

Public Disclosure for Tax-Exempt Organizations

Tax-exempt organizations are required to make a copy of their application for exemption and Form(s) 990 (and 990-T, if applicable) available for public inspection and to provide copies of such forms to individuals or organizations that request copies. Alternatively, the Internet may be used to make these documents available. (See the "Using the Internet" section which follows.) These rules apply to an organization's Form(s) 990 (and 990-T, if applicable) for the last three years and to its application for exemption.¹ If the application was filed prior to July 15, 1987, disclosure is not required unless the organization had a copy of the application on July 15, 1987. An organization **may omit names and addresses of contributors from its return(s)**. Failure to comply with disclosure requirements can result in an enforcement action by the IRS.

While disclosure rules create an additional burden, they also provide an opportunity for your organization to showcase the community benefits that it provides. The rules also heighten the need to carefully review all responses, including narrative explanations, contained on your Form(s) 990/990-T before filing.

Where Must Information Be Provided?

Generally, an organization must make its documents available for public inspection at any location where it has three or more employees. If the only services provided at the site are in furtherance of exempt purposes and the site does not serve as an office for management staff, the documents are not required to be made available there.

How Quickly Must Organizations Reply?

Requests for copies can be made in person or in writing. When requests are made in person, the copies must generally be provided on the same business day. There are provisions for delays due to unusual circumstances. However, in no event may the period of delay exceed five business days. Unusual circumstances include times when those staff that are capable of fulfilling a request are absent.

Written Requests

Requested copies generally must be mailed within 30 days from the date of the receipt of the written request. However, if the organization requires advance payment of a reasonable fee for copying and postage, it may provide the copies within 30 days from the date it receives payment rather than the date of the original request.

What Can an Organization Charge?

You are currently allowed to charge a maximum fee of \$.20 cents per page in addition to actual postage costs.

¹ Certain information within an application for exemption can be withheld from public inspection if public availability would adversely affect the organization, *e.g.*, information relating to a trade secret, patent, process, style of work or apparatus of the organization.

If any organization receives a written request for copies with no payment enclosed and the organization requires payment in advance, the organization must request payment within seven days from the date it received the request. An organization is required to accept a personal check for written requests if it does not accept payment by credit card. If an organization does not require prepayment and the requester does not enclose a prepayment with the request, the organization must receive consent from a requester before providing copies for which the fee charge for copying and postage would be in excess of \$20.

Local or Subordinate Organizations

A local or subordinate organization that is covered by a group exemption letter is given additional time for responding to some requests. If this type of organization receives a request made in person for inspection of its application for tax exemption, the local organization is required to acquire and make available the application for a group exemption letter filed by the central or parent organization within not more than two weeks. The same general rule would apply with respect to a local or subordinate organization must make the group return available for inspection within a reasonable period which is defined as not more than two weeks. If the group return includes separate schedules with respect to each local or subordinate organization, the local or subordinate organization may exclude or omit any schedules relating only to other organizations which are included in the group return.

If a request is made for a personal inspection to a local or subordinate organization, it has the option of mailing the return to the requester rather than allowing an inspection. However, if this is done, the local or subordinate organization may not charge for the copying of the document unless the requester consents to the charge. If a local or subordinate organization receives a request for copies, then it must comply with the rules stated previously.

Using the Internet

As an alternative to providing copies, an organization may provide access to its exemption application and Form(s) 990 (and 990-T, if applicable) through the Internet. The website must provide instructions for downloading the document(s). The information on the Internet must be in such a format that it may be accessed, downloaded, viewed or printed in the same format as the actual documents. An organization would need to make the web address available to the general public.

There is nothing that prevents others from posting your Forms 990, 990-T and exemption application on the Internet. Based on this fact and the potential strain on your organization's resources from providing copies, organizations should consider posting these documents on the Internet.

What if the Requests Are a Form of Harassment?

If an organization believes it is subject to a harassment campaign, it can file an application for a harassment determination with the Internal Revenue Service. This would allow the organization to suspend compliance with these requests. In addition, an organization may disregard requests for copies in excess of two per month or four per year made by a single individual or sent from a single address, without submitting an application for a harassment determination.

Please contact your BKD advisor if you have questions about these rules.

Form	990	

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

Department of the Treasury Internal Revenue Service

B Check if applicable:

Address

Name change

Initial return

Terminated Amended

Tax-exempt status:

Summary

return Application pending

J

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Governance

Activities &

Revenue

Expenses

s or ces

Assets | Balance

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Part I

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change

Do not enter Social Security numbers on this form as it may be made public. Open to Public ▶ Information about Form 990 and its instructions is at www.irs.gov/form990. Inspection A For the 2020 calendar year, or tax year beginning 07/01, 2020, and ending 06/30, 20 21 C Name of organization GLORIA DEO ACADEMY INC D Employer identification number FKA GLENDALE CHRISTIAN CHURCH SCHOOLS, INC. 26-2534427 Doing Business As Number and street (or P.O. box if mail is not delivered to street address) E Telephone number Room/suite 3146 S. GOLDEN AVE (417) 379-5430 City or town, state or province, country, and ZIP or foreign postal code SPRINGFIELD, MO 65807 G Gross receipts \$ 1,951,621. **F** Name and address of principal officer: GEORGE WARD H(a) Is this a group return for Yes Х No subordinates 3146 S. GOLDEN AVE, SPRINGFIELD, MO 65807 Yes No H(b) Are all subordinates included? X 501(c)(3) 501(c) (4947(a)(1) or If "No," attach a list. (see instructions) (insert no.) 527 Website:
GLORIADEOACADEMY.ORG H(c) Group exemption number Form of organization: X Corporation L Year of formation: 2008 M State of legal domicile: MO Trust Association Other 🕨 1 Briefly describe the organization's mission or most significant activities: GLORIA DEO ACADEMY PARTNERS WITH PARENTS TO EDUCATE STUDENTS IN A HISTORICAL, BIBLICAL WORLDVIEW THROUGH A RIGOROUS CLASSICAL CURRICULUM. 2 Check this box I if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) 7. 3 Number of independent voting members of the governing body (Part VI, line 1b) 7. 4 158. 5 Total number of individuals employed in calendar year 2020 (Part V, line 2a) 5 Total number of volunteers (estimate if necessary) 100. 6 0. 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0. **b** Net unrelated business taxable income from Form 990-T, line 34 7b Prior Year Current Year Contributions and grants (Part VIII, line 1h) 1,122,818 65,852. COPY FOR 1,880,264. Program service revenue (Part VIII, line 2g) 1,289,194 PUBLIC INSPECTION Investment income (Part VIII, column (A), lines 3, 4, and 7d) 968. 965. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) -11,297 4,540. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 2,401,683. 1,951,621. 0 0. Grants and similar amounts paid (Part IX, column (A), lines 1-3) Benefits paid to or for members (Part IX, column (A), line 4) 0 0

Signature Block Part

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

Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)

16a Professional fundraising fees (Part IX, column (A), line 11e) (C) line 2, 947.

Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)

Revenue less expenses. Subtract line 18 from line 12

Net assets or fund balances. Subtract line 21 from line 20

Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)

b Total fundraising expenses (Part IX, column (D), line 25)

Total assets (Part X, line 16)

Total liabilities (Part X, line 26)

<u>.</u> .										
Sign Here		Signature of officer				Date				
		JOY DAVIS	HEAD OF	SCHOOL						
		Type or print name and title								
	Prin	t/Type preparer's name	Preparer's signature	Date		Check	if	PTIN		
Paid Preparer Use Only	KAYLA M BELL					self-emple	oyed	P01682	2975	
	Firm's name 🕨 BKD, LLP				Firm's	s EIN 🕨	44	-016026	50	
	Firm's address ▶ 910 E ST LOUIS #200/PO BOX 1190 SPRINGFIELD, MO 65806-2523 Phone no.					e no.	41	7-865-8	3701	
May the II	RS di	scuss this return with the preparer show	n above? (see instructions)					ΧΥ	es	No
For Paper	work	Reduction Act Notice, see the separat	e instructions.					Forr	n 990	(2020)

1,010,032.

22,518.

302,912

1,335,462.

1,066,221.

2,308,347.

1,236,422.

1,071,925.

Beginning of Current Year

1,299,924.

2,947.

607,754.

40,996.

1,910,625.

2,949,327.

1,844,662.

1,104,665.

End of Year

(Rev. January 2020)

Department of the Treasury Internal Revenue Service

Application for Automatic Extension of Time To File an Exempt Organization Return

File a separate application for each return.
 Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-0047

Electronic filing (*e-file*). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit *www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits*.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or	Name of exempt organization or other filer, see instructions. Taxpayer identificati			Taxpayer identification nu	mber ((TIN)
print	GLORIA DEO ACADEMY INC			26-253442	7	
File by the due date for filing your	Number, street, and room or suite no. If a P.O. bo 3146 S. GOLDEN AVE	ox, see instru	ctions.			
return. See instructions.	City, town or post office, state, and ZIP code. Fo SPRINGFIELD, MO 65807	r a foreign ac	dress, see instructions.			
Enter the R	eturn Code for the return that this application	is for (file	a separate application for	each return)		01
Application	1	Return	Application			Return
Is For		Code	Is For			Code
Form 990 o	or Form 990-EZ	01	Form 990-T (corporation	n)		07
Form 990-E	3L	02	Form 1041-A			08
Form 4720	(individual)	03	Form 4720 (other than	individual)		09
Form 990-F	PF	04	Form 5227			10
Form 990-	Γ (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 990-	Γ (trust other than above)	06	Form 8870			12
 If the org If this is for the who a list with the dist with the for the for the for the for the for the x 	ne No. \blacktriangleright 417 379-5430 ganization does not have an office or place of for a Group Return, enter the organization's for one group, check this box \frown \blacktriangleright \Box . In the names and TINs of all members the extension est an automatic 6-month extension of time us e organization named above. The extension is calendar year 20 or tax year beginning 07/0 tax year entered in line 1 is for less than 12 m	business ir bur digit Gro lf it is for pa sion is for. Intils for the or 01, 20_2	Dup Exemption Number (Gart of the group, check th 05/16_, 20 2: ganization's return for: 0_, and ending	SEN) is box	a	. If this is nd attach nization return
	Change in accounting period					
nonre	application is for Forms 990-BL, 990-PF, 9 fundable credits. See instructions.			· · ·	3a \$	0.
estim	s application is for Forms 990-PF, 990-T ated tax payments made. Include any prior yea	ar overpayr	ment allowed as a credit.		3b \$	0.
	ce due. Subtract line 3b from line 3a. Include		ient with this form, if req	uired, by using EF IPS		0
	ronic Federal Tax Payment System). See instru				3c \$	
instructions.	ou are going to make an electronic funds withdrawa		nı) with this form 8868, see	Form 8453-EO and Form	1 8879	-EO for payment
For Privacy	Act and Paperwork Reduction Act Notice, see inst	ructions.			Form	8868 (Rev. 1-2020)

Fc	Page 2
F	Part III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	GLORIA DEO ACADEMY PARTNERS WITH PARENTS TO EDUCATE STUDENTS IN A
	HISTORIC BIBLICAL WORLDVIEW THROUGH A RIGOROUS CLASSICAL
	CURRICULUM. SEE SCHEDULE O FOR ADDITIONAL INFORMATION.
_	
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes X No If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?

	res
If "Yes," describe these changes on Schedule O.	

4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by	y
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others	3,
	the total expenses, and revenue, if any, for each program service reported.	

4a	(Code:) (Expenses \$ 1,274,103. including grants of \$) (Revenue \$	1,744,256.)
	WE PROVIDE A CLASSICAL BASED EDUCATION TO OUR STUDENTS IN		
	COLLABORATION WITH PARENTS. THIS MEANS TWO DAYS OF THE WEEK,		
	CHILDREN ARE IN THE CLASSROOM WITH EDUCATORS. TWO DIFFERENT	DAYS OF	
	THE WEEK, CHILDREN ARE AT HOME AND PARENTS ARE USING THE CLA	SSROOM	
	CURRICULUM TO ALSO TEACH THEIR CHILDREN. THIS PROVIDES A SEA	MLESS	
	TRANSITION BETWEEN CLASS DAYS AND HOMESCHOOL DAYS, WHILE ALL	JOWING	
	PARENTS TO PLAY A CRUCIAL AND VALUABLE PART IN THEIR CHILD'S		
	EDUCATION. WE SERVICE OVER 500 STUDENTS CURRENTLY, AND HAVE	OVER	
	100 MORE ON OUR WAITING LIST. OUR STUDENT BODY INCREASES EAC	CH YEAR	
	AS THE COMMUNITY RESPONDS TO THE UNIQUE EDUCATION STYLE WE C	FFER.	

4b	(Code:) (Expenses \$	132,322. including gr	ants of \$) (Revenue \$	121,858.)
	WE PROVIDE AN	ARRAY OF SC	HOOL ACTIVITIES T	HAT, WHEN	MATCHED WITH	
	OUR CURRICULU	M, PROVIDE F	OR A WELL-ROUNDED	EDUCATION	I FOR OUR	
	STUDENTS. THE	SE ACTIVITIE	S INCLUDE MUSIC A	ND DRAMA C	LASSES,	
	ATHLETIC PROG	RAMS, AND CL	UB ACTIVITIES (SU	CH AS GARI	ENING,	
	COOKING, AND	FINANCE).				

c (Co	ode:) (Expenses \$	14,150. including grants of \$) (Revenue \$	14,150.)		
WE	PLACE A	A STRONG EMPHASIS	ON PUBLIC SPEAKING. OUR STUD	ENTS ENGAGE			
IN SPEECH AND DEBATE CLASSES, AS WELL AS TOURNAMENTS, AROUND THE							
ST	ATE. WE	BELIEVE THAT A C	CRITICAL ASPECT OF EDUCATION I	S THE			
ĀB	ILITY FO	OR A STUDENT TO A	ARTICULATE THEIR POSITION ON A	TOPIC, AND			
EF	FECTIVEI	LY COMMUNICATE TH	IEIR POSITION AND PERSUADE OTH	ERS.			
d Ot	her prograr	n services (Describe on	Schedule O.)				

(Expenses \$	includin	g grants of \$) (Reve	nue \$)
4e Total program servio	ce expenses 🕨	1,420,57	5.	
JSA 0E1020 1.000 5939RP K929	5/16/2022	12:14:41 PM	V 20-7.21	0093110

GLORIA DEO ACADEMY INC

Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A. Yes No 2 is the organization regraps in direct or indirect political campaign activities on behalf of ni opposition to candidates for public direct? If Yes," complete Schedule A. 3 1 X 3 both the organization regraps in direct or indirect political campaign activities, or have a section 501(n) direct during the tax year? If Yes," complete Schedule C, Part I. 3 X 4 Section 501(c)(3) organization and the organization orgage in lobbying activities, or have a section 501(n) direct during the tax year? If Yes," complete Schedule C, Part I. 5 X 5 Did the organization activities and year activities of the accounts for which donors have the right to provide addice on the distribution or investment of amounts in such funds or accounts? If Yes," complete Schedule D, Part I. 7 X 6 Did the organization maintain collections of works of art, historical treasures, or other similar asset? If Yes," complete Schedule D, Part I. 7 X 7 Did the organization regort an amount for investments or naccount for While during activities are provide radic consensing, dubt management, redit regari, or debt negonization account in Part X, line 12, Into 12 Yes," complete Schedule D, Part V. 7 X 9 Did the organization factor to any of the following questions is "Yes," than complete Schedule D, Part V. 10 X 11 X	-	90 (2020)		F	Page 3
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," 1 X 2 Is the organization required to complete Schedule <i>A</i> , Schedule of Contributors See instructions? 1 X 3 Dd the organization required to complete Schedule <i>A</i> , Schedule of Contributors Schedule <i>A</i> , and the organization angage in direct policit Circle's Complete Schedule <i>C</i> , Part 1. 3 X 4 Section 501(c)(3) organizations. Dd the organization ungage in lobbying activities, or have a section 501(b) election in teleted during the taywerit 1"ves, complete Schedule <i>C</i> , Part 1. 4 X 5 Is the organization maintain any donor adveed funds or any similar funds or accounts for which donors have the right to provide avoice on the distribution or investment of amounts in such thads or accounts for which donors have the right to provide avoice on the distribution or investment of amounts in such thads or accounts for the similar assets? If "Yes," complete Schedule D, Part II 7 X 0 Dd the organization maintain any donor adveed funds or any similar funds account liability, serve as a custodial in sociects? If "Yes," complete Schedule D, Part II 7 X 0 Dd the organization maintain any donor adveed funds or any similar account liability, serve as a custodial in concentration accounts in the serve and anot in Part X, line 21, for escrow or custodial account liability, serve as a custodial for amount in Part X, line 21, for escrow or custodial maccount liability. <th>Part</th> <th>IV Checklist of Required Schedules</th> <th></th> <th></th> <th></th>	Part	IV Checklist of Required Schedules			
complete Schedule A, 1 1 1 1 1 1 2 1 2 15 the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public Orders Schedule C, Parl I, 3 X 4 Section 501(c)(3) organizations. Biothesis C, Caprello Schedule C, Parl I, 3 X 5 Is the organization assection 501(c)(4), 501(c)(5), or 501(c)(6) organization intel receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 84-197 H*Vs.* complete Schedule C, Parl I, 4 X 6 X 1 0 1 0 2 X 7 Did the organization maintain any doora valves d'unds or any similar fundous in such trucks 21 (%***, complete Schedule D, Parl I, 7 X 8 Did the organization maintain collections of works of at, historical treasures, or other similar assets? If Yes,* complete Schedule D, Parl I, 7 X 7 Did the organization, directive or hold a conservation easement, including easements to move assets? If Yes,* complete Schedule D, Parl V, 8 X 9 Did the organization, directive or hourd a conservation easement, includial account liability, serve as a custodian for amounts to taleasted trepatricol, building, and equipment in Parl X, line 17 Yes				Yes	No
2 Is the organization required to complete Schedule a Campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I. 3 X 3 Did the organization orgage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I. 3 X 4 Section S01(c)(3) organizations. Bid the organization mangae in lobbying activities, or have a section S01(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar announts as defined in Revoue Proceedure B-192 If 'Yes,' complete Schedule C, Part II. 4 X 5 Is 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 receives or an anount in Part X, line 12, lor escrow or custodal account liability, serve as a custodain osences? If 'Yes,' complete Schedule D, Part II. 7 X 10 Did the organization receives or any dista constructional treasure, or other similar asset? I'Yes,'' 8 X 10 Did the organization response or any dista relation any anount for investments or in quasi endowments? If 'Yes,' complete Schedule D, Part V. 10 X 10 Did the organization resport an amount for investments-order secondary and	1			v	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I. 3 X Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) effection in effect during the tax year' II 'Yes,' complete Schedule C, Part I. 4 X Is the organization asterior 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 91.91 'IYes,' complete Schedule C, Part I. 6 X 10 the organization maintain any doora advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors the environment, historical arress, or historica structures 71 'Wes,' complete Schedule D, Part I. 7 X 9 Did the organization maintain collections of works of ant, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part V. 8 X 10 Did the organization field a mount in Part X, line 12, tor escrow or custodal account liability, serve as a custodian for amounts not listed in Part X, ine 12, tor escrew or custodal account liability, serve as a custodian for amounts not listed in Part X, line 12, V M '. 9 X 10 Did the organization report an amount for lawest ments-orber 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 X. 11	2				
 a Sactian Soli(c)(3) or granization argain is to regarization argain in lobying activities, or have a socian 501(n) election in effect during the tax year? If "Yes," complete Schedule C, Part II. b Is the organization as action 501(c)(4), 501(c)(5), or 501(c)(6) or granization in the tracebers membership dues, sasessments, or similar amounts as defined in Revenue Procedure 98-197 If "Yes," complete Schedule C, Part II. D Id the organization calculated advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II. D Id the organization calculated or vorks of art. Instorical traceuses, or other similar lands or accounts? If "Yes," complete Schedule D, Part II. D Id the organization assess: Or loss of vorks of art. Instorical traceuses, or other similar lands or accounts? If "Yes," complete Schedule D, Part II. D Id the organization calculated or vorks of art. Instorical traceuses, or other similar lands or accounts? If "Yes," complete Schedule D, Part II. D Id the organization calculated Schedule D, Part IV. D Id the organization assesses? If "Yes," complete Schedule D, Part V. D Id the organization partices? If Yes," complete Schedule D, Part V. D Id the organization appendix Schedule D, Part V. D Id the organization appendix Schedule D, Part V. D Id the organization appendix an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V. D Id the organization report an amount for investments-other securities in Part X, line 12, that is 5% or more of is total assess reported in Part X, line 16? If "Yes," complete Schedule D, Part X. D Id the organization report an amount for investments-other securities in Part X, line 13, that is 5% or more of is total assess reported in Part X, line 16? If "Yes," complete Schedule D, Part X. <li< td=""><td></td><td></td><td>2</td><td>21</td><td></td></li<>			2	21	
 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II. Is the organization assection 501(c)(d), or 501(c)(d	3		3		х
 election in effect during the tax year? If "Yes," complete Schedule C, Part II, 5 Is the organization ascentro 501(c)(d), of 501(c)(d), or 701(c)(d), or	4				
5 Is the organization a section 501(c)(4), 501(c)(6) or 501(c)(6) organization that receives membership dues, assessments, or similar anounds as defined in Revue Procedure 98-191 "Vess" complete Schedule D, Part II. 5 X 6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II. 6 X 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II. 8 X 8 Did the organization report an amount in Part X. line 21, for escrow or custodial account liability, serve, "a custodian for amounts on listed in Part X, icr orovide credit counseling, dobt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part V. 8 X 10 Did the organization, report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V. 10 X 11 If the organization report an amount for linvestments-other securities in Part X, line 12, that is 55% or more of its total assets reported in Part X, line 17 ("Yes," complete Schedule D, Part X. 116 X 11 If the organization report an amount for linvestments-program related in Part X, line 10? If "Yes," complete Schedule P, Part X. 116 <td>•</td> <td></td> <td>4</td> <td></td> <td>Х</td>	•		4		Х
 assessments, or similar amounts as defined in Revenue Procedure 98-197 // "Yes" complete Schedule C, Part II Did the organization matiania any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I. Did the organization raport an amount in Part X, line 21, for escrow or custodial account liability, save as a custodian for amounts not listed in Part X, ine 17, historical trassues, or other similar assets? If "Yes," or aplete Schedule D, Part II. Did the organization raport an amount in Part X, line 21, for escrow or custodial account liability, save as a custodian for amounts not listed in Part X, ine 17, vers, "complete Schedule D, Part V. Did the organization raport an amount for land, buildings, and equipment in Part X, line 107 // If "Yes," complete Schedule D, Part VI. Did the organization raport an amount for land, buildings, and equipment in Part X, line 107 // If "Yes," complete Schedule D, Part VI. Did the organization raport 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 167 // "Yes," complete Schedule D, Part VI. Did the organization report an amount for other assets in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 167 // "Yes," complete Schedule D, Part VI. Did the organization report an amount for other assets in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 167 // "Yes," complete Schedule D, Part VI. Did the organization assetties or Yor to line 12A. Did the organization assetties or Yor to line 12A. Did the organization assetties or Yor to line 12A. Did the organization assetties or yorgan schedule J, Part X and XI is optimation or for any foreign organization? Interest cuented sc	5				
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12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII. 12a 12a 12a 12a 12a b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then complete Schedule D, Parts XI and XII is optional 12a X 13 Is the organization answered "No" to line 12a, then complete Schedule D, Parts XI and XII is optional 13 X 14a Did the organization maintain an office, employees, or agents outside of the United States? 13 X b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 14a X 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV 15 X 16 Did the organization report at total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I See instructions 17 X 18 Did the organization report more than \$15,000 of grass income from garning activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part	f				
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20 a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20 a X b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20 b 20 b 21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or 0 b 0 b	19				
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21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or					X
			206		
	21	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		х

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Part	V Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
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
24 a	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		Х
h	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
		240		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	0.4-		
	to defease any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
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		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			
	persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see 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		Х
h	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 lines 28a or 28b? If	200		
U	"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		X
	Did the organization receive more than \$25,000 in honecash contributions? <i>If Tes, complete schedule M</i>	23		
30		20		х
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			v
	complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			37
	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		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	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		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note: All Form 990 filers are required to complete Schedule O.	38	Х	
Part				
	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			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
	Did the organization comply with backup withholding rules for reportable payments to vendors and			
Ū	reportable gaming (gambling) winnings to prize winners?	1c	Х	
JSA			000	(2020)

Form **990** (2020)

Form 990 (2020)

Page 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			
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions).			
3a	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		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
τu	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		х
h	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).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
vu	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	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			
	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		X
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		L
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		<u> </u>
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
40.	against amounts due or received from them.)	12a		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
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		
a	Note: See the instructions for additional information the organization must report on Schedule O.	Teu		
h	Enter the amount of reserves the organization is required to maintain by the states in which			
D.	the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	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 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		X
	If "Yes," complete Form 4720, Schedule O.			

Form **990** (2020)

Form §	990 (2020) GLORIA DEO ACADEMY INC 26-2534	427	F	Page 6
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.			tions.
	Check if Schedule O contains a response or note to any line in this Part VI			X
Sect	ion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 7			
	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 7			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, trustees, or key employees to a management company or other person?	3		Х
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
6	Did the organization have members or stockholders?	6		Х
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:	-	37	
а	The governing body?	8a	Х	v
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	•		x
Sacti	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9 Codo)	А
Jeci	on B. Toncies (This Section B requests information about policies not required by the internal Revenue	Coue	.) Yes	No
10-	Did the experimetion have least charters branches as effiliates?	10a		x
	Did the organization have local chapters, branches, or affiliates?			
b	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a		11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a		12a	Х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b	Х	
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
-	describe in Schedule O how this was done	12c	Х	
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
b	Other officers or key employees of the organization	15b		Х
	If "Yes" to line 15a or 15b, describe the process in 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		Х
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		
	ion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T	(Sec	tion 5	01(c)
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict o	r intei	est p	olicy,
20	and financial statements available to the public during the tax year.	a ►		
20	State the name, address, and telephone number of the person who possesses the organization's books and record CAITLIN NELSON 3146 S. GOLDEN AVE SPRINGFIELD, MO 65807 417-379-5430	5 🗩		
		Form	990	(2020)
JSA				,)

Page

Part VII	Compensation	of	Officers,	Directors,	Trustees,	Key	Employees,	Highest	Compensated	Employees,	and
	Independent Contractors										
	Check if Schedule O contains a response or note to any line in this Part VII										
O a a than A	0///	- 1	. T arrata a s		and a second	I.I. sales		te d Encod			

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

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

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See instructions for the order in which to list the persons above.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and title	(B) Average hours per week	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation from the	
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	organization and related organizations	
(1)JOY DAVIS	40.00										
HEAD OF SCHOOL	0.			х				49,569.	0.	0.	
(2) ASHLEI WOELK	1.00										
SECRETARY	0.	Х		х				0.	0.	0.	
(3) WILLIAM WORSHAM	1.00										
TREASURER	0.	Х		Х				0.	0.	0.	
(4) GEORGE WARD	1.00										
CHAIRMAN	0.	Х		Х				0.	0.	0.	
(5) JUSTIN BUTLER	1.00										
BOARD MEMBER	0.	Х						0.	0.	0.	
(6) TOM RANKIN	1.00										
BOARD MEMBER	0.	Х						0.	0.	0.	
(7) DEBBIE BALL	1.00										
BOARD MEMBER	0.	Х						0.	0.	0.	
(8) ERIC MAXWELL	1.00										
BOARD MEMBER	0.	Х						0.	0.	0.	
(9)											
(10)											
(11)											
(12)											
(13)											
(14)											

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GLORIA DEO ACADEMY INC

-	rt VII Section A. Officers, Directors, Tru	istoos Ka		nlo		06	and H	lial	hest Companyat	od Emplo		ontinuo	Page 8
Га	(A)		;y ⊑⊓ ∣	ipic		es, C)	апип	igi	-	(E)	yees (c		
	(A) Name and title	(B) Average hours per week (list any hours for	Position (do not check more than on box, unless person is both a officer and a director/truste					an ee)	(D) Reportable compensation from the	Reportable compensation from related organizations		Esti amo o	(F) mated ount of ther ensation
		related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099		orga and	m the nization related nizations
			-										
			-										
			-										
С	Sub-total Total from continuation sheets to Part VII, S Total (add lines 1b and 1c)	-			• •	•••			49,569. 0. 49,569.		0. 0. 0.		0. 0. 0.
	Total number of individuals (including but not reportable compensation from the organization	limited to t		liste				re	ceived more than	\$100,000	of		
3	Did the organization list any former offic	er. directo	or. or	tru	Jste	e.	kev ei	am	lovee. or highes	t compens	ated		Yes No
	employee on line 1a? If "Yes," complete Sched	ule J for su	ch ind	livid	ual	• •						3	X
4	For any individual listed on line 1a, is the organization and related organizations graindividual	eater than	\$15	50,0	00?	P If	"Yes,	" (complete Schedu	le J for	such	4	X
5	Did any person listed on line 1a receive or for services rendered to the organization? If "Yo	accrue co	mpen	sati	on f	fron	n any					5	X
Se	ction B. Independent Contractors												
1	Complete this table for your five highest com compensation from the organization. Report of year.												
	(A) Name and business add	dress							(B) Description of se	rvices	с	(C) compensa	ation
2	Total number of independent contractors (in				nite			e li	sted above) who	received			
	more than \$100,000 in compensation from th	e organizat	tion 🕨	►		0	•						

Form 990 (2020)

GLORIA DEO ACADEMY INC Part VIII Statement of Revenue

		Check if Schedule	e O contains a respo	nse or note to ar	ny line in this Part V	/111		
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
សន	1a	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues						
۵Ĕ	c	Fundraising events						
r A	d	Related organizations						
ja Gi	e	Government grants (cc						
Sins	f	All other contributions,						
erio		and similar amounts not ir		65,852.				
iðf	g	Noncash contributions						
dti		lines 1a-1f	1g	\$				
ရှိ ပိ	h	Total. Add lines 1a-1f			65,852.			
				Business Code				
e	2a	TUITION REVENUE		616000	1,492,279.	1,492,279.		
e Ľ	b	SCHOOL ACTIVITES		611710	136,008.	136,008.		
Se		DEVELOPMENT INCOME		611430	34,953.	34,953.		
am	d d	OTHER INCOME		900099	217,024.	217,024.		
Par and a second	u							
Program Service Revenue	f	All other program servi	ice revenue					
	g	Total. Add lines 2a-2f			1,880,264.			
	3	Investment income (
		other similar amounts)			965.			965
	4	Income from investme			0.			
	5	Royalties	•	•	0.			
		- -	(i) Real	(ii) Personal				
	6a	Gross rents	6a 4,540.					
	b	Less: rental expenses	6b					
	c	Rental income or (loss)						
	d	Net rental income or (lo			4,540.			4,540.
	7a	Gross amount from	(i) Securities	(ii) Other				
		sales of assets						
		other than inventory	7a					
e	b	Less: cost or other basis						
Revenue		and sales expenses	7b					
eve	c	Gain or (loss)	7c					
	d	Net gain or (loss)			0.			-
Other	8a		m fundraising					
ō		events (not including \$	°,					
		of contributions rep						
		1c). See Part IV, line 18		0.				
	ь	Less: direct expenses		0.				
	c	Net income or (loss) fre		· · · · · · · •	0.			
	9a		rom gaming					
		activities. See Part IV, li	0 0	0.				
	b	Less: direct expenses		0.				
	с	Net income or (loss) fr			0.			
	10a		nventory, less					
		returns and allowances		0.				
	b	Less: cost of goods sold		0.				
	c	Net income or (loss) fro	~ · · · · · · · · · · · · · · · · · · ·		0.			
S				Business Code				
Miscellaneous Revenue	11a							
an€ ≱nu	b							
eve eve	c							
lisc R	d	All other revenue						
Σ	е	Total. Add lines 11a-11	1d	<u></u> . >	0.			
	12	Total revenue. See ins			1,951,621.	1,880,264.		5,505.

GLORIA DEO ACADEMY INC

Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations mus		. All other organization	ns must complete colur	nn (A)
Check if Schedule O contains a respo	· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·	
Do not include amounts reported on lines 6b, 7b, 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	0.			
2 Grants and other assistance to domestic				
individuals. See Part IV, line 22	0.			
3 Grants and other assistance to foreign				
organizations, foreign governments, and	0			
foreign individuals. See Part IV, lines 15 and 16	0.			
4 Benefits paid to or for members	0.			
5 Compensation of current officers, directors, trustees, and key employees	49,569.	34,698.	14,871.	
6 Compensation not included above to disqualified				
persons (as defined under section 4958(f)(1)) and	0			
persons described in section 4958(c)(3)(B)	0.	810,605.	247 400	
7 Other salaries and wages	1,158,007.	010,005.	347,402.	
8 Pension plan accruals and contributions (include	0.			
section 401(k) and 403(b) employer contributions)	0.			
9 Other employee benefits	92,348.	64,644.	27,704.	
0 Payroll taxes	52,540.	01,011.	27,704.	
1 Fees for services (nonemployees):	0.			
a Management	23.		23.	
b Legal	2,689.		2,689.	
c Accounting	0.			
e Professional fundraising services. See Part IV, line 17	2,947.			2,94
f Investment management fees	0.			
g Other. (If line 11g amount exceeds 10% of line 25, column				
(A) amount, list line 11g expenses on Schedule O.)	720.	720.		
2 Advertising and promotion	5,137.		5,137.	
3 Office expenses	51,847.	16,656.	35,191.	
4 Information technology	44,808.	44,344.	464.	
5 Royalties	0.			
6 Occupancy	176,366.	167,548.	8,818.	
7 Travel	63.		63.	
8 Payments of travel or entertainment expenses				
for any federal, state, or local public officials	0.	1 000	F10	
9 Conferences, conventions, and meetings	1,727.	1,209.	518.	
20 Interest	5,519.		5,519.	
Payments to affiliates	31,012.	31,012.		
2 Depreciation, depletion, and amortization	24,737.	16,326.	8,411.	
3 Insurance	21,131.	10,520.	0,111.	
4 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If				
line 24e amount exceeds 10% of line 25, column				
(A) amount, list line 24e expenses on Schedule O.)				
aSCHOOL ACTIVITIES	146,472.	146,472.		
bSUPPLIES	60,005.	60,005.		
cLICENSES, DUES, SUBSCRIPTION	30,293.	,	30,293.	
dDEVELOPMENT	26,336.	26,336.		
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	1,910,625.	1,420,575.	487,103.	2,94
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and				
fundraising solicitation. Check here ► if following SOP 98-2 (ASC 958-720)	0			
1010WITU 30F 90-2 (A30 938-720)	U			

0.

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following SOP 98-2 (ASC 958-720)

GLORIA DEO ACADEMY INC

art X	Balance Sheet			
	Check if Schedule O contains a response or note to any line in this Pa	art X		[
		(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing	86,377.	1	59,67
2	Savings and temporary cash investments.	553,432.	2	332,58
3	Pledges and grants receivable, net	958,818.	3	387,64
4	Accounts receivable, net.	536,212.	4	735,53
5	Loans and other receivables from 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	0.	5	
6	Loans and other receivables from other disqualified persons (as defined			
	under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)	0.	6	
7	Notes and loans receivable, net	0.	7	
7 8	Inventories for sale or use	0.	8	
9	Prepaid expenses and deferred charges	5,838.	9	2,00
10 a	Land, buildings, and equipment: cost or other			
	basis. Complete Part VI of Schedule D 10a 1,506,485.			
b	Less: accumulated depreciation	164,188.	10c	1,431,89
11	Investments - publicly traded securities.	0.	11	
12	Investments - other securities. See Part IV, line 11	0.	12	
13	Investments - program-related. See Part IV, line 11	0.	13	
14	Intangible assets	0.	14	
15	Other assets. See Part IV, line 11	3,482.	15	
16	Total assets. Add lines 1 through 15 (must equal line 33)	2,308,347.	16	2,949,32
17	Accounts payable and accrued expenses	14,330.	17	69
18	Grants payable	0.	18	
19	Deferred revenue.	1,070,392.	19	1,477,91
20	Tax-exempt bond liabilities.	0.	20	
21	Escrow or custodial account liability. Complete Part IV of Schedule D	0.	21	
22	Loans and other payables to any current or former officer, director,			
	trustee, key employee, creator or founder, substantial contributor, or 35%			
22	controlled entity or family member of any of these persons	0.	22	
23	Secured mortgages and notes payable to unrelated third parties	0.	23	366,05
24	Unsecured notes and loans payable to unrelated third parties	0.	24	
25	Other liabilities (including federal income tax, payables to related third			
	parties, and other liabilities not included on lines 17-24). Complete Part X			
	of Schedule D	151,700.	25	
26	Total liabilities. Add lines 17 through 25	1,236,422.	26	1,844,66
	Organizations that follow FASB ASC 958, check here ► X and complete lines 27, 28, 32, and 33.			
27	Net assets without donor restrictions	116,376.	27	596,14
28	Net assets with donor restrictions.	955,549.	28	508,51
27 28 29 30 31 32	Organizations that do not follow FASB ASC 958, check here ► and complete lines 29 through 33.			
29	Capital stock or trust principal, or current funds		29	
30	Paid-in or capital surplus, or land, building, or equipment fund		30	
31	Retained earnings, endowment, accumulated income, or other funds		31	
32	Total net assets or fund balances	1,071,925.	32	1,104,66
33	Total liabilities and net assets/fund balances	2,308,347.	33	2,949,32

Form **990** (2020)

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GLORTA	DEO	ACADEMY	TNC
OTOUTH		ACADBINI	TINC

Form 99	90 (2020)			Pa	ge 12		
Part	XI Reconciliation of Net Assets						
	Check if Schedule O contains a response or note to any line in this Part XI	<u></u>					
1	Total revenue (must equal Part VIII, column (A), line 12)	1		51,6			
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,910,625.				
3	Revenue less expenses. Subtract line 2 from line 1	3		40,9			
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,071,925.				
5	5 Net unrealized gains (losses) on investments						
6	6 Donated services and use of facilities 6						
7	7 Investment expenses						
8	Prior period adjustments	8		-8,2			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line						
	32, column (B))	10	1,1	04,6	565.		
Part							
	Check if Schedule O contains a response or note to any line in this Part XII						
				Yes	No		
1	Accounting method used to prepare the Form 990: Cash X Accrual Other						
	If the organization changed its method of accounting from a prior year or checked "Other," explain in						
	Schedule O.						
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?.		2a		X		
	If "Yes," check a box below to indicate whether the financial statements for the year were cor	npiled or					
	reviewed on a separate basis, consolidated basis, or both:						
	Separate basis Consolidated basis Both consolidated and separate basis						
b	Were the organization's financial statements audited by an independent accountant?		2b		X		
	If "Yes," check a box below to indicate whether the financial statements for the year were audi	ted on a					
	separate basis, consolidated basis, or both:						
	Separate basis Consolidated basis Both consolidated and separate basis						
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over	•					
	the audit, review, or compilation of its financial statements and selection of an independent accounta		2c				
	If the organization changed either its oversight process or selection process during the tax year, e	xplain on					
	Schedule O.						
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set fo	rth in the	0		х		
	Single Audit Act and OMB Circular A-133?		3a				
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not und		2				
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such a		3b	000	(2020)		
			Form	330	(∠∪∠∪)		

SCHE	EDU	LE	Α
(Form	990	or	990-EZ)

Public Charity Status and Public Support

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

OMB No. 1545-0047

	nal Revenue Service		Go to www.irs.go	v/Form990 for instruction	ons and t	he latest i	nformation.	Inspection
Nam	e of the organization	GLORIA DE	O ACADEMY IN	IC			Employer identifi	ication number
FKA	A GLENDALE CHI	RISTIAN CI	HURCH SCHOOLS	S, INC.			26-25344	27
Ра	rt I Reason for	r Public Cha	rity Status. (All	organizations must	complet	te this p	art.) See instructions	S.
The		•		t is: (For lines 1 throug		•	,	
1				tion of churches desc				
2				. (Attach Schedule E	-			
3	· ·	•		rganization described		. ,		
4		-	-	conjunction with a hose	spital de	scribed in	n section 170(b)(1)(A)	(iii). Enter the
_	hospital's nam							
5		-		a college or universit	y owned	d or ope	erated by a governme	ental unit described in
~	`		Complete Part II.)					
6			•	rnmental unit describe				on the general public
7			-	-	ipport in	om a go		om the general public
8			(1)(A)(vi). (Compl	o)(1)(A)(vi). (Complete	Dort II.)			
9				ed in section 170(b)(1			Lin conjunction with a	land-grant college
5			-	griculture (see instruct		-	-	
	university:		grant conogo or ag		.iono). E		name, etg, and etate e	The bellege of
10 11	receipts from support from acquired by th	activities rela gross investm ne organizatio	ted to its exempt f nent income and u n after June 30, 1	ore than 331/3% of its functions, subject to c nrelated business tax 975. See section 509 usively to test for publi	ertain ex able inco (a)(2). (0	ceptions ome (les: Complete	s; and (2) no more thar s section 511 tax) from e Part III.)	n 331/3 % of its
12	An organizatio	on organized a	and operated exclu	usively for the benefit	of, to pe	erform th	e functions of, or to o	carry out the purposes
	of one or mor	e publicly su	pported organizati	ions described in sec	tion 509	(a)(1) or	section 509(a)(2). S	Gee section 509(a)(3).
	Check the box	in lines 12a t	hrough 12d that d	escribes the type of s	upporting	g organiz	zation and complete li	nes 12e, 12f, and 12g.
а	🔄 Type I. A su	pporting orga	anization operated	l, supervised, or contr	olled by	its supp	orted organization(s),	typically by giving
	the supporte	ed organizatio	on(s) the power to	regularly appoint or e	lect a m	ajority of	the directors or truste	es of the
	supporting c	organization.	You must complet	te Part IV, Sections A	and B.			
b				ed or controlled in co				
				organization vested in	the sam	e persor	is that control or man	age the supported
	L L	()	•	, Sections A and C.				
С				ng organization opera				lly integrated with,
		•	. , .	ns). You must comple				
d		-		porting organization o	-			
				nization generally mus cmplete Part IV, Sect	-		-	a an alleniiveness
е				a written determination				
C		-		tionally integrated sup				п, туре п
f		-				ngamza		
g			•	orted organization(s).				
	(i) Name of supported of	-	(ii) EIN	(iii) Type of organization	(iv) Is the	organization	(v) Amount of monetary	(vi) Amount of
				(described on lines 1-10 above (see instructions))		ur governing ment?	support (see instructions)	other support (see instructions)
					Yes	No	instructionsy	mondonoy
(A)								
(7)								
(B)								
(C)								
(D)								
(E)								
Tota	al							
		ct Notice see th	e Instructions for Form	990 or 990-EZ			Schedule A	(Form 990 or 990-EZ) 2020

Page 2

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

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f).						
6	Public support. Subtract line 5 from line 4						
	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
7 8	Amounts from line 4. Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc. (s	ee instructions) .				12	
13	First 5 years. If the Form 990 is for organization, check this box and stop here.			d, third, fourth,	or fifth tax ye	ar as a section	501(c)(3) ►
Sec	tion C. Computation of Public Sup	oort Percenta	ige			<u>, , , , , , , , , , , , , , , , , , , </u>	
14	Public support percentage for 2020 (lin		•		,		%
15	Public support percentage from 2019	•	•				%
16a	331/3% support test - 2020. If the org						
	box and stop here. The organization qu						
b	331/3% support test - 2019. If the org						
	this box and stop here. The organization			-			
17a	10%-facts-and-circumstances test - 2						
	10% or more, and if the organization					-	
	Part VI how the organization meets to organization.			-	-		upported
h	10%-facts-and-circumstances test - 2						and line
5	15 is 10% or more, and if the organiz		0				
	in Part VI how the organization meets					-	-
	organization			-			
18	Private foundation. If the organizatio						and see
	instructions						

Schedule A (Form 990 or 990-EZ) 2020

Schedule A (Form 990 or 990-EZ) 2020

-

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	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513 .						
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
~	Add lines 7a and 7b.						
8	Public support. (Subtract line 7c from						
•	line 6.)						
Sec	tion B. Total Support						
	ndar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9	Amounts from line 6.						
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar						
	sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in 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 assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First 5 years. If the Form 990 is for	the organization	on's first, secor	d, third, fourth,	or fifth tax ye	ar as a section	501(c)(3)
	organization, check this box and stop here .	<u></u>					<u></u> ▶
Sec	tion C. Computation of Public Supp	ort Percenta	ge				
15	Public support percentage for 2020 (line 8,	column (f), divid	ed by line 13, colu	mn (f))		15	%
16	Public support percentage from 2019 Schee	dule A, Part III, lin	ne 15	<u></u>		16	%
Sec	tion D. Computation of Investment	Income Perc	entage				
17	Investment income percentage for 2020 (lin	e 10c, column (f	f), divided by line	13, column (f))		17	%
18	Investment income percentage from 2019 S	chedule A, Part	III, line 17			18	%
19 a	331/3% support tests - 2020. If the org					ore than 331/3%	, and line
	17 is not more than 331/3%, check this	box and stop	here. The orga	nization qualifies	as a publicly su	upported organiza	ation . 🕨 🗌
b	331/3% support tests - 2019. If the orga	nization did not	check a box or	line 14 or line	19a, and line 16	is more than 33	1/3 %, and
	line 18 is not more than 331/3%, check	this box and st	op here. The or	ganization qualifi	es as a publicly	supported organi	zation 🕨 🗌
20	Private foundation. If the organization d						
JSA 0E122						Schedule A (Form 9	
JE 122	^{1 1.000} 5939RP K929 5/16/2022 12	2:14:41 PM	V 20-7.21	0	093110		

Page 3

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

Yes No

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

- 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 or 990-EZ).*
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- **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 in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in Part VI.*
- **c** Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in Part VI.*
- **10 a** 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.)

JSA 0E1229 1.010 10b Schedule A (Form 990 or 990-EZ) 2020

Part	V Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described in line 11a above?	11b		
С	A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Secti	on 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.

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.

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously			
	provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	g 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 in 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? <i>If "Yes," describe in Part VI the role the organization's</i>			
	supported organizations played in this regard.	3		

Section E. Type III Functionally Integrated Supporting Organizations

1	Che	ck the box next to the method that the organization used to satisfy the Integral Part Test during the year (see ins	structio	ons).	
а		The organization satisfied the Activities Test. Complete line 2 below.			
b		The organization is the parent of each of its supported organizations. Complete line 3 below.			
С		The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (se	e instr	uction	s).
•	•			Yes	N
2	Activ	ities 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 in 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.*

s regard. 3b | Schedule A (Form 990 or 990-EZ) 2020

2a

2b

3a

26-2534427

1

2

Page 6

Schedule A (Form 990 or 990-E2) 2020	ninotion		Page
Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga			in in Dant VA. Car
1 Check here if the organization satisfied the Integral Part Test as a qualifyin instructions. All other Type III non-functionally integrated supporting organi			
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):	1e		
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		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, column A)	1		
2 Enter 0.85 of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		

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

Schedule A (Form 990 or 990-EZ) 2020

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Schedule A (Form 990 or 990-EZ) 2020

Page 7

Part	V Type III Non-Functionally Integrated 509(a)(3)	Supporting Organizat	tions (continued)		
Sect	ion D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish ex		1		
2	Amounts paid to perform activity that directly furthers exer	npt purposes of support	ed		
	organizations, in excess of income from activity			2	
3				3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - p	rovide 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 resp	onsive		
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2020 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2020	าร	(iii) Distributable Amount for 2020
_1	Distributable amount for 2020 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2020				
	(reasonable cause required - <i>explain in Part VI)</i> . See				
	instructions.				
3	Excess distributions carryover, if any, to 2020				
a	From 2015				
b					
	From 2017				
d	From 2018				
e	From 2019				
f	Total of lines 3a through 3e				
<u>g</u>	Applied to underdistributions of prior years				
<u>h</u>	Applied to 2020 distributable amount				
	Carryover from 2015 not applied (see instructions)				
	Remainder. Subtract lines 3g, 3h, and 3i from line 3f. Distributions for 2020 from				
4					
a	Section D, line 7: \$ Applied to underdistributions of prior years				
 b	Applied to 2020 distributable amount				
C	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2020, 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 2020. Subtract lines 3h				
-	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2021. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
а	Excess from 2016				
b	Excess from 2017				
С	Excess from 2018				
d	Excess from 2019				
е	Excess from 2020				
			0.1.		A (Form 990 or 990-E7) 2020

Schedule A (Form 990 or 990-EZ) 2020

Schedule A (Form 990 or 990-EZ) 2020

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

Schedule B	Schedule of Contributors		OMB No. 1545-0047
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	 Attach to Form 990, Form 990-EZ, or Form 990-PF. Go to www.irs.gov/Form990 for the latest information. 		2020
Name of the organization		Employe	r identification number
GLORIA DEO ACAD	EMY INC		
FKA GLENDALE CH	RISTIAN CHURCH SCHOOLS, INC.	26-2	534427
Organization type (che	eck one):		
Filers of:	Section:		
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization		
	4947(a)(1) nonexempt charitable trust not treated as a private	foundation	
	527 political organization		

501(c)(3) exempt private foundation

501(c)(3) taxable private foundation

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See

Check if your organization is covered by the General Rule or a Special Rule.

General Rule

instructions.

Form 990-PF

Solution 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.

4947(a)(1) nonexempt charitable trust treated as a private foundation

Special Rules

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 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

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

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

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-	B (Form 990, 990-EZ, or 990-PF) (2020) organization GLORIA DEO ACADEMY INC		Page 2 Employer identification number 26-2534427
Part I	FKA GLENDALE CHRISTIAN CHURCH S Contributors (see instructions). Use duplicate copi	•	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	N/A	\$10,000.	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.)
(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.)

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

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	(Form 990, 990-EZ, or 990-PF) (2020)		Pag
ame of or	ganization GLORIA DEO ACADEMY INC		ployer identification number 26-2534427
	FKA GLENDALE CHRISTIAN CHURCH SCHOOLS		
Part II	Noncash Property (see instructions). Use duplicate copies of	of Part II if additional spac	e is needed.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimat (See instructions	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimations) (See instructions)	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimations (See instructions	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimat (See instructions	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimat (See instructions	te) (d) .) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimations) (See instructions)	
		 \$	
		Ψ	

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

JSA

Schedule B	(Form 990, 990-EZ, or 990-PF) (2020)			Page 4	
Name of o	rganization GLORIA DEO ACADEMY INC			Employer identification number	
(FKA GLENDALE CHRISTIAN			26-2534427	
Part III	Exclusively religious, charitable, etc. (10) that total more than \$1,000 for the following line entry. For organizati contributions of \$1,000 or less for the Use duplicate copies of Part III if additi	the year from any ons completing Par e year. (Enter this in	one contributor. C t III, enter the total of formation once. Se	Complete columns (a) through (e) and of exclusively religious, charitable, etc.,	
(a) No.				(d) Decomination of how sitt is hold	
from Part I	(b) Purpose of gift	(c) Use	or gift	(d) Description of how gift is held	
	Transferee's name, address, ar	(e) Transi nd ZIP + 4	-	nship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held	
	Transferee's name, address, ar	(e) Transi nd ZIP + 4	-	nship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held	
		(e) Transi			
	Transferee's name, address, ar	nd ZIP + 4	Relatior	ship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held	
	(e) Transfer of gift				
	Transferee's name, address, ar	nd ZIP + 4	Relatior	nship of transferor to transferee	
JSA				Schedule B (Form 990, 990-EZ, or 990-PF) (2020)	

SCHEDULE D (Form 990)	
Department of the Treasury	

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.

2 **Open to Public** Inspection

OMB No. 1545-0047

Interr	al Revenue Service	Go to www.irs.gov	//Form990 for instructions and the latest information	rmation.	Inspection
Name	e of the organization	GLORIA DEO ACADEMY INC	1	Employer identifi	cation number
FKA	GLENDALE CH	RISTIAN CHURCH SCHOOLS	, INC.	26-2534	427
Ра	rt I Organiza	ations Maintaining Donor Adv	rised Funds or Other Similar Funds o	or Accounts.	
	Complete	e if the organization answered	I "Yes" on Form 990, Part IV, line 6.		
			(a) Donor advised funds	(b) Funds ar	d other accounts
1	Total number at e	end of year			
2		of contributions to (during year)			
3		of grants from (during year)			
4	Aggregate value	at end of year			
5	Did the organizat	tion inform all donors and dono	r advisors in writing that the assets held	d in donor advise	d b
	funds are the orga	anization's property, subject to th	e organization's exclusive legal control?		Yes No
6	Did the organizat	tion inform all grantees, donors,	and donor advisors in writing that grant	funds can be use	d
	only for charitable	e purposes and not for the bene	efit of the donor or donor advisor, or for	any other purpos	e
	conferring imperr	nissible private benefit?			. 🤄 Yes 🔄 No
Ра		ation Easements.			
			I "Yes" on Form 990, Part IV, line 7.		
1		•	e organization (check all that apply).		
		on of land for public use (for example			mportant land area
		of natural habitat	Preservation	n of a certified his	oric structure
		on of open space			
2			eld a qualified conservation contribution i		
		last day of the tax year.			e End of the Tax Year
а				2a	
b			s	2b	
C			historic structure included in (a)	2c	
d			c) acquired after 7/25/06, and not on a		
_		listed in the National Register		2d	
3			ansferred, released, extinguished, or tern	minated by the or	ganization during the
	tax year ►		relation opportunities logated		
4			ervation easement is located	ation hondling of	
5	-		garding the periodic monitoring, inspec	-	
6			sements it holds?		Yes No
6		i nours devoted to monitoring, insp	becting, frandling of violations, and enforcing	y conservation ease	anenis during the year
7	Amount of expense		ting, handling of violations, and enforcing	conservation ease	ments during the year
'	►\$	ses incurred in monitoring, inspec	sting, narioling of violations, and enforcing	conservation ease	ments during the year
8		rvation easement reported on line	2(d) above satisfy the requirements of sec	tion 170(h)(4)(B)(i	
•					Yes 🗆 No
9	In Part XIII. descr	ribe how the organization reports	conservation easements in its revenue ar	nd expense statem	
-		0 1	of the footnote to the organization's finan		
		counting for conservation easeme			
Pa			s of Art, Historical Treasures, or Othe	er Similar Asset	s.
	Complet	e if the organization answered	I "Yes" on Form 990, Part IV, line 8.		
1a	If the organizatio	n elected, as permitted under F	ASB ASC 958, not to report in its reven	ue statement and	balance sheet works
	of art, historical	treasures, or other similar asse	ets held for public exhibition, education to its financial statements that describes	, or research in	furtherance of public
h	•		ASB ASC 958, to report in its revenue		lance sheet worke a
b			eld for public exhibition, education, or re		
		ving amounts relating to these ite			
		. .	1		\$
					\$
2			rt, historical treasures, or other similar		cial gain, provide the
	following amount	s required to be reported under F	ASB ASC 958 relating to these items:		
а			· · · · · · · · · · · · · · · · · · ·	🕨	\$
b		n Form 990. Part X		🕨	\$

Schedule D (Form 990) 2020

GLORIA DEO ACADEMY INC

Sche	dule D (Form 990) 2020											Pa	age 2
Ра	rt III Organizations Maintaini	ng Colle	ections of	Art, Histo	rical Tre	asure	s, or	Other	Similar A	Assets (c	continue	d)	
3	Using the organization's acquisition	on, acces	sion, and	other recor	ds, chec	k any o	of the	follow	ing that n	nake sigr	nificant u	se of	f its
	collection items (check all that app	ly):											
а	Public exhibition			d 🗌	Loan	or excha	ange	prograi	m				
b	Scholarly research			e	Other								
С	Preservation for future gene	rations			_								
4	Provide a description of the organ	nization's	collections	s and expla	ain how t	they fui	rther	the org	ganization	s exempt	t purpos	e in l	Part
	XIII.												
5	During the year, did the organization	on solicit	or receive	donations c	of art, hist	orical tr	easu	res, or o	other simil	ar			
	assets to be sold to raise funds rath	ner than t	o be maint	ained as pa	art of the	organiza	ation'	s colled	ction?	[Yes		No
Ра	rt IV Escrow and Custodial A			· · ·									
	Complete if the organiza			es" on For	m 990, F	Part IV,	line	9, or r	eported a	n amour	nt on Fo	rm	
	990, Part X, line 21.												
1a	Is the organization an agent, trus	tee, cust	odian or c	other intern	nediary fo	or cont	ributi	ons or	other ass	ets not			
	included on Form 990, Part X?									[Yes		No
b	If "Yes," explain the arrangement i												
				•	U					Amount			
с	Beginning balance						1c						
d	Additions during the year												
e	Distributions during the year						1e						
f	Ending balance						1f						
2a	Did the organization include an am							stodial	account lia	ability?	Yes		No
	If "Yes," explain the arrangement i												
	rt V Endowment Funds.						onpi	onaca				•	L
Ιü	Complete if the organiza	ation ans	wered "Ye	es" on For	m 990. F	Part IV.	line	10.					
			rrent year	(b) Pric		(c) Tw			(d) Three y	ears back	(e) Four	vears b	back
4		(4) 04		()	, you		,		()	ouro suon	(0) ! 00!	, ea. e 2	
1a	Beginning of year balance												
b													
С	Net investment earnings, gains,												
	and losses												
d	Grants or scholarships												
е	Other expenditures for facilities												
	and programs												
f	Administrative expenses												
g	End of year balance												
2	Provide the estimated percentage		irrent year	end balanc	e (line 1g,	, columr	n (a))	held as					
a	Board designated or quasi-endown			_%									
b	Permanent endowment	%											
С	Term endowment	%											
	The percentages on lines 2a, 2b, a												
3a	Are there endowment funds not in	the poss	ession of t	he organiza	ation that	are hel	d and	d admir	histered for	the			
	organization by:											/es	No
	(i) Unrelated organizations										3a(i)		
	(ii) Related organizations										3a(ii)		
b	If "Yes" on line 3a(ii), are the relate	-		-			?				3b		
4	Describe in Part XIII the intended u												
Pa	rt VI Land, Buildings, and Equ Complete if the organized	ation and	swarad "V	es" on Fo	rm 990	Part IV	lino	112 9	See Form	000 Pa	rt X line	<u>1</u> 0 د	
	Description of property			r other basis	(b) Cost				cumulated) Book val		
				stment)		other)			eciation	,u	,	-	
1a	Land											_	
b	Buildings					913,20			7,610.			5,5	
С	Leasehold improvements					435,94			13,066.			2,8	
d	Equipment				1	152,98			49,563.		10	3,4	22.
	Other					4,35			4,350.				
Tota	I. Add lines 1a through 1e. (Column	ı (d) mus	t equal For	m 990, Part	X, colum	n (B). lir	ne 10	c.)			1,43	1,8	96.

Schedule D (Form 990) 2020

JSA 0E1269 1.000

Part VII	Investments - Other Securities. Complete if the organization answered	d "Yes" on Form 990), Part IV, line 11b. See Form 990, Part X, line 12.
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financi	al derivatives		
• •	held equity interests		
.,			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
	n (b) must equal Form 990, Part X, col. (B) line 12.) 🔒 🕨		
Part VIII			
	Complete if the organization answered	d "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 end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
	n (b) must equal Form 990, Part X, col. (B) line 13.)		
Part IX	Other Assets.		
	· · ·), Part IV, line 11d. See Form 990, Part X, line 15.
(4)	(a) De	escription	(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
<u>(7)</u>			
<u>(8)</u>			
(9) Total (Coll	umn (b) must equal Form 990, Part X, col. (B)	line 15)	
Part X	Other Liabilities.	inte 10.)	· · · · · · · · · · · · · · · · · · ·
T art A		d "Yes" on Form 990), Part IV, line 11e or 11f. See Form 990, Part X,
1.	(a) Descrip	otion of liability	(b) Book value
	ral income taxes		
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			

(9)

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

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

GLORIA DEO ACADEMY	DEMY INC
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Schedu	le D (Form 990) 2020	Page 4
Part	XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	n.
1	Total revenue, gains, and other support per audited financial statements	1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	
а	Net unrealized gains (losses) on investments	
b	Donated services and use of facilities	
c	Recoveries of prior year grants	
d	Other (Describe in Part XIII.)	
e	Add lines 2a through 2d	2e
3	Subtract line 2e from line 1	3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a	
_	Other (Describe in Part XIII.)	
b		4c
с 5	Add lines 4a and 4b	
Part		
1	Total expenses and losses per audited financial statements	1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	
a	Donated services and use of facilities	
b	Prior year adjustments	
č	Other losses.	
d	Other (Describe in Part XIII.)	
e	Add lines 2a through 2d	2e
3	Subtract line 2e from line 1	3
-		
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	
a		
b	Other (Describe in Part XIII.)	40
° c	Add lines 4a and 4b	
5 Dort	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5
Part	XIII Supplemental Information.	

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

Schedule D (Form 990) 2020

Part XIII Supplemental Information (continued)

Schedule D (Form 990) 2020

SCHEDULE E (Form 990 or 990-EZ) Complete if the organization answered "Yes" on Form Part IV, line 13, or Form 990-EZ, Part VI, line 48.			OMB No. 1545-0047		
Department of the Treasury Internal Revenue Service	 Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information. 		Open to Publi Inspection		С
Name of the organization	GLORIA DEO ACADEMY INC	Employer identificati	on num	ber	
FKA GLENDALE CHF	ISTIAN CHURCH SCHOOLS, INC.	26-253442	7		
Part I					
				YES	NO
0	ation have a racially nondiscriminatory policy toward students by statemer erning instrument, or in a resolution of its governing body?		1	x	
2 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions,					

programs, and scholarships?	2
Has the organization publicized its racially nondiscriminatory policy on its primarily publicly accessible Internet	
homepage at all times during its taxable year in a manner reasonably expected to be noticed by visitors to the	
homepage, or through newspaper or broadcast media during the period of solicitation for students, or during the	
registration period if it has no solicitation program, in a way that makes the policy known to all parts of the	
general community it serves? If "Yes," please describe. If "No," please explain. If you need more space, use Part II	3
	homepage at all times during its taxable year in a manner reasonably expected to be noticed by visitors to the homepage, or through newspaper or broadcast media during the period of solicitation for students, or during the

4	Does the organization maintain the following?			
а	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	Х	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	Х	
C	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4c	Х	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	Х	
5 a	Does the organization discriminate by race in any way with respect to: Students' rights or privileges?	52		X
	Admissions policies?	5b		x
с	Employment of faculty or administrative staff?	5c		x
d	Scholarships or other financial assistance?	5d		x
е	Educational policies?	5e		x

g	Athletic programs?	5g		Х
h	Other extracurricular activities?	5h		х
	If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.			
6a	Does the organization receive any financial aid or assistance from a governmental agency?	6a		x
	Has the organization's right to such aid ever been revoked or suspended?			Х
	If you answered "Yes" on either line 6a or line 6b, explain on Part II.			
7	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through			
	4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Part II	7	Х	
For F	Paperwork Reduction Act Notice, see the Instructions for Form 990 or Form 990-EZ. Schedule E (Forr	n 990 or	990-E2	Z) 2020

f Use of facilities?.....

SEE SUPPLEMENTAL PAGE

Х

Х

Х

5f

Page 2

SCHEDULE E, PART I, LINE 3

PUBLICIZED NONDISCRIMINATORY POLICY:

THE ORGANIZATION'S NONDISCRIMINATORY POLICY IS INCLUDED IN THE SCHOOL'S

HANDBOOK, WHICH IS AVAILABLE ON THE SCHOOL'S WEBSITE.

0093110

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

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 990-EZ.

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.



Internal Revenue Service Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.in	s.gov/form990. Inspection
Name of the organization GLORIA DEO ACADEMY INC	Employer identification number
FKA GLENDALE CHRISTIAN CHURCH SCHOOLS, INC.	26-2534427

FORM 990, PART III, LINE 1

ORGANIZATION MISSION:

THE GOAL OF GDA IS TO DEVELOP ETHICAL AND WISE INDIVIDUALS WHO WILL

IMPACT THEIR COMMUNITY FOR THE GLORY OF GOD THROUGH SERVICE, LEADERSHIP,

AND CHARACTER.

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

990 REVIEW PROCESS:

THE FORM 990 IS PREPARED BY AN INDEPENDENT ACCOUNTING FIRM BASED ON THE FINANCIAL STATEMENTS AND INFORMATION PROVIDED BY THE ORGANIZATION. MANAGEMENT REVIEWED THE COMPLETED FORM 990 PRIOR TO FILING AND WILL PRESENT THE FORM 990 TO THE BOARD AT THE NEXT BOARD MEETING.

FORM 990, PART VI, SECTION B, LINE 12C CONFLICT OF INTEREST MONITORING: EVERY YEAR THE BOARD MEMBERS REVIEW AND SIGN A CONFLICT OF INTEREST

POLICY. IF THERE IS A CONFLICT OF INTEREST, THE BOARD MEMBER EXCUSES THEMSELVES FROM THE DECISION MAKING PROCESS.

FORM 990, PART VI, SECTION B, LINES 15A & 15B PROCESS FOR DETERMINING COMPENSATION: EVERY YEAR THE BOARD APPROVES SALARIES FOR ALL EMPLOYEES, INCLUDING DIRECTORS AND KEY EMPLOYEES, FOR THE COMING FISCAL YEAR.

Name of the organization GLORIA DEO ACADEMY INC FKA GLENDALE CHRISTIAN CHURCH SCHOOLS, INC. Page 2

FORM 990, PART VI, SECTION C, LINE 19 DISCLOSURE OF DOCUMENTS: THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE UPON REQUEST. FINANCIAL STATEMENTS ARE PRESENTED TO THE PUBLIC ANNUALY IN JANUARY AT OUR STATE OF THE SCHOOL SPEECH.

Form 990-T Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))	OMB No. 1545-0047				
For calendar year 2020 or other tax year beginning $07/01$, 2020, and ending $06/30$, 20 2	<u>1</u> 20 20				
Department of the Treasury Go to www.irs.gov/Form990T for instructions and the latest information.	Open to Public Inspection for				
Internal Revenue Service Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).	Open to Public Inspection for 501(c)(3) Organizations Only Employer identification number				
	26-2534427				
	Group exemption number				
X SOLUCIVE 3) OF 3146 S GOLDEN AVE	(see instructions)				
Type Type 408(e) 220(e) Type City or town, state or province, country, and ZIP or foreign postal code					
408A 530(a) SPRINGFIELD, MO 65807	Check box if				
529(a) 529A C Book value of all assets at end of year. ► 2,949,327.	an amended return.				
G Check organization type ► X 501(c) corporation 501(c) trust 401(a) trust Other trust	Applicable reinsurance entity				
H Check if filing only to F Claim credit from Form 8941 Claim a refund shown on Form 243					
I Check if a 501(c)(3) organization filing a consolidated return with a 501(c)(2) titleholding corporation					
J Enter the number of attached Schedules A (Form 990-T)					
K During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group?	Yes X No				
If "Yes," enter the name and identifying number of the parent corporation					
L The books are in care of ► CAITLIN NELSON Telephone number ► 417-3	379-5430				
3146 S. GOLDEN AVE SPRINGFIELD MO 65807 Part I Total Unrelated Business Taxable Income					
1 Total of unrelated business taxable income computed from all unrelated trades or businesses (see					
instructions)	1				
2 Reserved	2				
3 Add lines 1 and 2	3				
4 Charitable contributions (see instructions for limitation rules)	4				
5 Total unrelated business taxable income before net operating losses. Subtract line 4 from line 3	5 0.				
6 Deduction for net operating loss. See instructions	6				
7 Total of unrelated business taxable income before specific deduction and section 199A deduction.					
Subtract line 6 from line 5	7				
8 Specific deduction (generally \$1,000, but see instructions for exceptions)	8 1,000.				
9 Trusts. Section 199A deduction. See instructions	9				
10 Total deductions. Add lines 8 and 9	10 1,000.				
11 Unrelated business taxable income. Subtract line 10 from line 7. If line 10 is greater than line 7,					
enter zero	11 0.				
Part II Tax Computation					
1 Organizations taxable as corporations. Multiply Part I, line 11 by 21% (0.21)	1				
2 Trusts taxable at trust rates. See instructions for tax computation. Income tax on the amount on					
Part I, line 11 from:	2				
3 Proxy tax. See instructions	3				
4 Other tax amounts. See instructions	4				
5 Alternative minimum tax (trusts only)	5				
6 Tax on noncompliant facility income. See instructions	6				
7 Total. Add lines 3 through 6 to line 1 or 2, whichever applies	Form 990-T (2020)				

(Rev. January 2020)

Department of the Treasury Internal Revenue Service

Application for Automatic Extension of Time To File an Exempt Organization Return

File a separate application for each return.
 Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-0047

Electronic filing *(e-file).* You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

	Name of exempt organization or other filer, see instructions.			Taxpayer identification number (TIN)		
Type or	ype or					
print	GLORIA DEO ACADEMY INC 26-2			26-2534427		
File by the	Number, street, and room or suite no. If a P.O. box, see instructions.					
due date for filing your	3146 S. GOLDEN AVE					
return. See	See City, town or post office, state, and ZIP code. For a foreign address, see instructions.					
instructions.	SPRINGFIELD, MO 65807					
Enter the Re	eturn Code for the return that this application	is for (file	a separate application for	r each return)	07	
Application		Return	Application		Return	
Is For		Code	Is For	Code		
Form 990 o	r Form 990-EZ	01	Form 990-T (corporation	on)	07	
Form 990-B		02	Form 1041-A		08	
Form 4720	(individual)	03	Form 4720 (other than	individual)	09	
Form 990-Pl	F	04	Form 5227	·	10	
Form 990-T	(sec. 401(a) or 408(a) trust)	05	Form 6069		11	
Form 990-T	(trust other than above)	06	Form 8870		12	
	CAITLIN NELSON					
 The book 	s are in the care of ▶ 3146 S. GOLDEN	AVE SPR	INGFIELD MO 65807	,		
 If the organization If this is for the whole 	e No. \blacktriangleright <u>417</u> <u>379-5430</u> anization does not have an office or place of or a Group Return, enter the organization's fo e group, check this box \blacktriangleright . I e names and TINs of all members the extens	business ir ur digit Gro f it is for pa	oup Exemption Number (G	GEN) If t	his is	
1 I request an automatic 6-month extension of time until 05/16, 20 22, to file the exempt organization return						
for the	organization named above. The extension is	for the org	ganization's return for:			
 calendar year 20 or X tax year beginning 07/01, 20 20, and ending 06/30, 20 21. 2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return						
	Change in accounting period					
	application is for Forms 990-BL, 990-PF, 9	90-T, 4720), or 6069, enter the te	entative tax, less any		
	undable credits. See instructions.			3a \$	0.	
b If this	application is for Forms 990-PF, 990-T,	4720, o	r 6069, enter any ref	fundable credits and		
	ted tax payments made. Include any prior yea			3b \$	0.	
	e due. Subtract line 3b from line 3a. Include		ent with this form, if req	uired, by using EFTPS		
(Electr	onic Federal Tax Payment System). See instru	ctions.		3c \$	0.	
Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment						
instructions.						
For Privacy A	For Privacy Act and Paperwork Reduction Act Notice, see instructions. Form 8868 (Rev. 1-2020)					

JSA 0F8054 1.000 5939RP K929 11/4/2021 12:34:06 PM V 20-7.5F

Form §	7-0PG	(2020)

Par	t III Tax and Payments					
1 a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) 1a					
b	Other credits (see instructions)					
С	General business credit. Attach Form 3800 (see instructions)					
d	Credit for prior year minimum tax (attach Form 8801 or 8827)					
е	Total credits. Add lines 1a through 1d					
2	Subtract line 1e from Part II, line 7					
3	Other taxes. Check if from: Form 4255 Form 8611 Form 8697 Form 8866					
	Other (attach statement)					
4	Total tax. Add lines 2 and 3 (see instructions). Check if includes tax previously deferred under					
	section 1294. Enter tax amount here		0.			
5	2020 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 4					
6 a	Payments: A 2019 overpayment credited to 2020					
b	2020 estimated tax payments. Check if section 643(g) election applies ► 6b					
С	Tax deposited with Form 8868					
d	Foreign organizations: Tax paid or withheld at source (see instructions) 6d					
е	Backup withholding (see instructions)					
f	Credit for small employer health insurance premiums (attach Form 8941) 6f					
g	Other credits, adjustments, and payments: Form 2439					
	Form 4136 Other Total ► 6g					
7	Total payments. Add lines 6a through 6g					
8	Estimated tax penalty (see instructions). Check if Form 2220 is attached					
9	Tax due. If line 7 is smaller than the total of lines 4, 5, and 8, enter amount owed					
10	Overpayment. If line 7 is larger than the total of lines 4, 5, and 8, enter amount overpaid					
11	Enter the amount of line 10 you want: Credited to 2021 estimated tax Refunded 11					
	t IV Statements Regarding Certain Activities and Other Information (see instructions)	No a	N -			
1	At any time during the 2020 calendar year, did the organization have an interest in or a signature or other authority	Yes	No			
	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file					
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country		х			
•			~			
2	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a		х			
	foreign trust?		~			
~	If "Yes," see instructions for other forms the organization may have to file.					
3	Enter the amount of tax-exempt interest received or accrued during the tax year		Х			
4 a	Did the organization change its method of accounting? (see instructions)		- 21			
b	If 4a is "Yes," has the organization described the change on Form 990, 990-EZ, 990-PF, or Form 1128? If "No,"					
	explain in Part V					

Supplemental Information Part V

Provide the explanation required by Part IV, line 4b. Also, provide any other additional information. See instructions.

SUPPLEMENTAL INFORMATION ATTACHED

Sign Here		nder penalties of perjury, I declare that I have examined ue, correct, and complete. Declaration of preparer (other than ta					nowledge and belief, it is
	J	TOY DAVIS		HEAI	O OF SCHOOL		discuss this return parer shown below
	S	ignature of officer	Date	Title		(see instructions)	?X Yes No
		Print/Type preparer's name	Preparer's signature		Date	Check if	PTIN
Paid		KAYLA M BELL				self-employed	P01682975
Prepar						Firm's EIN ► 44-0160260	
Use O	niy	Firm's address > 910 E ST LOUIS #200/P	O BOX 1190, SPR	INGFIELD,	MO 65806-2523	Phone no. 417	-865-8701
JSA							Form 990-T (2020)

0X2741 1.000

Form **990-T** (2020)

SUPPLEMENTAL INFORMATION DETA	ΔL
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PART	NUMBER:	1
LINE	NUMBER:	1

EXPLANATION:

THE TAXPAYER DOES NOT HAVE ANY ACTIVITIES GENERATING UNRELATED BUSINESS TAXABLE INCOME (AS DEFINED IN IRC §512(A)) IN THE CURRENT YEAR. FORM 990-T IS BEING FILED TO COMMENCE RUNNING ON THE PERIOD UNDER THE STATUTES OF LIMITATION FOR REPORTING UNRELATED BUSINESS INCOME.