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OMB No 1545-0047

Open to Public Inspection

Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

► The organization may have to use a copy of this return to satisfy state reporting requirements A For the 2007 calendar year, or tax year beginning 07-01-2007 and ending 06-30-2008 C Name of organization SCHOLARSHIP AMERICA INC D Employer identification number

В	Check ıf a	pplicable	Please	C Name of organization	10				D Employ	er identificati	ion number
_	Address ch		use IRS	SCHOLARSHIP AMERICA II	NC.				04-22	96967	
Г	Name cha	inge	label or print or		box if mail is not delivered to	street add	dress) Roor	n/suite	E Telepho	one number	
_	Initial retu	-	type. See Specific	ONE SCHOLARSHIP WAY B	OX 297				(507)	931-1682	
	Final retur		Instruc-	City or town, state or cour	ntry, and ZIP + 4		-		F Accounti	ng method ┌ C	ash 🔽 Accrual
			tions.	ST PETER, MN 56082					C Othe	r (specify) 🕨	
_	Amended										
ı	Application	n pending					l H and	d Tare not	annlıcahl	e to section 527	7 organizations
					and 4947(a)(1) nonexempt chedule A (Form 990 or 990		H(a)	Is this a	group retu		Yes V No
G	Web sit	e: 🕨 ww	w scholarsh	nipamerica org			' '	Are all af			Yes No
<u>J</u>	Organiza	ation typ	e (check only	one) 🕨 🔽 📆 501(c) (3)	◀ (insert no)	or 52				list See instruct return filed by a	•
K					rting organization and its gross f the organization chooses to fil		re i		•	p ruling?	Yes V No
			nplete return	Trictani is not required, but	. the organization discoses to the	o a rotam,	Í	Group E	Exempti	on Number 🕨	-
_	C		A	Sh. Ob. Ob	12 h 102 E10 E62		М	Check 🕨	☐ if the	e organization is	s not required to
				5b, 8b, 9b, and 10b to li			<u> </u>			m 990, 990-EZ,	
	art I				es in Net Assets or	runa B	salances	s (See	tne ins	structions.	.)
	1			s, grants, and similar an	ı	اما					
	a			onor advised funds .		1a	-	FF 262	0.2.7		
	b		• • •	ort (not included on line	· '	1b	1	155,362,	037		
	C			oport (not included on lir	<i>,</i>	1c					
	d			ıbutıons (grants) (not ınd 	'	1d					155 262 027
	e				55,362,037 noncash \$ _				_	e	155,362,037
	2	_			ment fees and contracts (•	e 93) .	-	2	9,720,754
	3								- 3	3	
	4	Interes	t on saving	s and temporary cash ir	vestments					1	
	5	Dividends and interest from securities						- -	5	7,222,658	
	6a	Gross rents									
	Ь	Less rental expenses									
	C									С	
별	7	Otherii	nvestment	ıncome (describe 🟲)						7	
Reven	8a	Grossa	mount from	n sales of assets	(A) Securities		(B)	Other			
ш				ry	11,205,114	8a					
	Ь	Less cos	t or other bas	sis and sales expenses	10,335,237	8b					
	c			ach schedule)	869,877	8c					
	d	Net gain or (loss) Combine line 8c, columns (A) and (B)					. 8	d	869,877		
	9	Special	events and	d activities (attach sche	dule) If any amount is fro	m gami ı	ng , check	here ►	-		
	а	Gross r	evenue (no	t including \$	of						
		contrib	utions repo	rted on line 1b) 🕏 .		9a		333,	797		
	Ь	Less d	ırect expen	ises other than fundrais	ng expenses	9b		87,	458		
	С				Subtract line 9b from line 9	a.,			. 9	С	-87,458
	10a			entory, less returns and		10a					
	Ь		•	ssold	ι	10b					
	C	Gross pro	ofit or (loss) fr	rom sales of inventory (attach	schedule) Subtract line 10b fro	m line 10	a		10	Ос	
	11								1	1	
_	12				7, 8d, 9c, 10c, and 11				1	2	173,087,868
	13	Progran	n services	(from line 44, column (B))				1	3	162,953,945
Expenses	14				lumn (C))					4	4,755,266
Ē.	15	Fundraising (from line 44, column (D))						5	1,637,203		
யி	16								_	6	
	17				mn (A)				1	7	169,346,414
<u>2</u>	18			·	ne 17 from line 12				1	8	3,741,454
3 3 3	19				of year (from line 73, colui				1	9	154,148,816
NE .	20		•		ces (attach explanation) 🤅				-	0	-5,929,889
_	21				Combine lines 18, 19, ar				2	1	151,960,381
Fo	Privacy	Act and	d Paperwor	k Reduction Act Notice,	see the separate instruct	ions.	Cat No	11282Y		F	orm 990 (2007)

Part II Statement of Functional Expenses

All organizations must complete column (A) Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See the instructions.)

	Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22a	Grants paid from donor advised funds (attach Schedule) (cash $\0 noncash $\0) If this amount includes foreign grants, check here	22a				
22b	Other grants and allocations (attach schedule) $(\cosh \$ \frac{156,445,331}{}$ noncash $(\cosh \$ \frac{1}{})$ If this amount includes foreign grants, check here	22b	156,445,331	156,445,331		
23	Specific assistance to individuals (attach schedule)	23	150,445,551	130,443,331		
24	Benefits paid to or for members (attach schedule)	24				
25a	Compensation of current officers, directors, key employees etc. Listed in Part V-A (attach schedule)	25a	712,915	171,444	437,031	104,440
b	Compensation of former officers, directors, key employees etc listed in Part V -B (attach schedule)	25b				
c	Compensation and other distributions not icluded above to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$ (attach schedule)	25c				
26	Salaries and wages of employees not included on lines 25a, b and c	26	5,411,421	3,391,180	1,240,826	779,415
27	Pension plan contributions not included on lines 25a, b and c	27	201,246	111,101	55,367	34,778
28	Employee benefits not included on lines 25a - 27	28	727,455	457,751	191,988	77,716
29	Payroll taxes	29	453,686	270,342	118,128	65,216
30	Professional fundraising fees	30	,	,		,
31	Accounting fees	31	133,944		133,944	
32	Legal fees	32	233,869	47,818	160,691	25,360
33	Supplies	33	243,834	177,010	62,493	4,331
34	Telephone	34	126,717	74,826	26,092	25,799
35	Postage and shipping	35	273,617	250,668	18,424	4,525
36	Occupancy	36	622,122	238,740	290,973	92,409
37	Equipment rental and maintenance	37				
38	Printing and publications	38	390,860	290,026	62,333	38,501
39	Travel	39	991,467	410,654	426,214	154,599
40	Conferences, conventions, and meetings	40				
41	Interest	41				
42	Depreciation, depletion, etc (attach schedule)	42	299,383	201,503	88,388	9,492
43	Other expenses not covered above (itemize)					
а	PRO FESSIO NAL SERVICES	43a	1,796,730	241,959	1,358,251	196,520
b	DUES & SUBSCRIPTIONS	43b	38,973	10,446	15,203	13,324
c	INSURANCE	43c	81,763	59,338	15,693	6,732
d	MISCELLANEOUS	43d	161,081	103,808	53,227	4,046
e		43e				
f		43f				
g		43g				
44	Total functional expenses. Add lines 22a through 43g (Organizations completing columns (B)-(D), carry these totals to lines 13—15)	44	169,346,414	162,953,945	4,755,266	1,637,203

Part III Statement of Program Service Accomplishments (See the instructions.)

form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular
organization. How the public perceives an organization in such cases may be determined by the information presented on its return
herefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and
accomplishments

All c	organizations must describe their exempt purpose achieve	ements neasura	THE MISSION OF SCHOLARSHIP AMERICA, INC IS TO MOBILIZE AMERICA THROUGH SCHOLARSHIPS AND EDUCATIONAL SUPPORT TO MAKE POSTSECONDARY EDUCATION POSSIBLE FOR ALL STUDENTS TO ACCOMPLISH THIS MISSION SCHOLARSHIP AMERICA WILL INVOLVE AND ASSIST COMMUNITIES, CORPORATIONS, FOUNDATIONS, ORGANIZATIONS, AND INDIVIDUALS IN THEIR SUPPORT OF STUDENTS AND THEIR ENCOURAGEMENT OF EDUCATIONAL ACHIEVEMENT SCHOLARSHIP AMERICA IS A PRIVATE SECTOR SCHOLARSHIP AND EDUCATIONAL SUPPORT ORGANIZATION SCHOLARSHIP AMERICA'S PROGRAMS PROVIDE FINANCIAL ASSISTANCE, AS WELL AS ACADEMIC SUPPORT, FOR STUDENTS PURSUING POST-SECONDARY EDUCATION THROUGH ITS PROGRAMS-DOLLARS FOR SCHOLARS, SCHOLARSHIP MANAGEMENT SERVICES, AND SCHOLARSHIP MANAGEMENT SERVICES, AND SCHOLARSHOP-SCHOLARSHIP AMERICA SERVES AS A LEADER, RESOURCE, AND ADVOCATE FOR IMPROVING ACCESS TO POSTSECONDARY EDUCATION SINCE ITS INCEPTION IN 1958 SCHOLARSHIP AMERICA HAS DISTRIBUTED OVER ONE BILLION DOLLARS WORTH OF SCHOLARSHIP AWARDS TO MORE THAN ONE MILLION STUDENTS ON SEPTEMBER 17, 2001, IN IN a clear and concise manner State the number of clients served, tible (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt set of the story.	Program Service Expenses (Required for 501(c)(3) and (4) orgs, and 4947(a)(1) trusts, but optional for others)
	STATEMENTS 1-3	location	·	
	(Grants and allocations \$ 156,445,331)		If this amount includes foreign grants, check here 🕨 🦵	162,953,945
b				
	(Grants and allocations \$)	If this amount includes foreign grants, check here 🕨 🦵	
С				
	(Grants and allocations \$)	If this amount includes foreign grants, check here 🕨 🦵	
d				
			_	
	(Grants and allocations \$)	If this amount includes foreign grants, check here 🕨 🦵	
е	Other program services (attach schedule) (Grants and allocations \$)	If this amount includes foreign grants, check here 🕨 🦵	

f Total of Program Service Expenses (should equal line 44, column (B), Program services)

Part IV	Balance She	ets (See the	instructions.)
		•	•

For	m 990	(2007)						Page 4
Pa	rt IV	Balance Sheets (See the instru	ctions	:.)				
Not	e:	Where required, attached schedules and amo column should be for end-of-year amounts or		thin the description	(A) Beginning of year			(B) ind of year
	45	Cash—non-interest-bearing			Degining of year	45	†	illa or year
	46	Savings and temporary cash investments			31,338,725	46	+	33,547,932
							+	
	47a	Accounts receivable	47a	2,941,225				
	ь	Less allowance for doubtful accounts	47b		3,011,270	47c		2,941,225
	48a	Pledges receivable	48a	903,353				
	ь	Less allowance for doubtful accounts	48b		914,293	48c		903,353
	49	Grants receivable	ble					
v٩	50a	Receivables from current and former office key employees (attach schedule)		50a				
	Ь	Receivables from other disqualified person 4958(c)(3)(B) (attach schedule)	•	l l		50b		
	51a	Other notes and loans receivable (attach schedule)	51a	[
9	ь	Less allowance for doubtful accounts	51b			51c		
Assets	52	Inventories for sale or use				52	+	
ă	53	Prepaid expenses and deferred charges	· . · .		159,856	53		236,705
	54a	Investments—publicly-traded securities		- Cost FMV	154,327,452			151.013.448
	ь	Investments—other securities (attach sch		' ' ' H	,02.,102	54b	+	,
	55a	Investments—land, buildings, and equipment basis	_{55a}	, , , , , , , , , , , , , , ,		345		
	ь	Less accumulated depreciation (attach schedule)	55a			55c		
	56	Investments—other (attach schedule) .	335			56	+	
	57a	Land, buildings, and equipment basis	57a	8,192,349			1	
	ь	Less accumulated depreciation (attach schedule)	57b	5,011,425	3,332,798	57c		3,180,924
	58	Other assets, including program-related in			†			
		(describe 🟲	1 270 155		45 ∓1	000 488		
					1,279,155	58	95 3	999,488
	59	Total assets (must equal line 74) Add line	s 45 th	rough 58	194,363,549	59		192,823,075
	60	Accounts payable and accrued expenses			806,583	60		871,590
	61	Grants payable		[61		
	62	Deferred revenue				62		
Ø.	63	Loans from officers, directors, trustees, an	d key e	mployees (attach				
		schedule)				63		
k (64a	Tax-exempt bond liabilities (attach sched	ule) .	[64a		
	b	Mortgages and other notes payable (attack	nsched	ule)	2,034,349	64b	195	1,953,066
	65	Other liablilities (describe ►)	37,373,801	65	195 3	38,038,038
	66	Total liabilities Add lines 60 through 65	40,214,733	66		40,862,694		
	Orga	nnizations that follow SFAS 117, check here 67 through 69 and lines 73 and 74	► ▽ a	nd complete lines				
Š	67	Unrestricted			7,380,006	67		8,317,065
	68	Temporarily restricted		[129,307,273	68		124,517,661
Balances	69	Permanently restricted			17,461,537	69		19,125,655
Fund	Orga	nnizations that do not follow SFAS 117, chec complete lines 70 through 74						
b	70	Capital stock, trust principal, or current fu	nds .			70		
	71	Paid-in or capital surplus, or land, building	, and ed	quipment fund		71		
Assets	72	Retained earnings, endowment, accumulat	ed inco	me, or other funds .		72		
Net A	73	Total net assets or fund balances Add lin through 72 (Column (A) must equal line 19						
		line 21)		<u> </u>	154,148,816			151,960,381
	74	Total liabilities and net assets / fund balance	s Add line	es 66 and 73	194,363,549	74		192,823,075

Par	Reconciliation of the instructions.)	Revenue per Audited Finan	cial Sta	itements V	Vith Reven	ue per	Return (See
	•	er support per audited financial stat	ements			a	101,259,099
b	A mounts included on line a bu						· · ·
1		tments	b1		-5,929,889		
2		acilities	b2		- , ,	1	
3		s	b3			1	
4	Other (specify)					1	
	Add lines b1 through b4		. b4	<u></u>		Ь	-5,929,889
с	_		_			c	107,188,988
d	A mounts included on Part I, li						
1	Investment expenses not inc						
	6b	,	d1				
2	Other (specify)						
			d2		55,898,880		
	Add lines d1 and d2					d	-5,929,889
е	Total revenue (Part I, line 12) d					_e	173,087,868
Par		Expenses per Audited Fina	ncial St	atements	With Expe		er Return
a		r audited financial statements .				a	103,447,534
b	A mounts included on line a bu						, ,
1		acılıtıes	b1				
2	Prior year adjustments report						
	20		b2				
3	Losses reported on Part I, line 20		b3				
4	Other (specify)		b4		87,458		
	Add lines h1 through h4				87,438	Ь	87,458
_	· ·				• •		103,360,076
c d						C	103,300,070
	A mounts included on Part I, li		Ì	İ			
1	Investment expenses not incl	luded on Part 1, line	d1				
2						1	
			d2	(55,986,338]	
	Add lines d1 and d2					d	65,986,338
e	Total expenses (Part I, line 17						169,346,414
Dar	d	► Directors, Trustees, and Key	Emple	woos (List	aach parca	e	ac an officer
rai		key employee at any time duri					
	(A) Name and address	(B) Title and average hours per week devoted to position		mpensation id, enter -0)	(D) Contribi employee bend deferred com plans	efit plans & pensation	(E) Expense account and other allowances
See A	dditional Data Table						

Software ID: Software Version:

EIN: 04-2296967

Name: SCHOLARSHIP AMERICA INC

Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

		<u> </u>	· · ·	
(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
DR CLIFFORD L STANLEY ONE SCHOLARSHIP WAY BOX 297 ST PETER, MN 56082	PRESIDENT & CEO 40 0	261,100	9,021	0
MR RICHARD J SCHWAB ONE SCHOLARSHIP WAY BOX 297 ST PETER, MN 56082	IMMEDIATE PAST CHAIR 5 0	o	0	0
MS MIM SCHRECK ONE SCHOLARSHIP WAY BOX 297 ST PETER, MN 56082	CHAIR 5 0	0	0	0
MS KAY M MARQUET ONE SCHOLARSHIP WAY BOX 297 ST PETER, MN 56082	TREASURER 5 0	0	0	0
MR MICHAEL RYDER ONE SCHOLARSHIP WAY BOX 297 ST PETER, MN 56082	CLERK 5 0	0	0	0
MR MARK BATES ONE SCHOLARSHIP WAY BOX 297 ST PETER, MN 56082	TRUSTEE 3 0	0	0	0
MS SUSANNE HUFFMON ESBER ONE SCHOLARSHIP WAY BOX 297 ST PETER, MN 56082	TRUSTEE 3 0	0	0	0
MS TINA LEE ONE SCHOLARSHIP WAY BOX 297 ST PETER, MN 56082	TRUSTEE 3 0	0	0	0
MS BARBARA B MCBEE ONE SCHOLARSHIP WAY BOX 297 ST PETER, MN 56082	TRUSTEE 5 0	0	0	0
MR MICHAEL RYAN ONE SCHOLARSHIP WAY BOX 297 ST PETER, MN 56082	TRUSTEE 3 0	0	0	0

Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

Torin 330, rure v A Current o	meers, birectors, me	istees, and itey Emp	510,0001	
(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0- .)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
MS SEEMA R SHAH ONE SCHOLARSHIP WAY BOX 297 ST PETER,MN 56082	TRUSTEE 3 0	0	0	0
MR MARTIN MODERI ONE SCHOLARSHIP WAY BOX 297 ST PETER, MN 56082	COO & CIO 40 0	168,938	10,440	0
MR DONALD LASSERE ONE SCHOLARSHIP WAY BOX 297 ST PETER,MN 56082	SR VP COMMON PROG 40 0	149,122	11,431	0
ANNE CHENEY ONE SCHOLARSHIP WAY BOX 297 ST PETER, MN 56082	CONTROLLER 40 0	93,538	9,325	0
MS TREASA BOWERS ONE SCHOLARSHIP WAY BOX 297 ST PETER, MN 56082	SECRETARY 5 0	0	0	0
MS JUDY ALLEN ONE SCHOLARSHIP WAY BOX 297 ST PETER, MN 56082	TRUSTEE 3 0	0	0	0
MR THOMAS CARDELLA ONE SCHOLARSHIP WAY BOX 297 ST PETER, MN 56082	TRUSTEE 3 0	0	0	0
MR TIMOTHY CHRISTENSEN ONE SCHOLARSHIP WAY BOX 297 ST PETER, MN 56082	TRUSTEE 3 0	0	0	0
MR RICHARD L FERGUSON ONE SCHOLARSHIP WAY BOX 297 ST PETER, MN 56082	TRUSTEE 3 0	0	0	0
MR J STEPHEN PUTNAM ONE SCHOLARSHIP WAY BOX 297 ST PETER, MN 56082	TRUSTEE 3 0	0	0	0

Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

(A) Name and address (B) Title and average hours per week devoted to position		(C) Compensation (If not paid, enter -0- .)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances	
MR ROBERT B RASMUSSEN ONE SCHOLARSHIP WAY BOX 297 ST PETER, MN 56082	TRUSTEE 3 0	0	0	0	

	990 (2007)						Page o		
	V-A Current Officers, Director			-		Yes	No		
75a	Enter the total number of officers, director	rs, and trustees permitted	l to vote on organization	n business at board					
	meetings		.						
b	Are any officers, directors, trustees, or ke	y employees listed in For	m 990, Part V - A , or hig	jhest compensated					
	employees listed in Schedule A , Part I , or	highest compensated pro	ofessional and other ind	ependent					
	contractors listed in Schedule A, Part II-	business							
	relationships? If "Yes," attach a statemen	it that identifies the indivi	duals and explains the	relationship(s) .	75b		No		
С	c Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated								
	employees listed in Schedule A, Part I, or	highest compensated pro	ofessional and other ind	ependent					
	contractors listed in Schedule A, Part II-	A or II-B, receive comper	nsation from any other o	organizations, whether					
	tax exempt or taxable, that are related to				75c		No		
	organization"								
	If "Yes," attach a statement that includes	the information described	d in the instructions						
d	Does the organization have a written conf	lict of interest policy? .			75d	Yes			
Par	t V-B Former Officers, Director Benefits (If any former officers) during the benefits in the appropriate of the control	cer, director, trustee, e year, list that person	or key employee red below and enter the	eived compensation amount of compens	or oth	ner bei	nefits		
	(A) Name and address	(B) Loans and Advances	(C) Compensation (If not paid enter -0-)	(D) Contributions to employee benefit plans and deferred compensation plans		oense acc ner allowa	count and ances		
Par	Other Information (See the	instructions.)				Yes	No		
76	Did the organization make a change in its activities	or methods of conducting activ	rities? If "Yes," attach a						
	detailed statement of each change				76		No		
77	Were any changes made in the organizing	or governing documents	but not reported to the :	IRS?	77		No		
	If "Yes," attach a conformed copy of the c	hanges							
78a	Did the organization have unrelated business gross		ng the year covered by this	return?	78a		No		
	If "Yes," has it filed a tax return on Form 9		- '		78b				
	Was there a liquidation, dissolution, termination, or								
	a statement				79		N o		
80a	Is the organization related (other than by association	on with a statewide or nationwi	de organization) through cor	nmon membershin.	"		110		
	governing bodies, trustees, officers, etc , to any ot				80a	_	No		
b	If "Yes," enter the name of the organization	on 🕨							
			ıs Fexempt or Fno	nexempt					
31a	Enter direct or indirect political expenditu	res (See line 81 instruct	ıons) 81a	0					
Ь	Did the organization file Form 1120-POL fo		81b		No				

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Par	t VI Other Information (continued)		Yes	No
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a	Yes	
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)			
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	Yes	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	Yes	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a		Νο
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gıfts were not tax deductible?	84b		
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?	85a		
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	85b		
	If "Yes," was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed the prior year			
С	Dues assessments, and similar amounts from members			
d	Section 162(e) lobbying and political expenditures			
е	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e			
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f			
g	Does the organization elect to pay the section 6033(e) tax on the amount on line $85f^{?}$	85g		
h	If section $6033(e)(1)(A)$ dues notices were sent, does the organization agree to add the amount on line $85f$ to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?			
		85h		
86	501(c)(7) orgs. Enter a Initiation fees and capital contributions included on line 12 86a 0			
	Gross receipts, included on line 12, for public use of club facilities 86b 0			
87	501(c)(12) orgs. Enter a Gross income from members or shareholders 87a 0			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
88a	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-37 If "Yes," complete Part IX	88a		No
b	At any time during the year, did the organization directly or indirectly own a controlled entity within the meaning of section 512(b)(13)? If yes complete Part XI	88b		No
202	501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under	000		110
	section 4911 ► 0 , section 4912 ► 0 , section 4955 ►			
b	501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b		No
c	Enter A mount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
d	Enter A mount of tax on line 89c, above, reimbursed by the organization			
	All organizations. At any time during the tax year was the organization a party to a prohibited tax shelter			
	transaction?	89e		N o
f	All organizations. Did the organization acquire direct or indirect interest in any applicable insurance contract?	0,00		110
•	7.11 organizations. But the organization dequire uncert of municipal mitures in any approache insurance contract			l <u>.</u> .
_	Favoring eventual and an analysis are assessed as a second and an area of second founds. Did the company of	89f		No
g	For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			
		89g		No
90a	List the states with which a copy of this return is filed 🕨	_		
	Number of employees employed in the pay period that includes March 12, 2007 (See			146
91a	The books are in care of ► ANNE CHENEY CONTROLLER Telephone no ► (507)	931-0	430	
	ONE SCHOLARSHIP WAY			
	Located at ST PETER, MN ZIP + 4 56802			
ь	At any time during the calendar year, did the organization have an interest in or a signature or other authority	г		
	over a financial account in a foreign country (such as a bank account, securities account, or other financial		Yes	No
	account)?	91b		No
	If "Yes," enter the name of the foreign country -			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1 , Report of Foreign Bank and Financial Accounts			

Page 8 c At any time during the calendar year, did the organization maintain an office outside of the United States? 91c Νo If "Yes," enter the name of the foreign country ▶_ 92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041—Check here. and enter the amount of tax-exempt interest received or accrued during the tax year . . . Part VII Analysis of Income-Producing Activities (See the instructions.) Unrelated business income Excluded by section 512, 513, or 514 (E) Note: Enter gross amounts unless otherwise indicated. Related or (A) (C) (B) (D) exempt function Exclusion Business Amount Amount income code code 93 Program service revenue a MANAGEMENT FEES 9,318,457 **b** SCHOLARSHOP 34.843 367,454 DOLLARS FOR SCHOLARS **f** Medicare/Medicaid payments . . . g Fees and contracts from government agencies Membership dues and assessments . . Interest on savings and temporary cash investments 95 7,222,658 96 Dividends and interest from securities . . 97 Net rental income or (loss) from real estate a debt-financed property **b** non debt-financed property . Net rental income or (loss) from personal property 98 Other investment income 99 18 869,877 Gain or (loss) from sales of assets other than inventory 100 -87,458 Net income or (loss) from special events 102 Gross profit or (loss) from sales of inventory 103 Other revenue **a** ___ 9,720,754 104 Subtotal (add columns (B), (D), and (E)) . . 8,005,077 17,725,831 Note: Line 105 plus line 1e, Part I, should equal the amount on line 12, Part I. Relationship of Activities to the Accomplishment of Exempt Purposes (See the instructions.) Line No. Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes) Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions.) (A) (C) (D) Name, address, and EIN of corporation, End-of-year Percentage of Nature of activities Total income partnership, or disregarded entity ownership interest assets % % Information Regarding Transfers Associated with Personal Benefit Contracts (See the Yes ▼ No (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ┌ Yes ┌ No (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . NOTE: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

					Yes	No	
	Did the reporting organization make any the Code? if "Yes," complete the sched		defined in section 5	12(b)(13) of		No	
	(A) Name and address of each controlled entity	(B) Employer Identification Number	(C) Description transfer		(D) of transf	fer	
a							
b							
с							
	Totals						
					T ,,		
107	Did the reporting organization receive a	ny transfers from a controlled entity	as defined in secti	on 512(b)(13) of	Yes	No No	
	the Code? If "Yes," complete the sched	·		, , ,		INO	
	(A) Name and address of each controlled entity	(B) Employer Identification Number	(C) Description transfer	OT I	(D) Amount of transfer		
а							
b							
С							
	Totals						
					Yes	No	
	Did the organization have a binding writ		2006 covering the	ınterests, rents,	163	No	
	royalties and annuities described in que				<u> </u>	<u>L</u>	
	and belief, it is true, correct, and complete	nave examined this return, including accompa Declaration of preparer (other than officer) i					
lease							
Sign Iere	Signature of officer Date						
	Anne L Cheney Controller Type or print name and title						
)oid	Preparer's signature KPMG LLP	Date	Check if self-	Preparer's SSN or PTIN (See Gen I	nst W)	
Paid Preparer'	S Firm's name (or yours & KPMG LLP		empolyed 🕨				
Jse Only	, ,	Chr. 00 C 74h		EIN 🕨			
	LOUGESS, AUG / IF + 4 AZIII WAIS FAMO	CH 90 5 / H					

Minneapolis, MN 55402

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DLN: 93490039000000

OMB No 1545-0047

SCHEDULE A (Form 990 or 990EZ)

刉 Department of the Treasury Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or 4947(a)(1) Nonexempt Charitable Trust Supplementary Information—(See separate instructions.)

▶ MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

2007

Name of the organization SCHOLARSHIP AMERICA INC

Employer identification number

04-2296967

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees (See page 1 of the instructions. List each one. If there are none, enter "None.")

\	nor Elec eden errer in aren e dr	<u> </u>	· · · · / 	
(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
MARILEE HEDBERG	DID HUMAN DECOUDES			
ONE SCHOLARSHIP WAY BOX 297 ST PETER, MN 56082	DIR, HUMAN RESOURCES 40 0	87,250	3,786	0
ANN WORLEY	EVEC DID CADEC			
ONE SCHOLARSHIP WAY BOX 297 ST PETER, MN 56082	EXEC DIR, CADFS 40 0	85,036	3,529	0
RICK MILLERICK	EVEC DID NWDEC			
ONE SCHOLARSHIP WAY BOX 297 ST PETER, MN 56082	EXEC DIR, NWDFS 40 0	85,905	8,760	0
PATSY ROSSOW	DID TECH INEDA OCED			
ONE SCHOLARSHIP WAY BOX 297 ST PETER, MN 56082	DIR, TECH, INFRA &SER 40 0	85,790	6,787	0
CURT TRYGSTAD	AVE COMMUNITY PROC			
ONE SCHOLARSHIP WAY BOX 297 ST PETER, MN 56082	AVP, COMMUNITY PROG 40 0	86,530	6,684	0
Total number of other employees paid over \$50,000	35			

Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services (See page 2 of the instructions. List each one (whether individual or firms). If there are none, enter

"None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation	
SMART SOFTWARE SOLUTIONS INC			
108 SOUTH PIERRE ST	SOFTWARE PROGRAMMING	361,518	
PIERRE,SD 57501			
MANPOWER TEMP			
21271 NETWORK PL	SOFTWARE PROGRAMMING	235,169	
CHICAGO,IL 60673			
LAURA SOLOMON		173,463	
300 E LANCASTER AV 106A	LEGAL		
WYNNEWOOD, PA 19096			
KPMG			
120 S SEVENTH ST	AUDIT AND TAX	129,108	
MINNEAPOLIS, MN 55403			
JUDGE TECHNICAL STAFF			
POBOX 820120	SOFTWARE PROGRAMMING	77,075	
PHILADELPHIA,PA 19182			
Total number of others receiving over \$50,000 for			
professional services			

Compensation of the Five Highest Paid Independent Contractors for Other Services Part II-B (List each contractor who performed services other than professional services, whether individual or

firms. If there are none, enter "None". See page 2 for instructions.)

(a) Name and address of each independent contractor paid more than \$50,000 (b) Type of service (c) Compensation SECURE 24 INC REMOTE SERVER HOST 149,481 21420 MELROSE AV SOUTHFIELD, MI 48075 **NELSON PRINTING** PRINTING 89,718 838 N MINNESOTA AV ST PETER, MN 56082 Total number of other contractors receiving over

\$50,000 for other services

Par	Statements About Activities (See page 2 of the instructions.)		Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, include any attempt			
	to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in			
	connection with the lobbying activities *\$(Must equal amounts on line 38, Part VI-A, or line i of Part VI-B)	1		No
	Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A Other			
	organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities			
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any			
	substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or			
	principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.) 🕏			
а	Sale, exchange, or leasing property?	2a		Νo
ь	Lending of money or other extension of credit?	2b		Νo
c	Furnishing of goods, services, or facilities?	2c		Νo
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d	Yes	
e	Transfer of any part of its income or assets?	2e		Νo
3a	Did the organization make grants for scholarships, fellowships, student loans, etc ? (If "Yes," attach an explanation			
Ь	of how the organization determines that recipients qualify to receive payments) 🕏 Did the organization have a section 403(b) annuity plan for its employees?	3a 3b	Yes Yes	
c	Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment , historic land areas or structures? If "Yes" attach a detailed statement	3с		No
d	Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?	3d		Νo
4a	Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g If "No," complete lines 4f and 4g	4a	Yes	
b	Did the organization make any taxable distributions under section 4966?	4b		Νo
c	Did the organization make a distribution to a donor, donor advisor, or related person?	4c		Νo
d	Enter the total number of donor advised funds owned at the end of the tax year			
e	Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year			
f	Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts			
g	Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year			

Pa	art I	Reason for Non-Private I	oundation Status	(See pages 4 th	rough 7 of the	instructions.)				
Icert	ify th	at the organization is not a private foun	dation because it is (PI	ease check only C	NE applicable bo	ox)				
5	Γ	A church, convention of churches, or	association of churches	Section 170(b)(1)(A)(ı)					
6	Γ	A school Section 170(b)(1)(A)(II) (A	lso complete Part V)							
7	Γ	A hospital or a cooperative hospital s	A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(III)							
8	Γ	A federal, state, or local government of	or governmental unit Se	ction 170(b)(1)(A)(v)					
9	Γ	A medical research organization oper	ated in conjunction with	a hospital Section	170(b)(1)(A)(ı	π) Enter the ho	spital's name, city,			
10	Γ	An organization operated for the bene Section 170(b)(1)(A)(iv) (Also comp	-	•	ated by a govern	mental unit				
11a	▽	An organization that normally receive Section 170(b)(1)(A)(vi) (Also comp	•		overnmental uni	t or from the ger	neral public			
11b	Γ	A community trust Section 170(b)(1)(A)(vı) (Also complete	the Support Sched	lule ın Part IV-A)				
12	Г	An organization that normally receive receipts from activities related to its its support from gross investment incacquired by the organization after Jun An organization that is not controlled	charitable, etc , function ome and unrelated busir e 30, 1975 See sectior	s—subject to certa ness taxable incom n 509(a)(2) (Also	ain exceptions, a ne (less section complete the Su	and (2) no more 511 tax) from b apport Schedule	than 331/3% of usinesses in Part IV-A)			
	·	requirements of section 509(a)(3) Cl		bes the type of sup		ation				
		Provide the following informa	tion about the supporte	d organizations. (s	see page 7 of the	e instructions.)				
(a) Name(s) of supported organization(s)			(b) Employer ident if icat ion number	(c) Type of organization (described in lines 5 through 12 above or	(d) Is the supported organization listed in the supporting organization's governing documents?		(e) Amount of support?			
				IRC section)	Yes	No				
Total				1		<u> </u>				
							1			

An organization organized and operated to test for public safety Section 509(a)(4) (See page 7 of the instructions)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12) Use cash method of accounting.

Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Cale	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2005	(c) 2004	(d) 2	2003	(e) Total
15	Gifts, grants, and contributions received (Do not include unusual grants See line 28)	94,993,027	98,751,180	87,850,410	8	33,542,564	365,137,181
16	Membership fees received						0
17	Gross receipts from admissions, merchandise						
	sold or services performed, or furnishing of	8,567,821	9,092,435	7,527,314		7,506,094	32,693,664
	facilities in any activity that is related to the	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	2,002,000	.,,,,,,,,		,,,,,,,,,,	,,
18	organization's charitable, etc , purpose Gross income from interest, dividends, amounts						
10	received from payments on securities loans						
	(section 512(a)(5)), rents, royalties, and	5,048,054	6,419,954	5,086,993		4,491,602	21,046,603
	unrelated business taxable income (less section	' '	, ,	, ,		, ,	, ,
	511 taxes) from businesses acquired by the organization after June 30, 1975						
19	Net income from unrelated business activities						0
	not included in line 18						
20	Tax revenues levied for the organization's benefit						0
	and either paid to it or expended on its behalf						U
21	The value of services or facilities furnished to						
	the organization by a governmental unit without						_
	charge Do not include the value of services or facilities generally furnished to the public without						0
	charge						
22	Other income Attach a schedule Do not include						
	gain or (loss) from sale of capital assets 🍠	0	0	0		0	0
23	Total of lines 15 through 22	108,608,902	114,263,569	100,464,717	c	5,540,260	418,877,448
24	Line 23 minus line 17	100,041,081	105,171,134	92,937,403		88,034,166	386,183,784
25	Enter 1% of line 23	1,086,089	1,142,636	1,004,647		955,403	· · ·
26		nter 2% of amount	ın column (e), lın	e 24	26a		7,723,676
Ŀ	Prepare a list for your records to show the name of	f and amount contr	buted by each pe	erson (other			
	than a governmental unit or publicly supported org	anızatıon) whose t	otal gifts for 200	2 through			
	2005 exceeded the amount shown in line 26a Do	•	-	<u>-</u>			
	of all these excess amounts			▶	26b		52,724,252
	Total support for section 509(a)(1) test Enter line	e 24, column (e)		▶	26c		386,183,784
c	Add Amounts from column (e) for lines 18	21,046,603	19	0			
	22		26b 5	52,724,252	26d		73,770,855
•	Public support (line 26c minus line 26d total)				26e		312,412,929
f	Public support percentage (line 26e (numerator) d	livided by line 26c	(denominator))	▶	26f		80 9 %
27	Organizations described on line 12: a For amou			7 that were receiv	ed from	a "dısqua	lıfıed person,"
	prepare a list for your records to show the name of	, and total amount	s received in eac	h year from, each	"dısqua	lified pers	on "
	Do not file this list with your return. Enter the sur	n of such amounts	for each year				
	(2006) (2005)		(2004)		(2003)		
Ŀ	For any amount included in line 17 that was receiv	ed from each pers	on (other than "dı	squalified person	s"), pre	oare a list	for your
	records to show the name of, and amount received	for each year, tha	t was more than t	he larger of (1) th	ie amou	nt on line 2	25 for the year
	or (2) \$5,000 (Include in the list organizations de	escribed in lines 5	through 11b, as	well as ındıvıduals) Do no	t file this	list with your
	return. After computing the difference between the	amount received	and the larger am	ount described in	(1) or (2) , enter t	the sum of
	these differences (the excess amounts) for each y	ear					
	(2006)(2005)		(2004)		(2003)_		
c	Add Amounts from column (e) for lines 15		16		_		
	17 20		21		•	27c	
	Add Line 27a total	and line 27b tota	<u></u>			27d	
	Public support (line 27c total minus line 27d total			1	•	27e	
	Total support for section 509(a)(2) test Enter am			27f		ļ l	
_	Public support percentage (line 27e (numerator) d			•	27g		
ŀ	Investment income percentage (line 18, column (e				27h		
28	Unusual Grants: For an organization described in li			_	_	_	
	prepare a list for your records to show, for each ye	ar, the name of the	contributor, the	date and amount	of the gr	ant, and a	brief

description of the nature of the grant Do not file this list with your return. Do not include these grants in line 15

	(To be completed ONLY by schools that checked the box on line 6 in Part IV)			
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws,		Yes	No
	other governing instrument, or in a resolution of its governing body?	29		
30	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?	30		
31	Has the organization publicized its racially nondiscriminatory policy 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?	31		
	If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement)			
32	Does the organization maintain the following			
а	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a		
ь	Records documenting that scholarships and other financial assistance are awarded on racially nondiscriminatory			
	basis?	32b	i i	
r	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing			
	with student admissions, programs, and scholarships?	32c		
4	Copies of all material used by the organization or on its behalf to solicit contributions?	32d		
a	copies of all material asea by the organization of on its behalf to solicit contributions.	324		
	If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement)			
	Tryou answered No to any of the above, please explain (fryou need more space, attach a separate statement)			
		-		
22	Does the companion decomposite by many in the companion to	_		
33	Does the organization discriminate by race in any way with respect to			
а	Students' rights or privileges?	33a		
b	Admissions policies?	33b		
c	Employment of faculty or administrative staff?	33c		
d	Scholarships or other financial assistance?	33d		
е	Educational policies?	33e		
f	Use of facilities?	33f		
-				
-	Athletic programs?	33g		
9	······································	3		
	Other extracurricular activities?	33h		
n	Other extracumcular activities.	3311	<u> </u>	
	The second of th			
	If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)			
		-		
		-		
		-		
34a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		
-	Has the organization's right to such aid ever been revoked or suspended?	34b		
b	If you answered "Yes" to either 34a or b, please explain using an attached statement			
b	,		'	
b				
ъ 35	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation			

Pa	rt VI-A Lobbying Expenditu (To be completed ONL						ruction	s.)	
he	ck 🕨 a 🦵 ıf the organizatıon belong	s to an affiliated gr	roup Check 🟲	b If you ch	necked	"a" and "I	ımıted	ontro	" provisions apply
	Limits on Lo (The term "expenditures	bbying Expends " means amounts				(a A ffiliate tota	d group		(b) To be completed for all electing organizations
36	Total lobbying expenditures to influe	nce public opinion	(grassroots lobb	yıng)	36				<u> </u>
37	Total lobbying expenditures to influe	nce a legislative b	ody (direct lobby	ng)	37				
38	Total lobbying expenditures (add line	es 36 and 37)			38				
39	Other exempt purpose expenditures				39				
10	Total exempt purpose expenditures	(add lines 38 and 3	39)		40				
11	Lobbying nontaxable amount Enter t	the amount from the	e following table–	_					
	If the amount on line 40 is— Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,500,000	The lobbying non: 20% of the amount of \$100,000 plus 15% of \$175,000 plus 10% of	on line 40 of the excess over \$5 of the excess over \$1	00,000 ,000,000	41				
	Over \$1,500,000 but not over \$17,000,000 Over \$17,000,000	\$225,000 plus 5% of \$1,000,000	the excess over \$1,	300,000					
	Grassroots nontaxable amount (ente				42				
	Subtract line 42 from line 36 Enter				43			_	
14	Subtract line 41 from line 38 Enter	-0- ıf lıne 41 ıs mo	re than line 38		44				
	Caution: If there is an amount on eith				<u> </u>				
	(Some organizations that	1-Year Averag made a section 50 instructions for line	1(h) election do i	not have to com	plete a	ll of the fiv	e colun	nns be	low
				bying Expendit			ır Avera	aging F	eriod
	Calendar year (or fiscal year beginning in) 🕨		(a) 2007	(b) 2006		(c) 2005		(d) 004	(e) Total
15	Lobbying nontaxable amount								
16	Lobbying ceiling amount (150% of l	ıne 45(e))							
17	Total lobbying expenditures								
18	Grassroots nontaxable amount								
19	Grassroots ceiling amount (150% c	of line 48(e))							
50	, , , ,								
Pa	rt VI-B Lobbying Activity by (For reporting only by				A)(Se	e page 1	1 of th	e inst	ructions.)
	ng the year, did the organization atter mpt to influence public opinion on a le	mpt to influence na	tıonal, state or lo	cal legislation, i			Yes	No	A mount
	V olunteers		•					Νο	

- **b** Paid staff or management (Include compensation in expenses reported on lines **c** through **h.**)
- **c** Media advertisements
- d Mailings to members, legislators, or the public
- e Publications, or published or broadcast statements
- **f** Grants to other organizations for lobbying purposes
- g Direct contact with legislators, their staffs, government officials, or a legislative body
- **h** Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means
- i Total lobbying expenditures (Add lines c through h.)
 - If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities

Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 12 of the instructions.)

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting organization to a noncharitable exempt organization of No Yes (i) Cash 51a(i) Νo (ii) Other assets a(ii) Nο **b** Other transactions (i) Sales or exchanges of assets with a noncharitable exempt organization b(i) Νo (ii) Purchases of assets from a noncharitable exempt organization b(ii) Νo (iii) Rental of facilities, equipment, or other assets b(iii) Νo (iv) Reimbursement arrangements b(iv) Νo (v) Loans or loan guarantees b(v) Νo (vi) Performance of services or membership or fundraising solicitations b(vi) Νo c Sharing of facilities, equipment, mailing lists, other assets, or paid employees Νo d If the answer to any of the above is "Yes," complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (a) (b) (c) Description of transfers, transactions, and sharing Line no A mount involved Name of noncharitable exempt organization arrangements 52a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations ☐ Yes described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? **b** If "Yes," complete the following schedule (a) (b) (c) Name of organization Type of organization Description of relationship

TY 2007 Cash Grants Paid Schedule

Name: SCHOLARSHIP AMERICA INC

Class of Activity	Recipient's name	Address	Amount	Relationship
	APPROX 83000 POST SECONDARY STUDE	Scholarship Way Box 297 St Peter, MN 56082	156,445,331	NONE

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TY 2007 Gain/Loss from Sale of Public Securities Schedule

Name: SCHOLARSHIP AMERICA INC

EIN: 04-2296967

Gross Sales Price: 11,205,114

Basis: 10,335,237

Sales Expenses:

Total (net): 869,877

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TY 2007 General Explanation Attachment

Name: SCHOLARSHIP AMERICA INC

ldentifier	Return Reference	Explanation
STATEMENT OF PROGRAM SERVICES ACCOMPLISHMENTS	990 PART III	Scholarship Management Services Program Service Expense \$160,744,557————————————————————————————————

ldentifier	Return Reference	Explanation
STATEMENT OF PROGRAM SERVICES ACCOMPLISHMENTS	990 PART III	aid and securing grants and loans. Dollars for Scholars chapters are supported by 42,000 v olunteers as well as by staff in the national office and seven regional offices.

ldentifier	Return Reference	Explanation
RELATIONSHIP OF ACTIVITIES TO THE ACCOMPLISHMENT OF EXEMPT PURPOSES	990 PART VIII	Scholarship Management Services Fees (Line 93a) The management of scholarship and tuition reimbursement programs sponsored by corporations, foundations, associations and individual s expands access to postsecondary education institutions to more students. ScholarShop (Line 93b) The formation and support of these local programs, available in organizations throughout the country, provides both curricula and resource centers that are designed to motivate and prepare students for postsecondary education. Programs are designed for high school students, middle school students and for the parents of students. A recent on-line version, ScholarShop Options for Kids, presents the program to middle school students in a computer-game environment. Dollars for Scholars (Line 93c). The formation and support of these grass-roots organizations throughout the country provides a community effort to raise scholarship funds and provide financial and academic support to local students. Support may be direct through scholarship awards or indirect through the Collegiate Partner scholarship -matching program. The program unites local citizens and encourages local students to reach for and achieve their educational goals.

ldentifier	Return Reference	Explanation
STATES WHERE REGISTERED TO CONDUCT FUNDRAISING	990 PART VILINE 90A	Alabama Consumer Protection Section 11 South Union Street Montgomery, Alabama 36130 Alaska Alaska Department Of Law 1031 W 4th Ave, Suite 200 Anchorage, Alaska 99501 Arzona Char itable Organization Registration 1700 W Washington St., 7th Floor Phoeniz, Arizona 85007 Arkansas Consumer Protection Division 323 Center Street, 200 Tower Bidg Little Rock, Arkan sas 72201 California Registry Of Charitable Trusts 1300 I Street, Suite 101 Sacramento, California 95814 Colorado Office Of The Secretary Of State 1560 Broadway, Suite 200 Denver, Colorado 80202 Connecticut Public Charities Unit 55 Elm Street Hartford, Connecticut 06106 Florida Division Of Consumer Services 407 S Calihoun Street, #218 Tallahasse, Florida 32 399 Georgia Office Of The Secretary Of State 2 Martin Luther King Jr Dr SE, #802 Atlanta, Georgia 30334 Illinois Charitable Trusts & Solicitations Div 100 W Randolph St, 12th Fl Chicago, Illinois 60601 Indiana Consumer Protection Division 100 N Senate Ave, Room 201 Indianapolis, Indiana 46204 lows a Consumer Protection Division 1300 East Walnut Des Moi nes, Iow a 50319 Kansas Secretary Of State's Office 120 S W 10th Ave, 1st Flr Mem Hall Topeka, Kansas 66612 Kentucky Consumer Protection Division 1024 Capital Center Drive Frank fort, Kentucky 40601 Maine Licensing & Enforcement Division State House Station 35 Augusta, Maine 04333 Maryland Charitable Division State House Annapolis, Maryland 21401 Massachus etts Division Of Public Charities 1 Ashburton Place Boston, Massachusetts 02108 Michigan Consumer Protection & Charitable Trust 690 Law Bidg, 525 W Ottawa Street Lansing, Michigan 48913 Minnesota Charities Division 445 Minnesota Street, Suite 1200 St Paul, Minnesota 55 101 Mississippi 39205 Missouri Public Protection Unit Po Box 899 Jefferson City, Missouri 65102 Montana Office Of The Attorney General Po Box 20146 Helena, Montana 59620 New Hampshire Division Of Charitable Trusts 33 Capitol Street Concord, New Hampshire 03301 New Jersey Division Of Consumer Affairs 124 Halsey Street, 7th Floor Newark, New Je

ldentifier	Return Reference	Explanation
DEPRECIATION, DEPLETION, ETC	990 PART II LINE 42, Part IV Lines 57 A&B	6/30/2007 Sales & 6/30/2008 Fixed Assets Beginning Additions Retirements Ending Furniture & Equip 3,123,101 93,388 - 3,216,489 Furnishings 11,635 11,635 Subtotal, Furniture & Equipment 3,134,736 93,388 - 3,228,124 Land 329,436 329,436 Bldng & Improve 4,524,543 54,120 - 4,578,663 Automobiles 16,126 16,126 Scholarshop Web Site 40,000 40,000 T otal Fixed Assets 8,044,841 147,508 - 8,192,349 Accumulated Depreciation Furniture & Equip 2,920,038 125,320 - 3,045,358 Scholarshop Web Site 40,000 40,000 Furnishings 11,635 11,635 Subtotal, Furniture & Equipment 2,971,673 125,320 - 3,096,993 Land 105,522 13,0 14 - 118,536 Buildings & Imp 1,619,797 159,974 - 1,779,771 Automobiles 15,051 1,074 - 16, 125 Total Accum Depr 4,712,043 299,383 - 5,011,425 Net Fixed Assets 3,332,798 3,180,924

ldentifier	Return Reference	Explanation	
SCHOLARSHIP AWARDS PROCESS	Schedule A Part III Line 3a	Scholarship America was formed to encourage citizen support of higher education. In furthe rance of that effort it has undertaken a variety of activities including the administration of scholarship programs on behalf of participating corporations, foundations and individuals. Scholarship America grants to individuals for study purposes are made in compliance with procedures set forth in the Scholarship America awards kit on file with the LRS, highlights of which are below. In administering a scholarship program Scholarship America is available to perform the following to determine the recipients. 1. Prepare and furnish a pplication forms. 2. Receive all application material directly. 3. Process and evaluate all applications. 4. Determine the recipients and the amount to be awarded. 5. Notify the recipient of their award. 6. Confirm the appropriate employment relationship or program eligibility. 7. Confirm enrollment in a qualified educational institution. 8. Make payment of the award. 9. Supervise and investigate the use of the funds by the recipients in their educational programs. Recipients are determined by Scholarship America utilizing selection cirteria based on a detailed analysis of the following candidate information. 1. Scholastic aptitude, as measured by performance on a recognized scholastic aptitude test. 2. Scholastic performance measured by rank in class. 3. Counselor appraisal. 4. Interest, activities and leadership contributions. 5. Financial need may also be taken into consideration.	

ldentifier	Return Reference	Explanation
PAYMENT OF COMPENSATION	SCHEDULE A PART III LINE 2A	SEE FORM 990, PART V-A

DLN: 93490039000000

TY 2007 Mortgages and Notes Payable Schedule

Name: SCHOLARSHIP AMERICA INC

EIN: 04-2296967

Total Mortgage Amount: 1953066

Item No.	1
Lender's Name	THE FIRST NATIONAL BANK OF ST PETE
Lender's Title	
Relationship to Insider	
Original Amount of Loan	
Balance Due	1943077
Date of Note	
Maturity Date	2025-09
Repayment Terms	SEMI-ANNUAL INSTALLMENTS OF \$90,000
Interest Rate	5.75
Security Provided by Borrower	
Purpose of Loan	
Description of Lender Consideration	
Consideration FMV	
<u></u>	•

Item No.	2
Lender's Name	CITY OF ST PETER
Lender's Title	
Relationship to Insider	
Original Amount of Loan	
Balance Due	9989
Date of Note	
Maturity Date	2009-01
Repayment Terms	MONTHLY INSTALLMENTS OF \$1,448
Interest Rate	3.0
Security Provided by Borrower	
Purpose of Loan	
Description of Lender Consideration	
Consideration FMV	

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TY 2007 Other Assets Schedule

Name: SCHOLARSHIP AMERICA INC

Description	Beginning of Year Amount	End of Year Amount
CONTRIBUTIONS RECEIVABLE		
LESS CURRENT PORTION	1,009,604	756,963
CASH VALUE OF LIFE INSURANCE	269,551	242,525

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TY 2007 Other Changes in Net Assets Schedule

Name: SCHOLARSHIP AMERICA INC

Description	Amount
NET CHANGE IN UNREALIZED A PPRECIATION	5,929,889

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TY 2007 Other Expenses Included Schedule

Name: SCHOLARSHIP AMERICA INC

Description	Amount
SPECIAL EVENTS EXPENSES	87,458

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TY 2007 Other Expenses Not Included Schedule

Name: SCHOLARSHIP AMERICA INC

Description	Amount
DESIGNATED SCHOLARSHIPS	65,986,338

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TY 2007 Other Liabilities Schedule

Name: SCHOLARSHIP AMERICA INC

Description	Beginning of Year Amount	End of Year Amount
SCHOLARSHIPS PAYABLE	20,113,674	18,055,340
REFUNDABLE DEPOSITS	17,260,127	19,982,698

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TY 2007 Other Revenues Not Included Schedule

Name: SCHOLARSHIP AMERICA INC

Description	Amount
SPECIAL EVENTS EXPENSES	-87,458
DESIGNATED SCHOLARSHIPS	65,986,338

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TY 2007 Special Events Schedule

Name: SCHOLARSHIP AMERICA INC

E	Event Name	Gross Receipts	Contributions	Gross Revenue	Direct Expense	Net Income (Loss)	l
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TY 2007 Other Income Schedule

Name: SCHOLARSHIP AMERICA INC

Description	2006	2005	2004	2003	Total
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TY 2007 Scholarship Award Statement

Name: SCHOLARSHIP AMERICA INC

EIN: 04-2296967

Statement:

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TY 2007 Self Dealing Statement

Name: SCHOLARSHIP AMERICA INC

Line Number	Explanation				
2d					

DLN: 93490039000000

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TY 2007 Supplemental Support Schedule

Name: SCHOLARSHIP AMERICA INC

Year	Gifts, Grants and Contributions Received	Membership Fees Received	Gross Receipts From Admissions, Etc.	Gross Investment Income And Post 1975UBI	Net UBI Pre 1975	Tax Revenues Levied For Organization's Benefit	Value Of Services, Facilities Furnished By Government	Other Income	Total
2006	94,993,027		8,567,821	5,048,054				0	108,608,902
2005	98,751,180		9,092,435	6,419,954				0	114,263,569
2004	87,850,410		7,527,314	5,086,993				0	100,464,717
2003	83,542,564		7,506,094	4,491,602				0	95,540,260