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PUBLIC DISCLOSURE COPY

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** PUBLIC DISCLOSURE COPY ** Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information.



Department of the Treasury Internal Revenue Service

AI	or un	and and a sear, or tax year beginning and	enaing		
B	Check if applicab	c Name of organization		D Employer identifie	cation number
	Addre	S GLOBAL SCHOOL LEADERS			
	Name			81-43877	83
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number	r
	Final	12329 CULVER BLVD		424-335-	
	termir ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	1,673,129.
	Amen			H(a) Is this a group re	eturn
	Applie tion	F Name and address of principal officer. AdAD OOTHIN		for subordinates	
	pendi	¹⁹ SAME AS C ABOVE		H(b) Are all subordinates in	ncluded? Yes No
1	Tax-ex	empt status: 🗴 501(c)(3) 🔄 501(c) () (insert no.) 🗌 4947(a)(1)	or 527		list. See instructions
-	Websi			H(c) Group exemption	
K	orm o	organization: 🔀 Corporation 🔄 Trust 🔄 Association 🔄 Other	L Year	of formation: 2016 N	State of legal domicile: CA
Pa	art I	Summary			
e	1	Briefly describe the organization's mission or most significant activities: TO A	DVANCE	THE EDUCAT	ION OF
Activities & Governance		CHILDREN BY TRAINING AND PREPARING SCHOO	L LEAD	ERS, TEACHE	RS, AND
erna	2	Check this box if the organization discontinued its operations or dispo			
Ň		Number of voting members of the governing body (Part VI, line 1a)			6
ي م	4	Number of independent voting members of the governing body (Part VI, line 1b)			4
es		Total number of individuals employed in calendar year 2022 (Part V, line 2a)			3
iviti	6	Total number of volunteers (estimate if necessary)	6	5	
Acti	7 a	Total unrelated business revenue from Part VIII, column (C), line 12			0.
_	b	Net unrelated business taxable income from Form 990-T, Part I, line 11			0.
				Prior Year	Current Year
e	8	Contributions and grants (Part VIII, line 1h)		887,584.	1,620,662.
ent	9	Program service revenue (Part VIII, line 2g)		33,000.	52,330.
Revenue		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		66.	137.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		98.	0.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		920,748.	1,673,129.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		341,843.	152,580.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
es		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		248,167.	232,122.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
ц.		Total fundraising expenses (Part IX, column (D), line 25) 11,8		200 485	
		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		328,475.	790,279.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		918,485.	1,174,981.
	19	Revenue less expenses. Subtract line 18 from line 12		2,263.	498,148.
ts or nces				ginning of Current Year	End of Year
t Assets Id Balanc	20	Total assets (Part X, line 16)	······	631,984.	2,493,631.
Plet A Fund F	21	Total liabilities (Part X, line 26)		34,042.	1,124,087.
		Net assets or fund balances. Subtract line 21 from line 20		597,942.	1,369,544.
		Signature Block	a and atatam	anto and to the bast of m	uknowledge and belief it is
UIIO	EL DEU	mes of denory, Fuedare mart have examined this reputh, including accompanying schedule	s anu siaiem	ents, and to the dest of m	V KHOWIEUUE AHU DEIIEI. IL 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						
-	AZAD OOMMEN, CEO									
	Type or print name and title									
	Print/Type preparer's name Prep	parer's signature Mercalous	Date 10	/27/23 Check PTIN						
Paid	MEENA BISHNOI		10,	if self-employed P01480769						
Preparer	Firm's name JM&M			Firm's EIN 52-1853933						
Use Only	Firm's address 10500 LITTLE PATUXE	NT PARKWAY, SUITE	770							
	COLUMBIA, MD 21044			Phone no. $410 - 884 - 0220$						
May the I	May the IRS discuss this return with the preparer shown above? See instructions									
232001 12-1	3-22 LHA For Paperwork Reduction Act Notice, se	ee the separate instructions.		Form 990 (2022)						

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

		2			
	· · ·	SEE SCHEDULE O F	OR CONTINUATI		Form 990 (
		g grants of \$ 1,046,381.) (Revenue \$)	
4d	Other program services (Describe on Schedule	O.)			
) (Exponence +		, ,		
	(Code:) (Expenses \$	including grants of \$		(Revenue \$	
łb	(Code:) (Expenses \$	including grants of \$)	(Revenue \$	
	SEE SCHEDULE O				
	-HELD AN IN-PERSON PARTY	NER GATHERING FO	R COLLABORATIO	ON AND LEARI	NING.
	-CONTINUED GENDER EQUITY -BUILT RESOURCES FOR SCH ACTIONS FOR SCHOOL LEAD	HOOL LEADER DEVE		ED TO HIGH 1	LEVERA
	-SUPPORTED SCHOOL LEADER KENYA, MALAYSIA, AND BRA	AZIL.		DIA, INDONE:	SIA,
	revenue, if any, for each program service report (Code:) (Expenses \$ 1,046 PROGRAM	including grants of \$	152,580.)	(Revenue \$	52,33
1	Describe the organization's program service ac Section $501(c)(3)$ and $501(c)(4)$ organizations an	re required to report the amount	of grants and allocations t	o others, the total exp	enses, and
3	Did the organization cease conducting, or make If "Yes," describe these changes on Schedule (e significant changes in how it co	onducts, any program serv	/ices?	Yes X
2	Did the organization undertake any significant p prior Form 990 or 990-EZ?				Yes X
	LEADERS, TEACHERS, AND (THER EDUCATORS.			
1	Briefly describe the organization's mission: TO ADVANCE THE EDUCATION		TRAINING AND	PREPARING	SCHOOL
		or note to any line in this Part II			

Form 990 (2022) GLOBAL SCHOOL LEADERS
Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			v
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			x
F	during the tax year? <i>If</i> "Yes," <i>complete Schedule C, Part II</i> Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	4		
5	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	5		
U	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	-		
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule 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		X
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		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	44.		x
А	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		
u	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
<u>م</u>	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes, " complete			
	Schedule D, Parts XI and XII	12a	Х	
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		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Х	
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		37	
4-	or more? If "Yes," complete Schedule F, Parts I and IV	14b	Х	<u> </u>
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		v	
40	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	10		x
17	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If</i> " <i>Yes</i> ," <i>complete Schedule G, Part I</i> . See instructions	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines		1	<u> </u>
.0	1c and 8a? If "Yes," complete Schedule G, Part II	18		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Yes,"		<u> </u>	
-	complete Schedule G, Part III	19		x
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
	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		X
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			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		x
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		Х
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		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	04-		
Ь	any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c 24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	24u		
200	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
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		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
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			x
00	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	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? If			
	"Yes," complete Schedule L, Part IV	28a		x
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
	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		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X X
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		_ A
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	20		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		- 23
33	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
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		х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			v
20	and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		X
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	x	
Par		30		
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 6			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X	
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Form	990 (2022) GLOBAL SCHOOL LEADERS 81-4387	783	Pa	age 5			
Par	t 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 3						
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х				
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х			
	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			37			
_	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х			
b	If "Yes," enter the name of the foreign country						
-	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	-		v			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a 5b		X X			
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	50 50		Δ			
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	90					
0a		6a		х			
h	any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	Ua					
D	were not tax deductible?	6b					
7	Organizations that may receive deductible contributions under section 170(c).	0.0					
'a	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		х			
b	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		Х			
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d						
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х			
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х			
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	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?	8					
9	Sponsoring organizations maintaining donor advised funds.						
а	a Did the sponsoring organization make any taxable distributions under section 4966?						
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 10a						
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b						
11	Section 501(c)(12) organizations. Enter:						
a	Gross income from members or shareholders 11a						
b	Gross income from other sources. (Do not net amounts due or paid to other sources against						
100	amounts due or received from them.) [11b] Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a					
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	Iza					
13	Section 501(c)(29) qualified nonprofit health insurance issuers.						
	Is the organization licensed to issue qualified health plans in more than one state?	13a					
	Note: See the instructions for additional information the organization must report on Schedule O.						
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 13c						
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х			
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		Х			
	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		Х			
	If "Yes," complete Form 4720, Schedule O.						
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.						

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Form 990	(2022)
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GLOBAL SCHOOL LEADERS

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

X

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

			Yes	N
1a	Enter the number of voting members of the governing body at the end of the tax year 1a	5		
	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.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b	1		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			Ι.
	officer, director, trustee, or key employee?	2		Σ
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			<u>.</u>
	of officers, directors, trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X X
6	Did the organization have members or stockholders?	6		
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		X
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		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	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	9		Σ
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	N
10a	Did the organization have local chapters, branches, or affiliates?	10a		Σ
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If</i> "Yes," <i>describe on Schedule O how this was done</i>	12c	x	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
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	Х	
	Other officers or key employees of the organization	15b		Σ
	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 with a			
	taxable entity during the year?	16a		Σ
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		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed CA			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only	/) avail	abl
	for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, a	nd fina	ncial	
	statements available to the public during the tax year.	ind		
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	AAZAD OOMEN - 424-335-8839			
32006	12329 CULVER BLVD, LOS ANGELES, CA 90066	Forn	1 990	(20
-	6			
71	027 793927 17801 2022.05000 GLOBAL SCHOOL LEADERS	17	801	

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 VI

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.

(A)	(B)	(C)		(D)	(E)	(F)				
Name and title	Average	(do	Position (do not check more than one		Reportable	Reportable	Estimated			
	hours per	box	box, unless person is be		is bot	h an	compensation	compensation	amount of	
	week	<u> </u>			officer and a director/trustee)		tee)	from	from related	other
	(list any	rector					the	organizations	compensation	
	hours for	or di	e			ated		organization	(W-2/1099-MISC/	from the
	related	ustee	trust		e	suadu		(W-2/1099-MISC/	1099-NEC)	organization and related
	organizations below	ual tr	tional		ploye	t con /ee		1099-NEC)		organizations
	line)	Individual trustee or director	In stitutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) AZAD OOMMEN	40.00		_		×	노	ш.			
CEO AND CO-FOUNDER		x		x				100,000.	0.	1,247.
(2) SAMEER SAMPAT, PRESIDENT UNTIL	40.00									
06/2022, THEN DIRECTOR		X		Х				57,780.	0.	5,525.
(3) DR. AMRITA AHUJA	1.00									
CHAIR		Х		Х				0.	0.	0.
(4) LAURENCE LIEN	1.00									
DIRECTOR		Х						0.	0.	0.
(5) VIKAS POTA	1.00								_	_
DIRECTOR		Х						0.	0.	0.
(6) DANA SCHMIDT	1.00									_
DIRECTOR		Х						0.	0.	0.
(7) DR. CAROLYN STREMLAU	1.00									_
DIRECTOR UNTIL 11/2022		х						0.	0.	0.
		1								
222007 12 12 22										Form 990 (2022)

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Form **990** (2022)

7

Form 990 (2022)	GLOBAL S	CHOOL LE	AD	ER	S				81-43	87783 Page 8
Part VII Section	A. Officers, Directors, Trus	stees, Key Emp	oloye	ees, a	and	Highe	est C	Compensated Employe	es (continued)	
Nar	(A) me and title	(B) (C Average hours per week (list any			eck m s pers	ion Reportable Reportab ore than one compensation compensat				(F) Estimated amount of other
			Individual trustee or director	Institutional trustee	Officer	Key employee Highest compensated	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MIS0 1099-NEC)	C/ compensation from the organization and related organizations
								157,780.		0. 6,772.
c Total from cor d Total (add line	ntinuation sheets to Part V s 1b and 1c) of individuals (including but i	II, Section A					····	0. 157,780.		0. 0. 0. 6,772.
	from the organization		0301	IISLEC		000) 00		eceived more than \$100		<u>1</u>
•	ation list any former officer ," complete Schedule J for s				•		-		•	
and related org	ual listed on line 1a, is the s ganizations greater than \$15 n listed on line 1a receive or	0,000? If "Yes,'	' con	nplet	te So	chedu	le J i	for such individual		
rendered to the Section B. Indepen	e organization? If "Yes," con Ident Contractors	nplete Schedule	e J fo	or suc	ch p	erson	<u></u>			5 X
•	table for your five highest connected and the second second second second second second second second second se	•	•							pensation from
	(A) Name and business CATION LEADERS		7.2 (1)		- 	мтт	ΠD	(B) Description of s	services	(C) Compensation
	, LODHA CASA P							SUPPORT SERV	ICE	135,000.
	of independent contractors (ompensation from the organ		ot lin	nited	to t	hose l 1	istec	d above) who received n	nore than	
										Form 990 (2022)

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Pa	rt \	VII	Statement of Re	venue						
			Check if Schedule O	contains a	response	e or note to any lir	ne in this Part VIII		<i>(</i> 0)	
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
nts its	1	а	Federated campaigns		1a					
Contributions, Gifts, Grants and Other Similar Amounts		b			1b					
а,		с			1c					
ar /					1d					
s, s		е			1e					
r Si		f	All other contributions, gifts,							
the			similar amounts not included			,620,662.				
ĘÓ		g	Noncash contributions included in		1g \$					
aŭ		h					1,620,662.			
						Business Code				
e	2	а	SERVICE FEES			900099	52,330.	52,330.		
Program Service Revenue		b								
Se		с								
eve eve		d								
р Б Ш		е								
ሻ		f	All other program service	revenue						
		g	Total. Add lines 2a-2f				52,330.			
	3		Investment income (includ							
			other similar amounts)				137.			137.
	4		Income from investment of	of tax-exem	npt bond	proceeds				
	5	,	Royalties							
				(i)) Real	(ii) Personal				
	6	а	Gross rents	6a						
		b	Less: rental expenses \dots	6b						
		С	Rental income or (loss)	6c						
			Net rental income or (loss							
	7	а	Gross amount from sales of	(i) S	ecurities	(ii) Other				
			assets other than inventory	7a						
n		b	Less: cost or other basis							
Revenue				7b						
eve			Gain or (loss)	7c						
er R			Net gain or (loss)			1				
Othe	8	а	Gross income from fundraisi							
0			including \$							
			contributions reported on							
		h	Part IV, line 18 Less: direct expenses							
			Net income or (loss) from		·····	-				
	6		Gross income from gamin		· –	1				
		a	Part IV, line 19	-						
		h	Less: direct expenses							
			Net income or (loss) from			-				
	10		Gross sales of inventory, I			1				
			and allowances			a				
		b	Less: cost of goods sold							
			Net income or (loss) from							
<i>(</i> ^						Business Code				
ŝno	11	а								
ane	1	b								
sell: eve		c								
Miscellaneous Revenue			All other revenue							
2			Total. Add lines 11a-11d							
_	12		Total revenue. See instruction				1,673,129.	52,330.	0.	137.
23200	09 12	2-13								Form 990 (2022)

GLOBAL SCHOOL LEADERS

Form 990 (2022)

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Part IX Statement of Functional Expenses

GLOBAL SCHOOL LEADERS

	Check if Schedule O contains a respons	se or note to any line in	this Part IX		X
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign	1 - 0 - 0 0	1 - 0 - 0 0		
	individuals. See Part IV, lines 15 and 16	152,580.	152,580.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	164 550	110 704		
	trustees, and key employees	164,552.	116,704.	44,793.	3,055.
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	41 014		11 001	
7	Other salaries and wages	41,214.	29,159.	11,281.	774.
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	0 502	C 421	2 0 2 5	117
9	Other employee benefits	8,583.	6,431.	2,035.	117.
10	Payroll taxes	17,773.	11,889.	5,585.	299.
11	Fees for services (nonemployees):				
a	Management				
b		10 452		10 452	
	Accounting	19,452.		19,452.	
	Lobbying				
e	· · · · · ·				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,	677 777	661 205	0 277	7 015
	column (A), amount, list line 11g expenses on Sch 0.)	677,777. 31.	661,285.	9,277.	7,215.
12	Advertising and promotion	2,364.	1,253.	1,111.	
13	Office expenses	15,759.	7,577.	8,182.	
14	Information technology	15,759.	7,577.	0,102.	
15	Royalties				
16		57,328.	49,523.	7,805.	
17		57,520.	49,525.	7,005.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	6,791.		6,791.	
19	Conferences, conventions, and meetings	0,791.		0,791.	
20					
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	4,980.	4,183.	448.	349.
23		4,900.	4,103.	440.	549.
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 0.)				
а	RESEARCH	3,679.	3,679.		
b	DUES AND SUBSCRIPTIONS	2,118.	2,118.		
с					
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	1,174,981.	1,046,381.	116,791.	11,809.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				

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Check here [

if following SOP 98-2 (ASC 958-720)

10 2022.05000 GLOBAL SCHOOL LEADERS

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GLOBAL SCHOOL LEADERS

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

				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		448,989.	1	648,346.
	2	Savings and temporary cash investments		-	2	950,303.
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		180,056.	4	894,300.
	5	Loans and other receivables from any current or				
		trustee, key employee, creator or founder, subst				
		controlled entity or family member of any of thes	se persons		5	
	6	Loans and other receivables from other disqualit	fied persons (as defined			
		under section 4958(f)(1)), and persons described	d in section 4958(c)(3)(B)		6	
3	7	Notes and loans receivable, net			7	
200	8	Inventories for sale or use			8	
C	9	Prepaid expenses and deferred charges			9	682.
	10a	Land, buildings, and equipment: cost or other				
		basis. Complete Part VI of Schedule D	10a			
	b	Less: accumulated depreciation			10c	
	11	Investments - publicly traded securities			11	
	12	Investments - other securities. See Part IV, line 1			12	
	13	Investments - program-related. See Part IV, line		13		
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11		2,939.	15	0.
	16	Total assets. Add lines 1 through 15 (must equa		631,984.	16	2,493,631.
	17	Accounts payable and accrued expenses	9,592.	17	29,421.	
	18	Grants payable		18	1 004 666	
	19	Deferred revenue		19	1,094,666.	
	20	Tax-exempt bond liabilities		20		
	21	Escrow or custodial account liability. Complete F		21		
201	22	Loans and other payables to any current or form				
		trustee, key employee, creator or founder, subst			-	
3	~	controlled entity or family member of any of thes	F		22	
	23	Secured mortgages and notes payable to unrela	F		23	
	24	Unsecured notes and loans payable to unrelated	F		24	
	25	Other liabilities (including federal income tax, par parties, and other liabilities not included on lines	-			
				24,450.	25	0.
	26	Total liabilities. Add lines 17 through 25		34,042.	23 26	1,124,087.
	20	Organizations that follow FASB ASC 958, che		01/0120	20	
2		and complete lines 27, 28, 32, and 33.				
	27	Net assets without donor restrictions		187,445.	27	98,586.
5	28	Net assets with donor restrictions	F	410,497.	28	1,270,958.
		Organizations that do not follow FASB ASC 9				
-		and complete lines 29 through 33.				
5	29	Capital stock or trust principal, or current funds			29	
	30	Paid-in or capital surplus, or land, building, or eq			30	
	31	Retained earnings, endowment, accumulated in			31	
	32	Total net assets or fund balances		597,942.	32	1,369,544.
	33			631,984.	33	2,493,631.

Form 990 (2022)

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Part X Balance Sheet

Assets

Liabilities

Net Assets or Fund Balances

Form 990 (2022)

	990 (2022) GLOBAL SCHOOL LEADERS	81-4	1387783	Pa	ge 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI	<u></u>			X
				_	
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,673		
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,174	1,9	81.
3	Revenue less expenses. Subtract line 2 from line 1	3			48.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	595	7,9	42.
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			54.
9	Other changes in net assets or fund balances (explain on Schedule O)	9	15	5,0	00.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	1,369	9,5	44.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedul	e O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d 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	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Scl				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit	t 🗌		
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits	<u></u>	3b		
_			Form	000	(0.0.0.)

Form **990** (2022)

232012 12-13-22

Department of the Treasury

Internal Revenue Service

(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. Attach to Form 990 or Form 990-FZ

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

1	2022
	Open to Public Inspection
Employer	identification number

OMB No. 1545-0047

Name of the organization

			AL SCHOOL						1-4387783
Pa	rt I	Reason for Public (Charity Status.	(All organizations must c	omplete tl	nis part.) S	ee instruction	IS.	
The	organ	ization is not a private found							
1		A church, convention of ch	urches, or associatio	on of churches described	d in sectio	n 170(b)(*	1)(A)(i).		
2		A school described in sect	ion 170(b)(1)(A)(ii).	Attach Schedule E (Form	า 990).)				
3		A hospital or a cooperative	hospital service orga	anization described in se	ection 170	(b)(1)(A)(i	ii).		
4		A medical research organiz	ation operated in co	njunction with a hospital	described	d in sectio	n 170(b)(1)(A)(iii). Enter	the hospital's name,
		city, and state:							
5		An organization operated for	or the benefit of a co	llege or university owned	d or opera	ted by a q	overnmental u	unit descrik	bed in
		section 170(b)(1)(A)(iv). (C		c	•				
6		A federal, state, or local gov	-	nental unit described in •	section 17	70(b)(1)(A)	(v)		
7	X	An organization that norma						ho gonoral	public described in
'				inial part of its support i	ion a gov	ernnentai		ne general	public described in
~		section 170(b)(1)(A)(vi). (C							
8	\square	A community trust describe							
9		An agricultural research org				-		-	-
		or university or a non-land-g	grant college of agric	ulture (see instructions).	Enter the	name, city	y, and state of	f the colleg	e or
		university:							
10		An organization that norma	Illy receives (1) more	than 33 1/3% of its sup	port from o	contributio	ons, members	hip fees, a	nd gross receipts from
		activities related to its exen	npt functions, subjec	t to certain exceptions;	and (2) no	more that	n 33 1/3% of i	ts support	from gross investment
		income and unrelated busir	ness taxable income	(less section 511 tax) fro	om busine	sses acqu	ired by the or	ganization	after June 30, 1975.
		See section 509(a)(2). (Cor	mplete Part III.)						
11		An organization organized a	and operated exclus	ively to test for public sa	ifety. See s	section 50)9(a)(4).		
12		An organization organized a	and operated exclus	ively for the benefit of, to	perform	the functio	ons of, or to ca	arry out the	e purposes of one or
		more publicly supported or	ganizations describe	ed in section 509(a)(1) o	r section &	509(a)(2).	See section 5	509(a)(3). (Check the box on
		lines 12a through 12d that	-						
а		Type I. A supporting orga	• •			-		-	, aivina
-		the supported organization	-	-	•				
		organization. You must c			a majority (apporting
b		Type II. A supporting org	-		tion with it	e cupport	od organizatio	n(c) by ba	vina
U	L		-				-		-
		control or management o			ame perso	ons that co	ontrol or mana	ige the sup	ported
		organization(s). You mus							
С		☐ Type III functionally inte						lly integrate	ed with,
		its supported organizatio					-		
d		☐ Type III non-functionally						-	
		that is not functionally int	с С	v			•	d an attent	iveness
		requirement (see instruct	ions). You must con	nplete Part IV, Sections	s A and D,	and Part	V.		
е		Check this box if the orga					а Туре I, Туре	II, Type III	
		functionally integrated, or		nally integrated supporti	ing organi:	zation.			
f	Ente	er the number of supported o	organizations						
g		vide the following information		.,	(iv) Is the orga	nization listed			
	(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10	in your governi	ng document?	(v) Amount of support (see in		(vi) Amount of other support (see instructions)
		organization		above (see instructions))	Yes	No	support (see in	istructions)	support (see instructions)
Tota	ıl								

Schedule	A (Form 990) 2022
Part II	Suppor	rt Sch

GLOBAL SCHOOL LEADERS

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

fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support						
Cale	ndar 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.")	464,500.	1083269.	509,779.	1026947.	1620662.	4705157.
2	Tax revenues levied for the organ-						
	ization'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	464,500.	1083269.	509,779.	1026947.	1620662.	4705157.
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)						2338281.
6	Public support. Subtract line 5 from line 4.						2366876.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7	Amounts from line 4	464,500.	1083269.	(c) 2020 509,779.	1026947.	1620662.	(f) Total 4705157.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources				66.	137.	203.
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.)				98.		98.
11	Total support. Add lines 7 through 10						4705458.
12	Gross receipts from related activities,	, etc. (see instructio	ons)			12	85,330.
13	First 5 years. If the Form 990 is for th	ne organization's fi	rst, second, third, [,]	fourth, or fifth tax	year as a section 5	501(c)(3)	
	organization, check this box and stop						
Sec	ction C. Computation of Publ	ic Support Pe	rcentage				
14	Public support percentage for 2022 (14	50.30 %
15	Public support percentage from 2021					15	99.17 %
16a	33 1/3% support test - 2022. If the o	organization did no	t check the box or	n line 13, and line	14 is 33 1/3% or n	nore, check this bo	
	stop here. The organization qualifies as a publicly supported organization						
b	33 1/3% support test - 2021. If the o	organization did no	t check a box on l	ine 13 or 16a, and	line 15 is 33 1/3%	or more, check th	nis box
	and stop here. The organization qual						
17a	10% -facts-and-circumstances tes	t - 2022. If the org	anization did not c	heck a box on line	e 13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the fact	ts-and-circumstanc	es test, check this	box and stop he	r e. Explain in Part	VI how the organiz	ation
	meets the facts-and-circumstances te	est. The organization	on qualifies as a pu	ublicly supported of	organization		
b	10% -facts-and-circumstances tes	t - 2021. If the org	anization did not c	heck a box on line	e 13, 16a, 16b, or ⁻	17a, and line 15 is	10% or
	more, and if the organization meets the	he facts-and-circun	nstances test, che	ck this box and st	op here. Explain ir	n Part VI how the	
	organization meets the facts-and-circ	umstances test. Th	ne organization qu	alifies as a publicly	y supported organ	ization	
18	Private foundation. If the organization	on did not check a	box on line 13, 16a	a, 16b, 17a, or 17t	o, check this box a	and see instruction	s
						Sebedule A	(Form 990) 2022

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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.)

Sec	ction A. Public Support						
Cale	ndar 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	Gross receipts from admissions, merchandise sold or services per- formed, 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 bus- iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities						
Ŭ	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
t	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						
c	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
See	ction B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 6						
10 <i>a</i>	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						
	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 loss from the sale of capital						
13	assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.)						
	First 5 years. If the Form 990 is for the		rst, second, third	, fourth, or fifth tax	vear as a section	501(c)(3) orga	nization,
	check this box and stop here				-		
See	ction C. Computation of Publ	ic Support Pe	rcentage				
15	Public support percentage for 2022 (line 8, column (f), a	divided by line 13,	column (f))		15	%
	Public support percentage from 2021					16	%
See	ction D. Computation of Inve	stment Incom	e Percentage	•			
17	Investment income percentage for 20	022 (line 10c, colur	mn (f), divided by	line 13, column (f)))	17	%
	Investment income percentage from					18	%
	33 1/3% support tests - 2022. If the						line 17 is not
	more than 33 1/3%, check this box a						
b	33 1/3% support tests - 2021. If the	organization did r	not check a box o	n line 14 or line 19	a, and line 16 is m	ore than 33 1/	3%, and
	line 18 is not more than 33 1/3% , che	eck this box and st	op here. The orga	anization qualifies	as a publicly supp	orted organiza	ition
20	Private foundation. If the organization	on did not check a	box on line 14, 19	9a, or 19b, check t	this box and see ir	nstructions	
2320	23 12-09-22					Sched	ule A (Form 990) 2022
				15			

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1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

Yes No

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.)

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Schedule A (Form 990) 2022

Schedule A	(Form 990) 2022	GLOBAL	SCHOOL	LEADERS
Part IV	Supporting Organ	izations (cont	inued)	

2

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
с	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
		_	Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		

2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization. 2- atio n C. Type II Supportin 0----

Section C. Type if Supportin	iy Organizations	

			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in 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		
Sec	ction 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.	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 yea(see instructions). 1
- The organization satisfied the Activities Test. Complete line 2 below. а
- The organization is the parent of each of its supported organizations. Complete line 3 below. b
- The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions) С
- 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.

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Schedule A (Form 990) 2022

2a

2b

За

3b

No Yes

Sched	ule A	(Form	990)
		_	

Schedule A (Form 990) 2022 GLOBAL SCHOOL LEADERS Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

Secti	on 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		
Secti	on B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
	Average monthly value of securities	1a		
	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
	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		
Secti	on C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
	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		

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

Schedule A (Form 990) 2022

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Par	rt V Type III Non-Functionally Integrated 509	9(a)(3) Supporting Orga	anizations _(continued)	
Secti	ion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe	empt purposes	1	
2	Amounts paid to perform activity that directly furthers exem	pt purposes of supported		
	organizations, in excess of income from activity	2		
3	Administrative expenses paid to accomplish exempt purpos	ns 3		
4	Amounts paid to acquire exempt-use assets		4	
5	Qualified set-aside amounts (prior IRS approval required - pr	ovide details in Part VI)	5	
6	Other distributions (describe in Part VI). See instructions.		6	
7	Total annual distributions. Add lines 1 through 6.		7	
8	Distributions 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	
Secti	ion 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 (reason-			
	able cause required - explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2022			
а	From 2017			
b	From 2018			
c	From 2019			
d	From 2020			
е	From 2021			
f	Total of lines 3a through 3e			
g	Applied to underdistributions of prior years			
h	Applied to 2022 distributable amount			
i	Carryover from 2017 not applied (see instructions)			
j	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			
с	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, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2022. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	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			
е	Excess from 2022			

Schedule A (Form 990) 2022

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<u>Schedu</u> le A ((Form 990) 2022		SCHOOL					81-43877	83 Page 8
Part VI	Supplemental In Part IV, Section A, line line 1; Part IV, Section Section D, lines 5, 6, a (See instructions.)	es 1, 2, 3b, 3c, 4b, 1 D, lines 2 and 3; F	4c, 5a, 6, 9a, 9 Part IV, Sectior	9b, 9c, 11 1 E, lines 1	a, 11b, and 1 1c, 2a, 2b, 3a	1c; Part IV, Se , and 3b; Part '	ction B, lines 1 V, line 1; Part V,	17b; Part III, line and 2; Part IV, Se Section B, line 1	12:
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Schedule of Contributors

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

2022

Employer identification number

81-4387783

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Schedule B

Department of the Treasury Internal Revenue Service

Name of the organization

Organization type (check one):

GLOBAL SCHOOL LEADERS

Filers of:	Section:
Form 990 or 990-EZ	\fbox 501(c)(3) (enter number) organization
	4947(a)(1) nonexempt charitable trust not treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**. **Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the 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

X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% 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) filing 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 totaling \$5,000 or more during the year for an *exclusively* religious.

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).

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

Name of organization

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GLOBAL SCHOOL LEADERS

Employer identification number

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Part I	Contributors (see instructions). Use duplicate copies of Part I if additiona	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$100,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$114,488.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$ <u>135,315.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$203,417.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$280,019.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$40,000.	Person X Payroll Noncash (Complete Part II for
223452 11-15			noncash contributions.) Schedule B (Form 990) (2022

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Schedule B (Form 990) (2022)

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Name of organization

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Employer identification number

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GLOBAL SCHOOL LEADERS

Part I	Contributors (see instructions). Use duplicate copies of Part I if a	additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$35,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8		\$60,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9		\$600,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(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.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
223452 11-15	2	3	Schedule B (Form 990) (2022

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Schedule	В	(Form	990)	(2022)
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Name of organization

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Employer identification number

GLOBAL SCHOOL LEADERS

81-4387783

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. (a) (c) No. (d) (b) FMV (or estimate) from Description of noncash property given Date received (See instructions.) Part I \$ (a) (c) No. (b) (d) FMV (or estimate) from Description of noncash property given Date received (See instructions.) Part I \$ (a) (c) No. (b) (d) FMV (or estimate) from Description of noncash property given Date received (See instructions.) Part I \$ (a) (c) No. (d) (b) FMV (or estimate) from Description of noncash property given Date received (See instructions.) Part I \$ (a) (c) No. (b) (d) FMV (or estimate) from Description of noncash property given Date received (See instructions.) Part I \$ (a) (c) No. (b) (d) FMV (or estimate) from Description of noncash property given **Date received** (See instructions.) Part I \$ 223453 11-15-22 Schedule B (Form 990) (2022) 24

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Schedule I	B (Form 990) (2022)			Page 4
Name of o	organization			Employer identification number
GLOBA	L SCHOOL LEADERS			81-4387783
	Exclusively religious, charitable, etc., contribut from any one contributor. Complete columns (a)	ions to organizations described in	section 501(c)(7), (8), or	(10) that total more than \$1,000 for the year
	completing Part III, enter the total of exclusively religious,	charitable, etc., contributions of \$1,000 or	less for the year. (Enter this	s info. once.) \$
(a) No.	Use duplicate copies of Part III if additional	space is needed.	<u> </u>	
`fŕom Part I	(b) Purpose of gift	(c) Use of gift	(b)	Description of how gift is held
		(e) Transfer of g	ft	
	Transferee's name, address, a	nd 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				· · ·
ŀ		(e) Transfer of g	I ft	
-	Transferee's name, address, a	nd ZIP + 4	Relationship o	of transferor to transferee
(a) No. from			(-1)	Description of how sift is hold
Part I	(b) Purpose of gift	(c) Use of gift	(d)	Description of how gift is held
		(e) Transfer of g		
			n.	
-	Transferee's name, address, a	nd ZIP + 4	Relationship o	of transferor to transferee
(a) No.				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d)	Description of how gift is held
			[
		(e) Transfer of g	ft	
	Transferee's name, address, a	nd ZIP + 4	Relationship of	of transferor to transferee
	· · · · · · · · · · · · · · · · · · ·		F	
223454 11-15	5-22			Schedule B (Form 990) (2022)

15271027 793927 17801

25 2022.05000 GLOBAL SCHOOL LEADERS

17801__1

SCHEDULE	D
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(Form	990)
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b

232051 09-01-22

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.



	ment of the Treasury Revenue Service	A Go to www.irs.gov/Form99	ttach to Form 990. O for instructions and	d the latest informat	tion.	Open to Inspect	o Public tion
	e of the organization					yer identificatio	
		GLOBAL SCHOOL LEAD				81-4387	
Pa	_	ations Maintaining Donor Advise		r Similar Funds	or Accoun	ts. Complete if t	he
	organization	n answered "Yes" on Form 990, Part IV, lir					
			(a) Donor adv	ised funds	(b) Funds	and other acco	unts
1	Total number at er	nd of year					
2		f contributions to (during year)					
3		f grants from (during year)					
4		t end of year					
5	-	on inform all donors and donor advisors in	-				
		on's property, subject to the organization's				Ves	└── No
6		on inform all grantees, donors, and donor a					
		oses and not for the benefit of the donor o	or donor advisor, or fo	r any other purpose o	conferring		□
Pa	impermissible priva					Yes	└── No
		ation Easements. Complete if the org	-		art IV, line 7.		
1		servation easements held by the organizat	, г				
		of land for public use (for example, recrea	ation or education) L	Preservation of a			ea
		f natural habitat	L	Preservation of a	a certified histo	one structure	
0		of open space	fied concernation con	tribution in the form of	f a concentrati	an accoment on	the left
2	day of the tax year	through 2d if the organization held a quali	ned conservation con	tribution in the form c		eld at the End of t	
2		onservation easements					
a b							
0		vation easements on a certified historic str	ructure included in (a)				
d		vation easements included in (c) acquired			20		
u		isted in the National Register			2d		
3		vation easements modified, transferred, re				luring the tax	
Ŭ	year		icacica, exanguiorica,		organization		
4	-	 where property subject to conservation ea	sement is located				
5		tion have a written policy regarding the pe		ection, handling of			
		orcement of the conservation easements i		, J		Yes	No No
6		r hours devoted to monitoring, inspecting,					vear
				, C		0	,
7	Amount of expens	es incurred in monitoring, inspecting, hand	dling of violations, and	enforcing conservat	ion easements	during the year	
8	Does each conser	vation easement reported on line 2(d) abov	ve satisfy the requiren	nents of section 170(h)(4)(B)(i)		
	and section 170(h))(4)(B)(ii)?				Yes	No No
9	In Part XIII, describ	be how the organization reports conservat	ion easements in its re	evenue and expense	statement and	I	
	balance sheet, and	d include, if applicable, the text of the foot	note to the organization	on's financial stateme	ents that descr	ibes the	
		ounting for conservation easements.					
Pa		ations Maintaining Collections o		Freasures, or Ot	her Similar	r Assets.	
		the organization answered "Yes" on Form					
1a		elected, as permitted under FASB ASC 95					
	-	easures, or other similar assets held for pu			•	ublic	
	<i>,</i> ,	Part XIII the text of the footnote to its fina					
b	-	elected, as permitted under FASB ASC 95					
		ures, or other similar assets held for public	c exhibition, educatior	n, or research in furth	erance of publ	ic service,	
	-	ng amounts relating to these items:					
		ded on Form 990, Part VIII, line 1					
	(ii) Assets include	ed in Form 990, Part X			\$		

		26		
801	2022.05000	GLOBAL	SCHOOL	LEADERS

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide

a Revenue included on Form 990, Part VIII, line 1

the following amounts required to be reported under FASB ASC 958 relating to these items:

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

Schedule D (Form 990) 2022

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Assets included in Form 990, Part X

Sche		SCHOOL LEA				-4387783	
Par	t III Organizations Maintaining C	collections of A	rt, Historical T	reasures, or Ot	her Similar A	ssets(continu	ued)
3	Using the organization's acquisition, accessi	on, and other record	ds, check any of th	e following that make	e significant use	of its	
	collection items (check all that apply):						
а	Public exhibition	c		change program			
b	Scholarly research	e	• 🛄 Other				
С	Preservation for future generations						
4	Provide a description of the organization's co					ו Part XIII.	
5	During the year, did the organization solicit o		•	•			
Der	to be sold to raise funds rather than to be ma		0			Yes	└── No
Par	t IV Escrow and Custodial Arran		ete if the organizat	ion answered "Yes" o	on Form 990, Pa	rt IV, line 9, or	
	reported an amount on Form 990, Pa				and the all states at		
та	Is the organization an agent, trustee, custod		•			N aa	
b	on Form 990, Part X?					L Yes	└── No
a	If "Yes," explain the arrangement in Part XIII	and complete the id	bilowing table:			Amount	
•	Paginning balance				1c	, anoant	
	Beginning balance						
	Additions during the year						
	Ending balance						
	Did the organization include an amount on F					Yes	No
	If "Yes," explain the arrangement in Part XIII.						
Par							
	· · · · ·	(a) Current year	(b) Prior year	(c) Two years back		back (e) Four	years back
1a	Beginning of year balance						
	Contributions						
	Net investment earnings, gains, and losses						
d	Grants or scholarships						
	Other expenditures for facilities						
	and programs						
f	Administrative expenses						
g	End of year balance						
2	Provide the estimated percentage of the cur	rent year end baland	ce (line 1g, column	(a)) held as:			
а	Board designated or quasi-endowment		_%				
b	Permanent endowment	%					
С	Term endowment	%					
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.					
3a	Are there endowment funds not in the posse	ession of the organiz	ation that are held	and administered for	r the	5	
	organization by:						Yes No
	(i) Unrelated organizations						
_	(ii) Related organizations			·····		3a(ii)	
	If "Yes" on line 3a(ii), are the related organiza			{?		3b	
	Describe in Part XIII the intended uses of the tVI Land, Buildings, and Equipm		owment funds.				
Fai	t VI Land, Buildings, and Equipm Complete if the organization answere		0 Part IV line 11a	See Form 000 Part	X line 10		
			<u>, , , , , , , , , , , , , , , , , , , </u>	/	,		value
	Description of property	(a) Cost or o basis (investr		.,	Accumulated epreciation	(d) Book	value
1a	Land						
	Buildings						
	Leasehold improvements						
d	Equipment					<u> </u>	
	Other						
Total	. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part	X, column (B), line	10c.)		<u> </u>	0.

Schedule D (Form 990) 2022

232052 09-01-22

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or er	nd-of-year market value
1) Financial derivatives			
2) Closely held equity interests			
3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11c. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or er	nd-of-year market value
(1)			,
(2)			
(3)			
(4)			
(5)			
(6) (7)			
(7)			
(8)			
(9)			
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets.	on Form 000, Port IV, line	11d See Form 000 Port V line 15	
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes"		11d. See Form 990, Part X, line 15.	
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" (a)	on Form 990, Part IV, line Description	11d. See Form 990, Part X, line 15.	(b) Book value
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" (a) (1)		11d. See Form 990, Part X, line 15.	(b) Book value
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" (a) (1) (2)		11d. See Form 990, Part X, line 15.	(b) Book value
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" (a) (1)		11d. See Form 990, Part X, line 15.	(b) Book value
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" (a) (1) (2)		11d. See Form 990, Part X, line 15.	(b) Book value
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" (a) (1) (2) (3)		11d. See Form 990, Part X, line 15.	(b) Book value
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" (a) (1) (2) (3) (4)		11d. See Form 990, Part X, line 15.	(b) Book value
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" (a) (1) (2) (3) (4) (5)		11d. See Form 990, Part X, line 15.	(b) Book value
Ottal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" (a) (1) (2) (3) (4) (5) (6)		11d. See Form 990, Part X, line 15.	(b) Book value
ottal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" (a) (1) (2) (3) (4) (5) (6) (7) (8) (9)	Description	11d. See Form 990, Part X, line 15.	(b) Book value
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otal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" (a) (1) (2) (3) (4) (5) (6) (7) (8) (9) Fotal. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.	Description		
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" (a) (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes"	Description		5.
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" (a) (1) (2) (3) (4) (5) (6) (7) (8) (9) otal. (Column (b) must equal Form 990, Part X, col. (B) lin Part X Other Liabilities. Complete if the organization answered "Yes" (b) Part X (c) Complete if the organization answered "Yes" (c) Complete if the organization answered "Yes")	Description		
Ottal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" (a) (1) (2) (3) (4) (5) (6) (7) (8) (9) otal. (Column (b) must equal Form 990, Part X, col. (B) lin Part X Other Liabilities. Complete if the organization answered "Yes"	Description		5.
Ottal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" (a) (1) (2) (3) (4) (5) (6) (7) (8) (9) otal. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability	Description		5.
Ottal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" (a) (1) (2) (3) (4) (5) (6) (7) (8) (9) Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability (1) Federal income taxes	Description		5.
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" (a) (1) (2) (3) (4) (5) (6) (7) (8) (9) otal. (Column (b) must equal Form 990, Part X, col. (B) lin Part X Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability (1) Federal income taxes (2)	Description		5.
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" (a) (1) (2) (3) (4) (5) (6) (7) (8) (9) otal. (Column (b) must equal Form 990, Part X, col. (B) lin Part X Other Liabilities. Complete if the organization answered "Yes" (1) (2) (3) (4)	Description		5.
Ottal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" (a) (1) (2) (3) (4) (5) (6) (7) (8) (9) otal. (Column (b) must equal Form 990, Part X, col. (B) lin Part X Other Liabilities. Complete if the organization answered "Yes" . (1) (2) (3) (4) (5) (1) (2) (3) (4) (5)	Description		5.
Other Assets. Complete if the organization answered "Yes" (a) (1) (2) (3) (4) (5) (6) (7) (8) (9) Other Liabilities. Complete if the organization answered "Yes" (3) (4) (5) (6) (7) (8) (9) otal. (Column (b) must equal Form 990, Part X, col. (B) lin Part X Other Liabilities. Complete if the organization answered "Yes" (1) Federal income taxes (2) (3) (4) (5) (6)	Description		5.
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otal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" (a) (1) (2) (3) (4) (5) (6) (7) (8) (9) fortal. (Column (b) must equal Form 990, Part X, col. (B) lin Part X Other Liabilities. Complete if the organization answered "Yes" . (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6)	Description		5.

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... X

Sche	edule D (Form 990) 2022 GLOBAL SCHOOL LEADERS			81-	4387783 Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Statem	ents With			
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	a.			
1	Total revenue, gains, and other support per audited financial statements			1	1,673,129.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	. 2a			
b	Donated services and use of facilities	. 2b			
с	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	. 2d			
е	Add lines 2a through 2d			2e	0.
3	Subtract line 2e from line 1			3	1,673,129.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	. 4a			
b	Other (Describe in Part XIII.)	4 b			
с	Add lines 4a and 4b			4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	1,673,129.
Do					
Pa	rt XII Reconciliation of Expenses per Audited Financial Stater		Expenses per	Retu	rn.
Pa	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	a.			
1		a.		Retu	rn. 1,159,981.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12: Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:	a.			
1	Complete if the organization answered "Yes" on Form 990, Part IV, line 12 Total expenses and losses per audited financial statements	a.			
1 2	Complete if the organization answered "Yes" on Form 990, Part IV, line 12: Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:	a. 2a			
1 2 a	Complete if the organization answered "Yes" on Form 990, Part IV, line 123 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities	a. 2a 2b			
1 2 a b	Complete if the organization answered "Yes" on Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	a. 2a 2b 2c 2d	· · ·		
1 2 a b c	Complete if the organization answered "Yes" on Form 990, Part IV, line 12: Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d	a. 2a 2b 2c 2c		1 2e	1,159,981.
1 2 b c d	Complete if the organization answered "Yes" on Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	a. 2a 2b 2c 2c		1	
1 2 b c d e	Complete if the organization answered "Yes" on Form 990, Part IV, line 12: Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1:	a. 		1 2e	1,159,981.
1 2 b c d 3	Complete if the organization answered "Yes" on Form 990, Part IV, line 12: Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1	a. 		1 2e	1,159,981.
1 2 3 4	Complete if the organization answered "Yes" on Form 990, Part IV, line 12: Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1:	a. 2a 2b 2c 2d 2d		1 2e	1,159,981. 0. 1,159,981.
1 2 a b c d e 3 4 a	Complete if the organization answered "Yes" on Form 990, Part IV, line 12: Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines 4a and 4b	a. 2a 2b 2c 2c 2d 4a 4b	15,000.	1 2e 3 4c	1,159,981. 0. 1,159,981. 15,000.
1 2 d e 3 4 b c 5	Complete if the organization answered "Yes" on Form 990, Part IV, line 12: Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)	a. 2a 2b 2c 2c 2d 4a 4b	15,000.	1 2e 3	1,159,981. 0. 1,159,981.

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.

PART X, LINE 2:

GSL BELIEVES THAT IT HAS APPROPRIATE SUPPORT FOR ANY TAX POSITIONS TAKEN, AND AS SUCH, DOES NOT HAVE ANY UNCERTAIN TAX POSITIONS THAT ARE MATERIAL TO THE FINANCIAL STATEMENTS OR THAT WOULD HAVE AN EFFECT ON ITS TAX-EXEMPT

STATUS. THERE ARE NO UNRECOGNIZED TAX BENEFITS OR LIABILITIES THAT NEED TO

BE RECORDED.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

RECLASSIFICATION OF OUTGOING FOREIGN GRANT EXPENSE

15,000.

232054 09-01-22

15

271027 793927 17801	2022.05000	30 GLOBAL SCHOOL	LEADERS	178011
232055 09-01-22				Schedule D (Form 990) 2022

SCHEDULE	F
(Form 990)	

Department of the Treasury

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.

OMB No. 1545-0047

Internal Revenue Service Name of the organization

GLOBAL SCHOOL LEADERS

Employer identification number

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×г	- /1	- × ×	11	× - ×	
01		20		0.0	

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

- 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? X Yes No
- 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.
- **3** 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	employees, agents, and	(d) Activities conducted in the region (by type) (such as, fundraising, pro- gram 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
EAST ASIA AND THE					
PACIFIC - AUSTRALIA,				SCHOOL LEADERSHIP	
BRUNEI, BURMA,			PROGRAM SERVICES AND GRANT	TRAINING CONTENT AND	
CAMBODIA,	0	3	RECIPIENTS	RESEARCH	192,275.
SOUTH ASIA -					
AFGHANISTAN,				SCHOOL LEADERSHIP	
BANGLADESH, BHUTAN,			PROGRAM SERVICES AND GRANT	TRAINING CONTENT AND	
INDIA, MALDIVES,	0	17	RECIPIENTS	RESEARCH	326,027.
SUB-SAHARAN AFRICA -					
ANGOLA, BENIN,				SCHOOL LEADERSHIP	
BOTSWANA, BURKINA			PROGRAM SERVICES AND GRANT	TRAINING CONTENT AND	
FASO,	0	3	RECIPIENTS	RESEARCH	61,214.
EUROPE (INCLUDING					
ICELAND & GREENLAND)				SCHOOL LEADERSHIP	
- ALBANIA, ANDORRA,				TRAINING CONTENT AND	
AUSTRIA, BELGIUM	0	3	PROGRAM SERVICES	RESEARCH	125,648.
NORTH AMERICA -					
CANADA AND MEXICO,				SCHOOL LEADERSHIP	
BUT NOT THE UNITED				TRAINING CONTENT AND	
STATES	0	2	PROGRAM SERVICES	RESEARCH	21,551.
SOUTH AMERICA -					, ,
ARGENTINA, BOLIVIA,				SCHOOL LEADERSHIP	
BRAZIL, CHILE,				TRAINING CONTENT AND	
COLUMBIA, ECUADOR,	0	1	PROGRAM SERVICES	RESEARCH	1,500.
3 a Subtotal	0	29			728,215.
b Total from continuation sheets to Part I	0	0			0.
c Totals (add lines 3a and 3b)	0	29			728,215.

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Schedule F (Form 990) 2022

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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)
		EAST ASIA AND THE	PROVIDING TRAINING					
		PACIFIC -	AND SUPPORT TO SCHOOL					
		AUSTRALIA,	LEADERS IN SCHOOLS					
		BRUNEI, BURMA,	ACROSS MALAYSIA.	34,877.	WIRE	٥.		
		EAST ASIA AND THE	SUPPORTING SCHOOL					
		PACIFIC -	PRINCIPALS IN					
		AUSTRALIA,	MITIGATING LEARNING					
		BRUNEI, BURMA,	LOSS THROUGH TUTORING	45,000.	WIRE	٥.		
		SOUTH ASIA -	TO EVALUATE AN					
		AFGHANISTAN,	INNOVATIVE TRAINING					
		BANGLADESH,	AND COACHING SUPPORT					
		BHUTAN, INDIA,	MODEL FOR SCHOOL	22,703.	WIRE	٥.		
		SUB-SAHARAN AFRICA	TRAINING OF HEAD TEACHERS.	50,000.	WIRE	0.		
exempt 501(c)(3) orga	inization by the IRS,	or for which the grantee	recognized as charities by the or counsel has provided a sec	tion 501(c)(3) ec	uivalency letter			

SEE PART V FOR COLUMN (D) DESCRIPTIONS

Schedule F (Form 990) 2022

GLOBAL SCHOOL LEADERS

81-4387783

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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)

Schedule F (Form 990) 2022

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? <i>If</i> "Yes," <i>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)</i>	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? <i>If</i> "Yes," <i>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	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)	Yes	X 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.

PART I, LINE 2:

ORGANIZATIONS THAT SUB-GRANTS ARE PROVIDED TO ARE PARTNER ORGANIZATIONS.

ON AT LEAST A MONTHLY BASIS, WE HOLD CONVERSATIONS WITH THESE PARTNER

ORGANIZATIONS TO UNDERSTAND THE STATUS AND PROGRESS OF THE PROGRAM.

PARTNER ORGANIZATIONS PROVIDE REGULAR WRITTEN REPORTS OF GRANT

EXPENDITURES.

PART II, COLUMN (D):

REGION: EAST ASIA AND THE PACIFIC - AUSTRALIA, BRUNEI, BURMA, CAMBODIA,

(D) PURPOSE OF GRANT: SUPPORTING SCHOOL PRINCIPALS IN MITIGATING

LEARNING LOSS THROUGH TUTORING AND REMEDIAL CLASS.

(A) REGION:

SOUTH ASIA - AFGHANISTAN, BANGLADESH, BHUTAN, INDIA, MALDIVES, NEPAL,

(D) PURPOSE OF GRANT: TO EVALUATE AN INNOVATIVE TRAINING AND COACHING

SUPPORT MODEL FOR SCHOOL LEADERS IN TELEGANA STATE, INDIA TO IMPROVE

SCHOOL AND TEACHING PRACTIVES.

232075 10-17-22

SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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 the latest information. EZ
OMB No. 1545-0047
2022
Open to Public
Inspection
Employer identification number

81-4387783

GLOBAL SCHOOL LEADERS

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

OTHER EDUCATORS.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

RESEARCH

-GLOBAL SCHOOL LEADERS (GSL) PUBLISHED THE GLOBAL SCHOOL LEADERS ANNUAL

PULSE SURVEY.

-LAUNCHED A RANDOMIZED CONTROL TRIAL IN INDIA TO DETERMINE THE IMPACT

OF COACHING ON SCHOOL LEADER DEVELOPMENT.

-CONDUCTED A DIAGNOSTIC STUDY IN MALAYSIA TO UNDERSTAND THE POLICY

ECOSYSTEM THAT SUPPORTS SCHOOL LEADERSHIP.

NETWORK

-CO-HOSTED CONVENINGS ON SCHOOL LEADERSHIP WITH THE WORLD BANK.

-CO-COORDINATING UNESCO TEACHER TASK FORCE'S SCHOOL LEADERSHIP NETWORK.

-LAUNCHED AN IN THE PRINCIPAL'S OFFICE SERIES WITH LEADERS IN EDUCATION

FROM AROUND THE WORLD.

FORM 990, PART VI, SECTION B, LINE 11B:

THE TAX RETURN IS PREPARED BY AN INDEPENDENT ACCOUNTING FIRM. THE

ORGANIZATION IS SENT A DRAFT OF THE TAX RETURNS TO BE REVIEWED AND EXAMINED

PRIOR TO FILING. THE ORGANIZATION DISTRIBUTES COPIES OF THE RETURNS TO

THOSE INDIVIDUALS CHARGED WITH GOVERNANCE. THOSE INDIVIDUALS AT THAT TIME

CAN REVIEW AND IF APPLICABLE DISCUSS ANY LINE ITEMS IN THE RETURN WITH THE

ACCOUNTANT WHO HAS PREPARED THE RETURN. IF ALL ITEMS ARE FOUND TO BE

 ACCEPTABLE, E-FILE AUTHORIZATION FORMS ARE SENT TO THE ORGANIZATION TO BE

 LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
 Schedule O (Form 990) 2022

 232211 10-28-22
 10-28-22

15271027 793927 17801

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2022.05000 GLOBAL SCHOOL LEADERS

GLOBAL SCHOOL LEADERS

SIGNED AND SENT BACK TO AUTHORIZE THE OUTSIDE ACCOUNTING FIRM TO

ELECTRONICALLY FILE THE RETURNS WITH THE DESIGNATED GOVERNMENTAL AGENCIES.

FORM 990, PART VI, SECTION B, LINE 12C:

BOARD MEMBERS ARE REQUIRED TO READ AND SIGN A CONFLICT OF INTEREST

DECLARATION EVERY YEAR. THE BOARD HAS A STANDING ITEM AT EACH BOARD MEETING WHERE EACH BOARD MEMBER MUST DISCUSS ANY CONFLICTS OF INTEREST.

FORM 990, PART VI, SECTION B, LINE 15A:

THE COMPENSATION OF OFFICERS IS DETERMINED BY THE ORGANIZATION'S EXECUTIVE DIRECTOR IN CONSULTATION WITH OTHERS WHEN APPROPRIATE, AND IS BASED ON INDUSTRY SALARY SURVEYS, EQUITABLE PAY SCALE WITHIN THE ORGANIZATION, AND INDIVIDUAL EMPLOYEE PERFORMANCE REVIEWS. COMPENSATION OF THE CEO IS DETERMINED EACH YEAR BY THE BOARD UPON REVIEW FOR THE CEO'S PERFORMANCE AND A REVIEW OF COMPARATIVE SALARIES.

FORM 990, PART VI, SECTION C, LINE 19:

GOVERNING DOCUMENTS ARE AVAILABLE FOR PUBLIC INSPECTION AT THE PRINCIPAL PLACE OF BUSINESS. THE CONFLICT OF INTEREST POLICY AND THE ORGANIZATION'S FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST.

FORM 990, PART IX, LINE 11G, OTHER FEES:

OTHER PROFESSIONAL FEES:

PROGRAM SERVICE EXPENSES

MANAGEMENT AND GENERAL EXPENSES

FUNDRAISING EXPENSES

TOTAL EXPENSES

232212 10-28-22

86,582.

9,277.

7,215.

103,074.

17801 1

GLOBAL SCHOOL LEADERS CONTRACTOR FEES: PROGRAM SERVICE EXPENSES	81-4387783
ROGRAM SERVICE EXPENSES	
	574,703.
IANAGEMENT AND GENERAL EXPENSES	0.
UNDRAISING EXPENSES	0.
OTAL EXPENSES	574,703.
OTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	677,777.
ORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
ECLASSIFICATION OF OUTGOING FOREIGN GRANT EXPENSE	15,000.
PART XII, LINE 2C:	
HESE PROCESSES HAVE NOT CHANGED FROM THE PRIOR YEAR.	