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)

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service 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.

A	For the	2024 calend	dar year, or tax year beginning Jul 1	, 2024, and end	ding Ju	ın 30	, 20 25
В	Check if a	pplicable:	C Name of organization Cornerstone College	& Seminary		D Employ	er identification number
	Address o	hange	Doing business as			23-704	44656
\Box	Name cha		Number and street (or P.O. box if mail is not delivered to stre	et address)	Room/suite	E Telepho	ne number
\Box	Initial retu		7501 Graham Street		120	(540) 8	898-5077
\Box		n/terminated	City or town, state or province, country, and ZIP or foreign po	ostal code			
H	Amended		Spotsylvania Courthouse, VA 2255			G Gross re	eceipts \$ 378,210.
H	Applicatio		F Name and address of principal officer:		H(a) Is this a gr		subordinates? Yes X No
	, ippliodilo	ii poriding	Julie M Wallace, 7501 Graham Street, Suite 120, Spotsylva	nia Courthouse VA			included? Yes No
ı -	Tax-exem	nt status:	▼ 501(c)(3)				. See instructions.
J	Website:		ornerstonecollege.org	3 (4)(1) 3	H(c) Group e		
K			Corporation Trust Association Other	L Year of for			f legal domicile: VA
D	art I	Summa		L Tear Of To	mation. 1909	W Otate of	riogal dornicile. VA
	_			t activities.			· · · · · · · · · · · · · · · · · · ·
			cribe the organization's mission or most significan	t activities.			
8	-	reachin	g Bible Students				
Jan	-						
ler.		Ole e e la tiele	be a second state of the s		l of one we there Of	F0/ -f !-	
30	MULTI STORY SE		box if the organization discontinued its operat			1 1	
ø	THE THE R. P. LEWIS CO., LANSING, MICH.		voting members of the governing body (Part VI, lin	생생하면 그렇게 선생님이 사고를 가는 그래요?		3	
es	100000000000000000000000000000000000000		independent voting members of the governing bo			4	5
₹			per of individuals employed in calendar year 2024			5	20
Activities & Governance			per of volunteers (estimate if necessary)			6	32
-	100		ated business revenue from Part VIII, column (C), I			7a	0.
	b	Net unrela	ed business taxable income from Form 990-T, Pa	rt I, line 11		7b	0.
e					Prior Yea	r	Current Year
	8 (Contribution	ons and grants (Part VIII, line 1h)		108	,132.	8,881.
S I	9 1	Program s	ervice revenue (Part VIII, line 2g)		83	,126.	91,200.
Revenue	10	nvestmen	income (Part VIII, column (A), lines 3, 4, and 7d)	1,900	,606.	59,003.	
Œ	11 (Other reve	nue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c,	and 11e)		,311.	539.
	12	Total reven	ue-add lines 8 through 11 (must equal Part VIII, co	olumn (A), line 12			159,623.
	A STATE OF THE PARTY NAMED IN		I similar amounts paid (Part IX, column (A), lines 1-				
			aid to or for members (Part IX, column (A), line 4)		The state of the s	-	**
S	4- 1		her compensation, employee benefits (Part IX, colun			,835.	250,986.
Expenses	16a		al fundraising fees (Part IX, column (A), line 11e)				
per	b		aising expenses (Part IX, column (D), line 25)	0.	AND DESCRIPTION OF THE PARTY OF		
ŭ	17		enses (Part IX, column (A), lines 11a-11d, 11f-24e)			,437.	189,224.
	-		nses. Add lines 13–17 (must equal Part IX, column			,272.	440,210.
			ess expenses. Subtract line 18 from line 12	. (1.1), 11.10 20)	1,592		-280,587.
7 8		noveride it	noo oxponioco. Gubridot iino 10 ii oiii iino 12	<u> </u>	Beginning of Cur		End of Year
Net Assets or	20	Total acce	s (Part X, line 16)		1,541	9.7.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.	1,322,948.
ASS	21		ties (Part X, line 26)			,893.	7,105.
let let	22		or fund balances. Subtract line 21 from line 20		1,538		1,315,843.
	art II		re Block		1,336	,214.	1,313,643.
					telescope and to the		beautades and halfaf it is
			I declare that I have examined this return, including accompane. Declaration of preparer (other than officer) is based on all information.				y knowledge and belief, it is
	1			40	L	10-100	
Qi.	gn	Cianatura	of officer		Da	1/17/20)25
	7.0	Signature			Da	.0	
He	ere		ie M Wallace, President				
			int name and title		T		· · · · · · · · · · · · · · · · · · ·
P	aid	Preparer's		PA	Date	Check X	
	eparer	Robert	J. Morrow, CPA		11/17/25	self-emplo	P01279326
	se Only	Cimento man				sEIN 2	0-4621255
		Firm's add				e no. (57	1)331-0348
Ma	ay the IR	S discuss	this return with the preparer shown above? See in	structions			. XYes No

Part		Statement of Program Ser Check if Schedule O contain	vice Accomplishmer	nts to any line in this Pa	rt III	
1	Brie	fly describe the organization's	mission:			
	Tea	ching Bible Students				
	D:-I		! ! f ! !			. 41
2		the organization undertake any Form 990 or 990-EZ?				
		es," describe these new servic				· Yes 🗵 No
3		the organization cease cond		ficant changes in ho	ow it conducts any proc	ıram
		ices?				
	If "Y	es," describe these changes of	n Schedule O.			
4		cribe the organization's progra		ments for each of its	three largest program serv	vices, as measured by
	expe	enses. Section 501(c)(3) and 50 cotal expenses, and revenue, if	01(c)(4) organizations a	are required to report		
4a	(Cod	de:) (Expenses \$	421.323 including	grants of \$	O) (Revenue \$	100.620
		ching Bible Students				
	100	ening bible beadenes				
4b	(Co	de:) (Expenses \$	including	a grants of ¢) (Poyonuo ¢	
710	,000) (Εχρείασες ψ				
	(Co.	do: \/Evnances t	inaludina	ware of C) (Revenue \$	
4c	(000	de:) (Expenses \$	Including	g grants of \$) (nevenue \$	
	<u> </u>		0.1.1.0.			
4d		er program services (Describe o		\ /D	`	
4e		enses \$ includ Il program service expenses	ling grants of \$ 421,323.) (Revenue \$)	
70	1010	p. agrain acritice expenses	741,040.			

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orm 99	00 (2024)		F	Page (
Part	V Checklist of Required Schedules			
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Yes	No
_	complete Schedule A	1	×	
2 3	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I </i>	3		×
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? <i>If "Yes," complete Schedule C, Part II</i>	4		×
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		×
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		×
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		×
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," complete Schedule D, Part III	8		×
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If</i> "Yes," <i>complete Schedule D, Part IV</i>	9		×
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? <i>If "Yes," complete Schedule D, Part V </i>	10		×
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	×	
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		×
С	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		×
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX </i>	11d		×
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		×
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		×
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		×
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		×
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	×	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		×
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV.</i>	14b		×
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		×

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

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

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on

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

Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions

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

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

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

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

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X

Part	Checklist of Required Schedules (continued)			
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes	No
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		×
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		×
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		×
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease 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		×
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior	Lou		<u> </u>
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I			
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	25b		×
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		×
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			
00	persons? If "Yes," complete Schedule L, Part III	27		×
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i> "Yes," complete Schedule L, Part IV	28a		×
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		×
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV	000		×
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	28c 29		×
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
21	conservation contributions? <i>If "Yes," complete Schedule M</i>	30		×
31 32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	31		<u> </u>
	complete Schedule N, Part II	32		×
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		×
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,	- 00		
	or IV, and Part V, line 1	34		×
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		×
-	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? <i>If "Yes," complete Schedule R, Part V, line 2 </i>	36		×
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		×
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O	38	×	
Part	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	
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 10		res	INO
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	10		

Part	V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 20			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	×	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		×
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O .	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		×
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		×
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		×
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		×
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		×
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
_	required to file Form 8282?	7с		×
d	If "Yes," indicate the number of Forms 8282 filed during the year	7.		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e 7f		×
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	71 7g		
g h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	79 7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	711		
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			
11	Section 501(c)(12) organizations. Enter:			
a b	Gross income from members or shareholders			
D	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	. La		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
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		×
_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		
16	If "Yes," see the instructions and file Form 4720, Schedule N.	46		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16		
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.			

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

Julie Wallace, 7501 Graham Street Suite 120, Spotsylvania Courthouse, VA 22553 (540)898-5077

Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a

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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.

	1	Ū			C)			ted any current	, , ,	
(A) Name and title	(B) Average hours	Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/ 1099-MISC/ 1099-NEC)	from related organizations (W-2/ 1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(1) Dr. Richard Barnett Chair	2.00	×		×						
(2) Dr. Joseph Holmes	2.00			 ^						
Vice Chair	42.00	×		×						
(3) Dr. Chris VanBuskirk	10.00									
Treasurer		×		×						
(4) Julie Wallace	40.00									
President				×						
(5) Glenn Prescott Board Member	2.00	×								
(6) Marlin Chang Board Member	2.00	×								
(7) Jay Flickinger	2.00									
Board Member		×								
(8) Ryan Flanders	2.00									
Board Member		×								
(9)	 									
10)										
11)										
12)										
13)	 									
14)	<u> </u>									

Part	VII Section A. Officers, Directors,	rustees,	Key I	Emp	plo	yees,	, and	d H	lighest Compe	nsated En	nploy	ees (c	ontinued)
					•	(C)							
	(A)	(B)	(do n	ot ch		sition more th	han oi	ne	(D)	(E)			(F)
	Name and title	Average hours	box, ι	unles	ss pe	erson is	both	an	Reportable compensation	Reportabl compensat			ed amount other
		per week	_		_	director/		<u> </u>	from the	from relate		comp	ensation
		(list any hours for	ndivi	nstit	Officer	Key emp	Highest	Former	organization (W-2/ 1099-MISC/	organizations 1099-MIS			m the zation and
		related	idual	utior	۳ ا	əmp	est	Φ	1099-NEC)	1099-NEC			rganizations
		organizations below	Individual trustee or director	nal tr									
		dotted line)	stee	Institutional trustee									
				ð									
(15)													
(16)													
(4.7)													
(17)			-										
(18)													
(10)			1										
(19)													
3			1										
(20)													
(21)]										
(22)			-										
(00)													
(23)			-										
(24)													
\ <u></u> /			1										
(25)													
32			1										
1b	Subtotal												
С	Total from continuation sheets to Part	VII, Section	n A										
d	Total (add lines 1b and 1c)												
2	Total number of individuals (including but		d to th	ose	e lis	ted ab	oove)) W	ho received mor	e than \$100	0,000	o†	
	reportable compensation from the organi	Zation											Yes No
3	Did the organization list any former of	officer dire	actor	tru	eta	م لام	v en	nnl	lovee or highes	t compans	hates		Yes No
•	employee on line 1a? If "Yes," complete s						-	-	· · · · · ·	-		3	×
4	For any individual listed on line 1a, is the												
	organization and related organizations	greater th	an \$1	50,	000)? <i>If</i>	"Yes	s, "	complete Sched				
	individual											4	×
5	Did any person listed on line 1a receive of												
	for services rendered to the organization	? If "Yes," o	compl	ete	Sci	hedule	e J fo	or s	such person .		•	5	×
	on B. Independent Contractors	ant name	t	. d	امرا	00000	lont.		natura et ava that w	and m	0 4 0 + k	200 P1	00 000 of
1	Complete this table for your five high compensation from the organization. Rep												
	<u>-</u>	ort compen	isatioi	1 101		Coalci	Tidal	yC	-	Within the	Ji gai ii.		- tax year.
(A) (B) (C) Name and business address Description of services Compens										ation			
							1						
										<u> </u>			
2	Total number of independent contractor						d to	th	ose listed abov	e) who			
	received more than \$100,000 of compens	ation from	me or	yan	ıızaı	non							

Part VIII Statement of Revenue

		Check if Schedule	Осо	ntains a re	espor	nse or note to an	ıy line in this Pa	ırt VIII		🗌
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
Contributions, Gifts, Grants, and Other Similar Amounts	1a b c d	Federated campaig Membership dues Fundraising events Related organization Government grants	 ns .		1a 1b 1c 1d 1d					
tributions, (Other Simi	f g	All other contribution and similar amounts no Noncash contribution lines 1a–1f	ns, gi ot incli ons in	fts, grants, uded above acluded in	1f	8,881.				
Son and	h	Total. Add lines 1a-			1g	_	8,881.			
<u> </u>	h	Total. Add lines 1a-	-11 .		• •	Business Code	0,001.			
e .	2a	Tuition				611310	77,774.	77,774.	0.	0.
Program Service Revenue	b	Registration	& Fε	 ees		611310	13,426.	13,426.	0.	0.
yram Ser Revenue	C						.,	,		
am eve	d									
gra	е									
Pro	f	All other program se								
_	g	Total. Add lines 2a-	-2f .				91,200.			
	3	Investment income other similar amoun	nts) .				57 , 291.	57,291.	0.	0.
	4	Income from investr	nent (of tax-exen	npt bo	and proceeds				
	5	Royalties								
				(i) Rea	I	(ii) Personal				
	6a	Gross rents	6a							
	b	Less: rental expenses								
	C	Rental income or (loss)		Ļ						
	_d	Net rental income o	r (los	· · · · · · · · · · · · · · · · · · ·						
	7a	Gross amount from sales of assets other than inventory		(i) Securit		(ii) Other				
Revenue	b	Less: cost or other basis and sales expenses .	7a 7b	220,2						
ve	С	Gain or (loss)	7c		712.					
R		Net gain or (loss)			, 12.		1,712.	1,712.	0.	0.
Other		Gross income from events (not including of contributions reports)	\$ porte	d on line				1,712.	· ·	
		1c). See Part IV, line			8a					
		Less: direct expens			8b					
	с 9а	Net income or (loss) Gross income f activities. See Part I	from	gaming		ents				
	h				9a 9b					
		Less: direct expens Net income or (loss)								
		Gross sales of ir returns and allowan	nvent		10a	25				
	b	Less: cost of goods			10a					
	C	Net income or (loss)								
s			, •			Business Code				
Miscellaneous Revenue	11a									
scellaneo Revenue	b									
e ev	C	A.IIII								_
Mis	d	All other revenue					539.	539.	0.	0.
_		Total. Add lines 11a					539.	150 740	0	0
	12	Total revenue. See	ınstr	uctions			159 , 623.	150,742.	0.	0.

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 expenses **(B)** Program service expenses Do not include amounts reported on lines 6b. 7b. (A) Total expenses Management and general expenses 8b, 9b, and 10b of Part VIII. Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic 2 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 112,619. 103,444. 9,175. 0. 6 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 119,429. 119,429. 0. 0. Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 9 10 Payroll taxes 18,938. 18,189. 749. 0. 11 Fees for services (nonemployees): Management Legal 0. 0. 208. 208. 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 Schedule O.) . 0. 0. 4,967. 4,967. 0. 12 Advertising and promotion 45,961. 45,961. 0. 13 Office expenses 3,668. 3,301. 367. 0. Information technology 16,550. 14 16,550. 0. 0. 15 47,324. 0. Occupancy 47,324. 16 0. 626. 626. 17 0. 0. 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings . 20 21 Payments to affiliates 1,983. 1,983. 22 Depreciation, depletion, and amortization . \cap 0. 23 4,434. 4,434. 0. 0. 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.) 21,035. 0. 0. 21,035. Accreditation 18,135. 18,135. 0. 0. Faculty Expenses 0. c Scholarships 46. 46. 0. Student & Graduation Expenses 1,820. 1,820. 0. 0. e All other expenses 22,467. 13,871. 8,596. 0. 25 **Total functional expenses.** Add lines 1 through 24e 440,210. 421,323. 18,887. Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here [if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

		Check if Schedule O contains a response of note to any line in this Par	(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	78,933.	1	54,716.
	2	Savings and temporary cash investments	943,288.	2	679,864.
	3	Pledges and grants receivable, net	•	3	,
	4	Accounts receivable, net	9,530.	4	10,411.
	5	Loans and other receivables from any current or former officer, director,	- ,		· · · · · ·
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
Ŋ	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
As	9	Prepaid expenses and deferred charges	4,600.	9	
•	10a	Land, buildings, and equipment: cost or other	4,000.		
		basis. Complete Part VI of Schedule D 10a 13,655.			
	b	Less: accumulated depreciation	4,945.	10c	2,213.
	11	Investments—publicly traded securities	496,081.	11	572,014.
	12	Investments—other securities. See Part IV, line 11	130,001.	12	0,2,011.
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	3,730.	15	3,730.
	16	Total assets. Add lines 1 through 15 (must equal line 33)	1,541,107.		1,322,948.
	17	Accounts payable and accrued expenses	1,963.	17	7,105.
	18	Grants payable		18	.,
	19	Deferred revenue	930.	19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D .		21	
တ္	22	Loans and other payables to any current or former officer, director,			
iţi		trustee, key employee, creator or founder, substantial contributor, or 35%			
Liabilities		controlled entity or family member of any of these persons	0.	22	
Ľ	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	2,893.	26	7,105.
Se		Organizations that follow FASB ASC 958, check here 🗵			
Š		and complete lines 27, 28, 32, and 33.			
ala	27	Net assets without donor restrictions	1,538,214.	27	1,315,843.
B	28	Net assets with donor restrictions		28	
Net Assets or Fund Balances		Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.			
ō	29	Capital stock or trust principal, or current funds		29	
ets	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
SS	31	Retained earnings, endowment, accumulated income, or other funds .		31	
Ϋ́	32	Total net assets or fund balances	1,538,214.	32	1,315,843.
Net	33	Total liabilities and net assets/fund balances	1,541,107.	33	1,322,948.
			-,,		Earm QQ0 (2024

Form 990 (2024) Page 12
Part XI Reconciliation of Net Assets

	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)		15	59,6	23.
2	Total expenses (must equal Part IX, column (A), line 25)		4	40,2	10.
3	Revenue less expenses. Subtract line 2 from line 1		-28	30,5	87.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 4		1,53	38,2	14.
5	Net unrealized gains (losses) on investments		58 , 9		64.
6	Donated services and use of facilities				
7	Investment expenses				
8	Prior period adjustments				
9	Other changes in net assets or fund balances (explain on Schedule O)			-7	48.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))		1,31	15,8	43.
Part	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 Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain	ı on			
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	. [2a	×	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled	d or			
	reviewed on a separate basis, consolidated basis, or both.				
	☐ Separate basis ☐ Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?	. [2b		×
	If "Yes," check a box below to indicate whether the financial statements for the year were audited of	n a			
	separate basis, consolidated basis, or both.				
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight				
	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	າ on			
	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in	the			
_	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?	.	3a		×
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo				
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits	; <u>.</u>	3b		

REV 09/03/25 PRO Form **990** (2024)

SCHEDULE A (Form 990)

(E) **Total**

Department of the Treasury

Public Charity Status and Public Support

OMB No. 1545-0047

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.

Open to Public Inspection

Internal Revenue Service Employer identification number Name of the organization Cornerstone College & Seminary 23-7044656 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. 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). X A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 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.) ☐ A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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.) 8 ☐ 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 university: An organization that normally receives (1) more than 331/3% 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 33¹/₃% 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). 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 12a, Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving а 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. 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) d 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 III. 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). (iii) Type of organization (i) Name of supported organization (ii) EIN (iv) Is the organization (v) Amount of monetary (vi) Amount of (described on lines 1-10 listed in your governing support (see other support (see above (see instructions)) document? instructions) instructions) Yes Nο (A) (B) (C) (D)

Schedule A (Form 990) 2024 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

Part II

(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.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2020 **(b)** 2021 (c) 2022 (d) 2023 **(e)** 2024 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . . Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge **Total.** Add lines 1 through 3 4 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) **Public support.** Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2020 **(b)** 2021 (c) 2022 (d) 2023 (e) 2024 (f) Total 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Net income from unrelated business 9 activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) **Total support.** Add lines 7 through 10 11 12 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 13 Section C. Computation of Public Support Percentage % 14 Public support percentage for 2024 (line 6, column (f), divided by line 11, column (f)) Public support percentage from 2023 Schedule A, Part II, line 14 15 331/3% support test - 2024. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this 331/3% support test - 2023. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check this box and **stop here**. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2024. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported b 10%-facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see 18

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

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

Secti	on A. Public Support			•	·	,	
Calen	dar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С 8	Add lines 7a and 7b						
Ü	line 6.)						
Secti	on B. Total Support						
	dar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
9	Amounts from line 6	(4) 2020	(2) 2021	(6) 2022	(4) 2020	(0) 202 1	(i) Fotoi
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties, and income from similar sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included on line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
40	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the	organization'	s first second	third fourth	or fifth tay ve	l Par as a sectio	n 501(c)(3)
• •	organization, check this box and stop he	•			-		
Secti	on C. Computation of Public Suppor						
15	Public support percentage for 2024 (line			13, column (f))		15	%
16	Public support percentage from 2023 Sch		•			16	%
	on D. Computation of Investment In					'	
17	Investment income percentage for 2024 (line 10c, colun	nn (f), divided l	oy line 13, colu	ımn (f))	17	%
18	Investment income percentage from 2023					18	%
19a	331/3% support tests-2024. If the organ						
	17 is not more than $33^{1}/_{3}\%$, check this box		-	-		_	_
b	331/3% support tests - 2023. If the organize						
	line 18 is not more than 331/3%, check this	oox and stop h	ere. The organ	ization qualifies	as a publicly s	upported organ	ization .
20	Private foundation. If the organization di	d not check a	box on line 14	19a or 19h (check this box	and see instru	ctions \square

Supporting Organizations Part IV

(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.)

Se

Secti	on A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in 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.			
5а	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).	4c		
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?	5b		
6	Substitutions only. Was the substitution the result of an event beyond the organization's control? Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>	5c		
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).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>	9b		
С	Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes" answer line 10b below	100		

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.)

Part	Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c,			
	provide detail in Part VI .	11c		
Section	on B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2		
Section	on 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			
	the supported organization(s).	1		
Section	on 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	1		
2	organization(s), or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3		
Section	on 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 i	nstru	ctions	s)
a b c	 ☐ The organization satisfied the Activities Test. Complete line 2 below. ☐ The organization is the parent of each of its supported organizations. Complete line 3 below. ☐ The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity. 		struct	ions).
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.			
_	have engaged in these activities but for the organization's involvement.	2b		
3 a	Parent of Supported Organizations. <i>Answer lines 3a and 3b below.</i> Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>If "Yes" or "No," provide details in Part VI.</i>	20		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	3a		
b	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Part	V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	jan	izations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	j tru	st on Nov. 20, 1970 (expla	ain in Part VI). See
	instructions. All other Type III non-functionally integrated supporting organ	nizat	ions must complete Secti	ons A through E.
Sect	ion A—Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
_ 7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B-Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	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-functional (see instructions)	_	integrated Type III suppor	ting organization

Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D-Distributions **Current Year** 1 Amounts paid to supported organizations to accomplish exempt purposes 2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity 2 3 Administrative expenses paid to accomplish exempt purposes of supported organizations Amounts paid to acquire exempt-use assets 4 5 5 Qualified set-aside amounts (prior IRS approval required - provide details in Part VI) Other distributions (describe in Part VI). See instructions. 6 6 7 Total annual distributions. Add lines 1 through 6. 7 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. 8 Distributable amount for 2024 from Section C, line 6 9 9 10 10 Line 8 amount divided by line 9 amount (ii) (iii) Underdistributions Distributable Section E—Distribution Allocations (see instructions) **Excess Distributions** Pre-2024 Amount for 2024 Distributable amount for 2024 from Section C, line 6 2 Underdistributions, if any, for years prior to 2024 (reasonable cause required - explain in Part VI). See instructions. Excess distributions carryover, if any, to 2024 **a** From 2019 From 2020 **c** From 2021 **d** From 2022 From 2023 Total of lines 3a through 3e Applied to underdistributions of prior years Applied to 2024 distributable amount Carryover from 2019 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from line 3f. Distributions for 2024 from 4 Section D, line 7: Applied to underdistributions of prior years Applied to 2024 distributable amount Remainder. Subtract lines 4a and 4b from line 4. Remaining underdistributions for years prior to 2024, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions. Remaining underdistributions for 2024. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. Excess distributions carryover to 2025. Add lines 3j and 4c. Breakdown of line 7: Excess from 2020 . . . Excess from 2021 .__. Excess from 2022 . . . Excess from 2023 . . . Excess from 2024 . . . е

Schedule A (Form 990) 2024 Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part Part VI III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

SCHEDULE D (Form 990)

(Rev. December 2024)

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

Open to Public Inspection

Name o	of the organization		Employer identification number
Cor	nerstone College & Seminary		23-7044656
	TI Organizations Maintaining Donor Adv	ised Funds or Other Similar Fund	ls or Accounts
	Complete if the organization answered '	Yes" on Form 990, Part IV, line 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
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		
	funds are the organization's property, subject to the		
6	Did the organization inform all grantees, donors, ar		
	only for charitable purposes and not for the benefi		· · · · <u> </u>
	conferring impermissible private benefit?		☐ Yes ☐ No
Par	t II Conservation Easements		
	Complete if the organization answered '		
1	Purpose(s) of conservation easements held by the	• • • • • • • • • • • • • • • • • • • •	
	Preservation of land for public use (for example, recre		f a historically important land area
	Protection of natural habitat	☐ Preservation of	f a certified historic structure
•	Preservation of open space	Internal Production of the Control Production	Calle form of a constant allow
2	Complete lines 2a through 2d if the organization he easement on the last day of the tax year.	eid a qualified conservation contribution	
	•		Held at the End of the Tax Year
а	· · · · · · · ·		. <u>2</u> a
b	Total acreage restricted by conservation easement		
C	Number of conservation easements on a certified h		
d	Number of conservation easements included on lir on a historic structure listed in the National Register		
•	-		·
3	Number of conservation easements modified, tra the organization during the tax year		erminated by
4	Number of states where property subject to conse		
4 5	Does the organization have a written policy reg.		
·	violations, and enforcement of the conservation ea		
6	Staff and volunteer hours devoted to monitoring		
		· · · · · · · · · · · · · · · · · · ·	
7	Amount of expenses incurred in monitoring, in	aspecting, handling of violations, ar	nd enforcina
-	the state of the s		
8	Does each conservation easement reported on line	2d above satisfy the requirements of s	ection 170(h)(4)(B)
	(i) and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports of		
	sheet, and include, if applicable, the text of the foo	tnote to the organization's financial sta	tements that describes the
	organization's accounting for conservation easeme	ents.	
Part	Organizations Maintaining Collections	s 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 FAS	SB ASC 958, not to report in its revenu-	e statement and balance sheet works
	of art, historical treasures, or other similar assets		
	service, provide in Part XIII the text of the footnote	to its financial statements that describe	es these items.
b	If the organization elected, as permitted under FA		
	art, historical treasures, or other similar assets held	•	earch in furtherance of public service,
	provide the following amounts relating to these iter		
	(i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X		\$
	(ii) Assets included in Form 990, Part X		\$
2	If the organization received or held works of art,	historical treasures, or other similar	assets for financial gain, provide the
	following amounts required to be reported under F.	ASB ASC 958 relating to these items.	
а	Revenue included on Form 990, Part VIII, line 1 . Assets included in Form 990, Part X		\$
b	Assets included in Form 990, Part X		\$

Part	Organizations Maintaining Col	lections of Art, I	Historical	Treasures,	, or Oth ϵ	er Similar Ass	ets (conti	nued)
3	Using the organization's acquisition, acce collection items (check all that apply).	ssion, and other re	ecords, che	ck any of the	e fol l owin	ig that make sig	nificant us	se of its
а	☐ Public exhibition		d 🗌 Loar	or exchang	e progran	n		
b	☐ Scholarly research		e 🗌 Othe	er				
С	☐ Preservation for future generations							
4	Provide a description of the organization's XIII.	s collections and e	xplain how	they further	the orgar	nization's exemp	ot purpose	in Part
5	During the year, did the organization solici assets to be sold to raise funds rather than						☐ Yes ☐	□ No
Part	V Escrow and Custodial Arrange	ements						
	Complete if the organization ans 990, Part X, line 21.						ount on Fo	orm
1a	Is the organization an agent, trustee, cust included on Form 990, Part X?						☐ Yes ☐	□No
b	If "Yes," explain the arrangement in Part XI	III and complete th	e fol l owing	table.		Am	ount	
С	Beginning balance				1c			
d	Additions during the year				1d			
е	Distributions during the year				1e			
f	Ending balance				1f			
2a	Did the organization include an amount on					•		☐ No
b	If "Yes," explain the arrangement in Part X	III. Check here if th	e explanatio	on has been	provided	in Part XIII .		
Par	V Endowment Funds							
	Complete if the organization ans	wered "Yes" on l	Form 990,	Part IV, line	e 10.			
	(a)	Current year (b) Prior year	(c) Two year	rs back (d) Three years back	(e) Four yea	ırs back
1a	Beginning of year balance							
b	Contributions							
С	Net investment earnings, gains, and losses							
d	Grants or scholarships							
е	Other expenditures for facilities and programs							
f	Administrative expenses							
g	End of year balance							
2	Provide the estimated percentage of the co	urrent vear end bal	ance (line 1	a. column (a	ı)) held as	:		
а		%	(3, (,,			
b	Permanent endowment 06							
С	Term endowment %							
	The percentages on lines 2a, 2b, and 2c sh	nould equal 100%.						
3a	Are there endowment funds not in the pos	•	anization th	nat are held	and admi	inistered for the		
	organization by:						Ye	s No
	(i) Unrelated organizations?						3a(i)	
	(ii) Related organizations?						3a(ii)	
b	If "Yes" on line 3a(ii), are the related organi						3b	
4	Describe in Part XIII the intended uses of the		•					
Part								
	Complete if the organization ans		Form 990,	Part IV, line	e 11a. Se	ee Form 990, F	art X, line	e 10.
	Description of property	(a) Cost or other bas (investment)	1 ' '	or other basis (other)		cumulated eciation	(d) Book va	llue
1a	Land		0.					0.
b	Buildings							
С	Leasehold improvements							
d	Equipment			13,655.		11,442.	2,	,213.
e	Other							
Total.	Add lines 1a through 1e. (Column (d) must	equal Form 990, Pa	art X, line 10	Oc, column (E	B))		2,	213.

Part VII	Investments – Other Securities Complete if the organization answered "Yes" on For	m 990, Part IV, lin	e 11b. See Form	990, Part X, line 12.
	(a) Description of security or category (including name of security)	(b) Book value	(c) Met	hod of valuation: -of-year market value
(1) Financial	derivatives			
(2) Closely h	eld equity interests			
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)	mp /b) must equal Form 000. Port V. line 12, cel. (P))			
Part VIII	mn (b) must equal Form 990, Part X, line 12, col. (B)) Investments—Program Related			
Part VIII	Complete if the organization answered "Yes" on For	m 990 Part IV lin	e 11c. See Form	990 Part X line 13
	(a) Description of investment	(b) Book value		hod of valuation:
	(a) Description of investment	(b) BOOK Value		of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Colu	mn (b) must equal Form 990, Part X, line 13, col. (B))			
Part IX	Other Assets			
	Complete if the organization answered "Yes" on For	m 990, Part IV, lin	e 11d. See Form	990, Part X, line 15.
	(a) Description			(b) Book value
(1)				
(2)				
(3)				
_(4)				
(5)				
(6)				
<u>(7)</u>				
(8)				
(9)	mn (h) must squal Form 000 Port V line 15 asl (D)			
Part X	mn (b) must equal Form 990, Part X, line 15, col. (B)) Other Liabilities			
PartA	Complete if the organization answered "Yes" on For	m 000 Part IV lin	0 110 or 11f So	Form 000 Part V
	line 25.	ili 990, Fait IV, iiii	e 11e 01 111. Set	eronn 990, Fan A,
1.	(a) Description of liability			(b) Book value
(1) Federal in				(b) Dook value
(2)	norme taxes			
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	mn (b) must equal Form 990, Part X, line 25, col. (B))			
	uncertain tax positions. In Part XIII, provide the text of the footne		n's financial stateme	ents that reports the
	s liability for uncertain tax positions under FASB ASC 740. Check			

Part		-	Return	
	Complete if the organization answered "Yes" on Form 990			
1	Total revenue, gains, and other support per audited financial statemen	ts	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	0-		
a	Net unrealized gains (losses) on investments	-	-	
b	Donated services and use of facilities		-	
C	Recoveries of prior year grants		-	
d	Other (Describe in Part XIII.)		- 00	
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	4.		
a	Investment expenses not included on Form 990, Part VIII, line 7b		-	
b	Other (Describe in Part XIII.)		4c	
с 5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, li		5	
Part			-	
rait	Complete if the organization answered "Yes" on Form 99		er neturn	
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
– a	Donated services and use of facilities	. 2a		
b	Prior year adjustments			
C	Other losses			
d	Other (Describe in Part XIII.)			
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	. 4a		
b	Other (Describe in Part XIII.)			
С	Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I,	line 18.)	5	
Part 2	Supplemental Information			
	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a			art X, line
2; Part	XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this pa	art to provide any additional ir	nformation.	
Pt X	I, Line 4b: Book to tax difference in depreciat	ion		
Pt X	, Line 4b: Book to tax difference in building s	sale gain.		

SCHEDULE E (Form 990)

(Rev. December 2024)

Department of the Treasury Internal Revenue Service Schools

Complete if the organization answered "Yes" on Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.

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

Cornerstone College & Seminary

Part I

Employer identification number
23-7044656

			YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	1	×	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions,			
	programs, and scholarships?	2	×	
3	Has the organization publicized its racially nondiscriminatory policy on its primary publicly accessible Internet homepage at all times during its tax year in a manner reasonably expected to be noticed by visitors to the homepage, or through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain. If you need more space,			
	use Part II	3	×	
	College Catalog (8/2023), Admissions Policy on p.14, Disability Policy on p. 2 and Ethics Policy on p.24			
	DISABILITY FOLICY ON p. 2 and Ethics Folicy on p.24			
4	Does the organization maintain the following:			
4 a	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	×	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	×	
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing			
	with student admissions, programs, and scholarships?	4c	×	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	×	
5	Does the organization discriminate by race in any way with respect to:			
а	Students' rights or privileges?	5a		×
b	Admissions policies?	5b		×
С	Employment of faculty or administrative staff?	5c		×
d	Scholarships or other financial assistance?	5d		×
е	Educational policies?	5e		×
f	Use of facilities?	5f		×
g	Athletic programs?	5g		×
h	Other extracurricular activities?	5h		×
	If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.			
6a	Does the organization receive any financial aid or assistance from a governmental agency?	6a		×
b	Has the organization's right to such aid ever been revoked or suspended?	6b		×
7	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, as modified by Rev. Proc. 2019-22, 2019-22 I.R.B. 1260, covering registron and isocial panelists; in Part II.	7		

REV 09/03/25 PRO

Part II	Supplemental Information. Provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also provide any other additional information. See instructions.					
Line 3:	Stated in current college catalog and updated website.					

SCHEDULE O (Form 990)

(Rev. December 2024)

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 instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization	Employer identification number
Cornerstone College & Seminary	23-7044656
Pt VI, Line 11b: Review by Board of Directors	
Pt VI, Line 15a: The Board reviews compensation & awards changes base	and on funds
available.	Jea on rands
Pt VI, Line 15b: The Board reviews compensation & awards changes bas	sed on funds
available.	
Pt XI: Book to tax difference in depreciation.	
Pt VI, Line 12c: We do regularly and consistently monitor and enforce	ce the policy
through self disclosure in board meetings, and other board members of	guestioning
the parties involved in transactions in light of our conflict of int	
F	
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Additional Information From 2024 Federal Exempt Tax Return

Form 990: Return of Organization Exempt from Income Tax

Line 16 col (B) Itemization Statement

Description	Amount
Rent	37,415.
Utilities	9,909.
Total	47,324.