990

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

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) on not enter social security numbers on this form as it may be made public.

2023

Open to Public Inspection

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

		ue Service						Inspection
			lendar year, or tax year beginnir	ng 07-01-2023 , and ending 06-30-20	24			
			C Name of organization	ig 07-01-2023 , and ending 06-30-20	24	D Employ	er identi	fication number
Che Ad	ck if a dress	pplicable: change	World Savvy					ication number
-		nange				45-04	73508	
	tial ret	turn	Doing business as					
Fin- returi	al n/termi	inated				F Telepho	ne number	
		d return		nail is not delivered to street address) Room/su	uite	L Telepho	ne number	
— Ap	plicati	on pending	2550 University Ave W Ste 200N			(612)	259-78	49
			City or town, state or province, coul	ntry, and ZIP or foreign postal code				
			St Paul, MN 55114			<b>G</b> Gross re	eceipts \$ 3,	497,031
			<b>F</b> Name and address of princip	oal officer:	H(a)	Is this a group r	eturn for	
			Hamse Warfa			subordinates?		Yes 🔽 No
			2429 Nicollet Ave Minneapolis, M.N. 55404		H(b)	Are all subordin	ates	☐Yes ☐ No
r Tax	(-exer	mpt status:	✓ 501(c)(3)			included?  If "No," attach a	list So	e instructions
			₩ 501(c)(3)   501(c) ( ) (Inse	ert no.)   4947(a)(1) or   527	H(c)	Group exemption		
J W	ebsit	te: ww	w.worldsavvy.org		11(3)	Group exemption	i iluliibe	
				_	1. 1/		Maria	<u> </u>
<b>K</b> Forn	n of o	rganization	: Corporation Trust Associat	ion Other	<b>L</b> Year	of formation: 2002	MN State	of legal domicile:
		_						
Pa	rt I		mary					_
			scribe the organization's missio		nc			
e e	<u> </u>	cuucate a	ind engage youth to learn, work,	and thrive as responsible global citize	:115.			
Ě	_							
Ē	-							
Š	2	Check th	nis box $oxdot$ if the organization dis	scontinued its operations or disposed o	f more	than 25% of its r	et asset	5.
J				ing body (Part VI, line 1a)			3	11
×8	4	Number	of independent voting members	of the governing body (Part VI, line 1b)			4	11
iii iii	5	Total nui	mber of individuals employed in	calendar year 2023 (Part V, line 2a)			5	36
Activities & Governance			, ,	necessary) · · · · · · ·			6	15
Ac			•	art VIII, column (C), line 12			7a	0
				* **				
	В		lated business taxable income f	rom Form 990-1, Part 1, line 11			7b	0
					-	Prior Year	0.0	Current Year
9			tions and grants (Part VIII, line 1	•		2,424,1	-	3,035,980
9	9	Program	service revenue (Part VIII, line 2	2g)		202,3	195	397,151
Revenue	10	Investme	ent income (Part VIII, column (A)	, lines 3, 4, and 7d ) • • • •		4,1	.33	56,814
_	11	Other re	venue (Part VIII, column (A), line	es 5, 6d, 8c, 9c, 10c, and 11e)		-52,3	57	-46,079
	12	Total rev	enue—add lines 8 through 11 (r	nust equal Part VIII, column (A), line 12	2)	2,578,3	354	3,443,866
	13	Grants a	nd similar amounts paid (Part IX	, column (A), lines 1-3 )			0	177,930
	14	Benefits	paid to or for members (Part IX,	column (A), line 4)			0	0
50	15	Salaries,	other compensation, employee	benefits (Part IX, column (A), lines 5-	10)	2,746,2	265	3,448,716
Exp enses				olumn (A), line 11e)	/		0	0
8			<b>5</b> ,	, ,,				
X			raising expenses (Part IX, column (D),			1.014.5	162	1 210 250
-				es 11a-11d, 11f-24e) • • • •		1,014,3	-	1,219,359
			•	equal Part IX, column (A), line 25)		3,760,6	527	4,846,005
	19	Revenue	less expenses. Subtract line 18	3 from line 12		-1,182,2	273	-1,402,139
Se of					В	eginning of Currer Year	it	End of Year
Net Assets or Fund Balances								
Ba			sets (Part X, line 16)			5,972,7	18	4,469,264
in a	21	Total lial	bilities (Part X, line 26)			474,0	155	372,740
Zű	22	Net asse	ts or fund balances. Subtract lir	ne 21 from line 20		5,498,6	663	4,096,524
Pa	rt II	Sign	ature Block					
				amined this return, including accompa				
		-		nplete. Declaration of preparer (other t	han offi	cer) is based on a	III inform	ation of which
ы ера	ier n	ias any Ki	nowledge.			2024-11-13		
Sign			e of officer			Date		
Here	•		Varfa CEO print name and title					
			Print/Type preparer's name		Date	12 Check if	PTIN	
Paid	ł				2024-11-	self-employed	P00552219	<del>)</del>
		or F	irm's name Abdo LLP			Firm's EIN 41-1	397419	
Pre∣		<u> </u>	"				205 -	
Use	On	iiy   F	Firm's address 5201 Eden Ave Ste 250			Phone no. (952)	835-9090	
			Edina, MN 55436					
May t	he IF	RS discus	s this return with the preparer s	shown above? See Instructions				Yes No

_

Yes No

Yes No

325,420)

Page 2

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

Briefly describe the organization's mission:

) (Expenses \$

) (Expenses \$

) (Expenses \$

education in the modern world and how we can create a system that supports everyone.

World Savvy is a national nonprofit working with educators and community leaders to reimagine learning for the 21st century and create inclusive, future-ready schools where young people are prepared to thrive in a fast-changing world. We know students must graduate ready

not only to succeed in the future, but also to take responsibility for a global community that will require even more resilient peacemakers, courageous problem solvers, and passionate leaders. That's why we're empowering educators to make school inclusive, relevant, and engaging for all students, inspiring them to learn, work, and thrive as responsible global citizens. Our program focuses on systems change by increasing student engagement, expanding educator capacity and cultural competence, and strengthening school and district leadership.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O.

Did the organization cease conducting, or make significant changes in how it conducts, any program

If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as measured by

634,622

431.278

including grants of \$

expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

2,487,100 including grants of \$

World Savvy's program prepares students to thrive in our globally connected world by redesigning K-12 education to increase student engagement, expand educator capacity, and strengthen school and district leadership. World Sayvy's approach to learning is based on the belief that students learn best when they are engaged in relevant and important issues that impact their communities and the world. We believe that students' lived experiences and perspectives are assets that can be leveraged in learning every day; however, in order to successfully reach diverse students in their classrooms, educators need support to teach in a way they did not learn while engaging students from communities to which they may not be native; more than 80% of K-12 educators in the US are white, serving a collective majority of minority students. World Savvy supports educators to create active, engaged, culturally-responsive classrooms where all students can thrive. Through all

of our work, we strive to embed global competence into teaching, learning and culture so that everyone within a school community - students, educators, leaders and families - is actively supporting the development of the skills and dispositions we know people need to thrive in a complex and interconnected world. World Savvy defines global competence as the skills, behaviors, values and attitudes necessary to positively engage in one's community, locally and globally. We want all students to value multiple perspectives, find comfort with ambiguity and change, practice empathy, question prevailing assumptions, engage in inclusive dialogue

including grants of \$

including grants of \$

and be collaborative problem solvers. As outlined in World Savvy's Global Competence Matrix (https://bit.ly/3lWxXTQ), this is how we prepare young people with the capacity to understand and take action on issues of global significance. The core of World Savvy's work pivots around our Comprehensive School Model, which supports system-wide change in schools and districts to create more inclusive, adaptive, and future-ready schools. This comprehensive model aims to transform classrooms and school buildings by enhancing educators' capacity to teach for global competence and supporting school leaders as they institutionalize this work in teaching, learning, and culture. To meet the needs of each school and district, we offer a range of services including workshops, resources, curriculum consulting, student design challenges, and instructional coaching for both teachers and administrators designed to support the effective integration of global competence. There is no one-size-fits-all model for embedding global competence, so our approach is responsive to the needs of each participating school, and our multi-year partnerships are designed collaboratively with school leaders to align with each school's strategic vision and goals.

) (Revenue \$

) (Revenue \$

177,930 ) (Revenue \$

World Savvy has experienced increased demand from school districts to provide services that lay the foundation for comprehensive school partnerships. We have expanded our programming to include leadership cohorts for district and school leaders. These cohorts are designed to create capacity across school districts to embed global competence into teaching, learning, and school culture. Through workshops, dialogue, and exploration, we lay the groundwork for deep and sustainable work with students, educators, and families. In addition, we create a professional community of school leaders that are committed to this work and can

use one another as resources and support. We also support districts through the development of Profiles of a Graduate and Global Competence Readiness

2,465) World Savvy has also seen increased interest in our Changemaker Hubs. Changemaker Hubs are day-long learning experiences that are designed to unleash the creativity of students, educators, school leaders, and community members as they come together across difference to think critically and creatively about the role of

) (Revenue \$

4b

4a

(Code:

(Code:

Assessments.

(Expenses \$

Other program services (Describe in Schedule O.)

4d

Total program service expenses 3,553,000 Form 990 (2023)

Form	990 (2023)			Page <b>3</b>
Pa	t IV Checklist of Required Schedules			
	•		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions. 🥞	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3		No
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		No
5	Is the organization a section $501(c)(4)$ , $501(c)(5)$ , or $501(c)(6)$ organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D,</i> Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes,"</i> complete Schedule D, Part III	8		Νo
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly of through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? If "Yes," complete Schedule D, Part V	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	11a		Νo
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of	11b		Νo

its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🥦 . . . . . . c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of

its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 🐿 . . . . . . . . . d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets

reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 🥦 . . . . . . . . . . . . . . . Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X

Did the organization's separate or consolidated financial statements for the tax year include a footnote that

12a ប៊ីប៉េក្តាម ទល្បានមេដា និក្សានាម្ខាត់ និក្សានាម្ខាត់ និក្សានាម្ចាត់ និក្សានាម្ចាន និក្សានាម្ចាត់ និក្សានាម្ចាន់ និក្សានិក្សានាម្ចាន់ និក្សានាម្ចាន់ និក

. If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🐒

**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

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other

Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions. . . . . Did the organization report more than \$15,000 total of fundraising event gross income and contributions on

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . . .

**b** If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for

**b** Was the organization included in consolidated, independent audited financial statements for the tax year?

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

14a Did the organization maintain an office, employees, or agents outside of the United States? . . .

assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . .

investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV

any foreign organization? If "Yes," complete Schedule F, Parts II and IV . . . . .

15

16

17

addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)?

Νo

Nο

Nο

Nο

Nο

Νo

Nο

Νo

Νo

Νo

Nο

Nο

11c

11d

11e

11f

12a

12b

13

14a

14b

15

16

17

18

19

20a

20b

Yes

Yes

Form 990 (2023)

Yes

Yes

Νo

Νo

Νo

Νo

Nο

Νo

Νo

Nο

Nο

Νo

Νo

Νo

Νo

Nο

Νo

Nο

Νo

No

Yes

23

24a

24b

24c

24d

25a

25b

26

27

28a

28b

28c

29

30

31

32

33

34

35a

35b

36

37

2.0

0

1a

1b

Yes

Yes

Form 990 (2023)

Form 990 (2023) Page 4 Part IV Checklist of Required Schedules (continued)

га	Checkinst 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		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's			

current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d

**b** Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . .

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I . . . . .

**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

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

哲道學研究 公公司用包括证例所的的形式的 智利并引力 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?

Was the organization a party to a business transaction with one of the following parties (see the Schedule L,

c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes,"

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . .

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations

Hid the Granketation field to the schedule N, Part I

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete

เพื่อรัฐโลย Complete Schedule R, Part II, III, or IV,

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 . . . Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Did the organization conduct more than 5% of its activities through an entity that is not a related organization

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

Statements Regarding Other IRS Filings and Tax Compliance

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?

c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable

a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," 

**d** Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?

Part IV instructions for applicable filing thresholds, conditions, and exceptions):

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable

**b** Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable

**b** A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV .

30

Part V

"Yes," complete Schedule L, Part I

If "Yes," completeSchedule L,Part III

conservation contributions?

and Part V, line 1 . . . .

sections 301.7701-2 and 301.7701-3?

entity or family member of any of these persons?

Form **990** (2023)

Pai	Statements Regarding Other IRS Filings and Tax Compliance (continued)			
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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		Νο
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial	4a		No
b	#C™Despt)enter the name of the foreign country:			
5a	Washibe organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νο
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			No
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5b 5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
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).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)  11b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			_
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		N o
ь 15	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 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?	14b 15		N o
16	If thesotraserizationstructionstructionstructionstructionstructions and files Fiturtion 13 @ bj Schedutlee Nacction 4968 excise tax on net investment income?	16		N o
	If "Yes," complete Form 4720, Schedule O.  Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that	10		110
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953?	17		

independent

year by the following: **a** The governing body?

Section C. Disclosure

13

14

18

or similar committee, explain in Schedule O.

**b** Enter the number of voting members included in line 1a, above, who are

Did the organization have members or stockholders? . . . . .

**b** Each committee with authority to act on behalf of the governing body?

**10a** Did the organization have local chapters, branches, or affiliates?

Νo

Nο

Nο

Nο

Νo

Νo

Nο

No

Νo

Page 6 Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines

1b

 $\mathsf{M}\,\mathsf{N}\,\mathsf{,C}\,\mathsf{A}\,\mathsf{,N}\,\mathsf{Y}\,\mathsf{,M}\,\mathsf{A}$ 

Check if Schedule O contains a response or note to any line in this Part VI	• •	• •	• •	• •					
ection A. Governing Body and Management									
							Ye	s	
Enter the number of voting members of the governing body at the end of the tax	1a				1	1			
YEAFore are material differences in voting rights among members of the governing									

Section A. Governing Body and Management												
					Yes	No						
1a	Enter the number of voting members of the governing body at the end of the tax	1a	1 1									
	$Y^{e}$ for the governing body, or if the governing body delegated broad authority to an executive committee											

Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any

Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .

Did the organization make any significant changes to its governing documents since the prior Form 990 was file the organization become aware during the year of a significant diversion of the organization's assets? .

7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or

**b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders,

Did the organization contemporaneously document the meetings held or written actions undertaken during the

Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the

11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing

b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give

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?

16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a

**b** If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? . . . . . . . . . . . . . . . . . .

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

(section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that

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

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

**b** Describe on Schedule O the process, if any, used by the organization to review this Form 990.

12a Did the organization have a written conflict of interest policy? If "No," go to line 13 .

Did the organization have a written document retention and destruction policy? .

a The organization's CEO, Executive Director, or top management official . . .

If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.

▼ Own website ▼ Another's website ▼ Upon request □ Other (explain in Schedule O)

The Organization 2550 University Ave W Ste 200N St Paul, M N 55114 (612) 259-7849

interest policy, and financial statements available to the public during the tax year.

**b** Other officers or key employees of the organization . . . . .

List the states with which a copy of this Form 990 is required to be filed

Did the organization have a written whistleblower policy? .

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

organization's mailing address? If "Yes," provide the names and addresses in Schedule O  $\,\cdot\,\,$  .  $\,\cdot\,\,$  .  $\,$  .

	Check if Schedule O contains a response or note to any line in this Part VI.	•	•	•	•	•	•	•	•	•	•	•	•	•
Sec	ction A. Governing Body and Management													
												Υe	es	
La	Enter the number of voting members of the governing body at the end of the tax	<b>1</b> a	•						1 1	L				

Check if Schedule O contains a response or note to any line in this Part VI			
Section A. Governing Body and Management			
	Yes	5	ı

c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe Yes 13 Yes

10a **b** If "Yes," did the organization have written policies and procedures governing the activities of such chapters, 10b affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?

1.1

2

4

5

6

7a

8a

9

11a

12a

12b

14

15a

15b

16a

16b

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Νo

Form 990 (2023)

Part VII

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

See the instructions for the order in which to  Check this box if neither the organization r	•			יע כו	ırrei	nt off	icer	director or true	staa	
(A)  Name and title	(B) Average hours per week (list	Posi	( <b>C)</b> ition (do not check more inless person is both an o	e tha	an o	ne bo	(D) Reportable compensation from the	<b>(E)</b> Reportable compensation from related	(F) Estimated amount of other	
	any hours for related organizations below dotted line)	dividual trustee director	Institutional Trustee;	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099- MISC/1099- NEC)	organizations (W-2/1099- MISC/1099- NEC)	compensation from the organization and related organizations
(1) Linda Ireland	3.00	. X		Х				0	0	0
Chair				L_'						
(2) Susan Corridoni	3.00			Х				0	0	0
Vice Chair				Ĺ						
(3) Sarah Curfman	1.00	. X		Х				0	0	0
Treasurer							$oxed{\begin{tabular}{c} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$	<u> </u>	<u> </u>	
(4) Leslie Wright Secretary		· x		х				0	0	0
(5) Kathlene Holmes Campbell PhD  Board Member		· x						0	0	0
(6) Dr Charles Khoury  Board Member		· x		<u> </u>				0	0	0
(7) Cay Kimbrell Board Member		· x		<u> </u>				0	0	0
(8) Christy Kujawa Board Member		· x		<u> </u>				0	0	0
(9) Virginia Mills Board Member	1.00							0	0	0
(10) Dwayne Redmond	1.00							0	0	0
Board Member		· X	!	l _'		_		<u> </u>	0	۷ 
(11) Sarah Smith	1.00				$\Box$			0	0	0
Board Member		X		'				U	0	U 
(12) Dana Mortenson	40.00			х				228 871	0	18 220
Chief Executive Officer				^				228,871		18,220
(13) Maria Cote Chief Operating Officer	40.00			х				120,304	0	7,518
(14) Mallory Tuominen Chief Program Officer	40.00			х				150,586	0	7,744
(15) Nathaniel Foster Former Chief Growth Officer				х				124,519	0	1,147
(16) Felix Isuk Director of Finance				х				135,188	0	16,113
(17) Thalia Theodore Washington  Executive Director - East Region	40.00			х				0	0	0

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

	<b>(A)</b> Name and title	(B) Average hours per week (list	Average Position (do not check more than one box, unless person is both an officer and a director/trustee) From Position (do not check more than one box, unless person is both an officer and a director/trustee)								(E) Reportable mpensation rom related eganizations	(F) Estimated amount of other compensation
		related organizations below dotted line)	Individual trustee or director	Institutional Trustee;	Officer	Key employee	Highest compensated employee	Former	(W-2/1099- MISC/1099- NEC)	(\	N-2/1099- ISC/1099- NEC)	from the organization and related organizations
(18)	Harben Porter	40.00					۵					
	utive Director - Midwest Region	40.00			Х				77,30	8	0	3,868
(19)	Anne Soto	40.00			\ \ \				140.22	0	0	7.261
	utive Director - West Region				Х				148,23	9	0	7,361
1b	Sub-Total						1					
	Total from continuation sheets to Part V											<del></del>
	Total (add lines 1b and 1c)						985,0			0	6	1,971
2	Total number of individuals (including be \$100,000 of reportable compensation f				eive	ed m	nore tl	han				
				,							Voc. N	
3	Did the organization list any <b>former</b> off	icer director or	truct	ee kevemnlovee orhi	ahe	st c	omnei	nsat	ed employee		Yes N	lo
•	on line 1a? If "Yes," complete Schedule	•			•	•	•	•		3	N	0
4	For any individual listed on line 1a, is t											
	organization and related organizations individual	greater than \$2	150,0	00? If "Yes," complete Se	chea	lule	J for s	such		_		
									. !	4	Yes	
5	Did any person listed on line 1a receive							or	individual for			
	services rendered to the organization?.	If "Yes," complet	e Sch	edule J for such person	•	•	• •	•		5	N	0
	ection B. Independent Contract								11 +100.000			
1	Complete this table for your five highe compensation from the organization. Re										tax year.	
	Name and I	(A) business address					Do	ccrin	(B) otion of services		(C)	
	ivame and i	Justiness duul ess					De	.3CI I	ACION OF SELVICES		Compensation	<u></u>
												_
	Total number of independent contractors \$100,000 of compensation from the orga		ot lin	nited to those listed abo	ve)	who	rece	ivec	I more than			

		90 (2023)										Page <b>9</b>
Part	t \		ent of Revenue chedule O contains a re	sponso or n	oto t	0 31	ny lino in this Par	<del>-1</del> \/!!!				г
		CHECK II 3	chedule O Contains a re	sponse or n	ote t	O al	(A) Total revenue	(B) Related exem function	l or pt on	(C) Unrelate busines revenu	s exe e tax i	(D) Revenue cluded from ander sections 512 - 514
Contr	·ib	outions, Gifts, Gra	ants, and OtherAmt Sim	ilar Amount	S <b>1a</b>	Fe	derated campaig	reven	1a			012 - 314
					_		embership dues .		1b			
							ndraising events		1c	60,	757	
							lated organizatio vernment grants (cor		1d		_	
						All	other contributions, g	gifts, grants,	1e		_	
						aha	d similar amounts not		1f	2,975,	223	
					g	line	ncash contributions in es 1a - 1f:\$	iciuaea in	1g			
	_				h	To	tal. Add lines 1a-	1f			3,035	.980
				Business	Cod	е	207.454		007.151			
en.		2a World Savvy Prog	ıram		90009	99	397,151		397,151			
nue												
Rev		b										
ce		c										
Serv												
E		d		_								
Program Service Revenue		е										
4		f All other progr	ram service revenue.									
			es 2a-2f		397,15	51						
		J Total: Add IIII	3 Investment income				s, interest, and					
			other						56,400			56,400
			49imilareafromnifolest  5 Royalties									
					Real		(ii) Personal					
	6a Gross rents			6a								
			<b>b</b> Less: rental	6b								
			expenses <b>c</b> Rental income or	6c								
			(loss)  d Net rental income			_						
				(i) Se			(ii) Other					
			<b>7a</b> Gross amount	7a			7,50	00				
			from sales of assets other									
9			than inventory <b>b</b> Less: cost or	7b								
Other Revenue			other basis and	75			7,08	86				
Rev			sales expenses • Gain or (loss)	7c			4:	14				
ē			<b>d</b> Net gain or (loss)		_	_		14	414			414
O th			8a Gross income from fur		-							
			(not including \$ contributions reported	60,757 on line 1c).	of							
			See Part IV, line 18		•	8a		0				
			<b>b</b> Less: direct expe			8b	46,07		46.070			46.070
			c Net income or (los	ss) from fun	draisi آ	ing	events	-	46,079			-46,079
			<b>9a</b> Gross income from	n gaming								
			activities. See Part IV, line 1 b Less: direct expe	9	-	9a						
			c Net income or (los		L ning	<b>9b</b> acti	vities					
			,	,	آ							
			10a Gross sales of inv returns and allowa			10a						
			<b>b</b> Less: cost of good	ds sold		10b	-					
			c Net income or (los	s) from sale	es of	inve	entory					
			11a				Business Code	e				
			110									
			b									
Othe	er	RevenueMiscAmt	с									
			<b>d</b> All other revenue									
			e Total. Add lines 1	1a-11d .					T			
_			12 Total revenue. Se	e instructio	ns .			3,4	143,866	397,151	0	10,735
	_									•	F	m 000 (2022)

orm 990 (2023)				Page <b>1</b>
Part IX Statement of Functional Expenses			*	
Section 501(c)(3) and 501(c)(4) organizations must	<u>.</u>		•	ete column (A).
Check if Schedule O contains a response or note to	any line in this Part	(B)	(C)	<u>L</u>
Oo not include amounts reported on lines 6b, b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	177,930	177,930		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	1,057,780	771,445	134,151	152,184
<b>6</b> Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,947,974	1,429,832	236,488	281,654
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	210,827	138,989	43,758	28,080
10 Payroll taxes	232,135	171,870	27,031	33,234
L1 Fees for services (non-employees):			/	
a Management				
<del>_</del>				
<b>b</b> Legal	80,528	56,370	8,858	15,300
c Accounting	80,328	30,370	0,030	13,300
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	432,237	289,305	122,551	20,38
12 Advertising and promotion	20,342	20,119	82	143
3 Office expenses	33,668	24,407	6,471	2,790
4 Information technology	20,173	12,543	4,228	3,402
. S Royalties				
.6 Occupancy	123,260	86,560	13,494	23,206
17 Travel	219,221	172,610	33,016	13,595
18 Payments of travel or entertainment expenses for any federal, state, or local public officials .				
<b>19</b> Conferences, conventions, and meetings	49,754	48,861	270	623
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	24,918	17,442	2,741	4,735
23 Insurance	7,942	4,357	2,402	1,183
Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
a Professional Developmen	69,729	35,638	26,252	7,839
<b>b</b> Memberships and Subscri	61,874	47,479	6,310	8,085
c Other Expenses	49,677	31,553	8,726	9,398
d Facility Rentals	14,002	12,708	474	820
e All other expenses	12,034	2,982	3,309	5,743
Total functional expenses. Add lines 1 through 24e	4,846,005	3,553,000	680,612	612,393
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).	.,510,003	3,533,666	330,012	312,333

Form **990** (2023)

_	,	U	(	_	v	_	_	

P	art X	Balance Sheet					
		Check if Schedule O contains a response or	note to	any line in this Part IX			
					<b>(A)</b> Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			1,988,896	1	1,560,320
	2	Savings and temporary cash investments			100,756	2	50,827
	3	Pledges and grants receivable, net			3,570,972	3	2,654,855
	4	Accounts receivable, net			68,863	4	87,260
	6	Loans and other receivables from any current trustee, key employee, creator or founder, su controlled entity or family member of any of t Loans and other receivables from other disqu under section 4958(f)(1)), and persons described.		5			
s	7	Notes and loans receivable, net		7			
Assets	8	Inventories for sale or use		8			
SS	9	Prepaid expenses and deferred charges .			44,337	9	23,586
1	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	0			
	ь	Less: accumulated depreciation	10b		9,449	10c	
	11	Investments—publicly traded securities .		11			
	12	Investments—other securities. See Part IV, li		12			
	13	Investments—program-related. See Part IV, I	ine 11			13	
	14	Intangible assets	52,500	14	46,569		
	15	Other assets. See Part IV, line 11			136,945	15	45,847
	16	Total assets: Add lines 1 through 15 (must e	qual lir	ne 33)	5,972,718	16	4,469,264
	17	Accounts payable and accrued expenses .			34,190	17	134,875
	18	Grants payable		18			
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
S	21	Escrow or custodial account liability. Complet	te Part	IV of Schedule D		21	
Liabilities	22	Loans and other payables to any current or for key employee, creator or founder, substantial controlled entity or family member of any of t		22			
I	23	Secured mortgages and notes payable to unre		23			
	24	Unsecured notes and loans payable to unrelate		·		24	
	25	Other liabilities (including federal income tax parties, and other liabilities not included on li Complete Part X of Schedule D	439,865	25	237,865		
	26	<b>Total liabilities.</b> Add lines 17 through 25 .			474,055	26	372,740
es		Organizations that follow FASB ASC 958, che	ck her	e 🔽 and complete			
Balances	27	lines 27, 28, 32, and 33. Net assets without donor restrictions			1,796,638	27	3,425,908
	20	Not poorts with depart restrictions		I	3,702,025	28	670,616
pur	28	Net assets with donor restrictions			3,702,023	28	070,010
Assets or Fund	29	Organizations that do not follow FASB ASC 99 complete lines 29 through 33.				29	
sts	30	Capital stock or trust principal, or current fun Paid-in or capital surplus, or land, building or		-		30	
SSE	31	Retained earnings, endowment, accumulated i		F		31	
	32	Total net assets or fund balances		, or other runus	5,498,663	32	4,096,524
Net	33	Total liabilities and het assets/fund balances	5,972,718	33	4,469,264		

2c

За

3b

Yes

Νo

Form 990 (2023)

c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the

**b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

Schedule O.

Uniform Guidance, 2 C.F.R. Part 200, Subpart F?

If the organization changed either its oversight process or selection process during the tax year, explain in

Form 990 (2023)		
Additional Data		Return to Form
	Software ID:	
	Software Version:	
Form 990, Special Condition Descripti	ion:	
	Special Condition Description	

## (Form 990) Department of the Treasury

Internal Revenue Service

World Savvy

**SCHEDULE A** 

Name of the organization

For Paperwork Reduction Act Notice, see the Instructions for

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

Reason for Public Charity Status (All organizations must complete this part.) See instructions.

4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

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

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

Schedule A (Form 990) 2023

**Employer identification number** 

45-0473508

Inspection

OMB No. 1545-0047

1		A church, convention	of churches, or	association of church	nes described ir	section 170(b	o)(1)(A)(i).		
2		A school described in	section 170(b)	<b>(1)(A)(ii).</b> (Attach Sc	chedule E (Form	າ 990).)			
3		A hospital or a cooper	ative hospital	service organization d	lescribed in <b>sec</b>	tion 170(b)(1)	(A)(iii).		
4		A medical research organization operated in conjunction with a hospital described in <b>section 170(b)(1)(A)(iii).</b> Enter the hospital's name, city, and state:							
5	Г		An organization operated for the benefit of a college or university owned or operated by a governmental unit described in <b>section 170(b)(1)(A)(iv).</b> (Complete Part II.)						
6		A federal, state, or local government or governmental unit described in <b>section 170(b)(1)(A)(v).</b>							
7		An organization that no described in <b>section 1</b>				m a governme	ntal unit or from the g	general public	
8		A community trust des	scribed in <b>secti</b>	on 170(b)(1)(A)(vi).	(Complete Part	t II.)			
9		An agricultural researd university or a non-lan							
10	V	An organization that n receipts from activitie from gross investment organization after June	s related to its income and ui	exempt functions—su nrelated business taxa	ibject to certain able income (le	exceptions, and section section 511	nd (2) no more than 3	33 1/3% of its support	
11		An organization organi					509(a)(4).		
12		An organization organione or more publicly s the box on lines 12a tl	upported organ	nizations described in	section 509(a)	(1) or section 5	609(a)(2). See section	<b>1 509(a)(3).</b> Check	
а		<b>Type I.</b> A supporting o supported organization organization. <b>You mus</b>	n(s) the power	to regularly appoint o	r elect a majorit				
b		Type II. A supporting management of the su must complete Part IV	pporting organ	ization vested in the s					
С		Type III functionally i supported organization	<b>ntegrated.</b> A s	upporting organization				grated with, its	
d		Type III non-functions not functionally integral (see instructions). You	ated. The orga	nization generally mus	st satisfy a disti	ribution require	,,	` '	
e		Check this box if the o integrated, or Type III					s a Type I, Type II, Ty	ype III functionally	
f	Enter	r the number of support	-				· · · · · · · · <u> </u>		
g	(:) N	Provide the following in	nformation abo			rappization	(w) Amount of	(vi) Amount of	
	(i) Name of supported organization		(II) LIN	(iii) Type of organization (described on lines	(iv) Is the organization listed in your governing document?		(vi) Amount of vi) Amour other suppor (see instructions) instruction		
				1- 10 above (see instructions))	Yes	No			
			T						
Tota	1							1	

Cat. No. 11285F

Schedule A (Form 990) 2023 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 failed to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (a) 2018 **(b)** 2019 (c) 2020 (d) 2021 (e) 2022 (f) Total (or fiscal year beginning in) 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.") . . 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . The value of services or facilities furnished by a governmental unit to the organization without charge.. Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 from line 4. Section B. Total Support Calendar year (a) 2018 **(b)** 2019 (c) 2020 (d) 2021 (e) 2022 (f) Total (or fiscal year beginning in) 7 Amounts from line 4. . 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). . Total support. Add lines 7 through 13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, 

Section C. Computation of Public Support Percentage

. . . . . . . . . . . . . .

. . . . . . . . . . . . . .

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Schedule A (Form 990) 2023

14	Public support percentage for 2023 (line 6, column (f) divided by line 11, column (f))	14	
15	Public support percentage for 2022 Schedule A, Part II, line 14	15	
16a	33 1/3% support test-2023. If the organization did not check the box on line 13, and line 14 is 33 1/3% or	more,	check this box

#### Public support percentage for 2023 (line 6, column (f) divided by line 11, column (f)) . . . . . . .

33 1/3% support test—2022. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this 17a 10%-facts-and-circumstances test-2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

b 10%-facts-and-circumstances test—2022. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

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

Schedule A (Form 990) 2023 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.)

132,657

1,631,760

287,083

33,364

320,447

1,631,760

1,631,821

61

(c) 2021

2,424,183

202,395

2,626,578

512,118

38,261

550.379

2,626,578

4.133

4,133

2,630,711

(d) 2022

(e) 2023

Section A. Publ	ic Support			
Calendar year	_	(a) 2019	<b>(b)</b> 2020	(c) 2021

(or fiscal year beginning in)

1,555,274

235,619

1,790,893

421,375

421,375

1,790,893

31

10

Public support percentage for 2023 (line 8, column (f) divided by line 13, column (f)) . . . . . . . . .

Investment income percentage for 2023 (line 10c, column (f) divided by line 13, column (f)) . . . . . .

Public support percentage from 2022 Schedule A, Part III, line 15 . . . . . . . . . . . . . . . .

Investment income percentage from 2022 Schedule A, Part III, line 17 . . . . . . . . . . . . . . .

(a) 2019

1,749,261

1,499,103

(d) 2022

(f) Total

2,980,980

10,208,801

1,044,512

11,253,313

1.625.178

1,924,131

3,549,309

7,704,004

11,253,313

60,735

60,735

424

11,314,472

68.090 %

78.680 %

0.540 %

Schedule A (Form 990) 2023

(f) Total

76,690

1,825,951

152,223

152,223

1,825,951

110

110

1.826.061

19a 33 1/3% support tests-2023. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . . . . . . b 33 1/3% support tests-2022. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . . . 🕨 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions . . . . .

First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, 

**(b)** 2020

397,151

3,378,131

252,379

1,852,506

2,104,885

3,378,131

56,400

56,400

414

15

16

17

(e) 2023

. . . . .

persons

Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . Gross receipts from admissions,

merchandise sold or services

Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge

Total. Add lines 1 through 5 7a Amounts included on lines 1, 2,

and 3 received from disqualified

**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.

**Public support.** (Subtract line 7c

securities loans, rents, royalties and income from similar sources

Unrelated business taxable income (less section 511 taxes) from businesses acquired after

assets (Explain in Part VI.) . . Total support. (Add lines 9, 10c,

Section C. Computation of Public Support Percentage

Section D. Computation of Investment Income Percentage

c Add lines 7a and 7b. .

(or fiscal year beginning in)

June 30, 1975.

11, and 12.). .

16

17

c Add lines 10a and 10b. Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on. **12** Other income. Do not include gain or loss from the sale of capital

**9** Amounts from line 6. . . Gross income from interest, dividends, payments received on

Section B. Total Support

from line 6.)

Calendar year

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

1

2

За

3b

5a

5b

5c

6

7

8

9a

10a

10b Schedule A (Form 990) 2023

Page 4

#### Part IV Supporting Organizations (Complete only if you checked a box on line 12 of Part I. If you checked box 12a, of Part I, complete Sections A and B. If you

box 12b, of Part I, complete Sections A and C. If you checked box 12c, of Part I, complete Sections A, D, and E. If you

12d, of Part I, complete Sections A and D, and complete Part V.)

checked checked box

Section A. All Supporting Organizations Yes No Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose,

describe the designation. If historic and continuing relationship, explain.

Did the organization have any supported organization that does not have an IRS determination of status under

section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization

was described in section 509(a)(1) or (2).

Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.

made the determination.

amendment to the organizing document).

organization's organizing document?

"Yes," complete Part I of Schedule L (Form 990).

(1) or (2))? If "Yes," provide detail in Part VI.

organizations)? If "Yes," answer line 10b below.

whether the organization had excess business holdings).

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 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. 3с Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.

4a 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

4b or supervised by or in connection with its supported organizations. 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 4c all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes. 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

Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the

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

Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with

Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If

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)

b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the

(regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine

Substitutions only. Was the substitution the result of an event beyond the organization's control?

the filing organization's supported organizations? If "Yes," provide detail in Part VI.

regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).

supporting organization had an interest? If "Yes," provide detail in Part VI. 9b Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI. 9c 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f)

organization's involvement.

Parent of Supported Organizations. Answer lines 3a and 3b below.

each of the supported organizations? If "Yes" or "No", provide details in Part VI.

Supporting Organizations (continued)

Page 5

а				
	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described on 11a above?	11b		
c	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to 11a, 11b, or 11c, provide detail in	11c		
S	Part VI. ection B. Type I Supporting Organizations			
			Yes	No
1	Did the officers, directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> 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 directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part VI</b> how providing such	_		
	benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.	2		
S	ection C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported	1		
	ection 7. All Type III Supporting Organizations			
	ection b. Air Type 111 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	. 65	
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 <b>Part VI</b> 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? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations	3		
	ection E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see inst	tructio	ns)·	
	The organization satisfied the Activities Test. Complete <b>line 2</b> below.	uctio		
	<b>b</b> The organization is the parent of each of its supported organizations. Complete <b>line 3</b> below.			
	The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a government entity	(see		
	instructions)			
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
	<ul> <li>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.</li> <li>b Did the activities described on line 2a, above constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the</li> </ul>	2a		

reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of

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.

2b

За

3b

instructions)

Page 6

	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):	1		
а	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):			
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 $0.015\ \text{of line 3}$ (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 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	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		

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

Section D<sup>Or</sup> อาการสา

**d** Excess from 2022. . . . . **e** Excess from 2023. . . . .

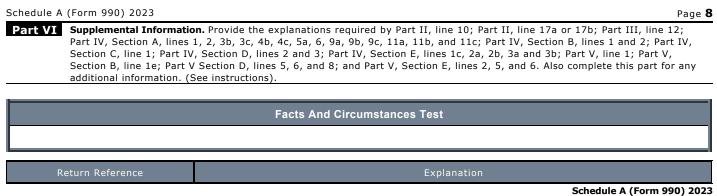
Part V Type III Non-Functionally Integrated 509(a)(3) Supporting

2 Amounts paid to perform activity that directly furthers exempt purposes of supported

1 Amounts paid to supported organizations to accomplish exempt purposes

1

excess of income from activity					
3 Administrative expenses paid to accomplish exempt	3				
4 Amounts paid to acquire exempt-use assets	4				
	and provide details in <b>Dant V</b>	<b>/T</b> \	5		
5 Qualified set-aside amounts (prior IRS approval requir		(1)			
6 Other distributions (describe in <b>Part VI</b> ). See instruc	tions		6		_
7 Total annual distributions. Add lines 1 through 6.			7		
<b>8</b> Distributions to attentive supported organizations to (provide details in <b>Part VI</b> ). See instructions	which the organization is re	sponsive	8		
9 Distributable amount for 2023 from Section C, line 6			9		
10 Line 8 amount divided by Line 9 amount			10		
Section E - Distribution Allocations	(i)		i)		(iii)
(see instructions)	Excess Distributions	Underdis Pre-	tributi 2023	ons	Distributable Amount for 2023
1 Distributable amount for 2023 from Section C, line 6					
2 Underdistributions, if any, for years prior to 2023 (reasonable cause required explain in Part VI					
). See instructions.					
3 Excess distributions carryover, if any, to 2023:					
a From 2018					
<b>b</b> From 2019					
<b>c</b> From 2020					
<b>d</b> From 2021					
e From 2022					
f Total of lines 3a through e					
<b>g</b> Applied to underdistributions of prior years					
<b>h</b> Applied to 2023 distributable amount					
<ul> <li>Carryover from 2018 not applied (see instructions)</li> </ul>					
<b>j</b> Remainder. Subtract lines 3g, 3h, and 3i from line 3f.					
4 Distributions for 2023 from Section D, line 7:					
\$					
a Applied to underdistributions of prior years					
<b>b</b> Applied to 2023 distributable amount					
c Remainder. Subtract lines 4a and 4b from line 4.					
<b>5</b> Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in <b>Part VI</b>					
See instructions.					
<b>6</b> Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, <i>explain in Part VI</i> . See instructions.					
<b>7 Excess distributions carryover to 2024.</b> Add lines 3j and 4c.					
8 Breakdown of line 7:					
a Excess from 2019					
<b>b</b> Excess from 2020					
c Excess from 2021					



## Schedule B OMB No. 1545-0047 Schedule of Contributors (Form 990) Attach to Form 990, 990-EZ, or 990-PF. 2023 Department of the Treasury Go to www.irs.gov/Form990 for the latest information. Internal Revenue Service Name of the organization **Employer identification number** World Savvv 45-0473508 Organization type (check one): Filers of: Section: Form 990 or 990-F7 ☐ 501(c)( ) (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the **General Rule** or a **Special Rule**. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33<sup>1</sup>/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, 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

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 990PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization World Savvy Employer identification number 45-0473508

,			
Part I Contributors	Contributors (see instructions). Use duplicate copies of Part I if additional	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
RESTRICTED			Person
RESTRICTED			Payroll
		\$ RESTRICTED	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
		<u> </u>	Noncash
			(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
-			Payroll
		<u> </u>	Noncash
			(Complete Part II for noncash contributions.)

(a) (c) (d) (b) FMV (or estimate) No. from Description of noncash property given Date received Part I (See instructions) (c) (a) (b) (d) No. from FMV (or estimate)

Description of noncash property given Date received Part I (See instructions)

Schedule I	B (Form 990) (2023)			Page 4
Name of o World Sav	rganization			Employer identification number
	vy			45-0473508
Part III	total more than \$1,000 for the year fro	m any one contrib ng Part III, enter th nis information on	outor. Complete colue total of exclusivel	ped in section 501(c)(7), (8), or (10) that umns (a) through (e) and the following y religious, charitable, etc., contributions s.)   \$
(a) No. from Part I	(b) Purpose of gift	(c)	Use of gift	(d) Description of how gift is held
-	Transferee's name, address, and		ransfer of gift	onship 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, and	, ,	ransfer of gift Relatio	onship 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, and	, ,	ransfer of gift Relatio	onship 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, and		ransfer of gift Relatio	onship of transferor to transferee

Schedule B (Form 990) (2023)

#### **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

## **Supplemental Financial Statements**

▶ Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990.

▶ Go to <u>www.irs.gov/Form990</u> for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

**Employer identification number** 

	,		45-0473508
Pa	rt I Organizations Maintaining Donor A		Funds or Accounts.
	Complete if the organization answered	"Yes" on Form 990, Part IV, line 6.  (a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	(a) Donor advised funds	(b) I unus and other accounts
2	Aggregate value of contributions to (during year)		
- 3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor adv	visors in writing that the assets hold in d	Innor adviced funds are
3	the organization's property, subject to the organization	3	
6	Did the organization inform all grantees, donors, and	donor advisors in writing that grant fun	
_	charitable purposes and not for the benefit of the dor	nor or donor advisor, or for any other pu	rpose conferring
	impermissible private benefit?		Yes No
Pa	rt II Conservation Easements. Complete if the organization answered	"Yes" on Form 990 Part IV line 7	
1	Purpose(s) of conservation easements held by the o		
•	Preservation of land for public use (e.g., recreati	_	an historically important land area
	Protection of natural habitat	Preservation of	a certified historic structure
	Preservation of open space	•	
2	Complete lines 2a through 2d if the organization hel	d a qualified concervation contribution i	n the form of a concernation
2	easement on the last day of the tax year.	u a quanneu conservation contribution i	Held at the End of the Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
	Number of concernation accompanies on a contified his	staria atmustura included in (a)	
C	Number of conservation easements on a certified his Number of conservation easements included in (c) a		<del> </del>
d	historic structure listed in the National Register		a <b>2d</b>
3	Number of conservation easements modified, transfe	erred, released, extinguished, or termina	ated by the organization during the
	tax year 🕨		
4	Number of states where property subject to conserv	ation easement is located 🕨	
5	Does the organization have a written policy regardin	g the periodic monitoring, inspection, ha	andling of
	violations, and enforcement of the conservation eas	ements it holds?	. Yes No
6	Staff and volunteer hours devoted to monitoring, ins	pecting, handling of violations, and enfo	orcing conservation easements during the
	year		
		bdiaafi_l_ki	
7	Amount of expenses incurred in monitoring, inspecti  \$ \\$	ng, nandling of violations, and enforcing	conservation easements during the year
8	Does each conservation easement reported on line	O(d) above satisfy the requirements of	section 170(h)(4)
•	(B)(i) and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports	conservation easements in its revenue a	and expense statement, and
	balance sheet, and include, if applicable, the text of		cial statements that describes
Par	the organization's accounting for conservation ease  till Organizations Maintaining Collection		or Other Similar Assets
G.	Complete if the organization answered		y or other similar Assetsi
1a	If the organization elected, as permitted under FASI		
	of art, historical treasures, or other similar assets he service, provide, in Part XIII, the text of the footnot		
b	If the organization elected, as permitted under FASI		
_	art, historical treasures, or other similar assets held	·	earch in furtherance of public service,
	provide the following amounts relating to these item		•
	(i) Revenue included on Form 990, Part VIII, line 1		
	ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, his following amounts required to be reported under FA	•	tor financial gain, provide the
а	Revenue included on Form 990, Part VIII, line 1 · ·	-	\$
b			
	Paperwork Reduction Act Notice, see the Instructions		•

Using the organization's acquisition, access collection items (check all that apply):	ion, and oth		,	ily Oi	the follo	wing that a	are a signifi	cant u	se of its	
Public exhibition			d $ egin{array}{c c c c c c c c c c c c c c c c c c c $	Loan	or excha	nge progr	ams			
Scholarly research			e							
Preservation for future generations										
Provide a description of the organization's c	ollections a	nd explain	how they	furth	er the or	ganization	n's exempt p	ourpose	e in	
During the year, did the organization solicit								┌ Yes	s □ No	
		.аса ао р		ga				103		
Complete if the organization and Part X, line 21.	swered "Ye	es" on Foi	m 990,	Part	IV, line	9, or rep	orted an a	mour	nt on Forn	า 990,
								Yes	s 🗌 No	
If "Yes," explain the arrangement in Part XI	II and comp	olete the fo	ollowing t	able:			Ar	nount		_
Beginning balance						1c				_
Additions during the year						1d				
Distributions during the year						1e				
Ending balance						1f				<u></u>
Did the organization include an amount on	Form 990, P	art X, line	21, for e	scrow	or custo	dial accou	ınt liability?	Yes	No	
• • •										
	II. Check h	ere if the o	explanati	on has	been pr	ovided in	Part XIII .			
	anad "Va	a" an Far	000	Dout.	r\/ line	10				
Complete if the organization ans							(d) Three yea	ars back	(e) Four ve	ars back
eginning of year balance	(,)		( )		(-)	,	( )		, , , , , ,	
ontributions										
et investment earnings, gains, and losses										
5.5.,										
rants or scholarships										
ther expenditures for facilities nd programs										
dministrative expenses										
nd of year balance										
Provide the estimated percentage of the cur	rent year ei	nd balance	(line 1g,	colun	nn (a)) h	eld as:				
Permanent endowment 🕨										
Term endowment 🕨										
	•									
•	ession of the	e organizat	ion that a	re hel	d and ad	ministered	d for the		Ves	No
organization by:								3	a(i)	140
(i) Unrelated organizations										
(i) Unrelated organizations (ii) Related organizations				٠.					a(ii)	
(ii) Related organizations								3	a(ii) 3b	
(ii) Related organizations	ons listed a	 s required	on Sche	dule R				3	· -	
(ii) Related organizations	ons listed a	 s required	on Sche	dule R				3	· -	
(ii) Related organizations	ons listed ane organiza	 s required tion's endo	on Scheo	dule R unds.	?	11a. See	e Form 990	3	3b	0.
(ii) Related organizations	ons listed ane organizatent.  swered "Year basis	 s required tion's endo	on Scheo owment for m 990,	dule R unds. Part	? IV, line	11a. See		3; ), Part	3b	
(ii) Related organizations	ons listed ane organizatent.  swered "Year basis	s required	on Scheo owment for m 990,	dule R unds. Part	? IV, line			3; ), Part	3b X, line 1	
(ii) Related organizations	ons listed ane organizatent.  swered "Year basis	s required	on Scheo owment for m 990,	dule R unds. Part	? IV, line			3; ), Part	3b X, line 1	
(ii) Related organizations	ons listed ane organizatent.  swered "Year basis	s required	on Scheo owment for m 990,	dule R unds. Part	? IV, line			3; ), Part	3b X, line 1	
(ii) Related organizations	ons listed ane organizatent.  swered "Year basis	s required	on Scheo owment for m 990,	dule R unds. Part	? IV, line			3; ), Part	3b X, line 1	
	Scholarly research Preservation for future generations Provide a description of the organization's cent XIII.  During the year, did the organization solicities sets to be sold to raise funds rather than Complete if the organization and Part X, line 21.  Is the organization an agent, trustee, customoluded on Form 990, Part X?  If "Yes," explain the arrangement in Part XI Beginning balance	Preservation for future generations  Provide a description of the organization's collections are part XIII.  During the year, did the organization solicit or receive classets to be sold to raise funds rather than to be maint  IV Escrow and Custodial Arrangements.  Complete if the organization answered "Ye Part X, line 21.  Is the organization an agent, trustee, custodian or othe included on Form 990, Part X?	Preservation for future generations  Provide a description of the organization's collections and explain Part XIII.  During the year, did the organization solicit or receive donations of assests to be sold to raise funds rather than to be maintained as passests to be sold to raise funds rather than to be maintained as passests to be sold to raise funds rather than to be maintained as passests to be sold to raise funds rather than to be maintained as passests to be sold to raise funds rather than to be maintained as passests to be sold to raise funds rather than to be maintained as passests to be sold to raise funds rather than to be maintained as passests to be sold to raise funds a passest to be sold to raise funds and the passest to be sold to raise funds and the passest to be sold to raise funds and the passest to be sold to raise funds and the passest to be sold to raise funds and the passest to be sold to raise funds and the passest to be sold to raise funds and the passest to be sold to raise funds and the passest to be sold to raise funds and the passest to be sold to raise funds and the passest to be sold to raise funds and the passest to be sold to raise funds and the passest to be maintained as passest to be sold to raise funds and the passest to be maintained as passest to be sold to raise funds and the passest to be maintained as passest to be sold to raise funds and the passest to be maintained as passest to be sold to raise funds and the passest to be maintained as passest to be sold to raise funds and the passest to be maintained as passest to be sold to raise funds and the passest to be maintained as passest to be administrative expenses and the passest to passest to be maintained as passest to passest to be maintained as passest to be maintained a	Scholarly research  Preservation for future generations  Provide a description of the organization's collections and explain how they part XIII.  During the year, did the organization solicit or receive donations of art, his assets to be sold to raise funds rather than to be maintained as part of the IV Escrow and Custodial Arrangements.  Complete if the organization answered "Yes" on Form 990, Part X, line 21.  Is the organization an agent, trustee, custodian or other intermediary for concluded on Form 990, Part X?  If "Yes," explain the arrangement in Part XIII and complete the following the Beginning balance .  Additions during the year .  Distributions during the year .  Distributions during the year .  Distributions during the arrangement in Part XIII. Check here if the explanation include an amount on Form 990, Part X, line 21, for explain the arrangement in Part XIII. Check here if the explanation in the organization answered "Yes" on Form 990, eaginning of year balance .  Distributions .  Endowment Funds.  Complete if the organization answered "Yes" on Form 990, eaginning of year balance .  Ontributions .  et investment earnings, gains, and losses and of year balance .  Provide the estimated percentage of the current year end balance (line 1g, Board designated or quasi-endowment learned endowment	Scholarly research  Preservation for future generations Provide a description of the organization's collections and explain how they furth Part XIII.  Pouring the year, did the organization solicit or receive donations of art, historica assets to be sold to raise funds rather than to be maintained as part of the organization that one maintained as part of the organization answered "Yes" on Form 990, Part Part X, line 21.  Its the organization an agent, trustee, custodian or other intermediary for contributed on Form 990, Part X?  If "Yes," explain the arrangement in Part XIII and complete the following table: Beginning balance  Additions during the year  Ending balance  Distributions during the year  Ending balance  Off "Yes," explain the arrangement in Part XIII. Check here if the explanation has the properties of the organization answered "Yes" on Form 990, Part X (a) Current year (b) Prior year eginning of year balance  ontributions  The percentages of facilities and programs  Or of year balance  Provide the estimated percentage of the current year end balance (line 1g, colum Board designated or quasi-endowment)  Permanent endowment  Permanent endowment  The percentages on lines 2a, 2b, and 2c should equal 100%.  Are there endowment funds not in the possession of the organization that are helotogranization by:	Scholarly research  Preservation for future generations Provide a description of the organization's collections and explain how they further the or Part XIII.  During the year, did the organization solicit or receive donations of art, historical treasure assets to be sold to raise funds rather than to be maintained as part of the organization's  IV Escrow and Custodial Arrangements.  Complete if the organization answered "Yes" on Form 990, Part IV, line Part X, line 21.  Is the organization an agent, trustee, custodian or other intermediary for contributions or included on Form 990, Part X?  If "Yes," explain the arrangement in Part XIII and complete the following table: Beginning balance  Additions during the year  Distributions during the year  Distributions during the year  Distributions during the year  Complete if the organization include an amount on Form 990, Part X, line 21, for escrow or custors  If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been present in the organization answered "Yes" on Form 990, Part IV, line  Endowment Funds.  Complete if the organization answered "Yes" on Form 990, Part IV, line entry line (a) Current year (b) Prior year (c) Two entributions  et investment earnings, gains, and losses  rants or scholarships  ther expenditures for facilities and programs  diministrative expenses  ond of year balance  Provide the estimated percentage of the current year end balance (line 1g, column (a)) here are another than the provide the estimated or quasi-endowment  Permanent endowment  Permanent endowment  Term endowment  Term endowment  Term endowment  Term endowment  Term endowment funds not in the possession of the organization that are held and adorganization by:	Scholarly research  Preservation for future generations Provide a description of the organization's collections and explain how they further the organization Part XIII.  During the year, did the organization solicit or receive donations of art, historical treasures or othe assets to be sold to raise funds rather than to be maintained as part of the organization's collection in the part of the organization's collection in the part XIII and complete if the organization answered "Yes" on Form 990, Part IV, line 9, or repart X, line 21.  Is the organization an agent, trustee, custodian or other intermediary for contributions or other assembled on Form 990, Part X?  If "Yes," explain the arrangement in Part XIII and complete the following table:  Beginning balance	Scholarly research  Preservation for future generations Provide a description of the organization's collections and explain how they further the organization's exempt provide a description of the organization's collections and explain how they further the organization's exempt provide a description of the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  IV Escrow and Custodial Arrangements.  Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an a Part X, line 21.  Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not notuded on Form 990, Part X?  If "Yes," explain the arrangement in Part XIII and complete the following table:  Beginning balance.  It additions during the year  It additions duri	Scholarly research  Preservation for future generations  Provide a description of the organization's collections and explain how they further the organization's exempt purpose puring the year, did the organization solicit or receive donations of art, historical treasures or other similar bassets to be sold to raise funds rather than to be maintained as part of the organization's collection?.   Yes  Escrow and Custodial Arrangements.  Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amour Part X, line 21.  Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not necluded on Form 990, Part X? .   Yes  If "Yes," explain the arrangement in Part XIII and complete the following table:  Amount Beginning balance .   Additions during the year .   In the post of the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?   Yes  If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII .   Frodowment Funds.  Complete if the organization answered "Yes" on Form 990, Part IV, line 10.  (a) Current year (b) Prior year (c) Two years back (d) Three years back and programs .   there expenditures for facilities and programs .   do f year balance .   Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:  Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:  Permanent endowment   Permanent endowment   Permanent endowment   The percentages on lines 2a, 2b, and 2c should equal 100%.   Are there endowment funds not in the possession of the organization that are held and administered for the organization by:	Scholarly research  Preservation for future generations Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.  Provide a description of the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization?. Yes No IV Escrow and Custodial Arrangements.  Complete if the organization an aswered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form Part X, line 21.  Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?.  Yes No If "Yes," explain the arrangement in Part XIII and complete the following table:  Additions during the year  Indication during the year the during the explanation has been provided in Part XIII  Provide the organization answered "Yes" on Form 990, Part IV, line 10.  Indication during distance the year shade (e) Four year (e) Prior year (e) Prior year (e) Two years back (d) Three years back (e) Four years generated of the current year end balance (line 1g, column (a)) held as:  Board designated or quasi-endowment burely means the provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:  Board designated or quasi-endowment burely means the provided the estimated percentage of the current yea

**Total.** Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

	(Form 990) 2022				Page <b>3</b>
Part VII	Investments - Other Securities. Complete if the organization answered "Yes" on Form 99				
	<ul><li>(a) Description of security or category (including name of security)</li></ul>	(b) Boo value			l of valuation: -year market value
	al derivatives				
(A)					
(B)					
(C)					
(D)					
(E)					
(F)					
(G)					
(H)					
	nn (b) must equal Form 990, Part X, col. (B) line 12.)				
Part	Investments - Program Related.		T)/ line 11e Ce	0	100 Davit V Jima 12
VIII	Complete if the organization answered 'Yes' on Form 99  (a) Description of investment	ou, Part	(b) Book value	(c)	) Method of valuation:
(1)				Cost or	end-of-year market value
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Part IX	on (b) must equal Form 990, Part X, col.(B) line 13.)  Other Assets.	۰			
	Complete if the organization answered 'Yes' on Form 990  (a) Description	O, Part I	V, line 11d. See	Form 99	90, Part X, line 15. (b) Book value
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
	mn (b) must equal Form 990, Part X, col.(B) line 15.)				•
Part X		). Part I	V. line 11e or 1	1f.	<b>'</b>
	See Form 990, Part X, line 25.  (a) Description of liability	, r ure 1			(b) Book value
1. (1) Federal	income taxes				(b) Book value
	hort term lease liability ong term lease liability				33,065 5,490
Refundable	advance				199,310
	on (b) must equal Form 990, Part X, col.(B) line 25.)  For uncertain tax positions. In Part XIII, provide the text of the foo	otnote to	the organization's	▶ s financial	237,865 statements that reports the
	n's liability for uncertain tax positions under FIN 48 (ASC 740). Cl				

1

Part XII

1

2

3

Page 4

87,842

3,443,866

3,443,866

4,933,847

87,842

#### Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 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: Net unrealized gains (losses) on investments . . . . 2a

2b

Donated services and use of facilities . . . . . . 

Other (Describe in Part XIII.) . . . . .

Add lines 2a through 2d . . . . 3

Subtract line 2e from line 1 . . . . Amounts included on Form 990, Part VIII, line 12, but not on line 1:

Investment expenses not included on Form 990, Part VIII, line 7b . Add lines 4a and 4b . . . .

Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) . . . . . . .

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements . . . Amounts included on line 1 but not on Form 990, Part IX, line 25:

Donated services and use of facilities . . . . . Other (Describe in Part XIII.) . . . . .

Subtract line 2e from line 1 . . . . . .

Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) . . . . .

Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) . . . . . . . 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

4b

2c

2d

4a

4b

2a

2b

2c

2d

4a

4c 5

87,842

87,842

2e

3

4c

1

2e

3

4,846,005

4,846,005

2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Add lines 2a through 2d .

Return Reference

Explanation

## SCHEDULE G (Form 990)

# Supplemental Information Regarding Fundraising or Gaming Activities

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

20

QUZ3
Open to Public

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service
Name of the organization

World Savvy

Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

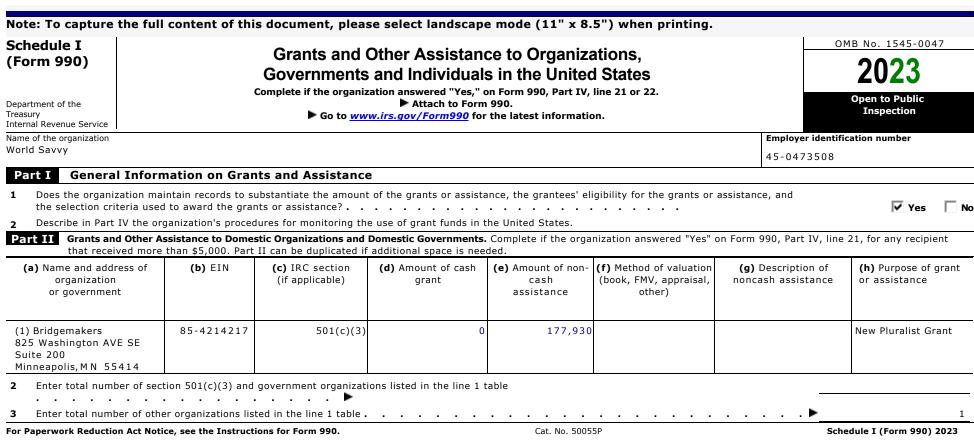
Open to Pub
Inspection
Employer identification number

					45-04/350	)8
_	<b>ctivities.</b> Comple ers are not requi		-		s" on Form 990, Part I	V, line 17.
1 Indicate whether the orga	anization raised fun	ds through	any of	the following activities.	Check all that apply.	
<b>a</b> Mail solicitations				e Solicitation of r	non-government grants	
<b>b</b> Internet and email so	licitations			f Solicitation of	government grants	
c Phone solicitations				g  Special fundrai	sing events	
<b>d</b> In-person solicitation	ıs					
Did the organization have or key employees listed in Services?  If Tyes, list the 10 higher to be compensated at least	n Form 990, Part V est paid individuals	'II) or enti or entities	ty in con (fundrai	nection with profession	nal fundraising 🔽 📉	es No
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundrais custo contr contribu	er have dy or ol of	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1						
2						
3						
4						
5						
6						
7						
8						
9						
. 0						
Total			<b>&gt;</b>			
3 List all states in which the registration or licensing.	organization is reg	istered or	licensed	to solicit contributions	or has been notified it is	exempt from

Pa	rt II Fundraising Events. Commore than \$15,000 of fundraevents with gross receipts g	aising event contribut	on answered "Yes" or ions and gross incom	n Form 990, Part IV, e on Form 990-EZ, li	line 18, or reported nes 1 and 6b. List
	, a a a a a a a a a a a a a a a a a a a	(a)Event #1  MN Critical  Conversation Event  (event type)	(b) Event #2  CA Event (event type)	(c)Other events (total number)	(d) Total events (add col. (a) through col. (c))
Revenue					
	1 Gross receipts	57,757	3,000		60,757
	2 Less: Contributions 3 Gross income (line 1 minus	57,757	3,000		60,757
	line 2)				
ses	6 Rent/facility costs	7,171	11,500		18,671
Direct Expenses	<b>7</b> Food and beverages	5,775	8,740		14,515
孤	8 Entertainment	271.12	571.13		2.1/2.22
Sire	9 Other direct expenses	12,000	893		12,893
_	<b>10</b> Direct expense summary. Add lines 4	through 9 in column (d	)		46,079
	11 Net income summary. Subtract line 1		•		-46,079
Par	<b>Gaming.</b> Complete if the or \$15,000 on Form 990-EZ, lir		"Yes" on Form 990, P	art IV, line 19, or re	ported more than
Revenue		(a) Bingo	<b>(b)</b> Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col.(a) through col.(c))
	1 Gross revenue		. <b>.</b>	ı	
enses	2 Cash prizes				
찞	3 Noncash prizes				
Direct Expense	4 Rent/facility costs				
ш	5 Other direct expenses	<b>—</b>	<b>—</b>		
	<b>6</b> Volunteer labor	☐ Yes <u>%</u>	☐ Yes <u>%</u> ☐ No	☐ Yes% ☐ No	
	7 Direct expense summary. Add lines 2	through 5 in column (d	)		,
	8 Net gaming income summary. Subtra	ct line 7 from line 1, colu	ımn (d)	<u></u>	
9	Enter the state(s) in which the organize	ation conducts gaming a	ctivities:		
a b	Is the organization licensed to conduct If "No," explain:				
10a b	Were any of the organization's gaming If "Yes," explain:		nded or terminated durin	g the tax year?	☐Yes ☐No

		Software	e ID:			
Ac	Iditional Data				Return to Form	
			•	ıle G (F	Form 990) 2023	
	instructions. Return Reference	. 90, 100, 130, 130, 16, and 170,	as applicable. Also provide any additi	Ulidi I	mormation. See	
Par	t IV Supplemental	Information. Provide the expla	nations required by Part I, line 2b, co			b
b		exempt activities during the tax year	ributed to other exempt organizations or sp \$\int \\$	ent		
h			ributed to other exempt organizations or so		Yes No	
а			e distributions from the gaming proceeds to			
17	Mandatory distributions:					
	Director/officer	Employee	☐ Independent contractor			
	bescription of services p					
	Description of services p					
	Gaming manager comper	nsation   \$				
	Name 🕨					
16	Gaming manager informa	tion:				
	Address					
	Name 🕨					
·	,	address of the third party:				
r		retained by the third party *				
b			organization 🕨 \$ and	l the		
15a	_		whom the organization receives gaming		Yes No	
	Address					
	Name 🕨					
14	Enter the name and addr	ess of the person who prepares the or	rganization's gaming/special events books a	nd red	cords:	
b				13b		%
а	·			13a		%
13		ritable gaming? of gaming activity conducted in:		 	Yes No	
12	İs the organization a grar	ntor, beneficiary or trustee of a trust o	r a member of a partnership or other entity			
11		nduct gaming activities with nonmem	bers?			ige 2
Sche	dule G (Form 990) 2023				D:	age <b>3</b>

**Software Version:** 



(6)

(7)

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

Schedule I (Form 990) 2023

		Com	pensation Information		OMB N	o. 1545	-0047
` Departr	m 990) ment of the Treasury Revenue Service	► Complete if the organiz	Directors, Trustees, Key Employees, and Hig Compensated Employees ation answered "Yes" on Form 990, Part IV Attach to Form 990.  Orm 990  Form 990  To instructions and the latest info	, line 23.	Ope	023	blic
	ne of the organiz	zation		Employer identif		-	
WOI	ld Savvy			45-0473508			
Pa	rt I Questi	ions Regarding Compensation	on				
						Yes	No
	990, Part VII, S First-class Travel for Tax idemn		ovided any of the following to or for a person to provide any relevant information regared.  Housing allowance or residence of the Payments for business use of personal services (e.g., maid, characteristics).	ding these items. for personal use rsonal residence iation fees			
b	,	·	organization follow a written policy regardi described above? If "No," complete Part II	5 1 7	1	b	
2			reimbursing or allowing expenses incurred ecutive Director, regarding the items check		2	2	
3	organization's	CEO/Executive Director. Check all the	panization used to establish the compensation that apply. Do not check any boxes for metl disation of the CEO/Executive Director, but	nods			
		tion committee	Written employment contract				

Independent compensation consultant Compensation survey or study Approval by the board or compensation committee Form 990 of other organizations During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: 4b Participate in, or receive payment from, a supplemental nonqualified retirement plan? Participate in, or receive payment from, an equity-based compensation arrangement? 4c If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

Νo Νo Νo For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: Νo 5a 5b Νo Any related organization? . . . . . . If "Yes," on line 5a or 5b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: Νo

5 The organization? . . . . . 6a Any related organization? . . . . . . . . . . 6b Νo If "Yes," on line 6a or 6b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed

payments not described in lines 5 and 6? If "Yes," describe in Part III . . . . . . . . . . . . . . . 7 Νo 8 Were any amounts reported on Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe 8 Νo If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations 

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

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.								
For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.  Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.								
(A) Name and Title	,	(B) Breakdown of W-2, 1099-MISC compensation, and/or 1099-NEC			(C) Retirement and other		<b>(E)</b> Total of columns	<b>(F)</b> Compensation in
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	deferred compensation		(B)(i)-(D)	column (B) reported as deferred on prior Form 990
1 Dana Mortenson Chief Executive Officer	(i)	228,871	0	0	0	18,220	247,091	0
	(ii)	0					0	 0
2 Mallory Tuominen Chief Program Officer	(i)	150,586	0	0	0	7,744	158,330	0
	(ii)	0	<b></b>		<b></b> 0			- <b>-</b> -
3 Anne Soto Executive Director - West Region	(i)	148,239	0	0	0	7,361	155,600	0
	(ii)	0	<b></b>		<b></b> 0	0	0	
4 Felix Isuk Director of Finance	(i)	135,188	0	0	0	16,113	151,301	0
Director of Finance	(ii)				 0		0	 0
			, , , , , , , , , , , , , , , , , , ,	, , ,		, , ,		
	l		<u> </u>				Schedule J	 (Form 990) 2023

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

Page 3

Schedule J (Form 990) 2023

#### Return Reference Explanation Compensation is discussed during a closed session during the Board meeting, and voted upon. The Organization also references compensation reports

Part I, Line 3

Schedule J (Form 990) 2023

from Guidestar, The Nonprofit Times, and various online salary calculators.



SCHEDULE O

Name of the organization

Department of the Treasury Internal Revenue Service

(Form 990)

World Savvy

# Complete to provide information for responses to specific questions on

The process has not changed changed from the prior year.

## Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

Inspection

**Employer identification number** 

45-0473508

Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or 990-EZ. Go to www.irs.gov/Form990 for the latest information.

**Explanation** Return Reference The Finance Committee reviews and comments on the 990 before the submission of the document, and concerns or guestions Form 990. Part VI. are addressed by the Director of Finance and Administration and the Treasurer. Section B. line 11b Form 990. Reviews of any contracts or potential conflicts are evaluated on a case by case basis. Part VI. Section B. line 12c Form 990. The CEO is reviewed on an annual basis by the Executive Committee of the Board of Directors. The Chair of the Board receives Part VI. upward appraisals, given anonymously from staff members and compiled by the HR liaison on the Board. The CEO's annual Section B. review is delivered by the President and Vice President of the Board. Compensation is discussed during a closed session line 15 during the Board meeting, and voted upon. The Leadership Team members have mid-year and annual (360 degree) reviews, which include self-assessments and supervisor appraisals, as well as peer feedback during the annual review. Their performance is measured against key performance indicators, annual goals, and core organizational values. All staff member salaries are referenced against currently available compensation reports, including but not limited to those provided or purchased from Guidestar, The Nonprofit Times, and various online salary calculators. Form 990. The Organization's governing documents, conflict of interest policy, and financial statements are made available through the Part VI. Organization's business office upon request. Section C. line 19

Form 990.

Part XII. Line 2c: