$\mathsf{Form}\,990$

Return of Organization Exempt From Income Tax

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

Do not enter social security numbers on this form as it may be made public.

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

OMB No. 1545-0047

2022
Open to Public Inspection

Department of the Treasury Internal Revenue Service

A Fo	or the 2	2022 calendar year, or tax year beginning	and	ending			
B Ch	eck if plicable:	C Name of organization			D Employer identific	ation number	
	Address change	World Leadership Founda	tion				
\equiv	Name change	Doing business as			27-049084	13	
\equiv	Initial return	Number and street (or P.O. box if mail is not delive	ered to street address)	Room/suite	E Telephone number		
\vdash	Final	5595 Sunshine Canyon Dr			(303) 679		
	return/ termin- ated	City or town, state or province, country, and Z			G Gross receipts \$	69,017.	
	Amende				H(a) Is this a group re		
H	Applica		Wehner			? Yes X No	
	pending				H(b) Are all subordinates in		
LT	ax-exe	mpt status: X 501(c)(3) 501(c) ()	(insert no.) 4947(a)(1)	or 527		list. See instructions	
	/ebsite	7 77 7 7 1			H(c) Group exemption	number	
			ociation Other	L Year		State of legal domicile: CO	
		Summary					
	1 E	Briefly describe the organization's mission or most s	ignificant activities: See	Schedu	le O		
Governance	_					_	
Ē	2 (Check this box if the organization discon	tinued its operations or dispos	sed of more	than 25% of its net ass	ets.	
<u>§</u>	3 1	Number of voting members of the governing body (F	Part VI, line 1a)		3	4	
ğ	4 1	Number of independent voting members of the gove	erning body (Part VI, line 1b)		4	0	
စ္ဆ	5	Total number of individuals employed in calendar ye	ear 2022 (Part V, line 2a)		5	0	
鬟	6	Total number of volunteers (estimate if necessary)			6	25	
Activities &	7 a ¯	Fotal unrelated business revenue from Part VIII, colu	umn (C), line 12			0.	
_	bl	Net unrelated business taxable income from Form 9	90-T, Part I, line 11			0.	
					Prior Year	Current Year	
<u>o</u>		Contributions and grants (Part VIII, line 1h)			2,090.	0.	
enc		A 5 A 5 A 5 A 5 A 5 A 5 A 5 A 5 A 5 A 5			0.	68,965.	
Revenue		Investment income (Part VIII, column (A), lines 3, 4,		000000000000000000000000000000000000000	18.	52.	
-		Other revenue (Part VIII, column (A), lines 5, 6d, 8c,		57-57-60-50-61-60-60-50	0.	60.017	
_	Commercial	Total revenue - add lines 8 through 11 (must equal f	AND		2,108.	69,017.	
		Grants and similar amounts paid (Part IX, column (A	•		0.	0.	
		Benefits paid to or for members (Part IX, column (A)			0.	0.	
98	15	Salaries, other compensation, employee benefits (P		2 (Control (2012) (2014) (2014)	0.	0.	
Expenses	10a	Professional fundraising fees (Part IX, column (A), lir Total fundraising expenses (Part IX, column (D), line		0.	· · · · · · · · · · · · · · · · · · ·	7. T. N. S. C.	
Ä	17	Other expenses (Part IX, column (A), lines 11a-11d,	A 10 - 10 - 10 - 10 - 10 - 10 - 10 - 10		31,205.	70,182.	
	11/	Total expenses. Add lines 13-17 (must equal Part IX			31,205.	70,182.	
		Revenue less expenses. Subtract line 18 from line 1			-29,097.	-1,165.	
- N	_	rievertue less experises. Subtract line 10 mon line			ginning of Current Year	End of Year	
ets (20	Total assets (Part X, line 16)			47,292.	53,314.	
Assets Raland	21	Total liabilities (Part X, line 26)			22,369.	29,556.	
# 5	1	Net assets or fund balances. Subtract line 21 from	ine 20		24,923.	23,758.	
		Signature Block					
Und	er pena	Ities of perjury, I declare that I have examined this return,	including accompanying schedule	s and statem	ents, and to the best of my	knowledge and belief, it is	
		t, and complete. Declaration of preparer (other than office					
		/m//			June	6, 2023	
Sign	n	Signature of officer			Date	<i>k</i>	
Her	e	Ross Wehner, Co-Founder					
		Type or print name and title					
		Print/Type preparer's name	Preparer's signature		Date Check C	PTIN	
Paid			Meghan Hays	(05/31/23 self-employ		
	parer	Firm's name KURTZ FARGO LLP			Firm's EIN 2	7-3147421	
Use Only Firm's address 1470 Walnut Street, Ste 301							
_		Boulder, CO 80302			Phone no. (7		
May	the If	RS discuss this return with the preparer shown about	ve? See instructions			X Yes No	

Form **8868**

(Rev. January 2022)

Department of the Treasury Internal Revenue Service

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

File a separate application for each return.

► Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-0047

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870. Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits. Automatic 6-Month Extension of Time. Only submit original (no copies needed). All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Name of exempt organization or other filer, see instructions. Taxpayer identification number (TIN) Type or print World Leadership Foundation 27-0490843 File by the Number, street, and room or suite no. If a P.O. box, see instructions. filing your 5595 Sunshine Canyon Drive return. See City, town or post office, state, and ZIP code. For a foreign address, see instructions. instructions. Boulder, CO 80302 Enter the Return Code for the return that this application is for (file a separate application for each return) Application Return **Application** Return Is For Code Is For Code Form 990 or Form 990-EZ Form 1041-A 01 08 Form 4720 (individual) 03 Form 4720 (other than individual) 09 Form 990-PF 04 Form 5227 10 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069 11 12 Form 990-T (trust other than above) 06 Form 8870 Form 990-T (corporation) Megan B. Warren The books are in the care of ► 30495 Big Pine Rd. - Painter, VA 23420 Telephone No. ► 757-442-6398 Fax No. If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box 🕨 🔲 . If it is for part of the group, check this box 🕨 📉 and attach a list with the names and TINs of all members the extension is for. I request an automatic 6-month extension of time until November 15, 2023 to file the exempt organization return for the organization named above. The extension is for the organization's return for: ► X calendar year 2022 or ___ tax year beginning , and ending | Initial return Final return If the tax year entered in line 1 is for less than 12 months, check reason: Change in accounting period If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less 0. any nonrefundable credits. See instructions. За If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2022)

Return of Organization Exempt From Income Tax

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

Inspection

Department of the Treasury Internal Revenue Service

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

A F	or the	2022 calendar year, or tax year beginning and	ending						
B c	heck if pplicable	C Name of organization		D Employer identific	cation number				
	Addres	World Leadership Foundation							
F	Name change			27-04908	43				
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suit						
]Final return/	5595 Sunshine Canyon Drive	,						
	termin ated			G Gross receipts \$	69,017.				
	Ameno return	Boulder, CO 80302		H(a) Is this a group re	eturn				
	Applic tion	F Name and address of principal officer: Ross Wehner		for subordinates	? Yes X No				
	pendir	same as C above		H(b) Are all subordinates in	ncluded? Yes No				
<u> 1 T</u>	ax-exe	empt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1)	or 52	If "No," attach a	list. See instructions				
	Vebsit			H(c) Group exemptio	n number				
		organization: X Corporation Trust Association Other	L Yea	r of formation: 2009 n	State of legal domicile: CO				
Pa	rt I	Summary							
Activities & Governance	1	Briefly describe the organization's mission or most significant activities: See	Sched	ule O					
ınaı	2	Check this box if the organization discontinued its operations or dispos	sed of mor	e than 25% of its net ass	sets.				
) Ve	3	Number of voting members of the governing body (Part VI, line 1a)		3	4				
Ğ	4	Number of independent voting members of the governing body (Part VI, line 1b)			0				
Š	5	Total number of individuals employed in calendar year 2022 (Part V, line 2a)		5	0				
vitie	6	Total number of volunteers (estimate if necessary)		6	25				
(ctj		Total unrelated business revenue from Part VIII, column (C), line 12			0.				
_	b	Net unrelated business taxable income from Form 990-T, Part I, line 11	<u></u>	7b	0.				
				Prior Year	Current Year				
Revenue	8	Contributions and grants (Part VIII, line 1h)		2,090.	0.				
		Program service revenue (Part VIII, line 2g)		0.	68,965.				
ě		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		18.	52.				
щ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	0.				
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		2,108.	69,017.				
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.				
		Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.				
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	0.				
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.				
ă	b	Total fundraising expenses (Part IX, column (D), line 25)	0.	21 205	70 100				
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		31,205. 31,205.	70,182.				
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)			70,182.				
	19	Revenue less expenses. Subtract line 18 from line 12		-29,097.	-1,165 .				
ts or	20 21 22			Beginning of Current Year	End of Year				
ssel 3ala	20	Total assets (Part X, line 16)		47,292. 22,369.	53,314.				
et A	21	Total liabilities (Part X, line 26)		24,923.	29,556. 23,758.				
Z _□	rt II	Net assets or fund balances. Subtract line 21 from line 20		24,343.	23,730.				
		Ities of perjury, I declare that I have examined this return, including accompanying schedule:	e and etaton	nante and to the heet of my	knowledge and helief it is				
	•	t, and complete. Declaration of preparer (other than officer) is based on all information of wl		•	kilowieuge allu bellel, it is				
uuc,	COLLEC	t, and complete. Declaration of preparer (other than officer) is based on an information of wi	non propare	i ilas aliy kilowieuge.					
Ciar		Signature of officer		Date					
Sigr Her		Ross Wehner, Co-Founder							
пег	e	Type or print name and title							
		Print/Type preparer's name Preparer's signature		Date Check	PTIN				
Paid		Meghan Hays Meghan Hays		05/31/23 if self-employ					
	arer	Firm's name KURTZ FARGO LLP			7-3147421				
	Only	Firm's address 1470 Walnut Street, Ste 301		, iiiii 3 Liii 2					
	,	Boulder, CO 80302		Phone no (7	20) 310-2078				
Mav	the IF	RS discuss this return with the preparer shown above? See instructions		1. Hono hor ()	X Yes No				

. u	Check if Schedule O contains a response or note to any line in this Part III	X
1	Briefly describe the organization's mission:	
	World Leadership Foundation's mission is to partner with K-12 sc	
	around the world to bring greater purpose to learning. Our visio	n is
	that K-12 education can, and should be, the ultimate platform fo	<u>r</u>
	launching children into lives of purpose. World Leadership Found	ation
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	X Yes No
	prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O.	ZI TESINO
3		X Yes No
_	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by ex	penses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total experience of the section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total experience of the section 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total experience of the section 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total experience of the section 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total experience of the section 501(c)(4) organizations are required to report the amount of grants and allocations to other section 501(c)(4) organizations are required to report the section 501(c)(4) organizations are required to report the section 501(c)(4) organization 501(c)(4)	enses, and
	revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$ 8,285. including grants of \$) (Revenue \$)	3,100.
	World Leadership Foundation was used to fund professional learni programs for a growing diversity of educators from independent,	ng public
	and charter schools. These efforts included:	public,
	and charter behoofs. These errores included.	
	Coordinators Fund, which was focused on collecting individual do	nations
	and supplying donations to our network coordinators in countries	like
	Peru, India, and Belize. Many of these volunteer coordinators we	re
	unable to buy enough food during the pandemic, and these donation	ns
	helped support their families.	
4b	(Code:) (Expenses \$ 57 , 503 •including grants of \$) (Revenue \$	55,689.)
	The fourth annual K-12 Purpose Summit, which was a hybrid event	,
	including virtual and in-person sessions for educators.	
	0.500	10 156
4c	(Code:) (Expenses \$ 2,500. including grants of \$) (Revenue \$) (Revenue \$) (Revenue \$) (Revenue \$) (Revenue \$	10,176.
	concluded in 2022.	and
	concluded in 2022.	
4d	Other program services (Describe on Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses 68,288.	
		Form 990 (2022)

			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_	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		Х
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		х
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		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
-	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>	⊢ ′		
Ü	Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for	٣		
3	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
		9		Х
40	If "Yes," complete Schedule D, Part IV	"		-22
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	40		Х
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	١		
	Part VI	11a		X
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	l		3,7
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			٦,
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Х	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
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? If "Yes," complete Schedule F, Parts II and IV	15		X
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		Х
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? If "Yes," complete Schedule G, Part I. See instructions	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
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		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		х
				-

World Leadership Foundation 27-0490843 Page 4 Part IV Checklist of Required Schedules (continued) Yes No 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 Х 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 X 23 Schedule J 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Х 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 d 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 Х b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Х 25b 26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% Х 26 controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II 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 Х 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): A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "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 c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If 28c "Yes," complete Schedule L, Part IV 29 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Х 31 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes." complete Х 32 Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations X sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Х 34 X **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 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?

	Note: All Form 990 filers are required to complete Schedule O					
Pai	ort V Statements Regarding Other IRS Filings and Tax Compliance					
	Check if Schedule O contains a response or note to any line in this Part V					
				Yes	No	
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable						
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	0				
С	c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming					
	(gambling) winnings to prize winners?		1c	X		

If "Yes," complete Schedule R, Part V, line 2

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

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

Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?

Х

Х

36

37

Form 990 (2022) World Leadership Foundation

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

			Yes	No
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		37
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	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	١.		 ₩
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	<u>4a</u>		X
D	If "Yes," enter the name of the foreign country Cas instructions for file and the foreign country Cas instructions for file and the fire SEN Form 1114 Bonard of Foreign Bonk and Financial Accounts (FRAR)			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	-		Х
_	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a 5b		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5c		-
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T? Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	30		
0a		6a		x
h	any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	- Oa		
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	OD		
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		х
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
-	to file Form 8282?	7c		х
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
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	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	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	4		
11	Section 501(c)(12) organizations. Enter:			
_	Gross income from members or shareholders	4		
b	Gross income from other sources. (Do not net amounts due or paid to other sources against			
40-	amounts due or received from them.)	10-		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Is the organization licensed to issue qualified health plans in more than one state?	13a		
u	Note: See the instructions for additional information the organization must report on Schedule O.	ioa		
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
-	organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		Х
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes," complete Form 6069.			

Form 990 (2022) World Leadership Foundation 27-0490843 Page
Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

	to line ou, ob, or rob solom, accorded the circumstances, proceeded, or oranges on conceans of conceans of			
0	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management		.,	·
			Yes	No
па	Enter the number of voting members of the governing body at the end of the tax year	-		
	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 0. Enter the number of voting members included on line 1a. above, who are independent			
b		-		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other		Х	
_	officer, director, trustee, or key employee?	2	Λ	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?	_		х
4		4		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	5		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?			X
6 7-	Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	6		
7a				х
	more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	7a		_^
D	and the other than the annual and the decided	7.		х
	persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	7b		
8		0.0	Х	
	The governing body? Each committee with authority to act on behalf of the governing body?	8a 8b	X	
b	• • • • • • • • • • • • • • • • • • • •	OD	- 22	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	9		х
Sec	organization's mailing address? If "Yes." provide the names and addresses on Schedule O	<u> </u>		21
	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	103	X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	100		
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
		12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe			
	on Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		Х
	Other officers or key employees of the organization	15b		Х
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filedNone			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)	s only)	availal	ole
	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, an	d financ	cial	
	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			
	Megan B. Warren - 757-442-6398			
	30495 Big Pine Rd., Painter, VA 23420			

Form 990 (2022)

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.

X Check this box if neither the organization ne	or any related o	orga	niza	tion	con	nper	sate	ed any current officer, d	irector, or trustee.	
(A)	(B)	(C)						(D)	(E)	(F)
Name and title	Average	(do	Position (do not check more than one					Reportable	Reportable	Estimated
	hours per	box	box, unless person is both an officer and a director/trustee)			is both	n an	compensation	compensation	amount of
	week		Cer ai	lu a u	Tecic	Trirus	lee)	from	from related	other
	(list any hours for	lirecto				L		the organization	organizations (W-2/1099-MISC/	compensation from the
	related	96 Or (stee			ısatec		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	truste	al tru		yee	nd mo		1099-NEC)	10001120,	and related
	below	Individual trustee or director	In stit utio nal tru stee	Je .	Key employee	Highest compensated employee	Jer			organizations
	line)	Indi	Insti	Officer	Key	High	Former			
(1) Bruce Miller	0.00	1								
Board Member		Х				_		0.	0.	0.
(2) Erin Hawk	0.00									
Board Member		Х		Х		_		0.	0.	0.
(3) Ross Wehner	0.00	ļ		l						
Board Member	0.00	Х		Х		├		0.	0.	0.
(4) David Maher	0.00	.,								•
Board Member		Х				_		0.	0.	0.
		-								
						-				
		1								
						\vdash				
		-								
		-								

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(A) Name and title	(B) Average hours per	Position (do not check more than one box, unless person is both an officer and a director/trustee)				than o	n an	(D) Reportable compensation	(E) Reportable compensatio	n	(F) timated nount of	
	week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer B	Key employee	Highest compensated employee		from the organization (W-2/1099-MISC/ 1099-NEC)	from related organization (W-2/1099-MIS 1099-NEC)	ns compens SC/ from the organization and rela		other pensation om the anization d related anizations
1b Subtotal c Total from continuation sheets to Part VI								0.		0.		0.
d Total (add lines 1b and 1c) Total number of individuals (including but no compensation from the organization								0 . eceived more than \$100,	,000 of reportable	0.		0.
3 Did the organization list any former officer,	director, truste	ee, k	кеу е	empl	loye	e, or	hig	hest compensated emp	loyee on	[Yes No
line 1a? If "Yes," complete Schedule J for s 4 For any individual listed on line 1a, is the su											3	X
and related organizations greater than \$150Did any person listed on line 1a receive or a	0,000? If "Yes,	" co	mple	ete S	Sche	edule	Jf	or such individual			4	X
rendered to the organization? // "Yes." com Section B. Independent Contractors											5	X
Complete this table for your five highest co the organization. Report compensation for	=	-							•	pensat	ion fro	om
(A) Name and business			ONE					(B) Description of s		С	(Compe	;) nsation
2 Total number of independent contractors (in \$100,000 of compensation from the organic	•	ot lin	nited	to '	thos (ted	above) who received me	ore than			

		Check if Schedule O contains a response	or note to any line	e in this Part VIII			
		Officer if Generalic G contains a response	or riote to arry link	(A)	(B)	(C)	(D)
				Total revenue	Related or exempt	Unrelated	Revenue excluded
					function revenue	business revenue	from tax under sections 512 - 514
							Sections 512 - 514
nts nts	1 a	Federated campaigns 1a					
iral our	b	Membership dues1b					
A, G	С	Fundraising events1c					
ii.	d	Related organizations 1d					
s, G	е	Government grants (contributions) 1e					
Sign	f	All other contributions, gifts, grants, and					
uti her		similar amounts not included above					
Q Ë	g						
Contributions, Gifts, Grants and Other Similar Amounts	9 h						
Oa		Total. Add lines 1a-1f	Business Code				
	_	Conforma Indom	611600	EE 600	EE 600		
<u>ce</u>		Conference Income		55,689.			
er v	b	Webinar Income	611600	10,176.	10,176.		
Se	С	Coordinators Fund	611600	3,100.	3,100.		
ar	d						
Program Service Revenue	е						
Ā	f	All other program service revenue					
		Total. Add lines 2a-2f		68,965.			
	3	Investment income (including dividends, intere		·			
		other similar amounts)		52.			52.
	4	Income from investment of tax-exempt bond p		321			320
		·	[
	5	Royalties(i) Real	(ii) Personal				
			(II) Personal				
	6 a	Gross rents6a					
	b	Less: rental expenses 6b					
	С	Rental income or (loss) 6c					
	d	Net rental income or (loss)					
	7 a	Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory 7a					
	b	Less: cost or other basis					
<u>o</u>	_	and sales expenses 7b					
ığ	_	Gain or (loss) 7c					
Revenue		. ,					
er B		Net gain or (loss)	1				
	8 а	Gross income from fundraising events (not					
ŏ		including \$ of					
		contributions reported on line 1c). See					
		Part IV, line 188a					
	b	Less: direct expenses 8b					
	С	Net income or (loss) from fundraising events					
	9 a	Gross income from gaming activities. See					
		Part IV, line 19 9a	<u> </u>				
	b	Less: direct expenses 9b					
		Net income or (loss) from gaming activities					
		Gross sales of inventory, less returns					
		and allowances 10a					
		Less: cost of goods sold 10b	'				
	С	Net income or (loss) from sales of inventory					
<u>0</u>			Business Code				
e e	11 a						
Miscellaneous Revenue	b						
eve	С						
/list B	d	All other revenue					
		Total. Add lines 11a-11d					
		Total revenue See instructions		69 017.	68 965.	0.	52.

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 (**D**)
Fundraising (C) Management and general expenses Do not include amounts reported on lines 6b. Program service expenses Total expenses 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages 7 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 9 10 Payroll taxes Fees for services (nonemployees): Management Legal 750. 750. Accounting Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.) Advertising and promotion 12 Office expenses 13 Information technology 14 15 Royalties Occupancy 16 17 Payments of travel or entertainment expenses 18 for any federal, state, or local public officials ... Conferences, conventions, and meetings 19 20 Payments to affiliates 21 Depreciation, depletion, and amortization 22 23 Other expenses. Itemize expenses not covered 24 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.) 57,503. 57,503. Conference Expense Project Costs 6,473. 6,473. 2,500. 2,500. Facilitator/ Speaker Ex 1,690. d Coordinator Fund 1,690. 1,266. 122. 1,144. e All other expenses 70,182. 68,288. 1,894. 0. Total functional expenses. Add lines 1 through 24e 25 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)

		Check if Schedule O contains a response or not	te to any line in this Part X			
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		40,842.	1	36,143.
	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net			4	
	5	Loans and other receivables from any current or				
		trustee, key employee, creator or founder, subs	tantial contributor, or 35%			
		controlled entity or family member of any of the			5	
	6	Loans and other receivables from other disquali				
		under section 4958(f)(1)), and persons described			6	
S	7	Notes and loans receivable, net			7	
Assets	8	Inventories for sale or use			8	
As	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment: cost or other				
		basis. Complete Part VI of Schedule D	10a			
	b	Less: accumulated depreciation			10c	
	11	Investments - publicly traded securities			11	
	12	Investments - other securities. See Part IV, line		12		
	13	Investments - program-related. See Part IV, line		13		
	14	Intangible assets		14		
	15	Other assets. See Part IV, line 11	6,450.	15	17,171.	
	16	Total assets. Add lines 1 through 15 (must equ	ı	47,292.	16	53,314.
	17	Accounts payable and accrued expenses		0.	17	27,056.
	18	Grants payable	ı		18	
	19	Deferred revenue		22,369.	19	2,500.
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete			21	
S	22	Loans and other payables to any current or form				
Liabilities		trustee, key employee, creator or founder, subs	tantial contributor, or 35%			
abil		controlled entity or family member of any of the	se persons		22	
Ë	23	Secured mortgages and notes payable to unrela	ated third parties		23	
	24	Unsecured notes and loans payable to unrelate	d third parties		24	
	25	Other liabilities (including federal income tax, pa	yables to related third			
		parties, and other liabilities not included on lines	s 17-24). Complete Part X			
		of Schedule D			25	
	26	Takal Balanda a Aslal Basas 47 November 05		22,369.	26	29,556.
		Organizations that follow FASB ASC 958, che	eck here			
Ses		and complete lines 27, 28, 32, and 33.				
<u>a</u>	27	Net assets without donor restrictions			27	
Ва	28	Net assets with donor restrictions			28	
nd I		Organizations that do not follow FASB ASC 9	58, check here X			
Ī		and complete lines 29 through 33.	l			
S	29	Capital stock or trust principal, or current funds		0.	29	0.
Net Assets or Fund Balances	30	Paid-in or capital surplus, or land, building, or ed	quipment fund	0.	30	0.
As	31	Retained earnings, endowment, accumulated in		24,923.	31	23,758.
Ret	32	Total net assets or fund balances		24,923.	32	23,758.
_	33	Total liabilities and net assets/fund balances .		47,292.	33	53,314.

Pa	rt 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			<u> 17.</u>	
2	Total expenses (must equal Part IX, column (A), line 25)	2	7	0,1	82.	
3	Revenue less expenses. Subtract line 2 from line 1	3	_	1,1	65.	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	2	4,9	23.	
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9			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	2	3,7	58.	
Pa	rt XII Financial Statements and Reporting	•				
	Check if Schedule O contains a response or note to any line in this Part XII					
				Yes	No	
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.				
2a	2a Were the organization's financial statements compiled or reviewed by an independent accountant?					
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?		2b		X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on 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 oversight of the	audit,				
	review, or compilation of its financial statements and selection of an independent accountant?		2c			
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule O.				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the					
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the require					
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b			
			Form	990	(2022)	

SCHEDULE A

(Form 990)

Total

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

World Leadership Foundation

Employer identification number

27-0490843 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	472,745.	618,350.	22,329.	2,090.	68,965.	1184479.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	472,745.	618,350.	22,329.	2,090.	68,965.	1184479.
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)						179,526.
6	Public support. Subtract line 5 from line 4.						1004953.
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 4	472,745.	618,350.	22,329.	2,090.	68,965.	1184479.
	Gross income from interest.		-	-	-	-	
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						1184479.
	Gross receipts from related activities,	etc. (see instruction	ns)			12	
	First 5 years. If the Form 990 is for the					D1(c)(3)	
	organization, check this box and stop	here					
Sed	ction C. Computation of Publi	c Support Per	centage				
14	Public support percentage for 2022 (I	ine 6, column (f), di	vided by line 11, c	olumn (f))		14	84.84 %
15	Public support percentage from 2021	Schedule A, Part I	I, line 14			15	89.72 %
16a	33 1/3% support test - 2022. If the	organization did no	t check the box on	line 13, and line 1	4 is 33 1/3% or mo	ore, check this box	and
	stop here. The organization qualifies as a publicly supported organization X						
b	b 33 1/3% support test - 2021. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box						
	and stop here. The organization qual	ifies as a publicly s	upported organiza	tion			
17a	10% -facts-and-circumstances test	- 2022. If the orga	anization did not c	heck a box on line	13, 16a, or 16b, a	nd line 14 is 10% o	or more,
	and if the organization meets the fact						
	meets the facts-and-circumstances te	st. The organization	n qualifies as a pul	olicly supported or	ganization		
b	10% -facts-and-circumstances test	- 2021. If the orga	anization did not c	heck a box on line	13, 16a, 16b, or 1	7a, and line 15 is	10% or
	more, and if the organization meets the	ne facts-and-circum	stances test, chec	k this box and st	op here. Explain ir	n Part VI how the	
	organization meets the facts-and-circu	umstances test. Th	e organization qua	lifies as a publicly	supported organiz	ation	
18	Private foundation. If the organization	n did not check a l	oox on line 13, 16a	i, 16b, 17a, or 17b	, check this box ar	nd see instructions	

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.)

Se	ction A. Public Support		,				
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
k	Amounts included on lines 2 and 3 received from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support	Т	Т		_	1	
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b Net income from unrelated business						
••	activities not included on line 10b,						
	whether or not the business is						
12	regularly carried on Other income. Do not include gain						
12	or loss from the sale of capital						
40	assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)					(01/2)/(0)	
14	First 5 years. If the Form 990 is for the	-			•		
Se	check this box and stop here ction C. Computation of Publi						
	Public support percentage for 2022 (I			column (f))		15	%
	Public support percentage from 2021					16	/ 6
	ction D. Computation of Inves					101	70
	Investment income percentage for 20			ne 13. column (f))		17	%
	Investment income percentage from					18	%
	33 1/3% support tests - 2022. If the						
	more than 33 1/3%, check this box ar						
ŀ	33 1/3% support tests - 2021. If the						
•	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization						

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

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

		Yes	No
	1		
	2		
	3a		
	3b		
	SD		
	3с		
	4a		
	4b		
	4c		
	5a		
	5b		
	5c		
	6		
	_		
	7		
	8		
	J		
	9a		
	9b		
	9c		
	10a		
	- 3-		
	10b		
ule	A (Forn	n 990)	2022

Sche	dule A (Form 990) 2022 World Leadership Foundation 27	7-049084	3 Pa	age 5
Pa	rt IV 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		
	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
800	detail in Part VI. tion B. Type I Supporting Organizations	11c		
360	tion B. Type I Supporting Organizations		V	Na
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one more supported organizations have the power to regularly appoint or elect at least a majority of the organization's office directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one support 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.	ers, ted	Yes	No
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
0	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
•	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	2		
3	the organization maintained a close and continuous working relationship with the supported organization(s). By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
3	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instru	ctions).		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity	(see instruction	1 <u>s).</u>	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
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? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	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			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
_	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	0-		
1.	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3b		
	5. 1.5 55pp 5. 556 organization of the section in the section in the section of the organization in this regard.		1	

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

Schedule A (Form 990) 2022

instructions).

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

Schedule A (Form 990) 2022

Schedule A

Identification of Excess Contributions Included on Part II, Line 5

2022

** Do Not File **

*** Not Open to Public Inspection ***

Contributor's Name	Total Contributions	Excess Contributions
Brad Feld	25,000.	1,310.
Dave and Kelly Burke	30,000.	6,310.
Eric Roza	75,000.	51,310.
Gregg Goldenberg	91,666.	67,976.
Julian Farrior	50,000.	26,310.
Gene and Maria Frantz	50,000.	26,310.
Total Excess Contributions to Schedule A, Part II, Line 5		179,526.

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047 Inspection

Name of the organization

World Leadership Foundation

Employer identification number 27-0490843

Pai	TI Organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line		or Accounts. Complete if the			
		(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 w	vriting that the assets held in donor advis	sed funds			
	are the organization's property, subject to the organization's e	exclusive legal control?	Yes No			
6	Did the organization inform all grantees, donors, and donor ac	dvisors in writing that grant funds can be	used only			
	for charitable purposes and not for the benefit of the donor or	donor advisor, or for any other purpose	conferring			
_	impermissible private benefit?		Yes No			
Pai	t II Conservation Easements. Complete if the org	anization answered "Yes" on Form 990,	Part IV, line 7.			
1	Purpose(s) of conservation easements held by the organization	`				
	Preservation of land for public use (for example, recreat	ion or education) Preservation o	f a historically important land area			
	Protection of natural habitat Preservation of a certified historic structure					
	Preservation of open space					
2	Complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization of the complete lines 2a through 2d if the organization of the complete lines 2a through 2d if the co	ed conservation contribution in the form				
	day of the tax year.		Held at the End of the Tax Year			
а	Total number of conservation easements		1 1			
b						
	Number of conservation easements on a certified historic stru		2c			
d	Number of conservation easements included in (c) acquired at					
	historic structure listed in the National Register					
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by the	e organization during the tax			
	year					
4	Number of states where property subject to conservation ease					
5	Does the organization have a written policy regarding the peri					
_	violations, and enforcement of the conservation easements it					
6	Staff and volunteer hours devoted to monitoring, inspecting, h	nandling of violations, and enforcing con-	servation easements during the year			
7	Amount of expenses incurred in monitoring, inspecting, handl	ling of violations, and enforcing conserva	ation easements during the year			
8	Does each conservation easement reported on line 2(d) above	a action, the requirements of acction 170	/b)/d)/D\(i)			
0		-				
9	and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation					
3	balance sheet, and include, if applicable, the text of the footnot	·				
	organization's accounting for conservation easements.	ote to the organization's infancial statem	ients that describes the			
Pai	Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.					
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.				
1a	If the organization elected, as permitted under FASB ASC 958	3, not to report in its revenue statement a	and balance sheet works			
	of art, historical treasures, or other similar assets held for public	lic exhibition, education, or research in fo	urtherance of public			
	service, provide in Part XIII the text of the footnote to its financial	cial statements that describes these iten	ns.			
b	If the organization elected, as permitted under FASB ASC 958	3, to report in its revenue statement and	balance sheet works of			
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in furth	herance of public service,			
	provide the following amounts relating to these items:					
	(i) Revenue included on Form 990, Part VIII, line 1		\$			
	(m) 4		•			
2	If the organization received or held works of art, historical trea		al gain, provide			
	the following amounts required to be reported under FASB AS					
а	Revenue included on Form 990, Part VIII, line 1		\$			
b	Assets included in Form 990, Part X					

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

		<u> </u>	,	<u> </u>	
	Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a	Land				
b	Buildings				
	Leasehold improvements				
d	Equipment				
е	Other				
Tota	I. Add lines 1a through 1e. (Column (d) must equa	I Form 990 Part X colun	an (R) line 10c)	· ·	0.

Schedule D (Form 990) 2022

Part VII Investments - Other Securities. Complete if the organization answered "Yes" of	on Form 990 Part IV line	11b See Form 990 Part X line 12	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	l-of-year market value
(1) Financial derivatives	()	'	, , , , , , , , , , , , , , , , , , , ,
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" of	on Form 990. Part IV. line	11c. See Form 990. Part X. line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	I-of-vear market value
(1)	(4)		,
(1)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets.			
Complete if the organization answered "Yes" of	on Form COO Dort IV line	11d Con Form 000 Dort V line 15	
	Description	Tru. See Form 990, Part A, line 15.	(b) Book value
(1) Project Advance	Description		
			9,062.
(2) Deferred Expenses			1,629. 6,480.
(3) Due from Related Party			0,480.
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			45 454
Total. (Column (b) must equal Form 990, Part X, col. (B) line	15.)		17,171.
Part X Other Liabilities.			
Complete if the organization answered "Yes" of	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 25.	
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			

organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Par	TXI Reconciliation of Revenue per Audited Financial	Statements With Revenue	per Return.	
	Complete if the organization answered "Yes" on Form 990, Part	IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statements	s	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 1		
а	Net unrealized gains (losses) on investments			
b	Donated services and use of facilities			
С	Recoveries of prior year grants			
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d			
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b			
b	Other (Describe in Part XIII.)	4b		
C	Add lines 4a and 4b			
5 Dar	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I. linet XII Reconciliation of Expenses per Audited Financial	e 12.)		
Fai		-	es per neturn.	
	Complete if the organization answered "Yes" on Form 990, Part			
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	ا ما		
a	Donated services and use of facilities			
b	Prior year adjustments			
C	Other losses			
d	Other (Describe in Part XIII.)	· · · · · · · · · · · · · · · · · · ·	20	
e o	Add lines 2a through 2d			
3 4	Subtract line 2e from line 1 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.)			
	A 1.11: A 1.41		4c	
5	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I. II			
	rt XIII Supplemental Information.	ne 16.)		
Provi	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a	and 4: Part IV. lines 1b and 2b: Par	t V. line 4: Part X. line 2: Part	XI.
	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provi		, , , ,	,
		•		

SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

2022 Open to Public Inspection

OMB No. 1545-0047

Name of the organization

World Leadership Foundation

Employer identification number 27-0490843

Form 990, Part 1, Line 1

World Leadership Foundation (www.wortdleadershlpfoundatlon.org) is a
global non-profit that is on a mission "to unleash the potential of
global communities through technology, teaming, and collaboration."
World Leadership Foundation serves rural school partners in the USA and
abroad where there are significant funding gaps.

Who We Are -

World Leadership Foundation's mission is to partner with K-12 schools around the world to bring greater purpose to learning. Our vision is that K-12 education can, and should be, the ultimate platform for launching children into lives of purpose. World Leadership Foundation accomplishes its mission by partnering on school transformation efforts with schools across the Americas, and also supporting our long-standing global school partners in 10 countries around the world.

Over the last decade, World Leadership Foundation has incubated an ambitious effort to "reduce inequity through education" in rural schools via an initiative that eventually came to be known as TeachUNITED (www.teachunited.org), which became its own independent 501(c)(3) non-profit as of January 1, 2020. As of May 2023, TeachUNITED had reached 1 million students and we are proud of the role that World Leadership Foundation had in starting this impact-driven nonprofit.

Schedule O (Form 990) 2022 Page 2

Name of the organization World Leadership Foundation Employer identification number 27-0490843

accomplishes its mission by partnering on school transformation efforts with schools across the Americas, and also supporting our long-standing global school partners in 10 countries around the world.

Over the last decade, World Leadership Foundation has incubated an ambitious effort to "reduce inequity through education" in rural schools via an initiative that eventually came to be known as TeachUNITED (www.teachunited.org), which became its own independent 501(c)(3) non-profit as of January 1, 2020. As of May 2023, TeachUNITED had reached 1 million students and we are proud of the role that World Leadership Foundation had in starting this impact-driven nonprofit.

Form 990, Part III, Line 2, New Program Services:

In the USA and Canada, World Leadership Foundation hosted the 4th

annual K-12 Purpose Summit in Boulder, Colorado. This event brought

together educators from around the world to explore what purpose means

for us as educators, and what it means for our teaching practice. More

information on this event can be found at www.k12purposesummit.com.

Form 990, Part III, Line 3, Changes in Program Services:

With our partner schools abroad, World Leadership Foundation in 2022

focused on making key investments in rural school communities that have

been affected by the COVID-19 pandemic. These investments included a

range of projects related to providing food, Personal Protective

Equipment (PPE), and critical infrastructure improvements.

Form 990, Part VI, Section A, line 2:

Erin Hawk and Ross Wehner both work at World Leadership School, an

Schedule O (Form 990) 2022 Page **2**

Name of the organization World Leadership Foundation	Employer identification number 27-0490843
educational consultancy that works with K12 schools to rei	magine learning
and create next-generation leaders. Ross Wehner and Bruce	Miller are
brother in laws.	
Form 990, Part VI, Section B, line 11b:	
Members of the board reviewed the 990 in conjunction with	the foundation's
book keeper.	
Form 990, Part VI, Section B, Line 12c:	
Board members were required to have no business dealings w	ith any of the
school entities that received funds. During our board meet	ings, members
affirm that no conflicts of interest exist.	_
Form 990, Part VI, Section C, Line 18:	
World Leadership Foundation updates progress on these and	other community
projects on its website:	
http://www.worldleadershipfoundation.org/community-project	s/
Form 990, Part VI, Section C, Line 19:	
No other documents available to the public, but available	to the board and
upon request to interested parties.	_

SCHEDULE R (Form 990)

Name of the organization

Related Organizations and Unrelated Partnerships
Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Attach to Form 990.

Department of the Treasury Internal Revenue Service

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

	World Leadersh	ip Foundation					<u> 27-04908</u>	143	
Part I	Identification of Disregarded Entities. Complet	e if the organization answered "Yes	on Form 990, Part IV, line 33	3.					
(a) Name, address, and EIN (if applicable) of disregarded entity		(b) Primary activity	(c) Legal domicile (state o foreign country)	(d) r Total inco	(e) eme End-of-year		Direct o	(f) controlling ntity	g
	Identification of Related Tax-Exempt Organiza	tions. Complete if the organization	answered "Vee" on Form 990	Part IV line 34	occause it had one	or more	rolated tay even	mnt	
Part II	organizations during the tax year.	tions. Complete if the organization	answered res offrom 990	, r art iv, iiile 54, i	Jecause It riad one	or more	Telated tax-exer		
	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	Dired	(f) ct controlling entity	cont	g) 512(b)(13) rolled tity?
					501(c)(3))			Yes	No

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	(k)
Name, address, and EIN	Primary activity	Legal domicile	Direct controlling	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total	Share of	1	ortionate	Code V-UBI	General	Percentage ownership
of related organization		(state or foreign	entity	excluded from tax under	income	end-of-year assets		ations?	amount in box 20 of Schedule K-1 (Form 1065)	partner	Ownership
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes N	0
	1										
	1										
	1										
	1										
	1										
	1										
	1										
	1										
							<u> </u>	l			

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Type of entity (C corp, S corp, or trust)	Share of total income	Share of end-of-year assets	Percentage ownership	1	tion b)(13) rolled tity?
		country)						Yes	No
World Leadership School - 26-0788336	_								
5595 Sunshine Canyon Drive									İ
Boulder, CO 80302		CO		S CORP					X
	-								
	_								
									<u> </u>
	4								
	_								
									<u> </u>
									1
]								1

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

Yes No

1a

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity

b	Gift, grant, or capital contribution to related organization(s)				1b	$\frac{X}{X}$				
С	c Gift, grant, or capital contribution from related organization(s)									
	d Loans or loan guarantees to or for related organization(s)									
е	Loans or loan guarantees by related organization(s)				1e	X				
f	Dividends from related organization(s)				1f	X				
g	Sale of assets to related organization(s)				1g	X				
h	Purchase of assets from related organization(s)				1h	X				
i	Exchange of assets with related organization(s)				1i	X				
j	Lease of facilities, equipment, or other assets to related organization(s)				1j	X				
						Х				
k Lease of facilities, equipment, or other assets from related organization(s)										
	Performance of services or membership or fundraising solicitations for related organ				11	X				
	Performance of services or membership or fundraising solicitations by related organ				1m	X				
n	n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)									
0	Sharing of paid employees with related organization(s)				10	X				
р	Reimbursement paid to related organization(s) for expenses				1p	X				
q	Reimbursement paid by related organization(s) for expenses				1q	X				
	Other transfer of cash or property to related organization(s)				1r	X				
	Other transfer of cash or property from related organization(s)				1s	X				
2	If the answer to any of the above is "Yes," see the instructions for information on when the above is "Yes," see the instructions for information on when the above is "Yes," see the instructions for information on when the above is "Yes," see the instructions for information on when the above is "Yes," see the instructions for information on when the above is "Yes," see the instructions for information on when the above is "Yes," see the instructions for information on when the above is "Yes," see the instructions for information on when the above is "Yes," see the instructions for information on when the above is "Yes," see the instructions for information on when the above is "Yes," see the instructions for information on when the above is "Yes," see the instruction of the above is "Yes," and "Yes," in the above it is "Yes," in the abov	ho must complete th	is line, including covered rela	ationships and transaction thresholds.						
	(a) Name of related organization	(b) Transaction	(c) Amount involved	(d) Method of determining amount in	amount involved					
		type (a-s)								
(1)										
(2)										
(3)										
(4)										
(5)										
(6)										
232163	09-14-22			Schedule	R (Form 9	90) 2022				

Schedule R (Form 990) 2022

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are all partners sec 501(c)(3) orgs.?	(g) Share of end-of-year assets	Dispretion allocat	opor- late tions?	General manage partner	(k) Al or Percentage ging ownership
	_								000) 0000