### **PUBLIC DISCLOSURE COPY**

# Form **990**

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

OMB No. 1545-0047

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

2023

			Do not enter social security numbers on this form as it may be		ildudiolioj	
		he Treasury	•	•		Open to Public
_	nal Revenu		Go to www.irs.gov/Form990 for instructions and the latest in			Inspection
_			dar year, or tax year beginning , 2023, and ending			, 20
	Check if ap	`	C Name of organization INTERNATIONAL FELLOWSHIP OF EVANGELICAL STUDE	ENTS USA INC.	D Employ	rer identification number
=	Address cl	-	Doing business as			26-3538114
=	Name char	-	, ,	oom/suite	9	ne number
닏	Initial retur		P.O. BOX 46007			(608) 348-6234
$\vdash$		/terminated	City or town, state or province, country, and ZIP or foreign postal code			
=	Amended i		MADISON, WI 53744		<b>G</b> Gross re	
Ш	Application	n pending	F Name and address of principal officer: KEVIN VAN HORNE			subordinates? Yes Vo
_			SAME AS C ABOVE			s included? LYes No
느	Tax-exemp		✓ 501(c)(3)			. See instructions.
$\overline{}$			ESWORLD.ORG	H(c) Group e	-	
			Corporation Trust Association Other L Year of format	tion: 2008	M State o	f legal domicile: WI
Ľ	art I	Summa	- Fi			
_			cribe the organization's mission or most significant activities: TO SEE	STUDENTS B	UILT INTO	O COMMUNITIES
& Governance	=	OF DISCIP	LES, TRANSFORMED BY THE GOSPEL.	***********		
Па	944					
Ve			box $\square$ if the organization discontinued its operations or disposed of		5% of its	net assets.
G				90.888.8	3	6
رن مي			independent voting members of the governing body (Part VI, line 1b)	20 28 3 3	4	6
ij			per of individuals employed in calendar year 2023 (Part V, line 2a) .	820 SEO SE SE	5	14
Activities			per of volunteers (estimate if necessary)	20203	6	9
ď			7a	0		
_	b N	let unrelat	ed business taxable income from Form 990-T, Part I, line 11		7b	0
			r	Current Year		
ě			ons and grants (Part VIII, line 1h)	6,	105,841	7,149,231
Revenue	1	_	ervice revenue (Part VIII, line 2g)		0	0
Je V			t income (Part VIII, column (A), lines 3, 4, and 7d)	25,757	99,556	
_			nue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) $\ldots$	590	1,765	
_			ue-add lines 8 through 11 (must equal Part VIII, column (A), line 12)	6,	132,188	7,250,552
	1		l similar amounts paid (Part IX, column (A), lines 1–3)	6,660,849		
			aid to or for members (Part IX, column (A), line 4)		0	0
es			her compensation, employee benefits (Part IX, column (A), lines 5–10) 📗	(	525,588	664,563
Expenses	16a F	Profession	al fundraising fees (Part IX, column (A), line 11e)		0	0
ă	b T	otal fundr	aising expenses (Part IX, column (D), line 25) 239,358		100	
ш	17 (	Other expe	enses (Part IX, column (A), lines 11a-11d, 11f-24e)		172,715	185,526
	18 T	Total expe	nses. Add lines 13-17 (must equal Part IX, column (A), line 25)	6,	731,641	7,510,938
_	19 F	Revenue le	ess expenses. Subtract line 18 from line 12	(5	99,453)	(260,386)
Net Assets or Fund Balances				Beginning of Cun	rent Year	End of Year
Sets	20 T	Total asset	ts (Part X, line 16)	6,9	962,766	4,760,944
A P	<b>21</b> T	Total liabili	ties (Part X, line 26)	2,4	135,004	400,526
			or fund balances. Subtract line 21 from line 20	4,5	527,762	4,360,418
P	art II	Signatu	re Block			
			, I declare that I have examined this return, including accompanying schedules and state			y knowledge and belief, it is
tru	e, correct,	and complet	e. Declaration of preparer (other than officer) is based on all information of which prepare	r has any knowle	dge.	
			- i			
Sig	- 1	Signature	of officer	Da	te 5 /	12024
He	ere	KEVIN V	AN HORNE, EXECUTIVE DIRECTOR		3/13	12024
		Type or p	int name and title			
Pa	id	Print/Type	preparer's name Preparer's signature Di	ate	Check	] if PTIN
	nu eparer	SHANNO	ON MAYNARD Kranyon & Maynard 5	5/13/2024	self-emple	- 1
	-	1	OADUL ODGUGELLO	Firm'	s EIN	36-3990892
US	se Only	Firm's add				(505) 502-2746
Ma	y the IRS		this return with the preparer shown above? See instructions		(M) (M) (M)	· Ves No
For	Paperwo	ork Reduct	ion Act Notice, see the separate instructions. Cat. No.	o. 11282Y		Form <b>990</b> (2023)

International Fellowship of Evangelical Students USA Inc. - 26-3538114

Part	Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III
1	riefly describe the organization's mission:
	HE VISION OF INTERNATIONAL FELLOWSHIP OF EVANGELICAL STUDENTS USA, INC. (IFES/USA) IS TO SEE
	TUDENTS BUILT INTO COMMUNITIES OF DISCIPLES, TRANSFORMED BY THE GOSPEL, IMPACTING THE
	INIVERSITY, THE CHURCH, AND SOCIETY FOR THE GLORY OF CHRIST.
	id the organization undertake any significant program services during the year which were not listed on the
2	rior Form 990 or 990-EZ?
	"Yes," describe these new services on Schedule O.
3	id the organization cease conducting, or make significant changes in how it conducts, any program
	ervices?
	"Yes," describe these changes on Schedule O.
4	escribe the organization's program service accomplishments for each of its three largest program services, as measured by
	xpenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other ne total expenses, and revenue, if any, for each program service reported.
	le total expenses, and revende, if any, for each program service reported.
4a	Code: (Expenses \$ 6,755,122 including grants of \$ 6,660,849 ) (Revenue \$ )
	NTERNATIONAL FELLOWSHIP OF EVANGELICAL STUDENTS/USA, INC. (IFES/USA) EXISTS TO BUILD STUDENTS
	NTO COMMUNITIES OF DISCIPLES, WHICH ARE TRANSFORMED BY THE GOSPEL.IFES/USA SEEKS TO IMPACT THE
	INIVERSITY, THE CHURCH, AND SOCIETY FOR THE GLORY OF CHRIST, INTRODUCING STUDENTS TO THE GOSPEL
	OF CHRIST, WHILE ENGAGING THE BROADER HIGHER EDUCATION COMMUNITY IN DIALOGUE ABOUT THE RELEVANCE
	DF THE GOSPEL MESSAGE AND THE CHRISTIAN LIFE AS A WHOLE. IFES/USA ALSO EXISTS TO SUPPORT,
	NCOURAGE, AND FACILITATE THE SPREAD AND GROWTH OF THE CHRISTIAN FAITH THROUGHOUT THE WORLD AND
	O SUPPORT OTHER ORGANIZATIONS, PROJECTS, AND INITIATIVES THAT ARE ORGANIZED AND OPERATED FOR SIMILAR PURPOSES. OUR SUPPORT INCLUDES GRANTING FUNDS TO FOREIGN ORGANIZATIONS, PROJECTS AND
	NSTITUTIONS WITH PURPOSES SIMILAR TO THOSE OF THE IFES/USA FOR SPECIFIC PROJECTS IN FURTHERANCE
	DF IFES/USA'S CHRISTIAN RELIGIOUS TAX-EXEMPT PURPOSES.
	CONTINUED ON SCHEDULE O)
4b	Code:) (Expenses \$including grants of \$) (Revenue \$)
4c	Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )
	they are aware as issay (Dagariha are Caleadula C.)
4d	hther program services (Describe on Schedule O.) Expenses \$ including grants of \$ ) (Revenue \$ )
	otal program service expenses 6 755 122

#### Part IV **Checklist of Required Schedules**

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	~	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	~	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If</i> "Yes," complete Schedule C, Part I	3		_
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		,
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		,
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		,
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If</i> "Yes," <i>complete Schedule D, Part II</i>	7		~
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," complete Schedule D, Part III	8		~
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If</i> "Yes," <i>complete Schedule D, Part IV</i>	9		V
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? <i>If "Yes," complete Schedule D, Part V </i>	10		~
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	<b>'</b>	
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	11b		~
С	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII </i>	11c		~
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	11d		V
e f	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11e	<b>✓</b>	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	~	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		~
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		~
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		~
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV.</i>	14b	<b>V</b>	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15	~	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		~
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</i> See instructions	17		~
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		~
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		~
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		~
b 21	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?  Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	20b 21		
	gerennen en anny	<b>4</b> 1		

<b>Part</b>	V Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	00		
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	23		~
	through 24d and complete Schedule K. If "No," go to line 25a	24a		~
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		~
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		V
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	250		
20	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		~
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			
	persons? If "Yes," complete Schedule L, Part III	27		>
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i> "Yes," complete Schedule L, Part IV	28a		~
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		~
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		<b>\</b>
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29	~	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	30		<b>V</b>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		~
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		<b>V</b>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If</i> "Yes," <i>complete Schedule R, Part I</i>	33		<b>&gt;</b>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		· ·
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		~
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2 </i>	36		~
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		\ \
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? <b>Note:</b> All Form 990 filers are required to complete Schedule O	38	_	<u> </u>
Part				
	Check if Schedule O contains a response or note to any line in this Part V			
	Estable manifestation and discharge of Estable 2000 Estab		Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 6	-		
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable Lab 0 Did the organization comply with backup withholding rules for reportable payments to vendors and	-		
C	reportable gaming (gambling) winnings to prize winners?	1c	~	

Form 990 (2023)

	0 (2020)		_	rage <b>U</b>
Part			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 14			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	~	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		~
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O .	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		~
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		~
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		~
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5с		
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		~
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		~
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		~
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		~
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		~
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities .    10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
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		
<b>L</b>	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
_	1			
C	Enter the amount of reserves on hand	4.4-		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		~
b 15	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O.	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	4-		
		15		~
40	If "Yes," see the instructions and file Form 4720, Schedule N.	40		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		~
47	If "Yes," complete Form 4720, Schedule O.			
17	<b>Section 501(c)(21) organizations.</b> 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?	_ د		
	·	17		
	If "Yes," complete Form 6069.			

5

Form 990 (2023)

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Section A. Governing Body and Management No Yes 1a Enter the number of voting members of the governing body at the end of the tax year . . . 1a 6 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. Enter the number of voting members included on line 1a, above, who are independent . 6 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 1 Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors, trustees, or key employees to a management company or other person? . 3 4 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 5 Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 6 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a 1 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O . . . . . 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No **10a** Did the organization have local chapters, branches, or affiliates? 10a If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a **b** Describe on Schedule O the process, if any, used by the organization to review this Form 990. **12a** Did the organization have a written conflict of interest policy? *If "No," go to line 13* 12a Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c 13 Did the organization have a written whistleblower policy? . . . . . . . . . . . . 13 ~ 14 14 Did the organization have a written document retention and destruction policy? 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official . . . 15a 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed GA, HI, MD, MN, MS, NH, SC, TN, UT, VA, WI, WV 17 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c) 18 (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Other (explain on Schedule O) Own website Another's website ✓ Upon request Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, 19 and financial statements available to the public during the tax year. 20 State the name, address, and telephone number of the person who possesses the organization's books and records. KEVIN VAN HORNE, P.O. BOX 46007, MADISON, WI 53744, (608) 348-6234

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

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

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

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

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

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

☐ Check this box if neither the organization no	r any relate	d org	aniz			ompe	nsa	ted any current	officer, director,	or trustee.
(A) Name and title	(B) Average hours per week (list any hours for related	box, office or directo	unles	Pos neck ss pe	rson	e than of is both or/trus	n an	(D)  Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
	organizations below dotted line)	trustee	nal trustee		oyee	Highest compensated employee				
(1) KEVIN VAN HORNE EXECUTIVE DIRECTOR	40.0			,				107,820	0	10,758
	1.0			-				107,020	0	10,756
(2) ROB KNIGHT BOARD CHAIR	1.0	/		1				0	0	0
(3) DAVE BERRY	1.0			Ť				0	0	0
BOARD CHAIR (PART YEAR)	1.0	~		1				0	0	0
(4) ENISA BALOGUN	1.0	<u> </u>		Ť					, and the second	
BOARD VICE CHAIR		1		~				0	0	0
(5) KENT STEPHENS	1.0									
BOARD VICE CHAIR (PART YEAR)		1		~				0	0	0
(6) LESLIE FERRELL	1.0									
SECRETARY		~		~				0	0	0
(7) ELEANOR EHRESMAN	1.0									
BOARD TREASURER (PART YEAR)		~		~				0	0	0
(8) ANN VAN DIXHORN	1.0									
BOARD MEMBER		~						0	0	0
(9) KURT MORRILL	1.0									
BOARD MEMBER		~						0	0	0
(10) PAULINE FONG	1.0									
BOARD MEMBER		~						0	0	0
(11)	<b></b>									
(12)										
(13)										
(14)										

Form **990** (2023)

Form 990 (2023)

Part V	Section A. Officers, Directors, 1	rustees, l	Key I	Emį	olo	yee	s, an	d F	lighest Compe	nsated	ed Employees (continued)			
	(A) Name and title	(B) Average hours	do not check more that box, unless person is b						(D) Reportable compensation	(E) Report	able	Estimate	( <b>F)</b> ed amount other	
		per week (list any hours for related organizations below dotted line)	Individua or directo	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/ 1099-MISC/ 1099-NEC)	from re organizatio 1099-N 1099-N	ns (W-2/ IISC/	fror organiz	ensation n the ation and ganizations	
(15)							<u> </u>							
(16)														
(17)														
(18)														
(19)														
(20)														
(21)														
(22)														
(23)														
(24)														
(25)														
	Subtotal								107,820		0		10,758	
	Total from continuation sheets to Part Total (add lines 1b and 1c)				:				107,820		0		10,758	
	Total number of individuals (including but reportable compensation from the organi		to th	ose	list	ed	above	e) w	ho received more	e than \$1	00,000	of		
3 1	Did the organization list any <b>former</b> o	officer, dire	ector.	tru	stee	e, k	(ev e	mpl	lovee, or highes	st compe	ensated		Yes No	
•	employee on line 1a? If "Yes," complete s For any individual listed on line 1a, is the	Schedule J	for su	uch	indi	ividı	ual					3		
(	organization and related organizations												V	
	Did any person listed on line 1a receive of for services rendered to the organization												V	
	n B. Independent Contractors	,	- 1-						, , , , , , , , , , , , , , , , , , ,			J J		
1 (	Complete this table for your five high compensation from the organization. Report													
	(A)  Name and business add	· ·		. 101		. Ju		. , 5	(B) Description of serv			(C) Compensa		
NONE	rano and business add								20001111011011011011	.,,,,				
	Total number of independent contractor received more than \$100,000 of compens						ed to	th	nose listed abov	e) who				

# Part VIII Statement of Revenue

		Check if Schedule	Осо	ntains a re	spon	ise or note to an	ıy line in this Pa	ırt VIII		
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
ທ໌ ທ	1a	Federated campaig	ns .		1a					
Contributions, Gifts, Grants, and Other Similar Amounts	b	Membership dues			1b					
ي ۾	С	Fundraising events			1c					
ţ, Ł	d	Related organization			1d					
	e	Government grants			1e					
ns,	f	All other contribution								
e Si		and similar amounts no			1f	7,149,231				
p i	g	Noncash contribution	ons in	cluded in						
	•	lines 1a-1f			1g	\$ 87,923				
a Co	h	Total. Add lines 1a-	-1f .				7,149,231			
						Business Code	, ,,			
e S	2a									
ام جَ	b									
gram Ser Revenue	C									
E Š	d									
P. S.	e									
Program Service Revenue	f	All other program se					0	0	0	0
_	g	Total. Add lines 2a-					0	-		
	3	Investment income								
		other similar amounts)				110,524			110,524	
	4	Income from investr	nent o	of tax-exem	npt bo	and proceeds				
	5				•					
		j		(i) Rea		(ii) Personal				
	6a	Gross rents	6a							
	b	Less: rental expenses	6b							
	С	Rental income or (loss)	6c		0	0				
	d	Net rental income o		s)						
	7a	Gross amount from		(i) Securit		(ii) Other				
		sales of assets		0.005.400						
		other than inventory	7a	8,82	5,180					
<u>o</u>	b	Less: cost or other basis								
Revenue		and sales expenses .	7b	8,83	6,148					
e e	С	Gain or (loss)	7c	(10	),968)	0				
	d	Net gain or (loss)					(10,968)			(10,968)
Other	8a	Gross income from	m fu	indraising						
δ		events (not including		J						
		of contributions rep	porte	d on line						
		1c). See Part IV, line	e 18		8a					
	b	Less: direct expense	es .		8b					
	С	Net income or (loss)	) from	n fundraisin	g eve	nts				
	9a	Gross income f								
		activities. See Part I	IV, lin	e 19 .	9a					
		Less: direct expense			9b					
		Net income or (loss)	•	0	tivitie	es				
	10a	Gross sales of ir		ory, less						
		returns and allowan			10a					
	b	Less: cost of goods			10b					
	С	Net income or (loss)	) from	sales of ir	vento	ory				
<u>s</u> n						Business Code				
eo e	11a									
an en	b									
Miscellaneous Revenue	С									
Ais F	d	All other revenue				900099	1,765	0	0	1,765
_		Total. Add lines 11a					1,765			
	12	Total revenue. See	instr	uctions			7,250,552	0	0	101,321

### Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

	Check if Schedule O contains a response		III IIIIS Part IA .		<u> </u>
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21 .	7,982	7,982		
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	6,652,867	6,652,867		
4	Benefits paid to or for members	0	0		
5	Compensation of current officers, directors,				
	trustees, and key employees	120,318	26,955	39,453	53,910
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	2,002		2,002	
7	Other salaries and wages	440,677	50,115	319,157	71,405
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	41,242	7,696	21,015	12,531
9	Other employee benefits	16,750	2,501	9,977	4,272
10	Payroll taxes	43,574	6,100	27,539	9,935
11	Fees for services (nonemployees):				
а	Management				
b	Legal				
С	Accounting	19,624		19,624	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A), amount, list line 11g expenses on Schedule O.) .	4,206	0	3,806	400
12	Advertising and promotion	31,598		4,374	27,224
13	Office expenses	29,557		27,984	1,573
14	Information technology	10,530		5,394	5,136
15	Royalties				
16	Occupancy	7,772		7,772	
17	Travel	58,751	906	15,485	42,360
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .	14,420		3,853	10,567
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .				
23	Insurance	5,275		5,275	
24	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A), amount, list line 24e expenses on Schedule O.)				
а	MEMBERSHIPS	3,793		3,748	45
b					
C.					
d	All all and an area	_			=
e	All other expenses	7.540.000	0 755 400	0	0
25	Total functional expenses. Add lines 1 through 24e	7,510,938	6,755,122	516,458	239,358
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation. Check here  if				
	following SOP 98-2 (ASC 958-720)				

# Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Par	(A)		(B)				
			Beginning of year		End of year				
	1	Cash—non-interest-bearing	354,552	1	41,303				
	2	Savings and temporary cash investments	408,891	2	236,171				
	3	Pledges and grants receivable, net	1,903,950	3	1,319,023				
	4	Accounts receivable, net	133,060	4	57,045				
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%							
	_	controlled entity or family member of any of these persons	0	5	0				
ts	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)	0	6	0				
	7	Notes and loans receivable, net							
Assets	8	Inventories for sale or use		8					
As	9	Prepaid expenses and deferred charges	1,145	9	61				
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 2,592	·						
	b	Less: accumulated depreciation	0	10c	0				
	11	Investments—publicly traded securities	4,136,692	11	3,089,749				
	12	Investments—other securities. See Part IV, line 11	0		0				
	13	Investments—program-related. See Part IV, line 11	0		0				
	14	Intangible assets		14					
	15	Other assets. See Part IV, line 11	24,476	15	17,592				
	16	<b>Total assets.</b> Add lines 1 through 15 (must equal line 33)	6,962,766	16	4,760,944				
	17	Accounts payable and accrued expenses	30,941	17	26,560				
	18	Grants payable	507,381	18	355,654				
	19	Deferred revenue	•	19	,				
	20	Tax-exempt bond liabilities		20					
	21	Escrow or custodial account liability. Complete Part IV of Schedule D .	1,871,818	21					
Liabilities	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%							
api		controlled entity or family member of any of these persons	0	22	0				
J	23	Secured mortgages and notes payable to unrelated third parties		23					
	24 25	Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third		24					
		parties, and other liabilities not included on lines 17–24). Complete Part X							
		of Schedule D	24,864	25	18,312				
	26	Total liabilities. Add lines 17 through 25	2,435,004	26	400,526				
nces		Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.							
<u>ala</u>	27	Net assets without donor restrictions	869,397	27	1,137,381				
Ä	28	Net assets with donor restrictions	3,658,365	28	3,223,037				
Func		Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.							
_	29	Capital stock or trust principal, or current funds		29					
0		Paid-in or capital surplus, or land, building, or equipment fund		30					
ets o	30	raid in or outsitud our place, or laine, building, or oquipmont fund							
Assets o	30 31	Retained earnings, endowment, accumulated income, or other funds .		31					
Net Assets or Fund Balances		· · · · · · · · · · · · · · · · · · ·	4,527,762	31 32	4,360,418				

Form **990** (2023)

Part	XI Reconciliation of Net Assets				-	
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1			7,25	0,552
2	Total expenses (must equal Part IX, column (A), line 25)	2			7,51	0,938
3	Revenue less expenses. Subtract line 2 from line 1	3			(260	,386)
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4			4,52	7,762
5	Net unrealized gains (losses) on investments	5			9:	3,042
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9				0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	32, column (B))	10			4,36	0,418
Part	Financial Statements and Reporting					_
	Check if Schedule O contains a response or note to any line in this Part XII		• •			
	A		Г		Yes	No
1	Accounting method used to prepare the Form 990:  Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," e	volain				
	Schedule O.	γριαιι ι	OII			
2a				2a		_
Za	If "Yes," check a box below to indicate whether the financial statements for the year were con-			Za		
	reviewed on a separate basis, consolidated basis, or both.	прпес	' 0'			
	Separate basis Consolidated basis Both consolidated and separate basis					
b				2b	~	
~	If "Yes," check a box below to indicate whether the financial statements for the year were aud	ited o	n a			
	separate basis, consolidated basis, or both.					
	Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for ov	ersigh	t of			
	the audit, review, or compilation of its financial statements and selection of an independent account			2c	~	
	If the organization changed either its oversight process or selection process during the tax year, e	xplain	on			
	Schedule O.					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set for	rth in	the			
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		.	3a		~
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not und					
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such	audits	.	3b		

Form **990** (2023)

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

# **Public Charity Status and Public Support**

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection Employer identification number

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

INT	ERNATIONAL FELLOWSHI	P OF EVANC	BELICAL STUDE	NTS US	A INC.	26-35	38114					
Pai	t I Reason for Public Cha	rity Status. (All	l organizations mus	t comple	ete this p	oart.) See instructi	ons.					
The o	organization is not a private founda	ition because it i	s: (For lines 1 through	12, ched	k only or	ne box.)						
1	☐ A church, convention of churc	hes, or associati	on of churches descri	bed in <b>se</b>	ection 17	0(b)(1)(A)(i).						
2	☐ A school described in <b>section</b>											
3	A hospital or a cooperative ho											
4	A medical research organization	•	onjunction with a hosp	oital desc	ribed in <b>s</b>	section 170(b)(1)(A)	(iii). Enter the					
_	hospital's name, city, and state											
5	An organization operated for section 170(b)(1)(A)(iv). (Com	plete Part II.)			•		al unit described	ın				
6 7												
8	A community trust described i			•								
9	An agricultural research organ or university or a non-land-gra university:	nt college of agr	iculture (see instruction	ons). Ente	r the nan	ne, city, and state of	the college or					
10	An organization that normally receives (1) more than 33½% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33½% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See <b>section 509(a)(2)</b> . (Complete Part III.)											
11	☐ An organization organized and	operated exclus	sively to test for public	safety.	See <b>sect</b> i	ion 509(a)(4).						
12	$\hfill\square$ An organization organized and											
	one or more publicly supported	•				` '` '	` '` '	٥k				
	the box on lines 12a through 12		• • • • • • • • • • • • • • • • • • • •			•	. •					
а	_ ,,							1				
	the supported organization supporting organization.					ne directors or trust	ees of the					
b	Type II. A supporting organization(s). You must	the supporting o	rganization vested in	the same								
С	Type III functionally integ its supported organization(						ally integrated with	١,				
d	☐ Type III non-functionally	<b>integrated.</b> A su	pporting organization	operated	d in conn	ection with its suppo	orted organization(	s)				
	that is not functionally integree requirement (see instruction						d an attentiveness	3				
е	☐ Check this box if the organ	ization received	a written determination	on from tl	ne IRS th	at it is a Type I, Type	e II, Type III					
	functionally integrated, or	Гуре III non-func	tionally integrated sup	oporting o	organizat	ion.						
f	Enter the number of supported of	-										
g		1				T						
	(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	listed in you	organization ur governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)					
				Yes	No							
(A)												
(B)												
(C)												
(D)												
(E)												
Toto								_				

Schedule A (Form 990) 2023 Page **2** 

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Socti	on A. Public Support	quality unde	i ille tests lis	ted below, pr	ease comple	te Part III.)	
	dar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Gifts, grants, contributions, and	(a) 2019	(b) 2020	(C) 2021	(u) 2022	(e) 2023	(I) TOTAL
1	membership fees received. (Do not include any "unusual grants.")	5,942,887	4,197,326	6,142,264	6,105,841	7,149,231	29,537,549
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	3,342,001	4,107,020	0,142,204	0,103,041	7,143,231	0
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0
4	Total. Add lines 1 through 3	5,942,887	4,197,326	6,142,264	6,105,841	7,149,231	29,537,549
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						7,017,306
6	Public support. Subtract line 5 from line 4						22,520,243
Secti	on B. Total Support			'		'	
Calen	dar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	<b>(e)</b> 2023	(f) Total
7	Amounts from line 4	5,942,887	4,197,326	6,142,264	6,105,841	7,149,231	29,537,549
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	31,119	27,881	13,636	26,403	110,524	209,563
9	Net income from unrelated business activities, whether or not the business is regularly carried on	,	,	,	,	,	0
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	3,106	2,465	0	590	1,765	7,926
11 12 13	<b>Total support.</b> Add lines 7 through 10 Gross receipts from related activities, etc <b>First 5 years.</b> If the Form 990 is for the organization, check this box and <b>stop he</b>	organization's	•	third, fourth,		12 ar as a section	29,755,038 0 n 501(c)(3)
Secti	on C. Computation of Public Suppor	rt Percentage	<del>)</del>				
14	Public support percentage for 2023 (line 6	6, column (f), di	vided by line 1	1, column (f))		14	75.69 %
15 16a	Public support percentage from 2022 Sch 331/3% support test—2023. If the organi box and stop here. The organization qua	ization did not	check the box	on line 13, an	d line 14 is 33		
b	331/3% support test—2022. If the organithis box and stop here. The organization	zation did not d	check a box o	n line 13 or 16	a, and line 15	is 33 <sup>1</sup> /3% or m	ore, check
17a	10%-facts-and-circumstances test—20 10% or more, and if the organization me Part VI how the organization meets the organization	eets the facts-a facts-and-circu	and-circumsta ımstances tes	nces test, che t. The organiza	ck this box ar ation qualifies	nd <b>stop here</b> . as a publicly	Explain in supported
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organizatio in Part VI how the organization meets the organization	<b>022.</b> If the orga on meets the face facts-and-circ	nization did notes and circure temperature	ot check a box nstances test, st. The organiz	c on line 13, 1 check this boz zation qualifies	6a, 16b, or 17a x and <b>stop hei</b> s as a publicly	a, and line  re. Explain supported
18	<b>Private foundation.</b> If the organization instructions						

Schedule A (Form 990) 2023 Page **3** 

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

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

Secti	on A. Public Support	under the te	oto notou por	ov, picaso oc	ompioto i art	,	
	dar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	<b>(e)</b> 2023	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	(4) 20 10	(3) 2323	(6) 2021	(0) 2022	(6) 2020	(4) 1010
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6 7a	<b>Total.</b> Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons .						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
с 8	Add lines 7a and 7b						
Secti	on B. Total Support				•		
Calen	dar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	<b>(e)</b> 2023	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	<b>Total support.</b> (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the organization, check this box and stop he	•			-	ear as a sectio	
Secti	on C. Computation of Public Suppor	t Percentag	е				
15	Public support percentage for 2023 (line 8	, ,,,	•	, ( , ,		15	%
16	Public support percentage from 2022 Sch					16	%
	on D. Computation of Investment In						<del> </del>
17	Investment income percentage for 2023 (			-			<u>%</u>
18	Investment income percentage from 2022						% and line
19a	33 <sup>1</sup> / <sub>3</sub> % support tests—2023. If the organ 17 is not more than 33 <sup>1</sup> / <sub>3</sub> %, check this box						
h	33 <sup>1</sup> /3% support tests—2022. If the organiz		_	-		-	_
b	line 18 is not more than 331/3%, check this l						
20	Private foundation. If the organization di	d not check a	box on line 14	, 19a, or 19b, o	check this box	and see instru	ctions .

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, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Section A. All Supporting Organizations

Section Section A. All Supporting Organizations

ecu	on A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)			
	purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in <b>Part VI</b> , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action			
	was accomplished (such as by amendment to the organizing document).	5a		
b	<b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
С	<b>Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity	0		
	with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in <b>Part VI</b> .	9a		
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in <b>Part VI</b> .	9b		
С	Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in <b>Part VI</b> .	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated			
	supporting organizations)? If "Yes," answer line 10b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	10b		

Schedule A (Form 990) 2023

Page 5 Schedule A (Form 990) 2023

Part I	V Supporting Organizations (continued)		•	
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c,			
	provide detail in <b>Part VI</b> .	11c		
Section	on B. Type I Supporting Organizations		l	
	The selling of the second		Yes	No
4	Did the appropriate book, manufactor of the manufactor book, officers extinct in their efficient consolity, as a continuous for an ex-			
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in <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 officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported	•		
2	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part</b>			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Section	on C. Type II Supporting Organizations			
Ocour	on or Type in Supporting Organizations		Yes	No
4	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		103	140
1	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 organization(s).	1		
Section	on D. All Type III Supporting Organizations	•		
OCCLIC	on b. All Type in oupporting organizations		Yes	No
4	Did the examination provide to each of its supported examinations, by the last day of the fifth month of the		163	140
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
_	organization(s), or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI</i>			
	how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have			
J	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 played in this regard.	3		
Section	on E. Type III Functionally Integrated Supporting Organizations	U		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see in	nstru	ctions	s)
a	The organization satisfied the Activities Test. <i>Complete line 2 below.</i>			-/-
b	☐ The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
C	☐ The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a governmental entity (	see in	struct	ions).
2	Activities Test. Answer lines 2a and 2b below.		Yes	
а	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? <i>If "Yes," then in <b>Part VI identify</b></i>			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's			
-	involvement, one or more of the organization's supported organization(s) would have been engaged in? If			
	"Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would			
	have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. <i>Answer lines 3a and 3b below.</i>			
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
~	trustees of each of the supported organizations? <i>If "Yes" or "No," provide details in <b>Part VI</b>.</i>	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	Ju		
-	of its supported organizations? If "Yes," describe in <b>Part VI</b> the role played by the organization in this regard.	3b		

Schedule A (Form 990) 2023

Part	V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	gani	zations	. ago
1	Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ	j tru	st on Nov. 20, 1970 (expl	ions A through E.
Sect	ion A—Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B—Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	<b>Discount</b> claimed for blockage or other factors (explain in detail in <b>Part VI</b> ):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C-Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
7	emergency temporary reduction (see instructions).  Check here if the current year is the organization's first as a non-functional content.	6 ally i	integrated Type III suppo	rting organizatio

Schedule A (Form 990) 2023

(see instructions).

Schedule A (Form 990) 2023 Page 7

Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Part V Section D-Distributions **Current Year** Amounts paid to supported organizations to accomplish exempt purposes 1 2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity 2 3 Administrative expenses paid to accomplish exempt purposes of supported organizations 4 Amounts paid to acquire exempt-use assets 4 5 5 Qualified set-aside amounts (prior IRS approval required - provide details in Part VI) Other distributions (describe in Part VI). See instructions. 6 6 7 Total annual distributions. Add lines 1 through 6. 7 Distributions to attentive supported organizations to which the organization is responsive 8 (provide details in Part VI). See instructions. 8 Distributable amount for 2023 from Section C, line 6 9 9 10 10 Line 8 amount divided by line 9 amount (ii) (iii) **Underdistributions Distributable** Section E—Distribution Allocations (see instructions) **Excess Distributions** Pre-2023 Amount for 2023 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. Excess distributions carryover, if any, to 2023 **a** From 2018 . . . . . From 2019 **c** From 2020 **d** From 2021 . . . . . **e** From 2022 Total of lines 3a through 3e Applied to underdistributions of prior years Applied to 2023 distributable amount Carryover from 2018 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from line 3f. Distributions for 2023 from 4 Section D, line 7: Applied to underdistributions of prior years Applied to 2023 distributable amount Remainder. Subtract lines 4a and 4b from line 4. Remaining underdistributions for years prior to 2023, if 5 any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions. Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. Excess distributions carryover to 2024. Add lines 3j and 4c. Breakdown of line 7: Excess from 2019 . . . Excess from 2020 . . . Excess from 2021 . . . Excess from 2022 . . .

Schedule A (Form 990) 2023

Excess from 2023 . . .

Schedule A (Form 990) 2023 Page 8

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

#### Part VI

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

Return Reference - Identifier				Explanation			
SCHEDULE A, PART II,	Description	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
LINE 10 - OTHER INCOME	(1) OTHER INCOME	3,106	2,465		590	1,765	7,926
	Total	3,106	2,465	0	590	1,765	7,926

# Schedule B (Form 990)

Schedule of Contributors

OMB No. 1545-0047

2023

Department of the Treasury Internal Revenue Service Attach to Form 990, 990-EZ, or 990-PF.

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

Name of the organization
INTERNATIONAL FELLOWSHIP OF EVANGELICAL STUDENTS USA INC.

Employer identification number
26-3538114

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

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

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

Cat. No. 30613X

Schedule B (Form 990) (2023)

Name of organization
INTERNATIONAL FELLOWSHIP OF EVANGELICAL STUDENTS USA INC.

Employer identification number

26-3538114

Page 2

Part I	Contributors (see instructions). Use duplicate copie	s of Part I if additional space is r	needed.
(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
2		\$\$ 	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$\$	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$\$ 	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$\$ 	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$\$ 	Person Payroll Noncash  (Complete Part II for noncash contributions.)

Name of organization
INTERNATIONAL FELLOWSHIP OF EVANGELICAL STUDENTS USA INC.

Employer identification number

26-3538114

raitii	Noncasti Property (see instructions). Ose duplicate copies	or Fart II II additional Spa	ace is needed.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	

Schedule B (Form 990) (2023)

Name of organization Employer identification number INTERNATIONAL FELLOWSHIP OF EVANGELICAL STUDENTS USA INC. 26-3538114 Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) \$ Use duplicate copies of Part III if additional space is needed. (a) No. (b) Purpose of gift (c) Use of gift (d) Description of how gift is held from Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (c) Use of gift (b) Purpose of gift (d) Description of how gift is held fŕom Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. fŕom (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (c) Use of gift (b) Purpose of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

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

# **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. OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.

Name o	f the organization		Employer identification number
INTER	NATIONAL FELLOWSHIP OF EVANGELICAL STUDENTS	S USA INC.	26-3538114
Par	Organizations Maintaining Donor Adv Complete if the organization answered "		ds or Accounts
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year) .		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor	advisors in writing that the assets he	eld in donor advised
	funds are the organization's property, subject to the	e organization's exclusive legal contro	l? □ Yes □ No
6	Did the organization inform all grantees, donors, a		
	only for charitable purposes and not for the benef		
	conferring impermissible private benefit?		· · · · · · 🗌 Yes 🗌 No
Par	Conservation Easements		
	Complete if the organization answered "	Yes" on Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the	organization (check all that apply).	
	☐ Preservation of land for public use (for example, recre	eation or education) $\square$ Preservation of	of a historically important land area
	☐ Protection of natural habitat	☐ Preservation o	of a certified historic structure
	☐ Preservation of open space		
2	Complete lines 2a through 2d if the organization he	ld a qualified conservation contribution	n in the form of a conservation
	easement on the last day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		. <b>2a</b>
b	Total acreage restricted by conservation easements	8	. 2b
С	Number of conservation easements on a certified h		
d	Number of conservation easements included on lin		
	on a historic structure listed in the National Registe		
3	Number of conservation easements modified, trans	sferred, released, extinguished, or terr	ninated by the organization during the
	tax year		
4	Number of states where property subject to conser		
5	Does the organization have a written policy requipolations, and enforcement of the conservation east		
_			
6	Staff and volunteer hours devoted to monitoring, inspec	cting, handling of violations, and enforcing	g conservation easements during the year
7	Amount of expenses incurred in monitoring, inspecting	g, handling of violations, and enforcing	conservation easements during the year
8	Does each conservation easement reported on line	2d above satisfy the requirements of	section 170(h)(4)(B)(i)
U	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports of		
•	sheet, and include, if applicable, the text of the foot		
	organization's accounting for conservation easeme	=	
Par	III Organizations Maintaining Collections	s of Art. Historical Treasures. or	Other Similar Assets
	Complete if the organization answered "		
1a	If the organization elected, as permitted under FAS		ue statement and balance sheet works
	of art, historical treasures, or other similar assets		
	service, provide in Part XIII the text of the footnote	to its financial statements that describ	es these items.
b	If the organization elected, as permitted under FAS	SB ASC 958, to report in its revenue s	statement and balance sheet works of
	art, historical treasures, or other similar assets held	for public exhibition, education, or res	search in furtherance of public service,
	provide the following amounts relating to these item		
	<ul><li>(i) Revenue included on Form 990, Part VIII, line 1</li><li>(ii) Assets included in Form 990, Part X</li></ul>		\$
	(ii) Assets included in Form 990, Part X		\$
2	If the organization received or held works of art,	historical treasures, or other similar	assets for financial gain, provide the
	following amounts required to be reported under FA	ASB ASC 958 relating to these items.	
а	Revenue included on Form 990, Part VIII, line 1 .		\$
h	Assets included in Form 990 Part X		\$

Schedule D (Form 990) 2023

Page 2

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply).

3	Using the organization's acquisition, collection items (check all that apply).	,	her reco	rds, chec	k any of the	follov	ving that make	sigr	nificant us	e of its
а	☐ Public exhibition		Ь	□Loan	or exchange	progr	am			
b	Scholarly research		e							
C	☐ Preservation for future generations	•	Ū							
4	Provide a description of the organization		and expl	ain how t	hey further t	he org	janization's exe	mp	t purpose	in Part
5	XIII.  During the year, did the organization	colicit or receive	donation	oc of art	historical tro	acura	s or other simi	lor		
	assets to be sold to raise funds rather	than to be mainta							☐ Yes	☐ No
Part	Complete if the organization 990, Part X, line 21.	answered "Yes					•		unt on Fo	orm
1a	Is the organization an agent, trustee, included on Form 990, Part X?							iot	☐ Yes	☐ No
b	If "Yes," explain the arrangement in P	art XIII and compl	ete the fo	ollowing to	able.		1			
						-		<del>\</del> mc	ount	
C	Beginning balance					10				
d	Additions during the year					1d				
е	Distributions during the year					1e				
f	Ending balance					1f				
2a	Did the organization include an amoun							•		∐ No
	If "Yes," explain the arrangement in P	art XIII. Check her	e if the e	xplanatio	n has been p	provide	ed in Part XIII .			<u> Ш</u>
Par		1.007	. –	000		40				
	Complete if the organization									
		(a) Current year	<b>(b)</b> Pr	ior year	(c) Two years	back	(d) Three years ba	⊃k ——	(e) Four year	rs back
1a	Beginning of year balance							_		
b	Contributions							_		
С	Net investment earnings, gains, and									
	losses							_		
d	Grants or scholarships							$\perp$		
е	Other expenditures for facilities and programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of t	the current year er	nd baland	ce (line 1g	, column (a))	held	as:			
а	Board designated or quasi-endowmen	nt	%							
b	Permanent endowment	%								
С	Term endowment %									
	The percentages on lines 2a, 2b, and	2c should equal 1	00%.							
3a	Are there endowment funds not in the	e possession of the	ne organ	ization tha	at are held a	nd ad	ministered for t	he		
	organization by:								Yes	s No
	(i) Unrelated organizations?								3a(i)	
	(ii) Related organizations?								3a(ii)	
b	If "Yes" on line 3a(ii), are the related o	rganizations listed	l as requ	ired on So	chedule R?				3b	
4	Describe in Part XIII the intended uses	s of the organization	on's end	owment f	unds.					
Part	VI Land, Buildings, and Equip	ment		<u> </u>						
	Complete if the organization	answered "Yes	<u>" on</u> Fo	rm 990, F	Part IV, line	11a.	See Form 990	<u>,</u> Pa	art X, line	10.
	Description of property	(a) Cost or or (investment)		1 ' '	or other basis other)	٠,	Accumulated epreciation		(d) Book val	lue
1a	Land									
b	Buildings									
C	Leasehold improvements									
d	Equipment				2,592		2,592			0
e	Other				, -		,			
	Add lines 1a through 1e. (Column (d) n	nust equal Form 9	90, Part	X, line 10	c, column (B)	)) .				0

Schedule D (Form 990) 2023

Schedule D (Form 990) 2023

Part VII	Investments – Other Securities Complete if the organization answered "Yes" on Fo	orm 990, Part IV, line	11b. See Form 990, Part X, line 12.
	(a) Description of security or category (including name of security)	(b) Book value	<b>(c)</b> Method of valuation: Cost or end-of-year market value
1) Financial	I derivatives		<u> </u>
-	neld equity interests		
<b>3)</b> Other			
(A)			
(G)			
(H)	mn (b) must equal Form 990, Part X, line 12, col. (B))		
Part VIII	Investments—Program Related		
alt VIII	Complete if the organization answered "Yes" on Fo	orm 990 Part IV line	11c See Form 990 Part X line 13
	(a) Description of investment	(b) Book value	(c) Method of valuation:
			Cost or end-of-year market value
(1)			
(2)		+	
(3)			
(4) (5)			
(6)			
(7)			
(8)			
(9)			
	mn (b) must equal Form 990, Part X, line 13, col. (B))		
Part IX	Other Assets Complete if the organization answered "Yes" on Fo	orm 990 Part IV line	11d See Form 990 Part X line 15
	(a) Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9) Fotal (Colu	mn (b) must equal Form 990, Part X, line 15, col. (B))		
Part X	Other Liabilities		
T GI C X	Complete if the organization answered "Yes" on Foline 25.	orm 990, Part IV, line	11e or 11f. See Form 990, Part X,
1.	(a) Description of liability		(b) Book value
(1) Federal ir	ncome taxes		
(2) LEASE (	OBLIGATIONS		18,3°
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)	umn (b) must equal Form 990, Part X, line 25, col. (B))		

Schedule D (Form 990) 2023 Page **4** 

Part	XI Reconciliation of Revenue per Audited Financial Stateme	ents '	With Revenue per	Return	
	Complete if the organization answered "Yes" on Form 990, I	Part I	V, line 12a.		
1	Total revenue, gains, and other support per audited financial statements			1	7,343,594
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	93,042		
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d	0		
е	Add lines 2a through 2d			2e	93,042
3	Subtract line <b>2e</b> from line <b>1</b>			3	7,250,552
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b	0		
С				4c	0
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line			5	7,250,552
Part				r Retur	า
	Complete if the organization answered "Yes" on Form 990, I	Part I	V, line 12a.		
1	Total expenses and losses per audited financial statements			1	7,510,938
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	Ι.	I		
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
С	Other losses	2c			
d	Other (Describe in Part XIII.)	2d	0		
е	Add lines 2a through 2d			2e	0
3	Subtract line <b>2e</b> from line <b>1</b>			3	7,510,938
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	_			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b	0		
c	Add lines <b>4a</b> and <b>4b</b>			4c	7.540.000
5 Dort	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line	2 18.)	<u> </u>	5	7,510,938
	XIII Supplemental Information e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	J 4. D	art IV lines the and Oh	· Dort \/ I	ing 4. Dort V line
	e the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part				
۲, ۱ ۵۱	i. XI, IIIIes zu and 45, and 1 art XII, IIIIes zu and 45. Also complete this part	to pic	Tride arry additional in	ioiiiatioi	·

# SCHEDULE F (Form 990)

#### **Statement of Activities Outside the United States**

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

Attach to Form 990.

20**23**Open to Public

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization Go to www.irs.gov/Form990 for instructions and the latest information.

Inspection
Employer identification number

INTERNATIONAL FELLOWSHIP OF EVANGELICAL STUDENTS USA INC. 26-3538114

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on

	Form 990, Part IV, line	14b.				
1	For grantmakers. Does the other assistance, the grante award the grants or assistant	es' eligibility	for the gran		selection criteria used to	☑ Yes □ No
2	For grantmakers. Describe outside the United States.	in Part V the	e organization	's procedures for monitorin	g the use of its grants and	d other assistance
3	Activities per Region. (The fo	llowing Part	I, line 3 table o	can be duplicated if addition	nal space is needed.)	
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
(1)	CENTRAL AMERICA AND THE CARIBBEAN	0	0	GRANTS TO ASSIST IN SUPPORTING CHRISTIAN STUDENTS		182,254
(2)	EAST ASIA AND THE PACIFIC	0	0	GRANTS TO ASSIST IN SUPPORTING CHRISTIAN STUDENTS		252,236
(3)	EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0	GRANTS TO ASSIST IN SUPPORTING CHRISTIAN STUDENTS		4,958,323
(4)	EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0	PROGRAM SERVICES	TRAVEL	3,318
(5)	MIDDLE EAST AND NORTH AFRICA	0	0	GRANTS TO ASSIST IN SUPPORTING CHRISTIAN STUDENTS		289,963
(6)	NORTH AMERICA (CANADA & MEXICO ONLY)	0	0	GRANTS TO ASSIST IN SUPPORTING CHRISTIAN STUDENTS		56,067
(7)	RUSSIA AND NEIGHBORING STATES	0	0	GRANTS TO ASSIST IN SUPPORTING CHRISTIAN STUDENTS		271,323
(8)	SOUTH AMERICA	0	0	GRANTS TO ASSIST IN SUPPORTING CHRISTIAN STUDENTS		94,309
(9)	SOUTH ASIA	0	0	GRANTS TO ASSIST IN SUPPORTING CHRISTIAN STUDENTS	TDAYE!	63,031
(10)	SOUTH ASIA	0	0	PROGRAM SERVICES	TRAVEL	4,892
(11)	SUB-SAHARAN AFRICA	0	0	GRANTS TO ASSIST IN SUPPORTING CHRISTIAN STUDENTS		485,361
(12)						
(13)						
(14)						
(15)						
(16)						
(17)						
3a		0	0			6,661,077
b	sheets to Part I	0	0			
<u>c</u>	Totals (add lines 3a and 3b)	0	0			6,661,077

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

Cat. No. 50082W

Schedule F (Form 990) 2023

Schedule F (Form 990) 2023

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

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			CENTRAL AMERICA AND THE CARIBBEAN	TO ASSIST IN SUPPORTING CHRISTIAN STUDENTS	6,233	ACH & WIRE TRANSFERS			
(2)			CENTRAL AMERICA AND THE CARIBBEAN	TO ASSIST IN SUPPORTING CHRISTIAN STUDENTS	7,178	ACH & WIRE TRANSFERS			
(3)			CENTRAL AMERICA AND THE CARIBBEAN	TO ASSIST IN SUPPORTING CHRISTIAN STUDENTS	5,313	ACH & WIRE TRANSFERS			
(4)			CENTRAL AMERICA AND THE CARIBBEAN	TO ASSIST IN SUPPORTING CHRISTIAN STUDENTS	139,689	ACH & WIRE TRANSFERS			
(5)			EAST ASIA AND THE PACIFIC	TO ASSIST IN SUPPORTING CHRISTIAN STUDENTS	5,711	ACH & WIRE TRANSFERS			
(6)			EAST ASIA AND THE PACIFIC	TO ASSIST IN SUPPORTING CHRISTIAN STUDENTS	35,963	ACH & WIRE TRANSFERS			
(7)			EAST ASIA AND THE PACIFIC	TO ASSIST IN SUPPORTING CHRISTIAN STUDENTS	7,110	ACH & WIRE TRANSFERS			
(8)			EAST ASIA AND THE PACIFIC	TO ASSIST IN SUPPORTING CHRISTIAN STUDENTS	12,979	ACH & WIRE TRANSFERS			
(9)			EAST ASIA AND THE PACIFIC	TO ASSIST IN SUPPORTING CHRISTIAN STUDENTS	6,654	ACH & WIRE TRANSFERS			
10)			EAST ASIA AND THE PACIFIC	TO ASSIST IN SUPPORTING CHRISTIAN STUDENTS	28,296	ACH & WIRE TRANSFERS			
11)			EAST ASIA AND THE PACIFIC	TO ASSIST IN SUPPORTING CHRISTIAN STUDENTS	145,476	ACH & WIRE TRANSFERS			
12)			EUROPE (INCLUDING ICELAND AND GREENLAND)	TO ASSIST IN SUPPORTING CHRISTIAN STUDENTS	11,788	ACH & WIRE TRANSFERS			
 13)			EUROPE (INCLUDING ICELAND AND GREENLAND)	TO ASSIST IN SUPPORTING CHRISTIAN STUDENTS	31,678	ACH & WIRE TRANSFERS			
14)			EUROPE (INCLUDING ICELAND AND GREENLAND)	TO ASSIST IN SUPPORTING CHRISTIAN STUDENTS	15,367	ACH & WIRE TRANSFERS			
15)			EUROPE (INCLUDING ICELAND AND GREENLAND)	TO ASSIST IN SUPPORTING CHRISTIAN STUDENTS	5,380	ACH & WIRE TRANSFERS			
16)			(SEE STATEMENT)						
2	exempt 501(d	c)(3) organizatio	n by the IRS, or for v	sted above that are revolute the steel above that are revoluted above that are revoluted as the steel above the steel as the steel above that are revoluted as the steel above the steel as the steel above the steel as the stee	ounsel has provid	ed a section 501(c)(	3) equivalency letter		52

Schedule F (Form 990) 2023

Schedule F (Form 990) 2023

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

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

Schedule F (Form 990) 2023 Page **4** 

### Part IV Foreign Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	☐ Yes	✓ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	☐ Yes	✓ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)	☐ Yes	☑ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	☐ Yes	✓ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	☐ Yes	☑ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)	☐ Yes	✓ No

Schedule F (Form 990) 2023

Part II

Grants and Other Assistance to Organizations or Entities Outside the United States (continued)

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)
Name of Organization	IRS code section and EIN	Region	Purpose of grant	Amount of cash grant	Manner of cash disbursement	Amount of non-cash assistance	Description of non-cash assistance	Method of valuation (book, FMV, apraisal, other)
(16)		EUROPE (INCLUDING ICELAND AND GREENLAND)	TO ASSIST IN SUPPORTING CHRISTIAN STUDENTS	9,589	ACH & WIRE TRANSFERS			
(17)		EUROPE (INCLUDING ICELAND AND GREENLAND)	TO ASSIST IN SUPPORTING CHRISTIAN STUDENTS	7,839	ACH & WIRE TRANSFERS			
(18)		EUROPE (INCLUDING ICELAND AND GREENLAND)	TO ASSIST IN SUPPORTING CHRISTIAN STUDENTS	6,589	ACH & WIRE TRANSFERS			
(19)		EUROPE (INCLUDING ICELAND AND GREENLAND)	TO ASSIST IN SUPPORTING CHRISTIAN STUDENTS	50,148	ACH & WIRE TRANSFERS			
(20)		EUROPE (INCLUDING ICELAND AND GREENLAND)	TO ASSIST IN SUPPORTING CHRISTIAN STUDENTS	6,120	ACH & WIRE TRANSFERS			
(21)		EUROPE (INCLUDING ICELAND AND GREENLAND)	TO ASSIST IN SUPPORTING CHRISTIAN STUDENTS	5,494	ACH & WIRE TRANSFERS			
(22)		EUROPE (INCLUDING ICELAND AND GREENLAND)	TO ASSIST IN SUPPORTING CHRISTIAN STUDENTS	5,108	ACH & WIRE TRANSFERS			
(23)		EUROPE (INCLUDING ICELAND AND GREENLAND)	TO ASSIST IN SUPPORTING CHRISTIAN STUDENTS	17,091	ACH & WIRE TRANSFERS			
(24)		EUROPE (INCLUDING ICELAND AND GREENLAND)	TO ASSIST IN SUPPORTING CHRISTIAN STUDENTS	13,871	ACH & WIRE TRANSFERS			
(25)		EUROPE (INCLUDING ICELAND AND GREENLAND)	TO ASSIST IN SUPPORTING CHRISTIAN STUDENTS	10,764	ACH & WIRE TRANSFERS			
(26)		EUROPE (INCLUDING ICELAND AND GREENLAND)	TO ASSIST IN SUPPORTING CHRISTIAN STUDENTS	4,741,543	ACH & WIRE TRANSFERS			
(27)		MIDDLE EAST AND NORTH AFRICA	TO ASSIST IN SUPPORTING CHRISTIAN STUDENTS	283,934	ACH & WIRE TRANSFERS			
(28)		NORTH AMERICA (CANADA & MEXICO ONLY)	TO ASSIST IN SUPPORTING CHRISTIAN STUDENTS	55,311	ACH & WIRE TRANSFERS			
(29)		RUSSIA AND NEIGHBORING STATES	TO ASSIST IN SUPPORTING CHRISTIAN STUDENTS	24,153	ACH & WIRE TRANSFERS			
(30)		RUSSIA AND NEIGHBORING STATES	TO ASSIST IN SUPPORTING CHRISTIAN STUDENTS	23,160	ACH & WIRE TRANSFERS			
(31)		RUSSIA AND NEIGHBORING STATES	TO ASSIST IN SUPPORTING CHRISTIAN STUDENTS	8,118	ACH & WIRE TRANSFERS			
(32)		RUSSIA AND NEIGHBORING STATES	TO ASSIST IN SUPPORTING CHRISTIAN STUDENTS	19,337	ACH & WIRE TRANSFERS			
(33)		RUSSIA AND NEIGHBORING STATES	TO ASSIST IN SUPPORTING CHRISTIAN	24,835	ACH & WIRE TRANSFERS			

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)
Name of Organization	IRS code section and EIN	Region	Purpose of grant	Amount of cash grant	Manner of cash disbursement	Amount of non-cash assistance	Description of non-cash assistance	Method of valuation (book, FMV, apraisal, other)
45.0			STUDENTS					
(34)		RUSSIA AND NEIGHBORING STATES	TO ASSIST IN SUPPORTING CHRISTIAN STUDENTS	13,190	ACH & WIRE TRANSFERS			
(35)		RUSSIA AND NEIGHBORING STATES	TO ASSIST IN SUPPORTING CHRISTIAN STUDENTS	124,080	ACH & WIRE TRANSFERS			
(36)		RUSSIA AND NEIGHBORING STATES	TO ASSIST IN SUPPORTING CHRISTIAN STUDENTS	31,652	ACH & WIRE TRANSFERS			
(37)		SOUTH AMERICA	TO ASSIST IN SUPPORTING CHRISTIAN STUDENTS	19,839	ACH & WIRE TRANSFERS			
(38)		SOUTH AMERICA	TO ASSIST IN SUPPORTING CHRISTIAN STUDENTS	5,142	ACH & WIRE TRANSFERS			
(39)		SOUTH AMERICA	TO ASSIST IN SUPPORTING CHRISTIAN STUDENTS	25,432	ACH & WIRE TRANSFERS			
(40)		SOUTH AMERICA	TO ASSIST IN SUPPORTING CHRISTIAN STUDENTS	8,162	ACH & WIRE TRANSFERS			
(41)		SOUTH AMERICA	TO ASSIST IN SUPPORTING CHRISTIAN STUDENTS	29,324	ACH & WIRE TRANSFERS			
(42)		SOUTH ASIA	TO ASSIST IN SUPPORTING CHRISTIAN STUDENTS	13,945	ACH & WIRE TRANSFERS			
(43)		SOUTH ASIA	TO ASSIST IN SUPPORTING CHRISTIAN STUDENTS	12,444	ACH & WIRE TRANSFERS			
(44)		SOUTH ASIA	TO ASSIST IN SUPPORTING CHRISTIAN STUDENTS	28,829	ACH & WIRE TRANSFERS			
(45)		SUB-SAHARAN AFRICA	TO ASSIST IN SUPPORTING CHRISTIAN STUDENTS	20,094	ACH & WIRE TRANSFERS			
(46)		SUB-SAHARAN AFRICA	TO ASSIST IN SUPPORTING CHRISTIAN STUDENTS	13,869	ACH & WIRE TRANSFERS			
(47)		SUB-SAHARAN AFRICA	TO ASSIST IN SUPPORTING CHRISTIAN STUDENTS	34,450	ACH & WIRE TRANSFERS			
(48)		SUB-SAHARAN AFRICA	TO ASSIST IN SUPPORTING CHRISTIAN STUDENTS	11,984	ACH & WIRE TRANSFERS			
(49)		SUB-SAHARAN AFRICA	TO ASSIST IN SUPPORTING CHRISTIAN STUDENTS	5,851	ACH & WIRE TRANSFERS			
(50)		SUB-SAHARAN AFRICA	TO ASSIST IN SUPPORTING CHRISTIAN STUDENTS	5,814	ACH & WIRE TRANSFERS			
(51)		SUB-SAHARAN AFRICA	TO ASSIST IN SUPPORTING CHRISTIAN STUDENTS	5,535	ACH & WIRE TRANSFERS			
(52)		SUB-SAHARAN	TO ASSIST IN	362,678	ACH & WIRE			

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)
Name of Organization	IRS code section and EIN	Region	Purpose of grant	Amount of cash grant	Manner of cash disbursement	Amount of non-cash assistance	Description of non-cash assistance	Method of valuation (book, FMV, apraisal, other)
		AFRICA	SUPPORTING CHRISTIAN STUDENTS		TRANSFERS			

#### Part V

**Supplemental Information.** Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

Return Reference - Identifier	Explanation
SCHEDULE F, PART I, LINE 2 - PROCEDURES FOR MONITORING USE OF GRANT FUNDS	IFES/UK SENDS FUNDING REQUESTS TO IFES/USA. BASED ON THE FRAMEWORK BUDGET APPROVED BY THE BOARD OF IFES/USA, THE BOARD THEN DECIDES WHETHER TO APPROVE THE GRANT REQUEST. THE EXECUTIVE DIRECTOR OF IFES/USA MAKES PERIODIC TRIPS TO THE IFES/UK OFFICE TO REVIEW THE OPERATIONS AND EXPENDITURES OF GRANTED FUNDS. ANNUALLY, IFES/USA HAS IFES/UK GRANT AMOUNTS AND PURPOSE RESTRICTIONS CONFIRMED. IFES/UK REQUIRES ANNUAL FINANCIAL REPORTING FROM ANY SUBSEQUENT RE-GRANTEES AND ENSURES OFAC COMPLIANCE.
SCHEDULE F, PART I, LINE 3 - METHOD USED TO ACCOUNT FOR EXPENDITURES ON ORG'S FINANCIAL STATEMENTS	CENTRAL AMERICA AND THE CARIBBEAN -ACCRUAL EAST ASIA AND THE PACIFIC -ACCRUAL EUROPE (INCLUDING ICELAND AND GREENLAND) -ACCRUAL MIDDLE EAST AND NORTH AFRICA -ACCRUAL NORTH AMERICA (CANADA & MEXICO ONLY) -ACCRUAL RUSSIA AND NEIGHBORING STATES -ACCRUAL SOUTH AMERICA -ACCRUAL SOUTH ASIA -ACCRUAL SUB-SAHARAN AFRICA -ACCRUAL
SCHEDULE F, PART II, LINE 1 - METHOD USED TO ACCOUNT FOR EXPENDITURES ON ORG'S FINANCIAL STATEMENTS	CENTRAL AMERICA AND THE CARIBBEAN -ACCRUAL, EAST ASIA AND THE PACIFIC -ACCRUAL, EUROPE (INCLUDING ICELAND AND GREENLAND) -ACCRUAL, MIDDLE EAST AND NORTH AFRICA -ACCRUAL NORTH AMERICA (CANADA & MEXICO ONLY) -ACCRUAL RUSSIA AND NEIGHBORING STATES -,ACCRUAL SOUTH AMERICA -,ACCRUAL SOUTH ASIA -,ACCRUAL SUB-SAHARAN AFRICA -,ACCRUAL

# SCHEDULE M (Form 990)

# **Noncash Contributions**

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Name of the organization

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

| Employer identification number

INTERNATIONAL FELLOWSHIP OF EVANGELICAL STUDENTS USA INC.

26-3538114

Part	Types of Property						
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method o	(d) of determinin otribution am	
1	Art—Works of art						
2	Art—Historical treasures						
3	Art—Fractional interests						
4	Books and publications						
5	Clothing and household						
	goods						
6	Cars and other vehicles						
7	Boats and planes						
8	Intellectual property						
9	Securities—Publicly traded	·	5	87,923	SELLING CO	OST	
10	Securities—Closely held stock .						
11	Securities - Partnership, LLC,						
	or trust interests						
12	Securities-Miscellaneous						
13	Qualified conservation						
	contribution—Historic						
	structures						
14	Qualified conservation						
	contribution—Other						
15	Real estate—Residential						
16	Real estate—Commercial						
17	Real estate—Other						
18	Collectibles						
19	Food inventory						
20	Drugs and medical supplies						
21	Taxidermy						
22	Historical artifacts						
23	Scientific specimens						
24	Archeological artifacts						
25	Other ()						
26	Other ()						
27	Other ()						
28	_Other( )			0			
29	Number of Forms 8283 received which the organization completed					_	
	which the organization completed	FUIII 0203	s, Part v, Donee Acknowled	agement	29	0	T
	<b>5</b>					Yes	No
30a	During the year, did the organiza						
	28, that it must hold for at least 3 used for exempt purposes for the					00-	
L			ing penou:			30a	-
	If "Yes," describe the arrangement		stance policy that require	on the review of any m	anetandard		
31	Does the organization have a contributions?		tance policy that require	=	Jiistaiiuaiu	31 🗸	
32a	Does the organization hire or us					31 🗸	+
<b>32</b> d		-	_	is to solicit, process, or se		222	١.,
h	If "Yes," describe in Part II.					32a	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
ь 33	If the organization didn't report an	amount in	column (c) for a type of pro	nerty for which column (a)	is checked		
00	describe in Part II.	arriourit III	column (c) for a type of pro	porty for willon column (a)	o oneoneu,		

### Part II

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

Return Reference - Identifier	Explanation
	SECURITIES - PUBLICLY TRADED - THE NUMBER OF CONTRIBUTIONS REPRESENTS THE NUMBER OF CONTRIBUTIONS RECEIVED, NOT THE NUMBER OF ITEMS DONATED.

#### **SCHEDULE O** (Form 990)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047 Open to Public Inspection

Department of Treasury Internal Revenue Service

Name of the Organization INTERNATIONAL FELLOWSHIP OF EVANGELICAL STUDENTS USA INC.

Employer Identification Number 26-3538114

Return Reference - Identifier	Explanation
FORM 990, PART III, LINE 4A - PROGRAM SERVICE DESCRIPTION	WE VALUE WORKING CLOSELY WITH CHRISTIAN STUDENT MINISTRIES THAT HAVE A STAFF PRESENCE IN SPECIFIC REGIONS AND COUNTRIES THAT ARE COMMITTED TO STRONG GOVERNANCE DEVELOPMENT, LEADERSHIP DEVELOPMENT, AND SKILL BUILDING IN AREAS OF EVANGELISM, SCRIPTURE ENGAGEMENT, AND DEVELOPMENT OF LOCAL FUNDING CAPACITY.WE ALSO VALUE WORKING CLOSELY WITH CHRISTIAN STUDENT MINISTRIES THAT ARE ACTIVE IN PIONEERING STUDENT MINISTRY ON NEW CAMPUSES AND IN NEW COUNTRIES.
FORM 990, PART VI, LINE 1A - DELEGATE BROAD AUTHORITY TO A COMMITTEE	THE EXECUTIVE COMMITTEE CONSIST OF TWO OR MORE DIRECTORS ELECTED BY THE BOARD OF DIRECTORS AND MAY EXERCISE, WHEN THE BOARD OF DIRECTORS IS NOT IN SESSION, THE POWERS OF THE BOARD OF DIRECTORS IN THE MANAGEMENT OF THE AFFAIRS OF THE CORPORATION, EXCEPT ACTION WITH RESPECT TO ELECTION OF OFFICERS AND THE FORMATION OF AND THE FILLING OF VACANCIES.
FORM 990, PART VI, LINE 11B - REVIEW OF FORM 990 BY GOVERNING BODY	THE FORM 990 IS PREPARED BY AN INDEPENDENT CPA FIRM AND THEN REVIEWED BY THE DIRECTOR OF FINANCE AND EXECUTIVE DIRECTOR IN DETAIL. THE BOARD MEMBERS ARE PROVIDED WITH AN ELECTRONIC COPY OF THE 990 PRIOR TO A BOARD MEETING WHERE THE 990 IS DISCUSSED AND APPROVED BEFORE IT IS FILED WITH THE IRS.
FORM 990, PART VI, LINE 12C - CONFLICT OF INTEREST POLICY	ON AN ANNUAL BASIS, EACH DIRECTOR, OFFICER, AND MEMBER OF A COMMITTEE WITH GOVERNING BOARD DELEGATED POWERS SIGNS A STATEMENT WHICH AFFIRMS THAT SUCH PERSON:  1. HAS RECEIVED A COPY OF THE CONFLICTS OF INTEREST POLICY,  2. HAS READ AND UNDERSTANDS THE POLICY,  3. HAS AGREED TO COMPLY WITH THE POLICY, AND  4. UNDERSTANDS THE ORGANIZATION IS CHARITABLE AND IN ORDER TO MAINTAIN ITS FEDERAL TAX EXEMPTION, IT MUST ENGAGE PRIMARILY IN ACTIVITIES WHICH ACCOMPLISH ONE OR MORE OF ITS TAX-EXEMPT PURPOSES.  THE EXECUTIVE COMMITTEE OF THE BOARD IS RESPONSIBLE FOR OVERSIGHT OF THIS PROCESS AND THE HANDLING ANY POTENTIAL CONFLICTS OF INTEREST. IF A CONFLICT IS DETERMINED TO EXIST, INTERESTED PARTIES ARE REQUIRED TO RECUSE THEMSELVES FROM RELATED BOARD DELIBERATION AND VOTE.
FORM 990, PART VI, LINE 15A - PROCESS TO ESTABLISH COMPENSATION OF TOP MANAGEMENT OFFICIAL	IN DETERMINING COMPENSATION OF THE ORGANIZATION'S EXECUTIVE DIRECTOR, THE INDEPENDENT MEMBERS OF THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS RESEARCH COMPARABLE SALARY AND BENEFIT PACKAGES OFFERED BY SIMILARLY SIZED NON-PROFITS LOCATED IN THE SAME REGION. INFORMATION USED WAS OBTAINED THROUGH SOURCES SUCH AS THE CHRISTIAN LEADERSHIP ALLIANCE'S SALARY SURVEY, EVANGELICAL COUNCIL OF FINANCIAL ACCOUNTABILITY'S SALARY SEARCH, AS WELL AS THE CHARITY NAVIGATOR'S WEBSITE. THIS PROCESS IS FOLLOWED EACH YEAR TO SUBSTANTIATE COMPENSATION PROVIDED. THE BOARD DECISION REGARDING EXECUTIVE COMPENSATION IS RECORDED IN THE BOARD MINUTES.
FORM 990, PART VI, LINE 15B -	THE ORGANIZATION DOES NOT COMPENSATE ANY OTHER OFFICERS OR KEY EMPLOYEES. THEREFORE, THIS LINE WAS ANSWERED NO IN ACCORDANCE WITH THE INSTRUCTIONS.
FORM 990, PART VI, LINE 19 - REQUIRED DOCUMENTS AVAILABLE TO THE PUBLIC	THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST.