose conflicts	of interest per
Board policy. All Boar	d members are allowed and encouraged to inquire of other members should a perc	eived, potential, o	known conflict
of interest arise. The E	Board member with the conflict of interest is prohibited from voting or lobbying on	the matter.	
	tion C, Line 19 - PUBLIC DOCUMENTS Global Outreach Foundation's governing		
	nts were available to the public upon request. The Conflict of Interest, Whistleblow	er Policy, and previ	ous years' Form
990s were available or	nline at the organization's website: www.globaloutreachfoundation.org		

Cat. No. 51056K