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·Form 990

Return of Organization Exempt From Income Tax

OMB No 1545-0047

2013

Open to Public Inspection

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

Department of the Treasury

► Do not enter Social Security numbers on this form as it may be made public.

For Paperwork Reduction Act Notice, see the separate instructions.

Inter	nal Reven	ue Service	► Info	rmation about Fo	rm 990 and its ins	tructions is a	t www.irs.g	ov/form99	<u>0.</u>	Inspec	uon
Α	For the	2013 caler	ndar year, or tax	year beginning	January 1	, 2013, a	and ending	Decer	nber 31	, 20 13	
В	Check if	applicable.	C Name of organiza	tion Student Work	Development For	Indation Inc			D Employ	er identification r	umber
$\bar{\Box}$	Address		Doing Business As		Developinoni i	ariodilori, mo:		-	, ,	E4 0100107	
H		· ·		t (or P O box if mail is	not delivered to stre	ot addrace)	Room/suite		E Tolopho	51-0168187 ne number	
님	Name ch	· .		t (OI F O DOX II III ali k	S HOLDENVELED TO SUR	et address)	noonvalle	'	E relephor		
	Initial ret	t	P. O. Box 2100				<u> </u>			<u>(405) 329-2990</u>	
\sqcup	Terminat	ed	City or town, state	or province, country,	and ZIP or foreign p	ostal code					
	Amende	d return	Norman, Oklahoi	ma 73070					G Gross re	eceipts \$	3,467,331
	Applicati	on pending	F Name and address	s of principal officer	Max D. Barnett			H(a) Is this a g	roup return for	subordinates? 🔲 Ye:	s 🗹 No
			1320 W. Lindsev	St., Norman, Okla	homa 73069					s ıncluded? 🔲 Ye:	
	Tax-exe	npt status	✓ 501(c)(3)	501(c) () ◀ (insert no) [4947(a)(1) or	527			list (see instructi	
	Website				/ (+5+/\u/\1/\01		┥	exemption	•	•
K			✓ Corporation T	rust Association	Other ▶	I Va	ar of formatic				
				rust Association	1 ☐ Otner ►	L te	ar of formatic	n 1975	M State	of legal domicile	<u>KS</u>
F	art I	Summa									
	1	-	=	nization's missior	_						.'s
Activities & Governance		primary pu	urpose is to assi	st in providing tra	ining and suppor	for individua	Is and grou	ıps in disci	pleship, e	ducation,	,
па				to help produce n							
ě	2	Check thi	s box ▶ 🗌 if the	organization dis	continued its op	erations or di	isposed of	more than	1 25% of	its net assets.	
Ó	3	Number of	of voting member	ers of the governi	ng body (Part VI	line 1a)			3		5
~	4			oting members			, line 1b)		4		5
es	5			als employed in c					5		<u></u>
Ž	6			rs (estimate if ne	•	-	•		6		
Ćţ				•	• •						7
⋖	7a			revenue from Pa					7a		0
	Ь	Net unrela	ated business ta	axable income fro	om Form 990-1,	ine 34	· +	· · · ·	7b		0
							L	Prior Y	ear	Current Y	ear
<u>o</u>	8		-	(Part VIII, line 1h			· · _		390,360		3,034,809
ē	9	_		(Part VIII, line 2g	•				151,148	· · · · ·	171,594
<u>ഭ</u> ്ത	10	Investme	nt income (Part	VIII, column (A), I	ines 3, 4, and 7c)	<u>L</u>		42,940		258,438
Ö.	11	Other rev	enue (Part VIII, d	column (A), lines	5, 6d, 8c, 9c, 10	c, and 11e) .			1,972		2,490
	12	Total reve	nue-add lines	8 through 11 (mus	st equal Part VIII,	column (A), lı	ne 12)		586,420		3,467,331
Z NNC CANNEDS Expense	13	Grants ar	nd simılar amoui	nts paid (Part IX,	column (A) lines	1–3)			329,305		358,737
氚	14			embers (Part IX, o					0		0
0,	15			ion, employee bei			5-10		61,279		50,917
چ چ	16a			fees (Part IX, colu					01,279		30,317
Œĕ	b	Total fund	draicina expens	es (Part IX, colum	IST MAY) 1 00.	າຜ. ⊢				<u>\</u>
	1	Other	araising expense	os (rait IX, coluii	11 (1), 1110/23)	<u> </u>	∦ Q #				
	17			column (A), lines			[\$2] · ⊢		183,473		133,952
೯೨	18			s 13-17 (must eq		70 (A), line 2:	op · □		574,057		543,606
2	19	Revenue	less expenses.	Subtract line 18 t	rom line 12		<u> </u>		12,363		2,923,725
								eginning of C		End of Y	ear ———
Set	20		ets (Part X, line	•			· · L		3,307,758		5,472,782
Net Asse Fund Rais	21		•	e 26)			· · L		0		0
		Net asset	s or fund balance	ces. Subtract line	21 from line 20		<u> </u>		3,307,758		5,472,782
P	art II	Signat	ure Block								
				ive examined this retu						my knowledge an	d belief, it is
tr.	ie, correc	t, and compli	ete Declaration of p	reparer (other than of	icer) is based on all i	nformation of wh	ich preparer	has any know	ledge		
		/	Marken	W hohm					417	5/14	
Si	gn	Sign	ature of officer	1. 0	1 /			Da	ate /	7	
He	ere		CHARLES	12/ 10	HN			MAY	1 15 2	014	
		Туре	or print name and t	}	_						
۵-	nid	Print/Ty _l	pe preparer's name	Pi	aparer's signature	Λ	Dat	9 ,	Check	PTIN	
		Dale B	Cazes, Esq.	U_	XLL B	مدها	5	15/201			177791
	epare	·'	·····	Cazes, P.C.	, , , , , , , , , , , , , , , , , , ,	77			m's EIN ▶	46-1948	
U	se On	'y		W. 63rd St., Ste. 1	52E, Oklahoma C	ity. OK 73116			one no	(405) 254-5	
Ma	y the If			the preparer sh			· · · ·				es 🗌 No

Form **990** (2013)

Cat. No 11282Y

orm 99	0 (2013)	age 2
Part		
	Check if Schedule O contains a response or note to any line in this Part III	<u> </u>
1	Briefly describe the organization's mission:	
	Student Work Development Foundation, Inc.'s primary purpose is to assist in providing training and support for	
	individuals and groups in discipleship, education, evangelism, and missions to help produce more effective	
	discipleship ministries.	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	No
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	
		No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measur expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to o the total expenses, and revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$ 83,117 including grants of \$) (Revenue \$ 60,875)	
	The Sullivant Retreat Center is a part of Student Work Development Foundation, Inc. and is used for fostering an	
	environment for discipleship, evangelism, and teaching/training for college and university campus organizations	
	and churches to accomplish Student Work Development Foundation, Inc.'s purpose of helping produce more	
	effective discipleship ministries and spreading the Gospel of the Lord Jesus Christ.	
4b	(Code:) (Expenses \$ 385,239 including grants of \$ 307,818) (Revenue \$)	
	Student Work Development Foundation, Inc. provides assistance to IRC Section 501 (c) 3 organizations within the	
	U. S. such as the Baptist Student Union at various colleges and universities. The Navigators, Campus Crusade for Christ,	
	and Churches reach out to college students and international students to help them learn to evangelize young men and women with the Gospel of the Lord Jesus Christ and disciple them in the Word of God.	
	women with the Gospei of the Lord Jesus Christ and disciple them in the word of God.	
	(O-d-)/5	
4c	(Code:) (Expenses \$ 1,580 including grants of \$ 1,580) (Revenue \$)	
	Student Work Development Foundation, Inc. provides assistance to an individual who helps with the chapter of	
	Christian Fellowship of Athletes in Des Moines, IA. This chapter was short on funds. This monetary assistance	
	was to help the chapter.	

519,275

4e Total program service expenses ▶

Part	Checklist of Required Schedules			
_			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	1	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	1	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		1
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			<u> </u>
	assessments, or similar amounts as defined in Revenue Procedure 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		1
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		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a	-		<u> </u>
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		1
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable.	<i>¥</i> ,	s	
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	√	
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		1
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		1
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		1
12 a	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		1
13	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		1
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		1
þ	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	✓	
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	1	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		1
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		√
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.	18		√
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III			
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	19 20a	<u> </u>	✓
_	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a		\ <u> </u>

Part	0 (2013) V Checklist of Required Schedules (continued)			Page 4
- ald	Checklist of Required Schedules (continued)		Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	cs ✓	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		1
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		1
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		1
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	24d 25a		1
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		1
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		1
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		ž	
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		√
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	1	1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
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		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		1
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 35b		1
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		1
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? If "Yes," complete Schedule R,			
38	Part VI	37	_	1

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	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			İ
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c		✓
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			ŀ
h	Statements, filed for the calendar year ending with or within the year covered by this return 2a 7	2b	<u></u>	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? . Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	20	'	-
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 in Schedule O	3b		_
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	"	 -	
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a	}	✓
b	If "Yes," enter the name of the foreign country: ▶			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
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).		135	,
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?	7-		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7a 7b		✓
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	76	 -	-
_	required to file Form 8282?	7c		1
d	If "Yes," indicate the number of Forms 8282 filed during the year	1	<u> </u>	
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	·	1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		1
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8	<u> </u>	
9	Sponsoring organizations maintaining donor advised funds.			ļ
a	Did the organization make any taxable distributions under section 4966?	9a	 	↓
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		├
10 a	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	┨		1
11	Section 501(c)(12) organizations. Enter:	1		
	Gross income from members or shareholders		1	l
b	Gross income from other sources (Do not net amounts due or paid to other sources	1	1	
	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		
þ	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
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	<u> </u>	
	Note. See the instructions for additional information the organization must report on Schedule O.			
þ	Enter the amount of reserves the organization is required to maintain by the states in which			
_	the organization is licensed to issue qualified health plans	-	1	
C 140	Enter the amount of reserves on hand	-	 	
14a b	Did the organization receive any payments for indoor tanning services during the tax year?	14a	-	✓
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	1	L

Part \	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below,	and t	for a	"No"
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S			
	Check if Schedule O contains a response or note to any line in this Part VI		<u> </u>	✓
Section	on A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 5			
	If there are material differences in voting rights among members of the governing body, or			1
	if the governing body delegated broad authority to an executive committee or similar			1
	committee, explain in Schedule O.	-		
b	Enter the number of voting members included in line 1a, above, who are independent . 1b 5			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
_	any other officer, director, trustee, or key employee?	2	✓	
3	Did the organization delegate control over management duties customarily performed by or under the direct	_		,
_	supervision of officers, directors, or trustees, or key employees to a management company or other person? .	3		√
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		√
5	Did the organization become aware during the year of a significant diversion of the organization's assets?.	5		√
6 7a	Did the organization have members or stockholders?	6		✓_
14	one or more members of the governing body?			,
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	7a		✓
D	stockholders, or persons other than the governing body?			✓
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	7b		
U	the year by the following:			Ž.
а	The governing body?	8a		لسنتنا
b	Each committee with authority to act on behalf of the governing body?	8b	∨ ✓	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	00	<u> </u>	
•	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		1
Section	on B. Policies (This Section B requests information about policies not required by the Internal Reven		ode.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		1
b	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		L
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 in 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		✓
þ	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		<u> </u>
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this was done	12c		<u> </u>
13	Did the organization have a written whistleblower policy?	13		✓
14	Did the organization have a written document retention and destruction policy?	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?			
_	·	45-	<u> </u>	/
a	The organization's CEO, Executive Director, or top management official	15a	<u> </u>	1
b	Other officers or key employees of the organization	15b	 	-
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a	 	/
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	· · · ·	 	•
~	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		ļ'
Secti	on C. Disclosure		·	
17	List the states with which a copy of this Form 990 is required to be filed ▶ Kansas			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section	า 501	(c)(3)s	only)
	available for public inspection. Indicate how you made these available. Check all that apply.			
	☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of int	erest	policy	y, and
	financial statements available to the public during the tax year.			
20	State the name, physical address, and telephone number of the person who possesses the books and records	of the	€	
	organization: Charlie Anne Cooksey, 1320 W. Lindsey St., Norman, Oklahoma 73069 (405) 329-2990			

	•		
Form	990	(2013)	

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

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 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 and/or Box 7 of Form 1099-MISC) 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.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees, and former such persons.

Check this box if neither the organization no	r any relate	d org	aniz	atio	n c	ompe	nsa	ted any currer	t officer, director	, or trustee.
				Pos	C)					
(A)	(B)	(do n				than o	one	(D)	(E)	(F)
Name and Title	Average hours per	box, unless person is both an officer and a director/trustee)						Reportable compensation	Reportable compensation from	Estimated amount of
	week (list any hours for related organizations below dotted line)	Individua or direct	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) Bob Anderson										
Board Member	0	1					_	0	0	
(2) John Kelsey							1			
Board Member	0	✓		L_				0	0	
(3) Robert Pruett										
Board Member	0	/					<u> </u>	0	0	
(4) Neil Walker										
Board Member	0	✓						0	0	
(5) Brett Yohn										
Board Member	0	/		_			_	0	0	
(6) Max D. Barnett	ļ									
President	0			1			_	0	0	
(7) Richard Jaques				١.						
Vice President	0	ļ	<u> </u>	✓	L	ļ	<u> </u>	0	0	
(8) Charles Yohn	. 	Į		١.			ĺ		,	
Secretary/Treasurer	0		<u> </u>	✓	<u> </u>		<u> </u>	0	0	
(9) Drew LaMunyon	ļ	Į			١.					
Key Employee	40	ļ	<u> </u>	_	✓		Ļ	29,080	0	
(10)	ļ	1								
(11)					Γ					
(12)	ļ									
(13)	ļ									
(14)			T				-	 		

Part	VII Section A. Officers, Directors, Trust	tees, Key E	mploy	/ees			lighes	st C	ompensated E	mployees (conti	nued)	
	(A) Name and title	(B) Average hours per week (list any	box, i	unies	Pos eck s pe d a d	more rson	than o	an ee)	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimate amount other	
		hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensa from th organizati and relat organizati	e ion ied
(15)												
(16)												
(17)												
(18)												
(19)												
(20)			-					-				
					-							
(22)				-								-
(23)		<u> </u>		-								
(24)												-
(25)												
1b c d	Sub-total	VII, Section	n A				· ·	> > >	29,080 0 29,080	0		0
2	Total number of individuals (including bu reportable compensation from the organ	t not limited						e) w			00 of	
3	Did the organization list any former of employee on line 1a? If "Yes," complete	fficer, direc						emp	oloyee, or high	nest compensat		s No
4	For any individual listed on line 1a, is the organization and related organizations individual	greater th	an \$	150	,000)? /	f "Ye	s, "				
5	Did any person listed on line 1a receive of for services rendered to the organization									zation or individu		1
Section 1	on B. Independent Contractors			4						- d Ab Aa	20.000 - 4	
	Complete this table for your five highest compensation from the organization. Re year.	port compe	ensati	on f	or t	he d	calend	dar	year ending wi	th or within the	organization's	s tax
	(A) Name and business add	dress							(B) Description of s	services	(C) Compensation	n
						-						<u>-</u>
								-				
	Total number of independent contractor	ors finclud	na h	ut s	not	Jim:	ted t		hose listed of	ove) who		
	received more than \$100,000 of compen							J (1	ilose listeu au	OVE) WITO	<u></u>	

Part	: VIII	Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII												
		Check if Schedule C	contains	a res	ponse or note to			<u>.</u>	🗆					
;						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514					
nts	1a	Federated campaigns	·	1a	0									
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues .		1b	0									
S, (С	Fundraising events .		1c	0									
Gift	d	Related organizations		1d	0									
ini	е	Government grants (con		1e	Ō									
tior S T	f	All other contributions, g												
th di		and similar amounts not inc			3,034,809									
d dt	g	Noncash contributions include	ded in lines 1a	-1f. \$	2,726,200									
	h	Total. Add lines 1a-1	<u>f</u>			3,034,809								
Program Service Revenue					Business Code									
eve	2a	Sullivant Retreat Cente			90009	60,875	60,875	0						
ě	b	Life Impact Conference	9		90009	84,821	84,821	0						
Ş.	С	Project Impact	·		90009	19,420	19,420	0						
Se	d	Christian Challenge Co	onference		90009	4,600	4,600	0						
뼕	е	Lead Conference	· 		90009	1,878	1,878	0						
ğ	f	All other program ser				0	0	0						
	g	Total. Add lines 2a-2				171,594		<u> </u>	т					
	3	Investment income and other similar amo												
					1	150,603	0	0						
	4	Income from investmen		•	·	0	0	0						
	5	Royalties	(ı) Real		(ii) Personal		0	0						
		O	(i) Near			•	\$	·	ŗ					
	6a	Gross rents		0	0		教 学	* . * .	*."} '\$' '					
	b	Less: rental expenses		0	0	« *	`-`	,	*					
	C	Rental income or (loss) Net rental income or		0	0									
	d 7a	Gross amount from sales of	(i) Securit		(ii) Other	0	0	0						
	' "	assets other than inventory	· · · · · · · · · · · · · · · · · · ·		.,									
	ь	Less, cost or other basis	10	8,464	0	- 4	**	Ţ	<i>,</i> ,					
		and sales expenses .		629				•	'`					
	c	Gain or (loss)	10	7,835										
	ď	Net gain or (loss) .	10	1,033	· · · · · · · · · · · · · · · · · · ·	107,835	0	0	407.031					
	"	rect gain or (1033) .		• •		107,835			107,83					
une	8a	Gross income from fu	undraising						1					
, ve		events (not including \$		0										
æ		of contributions reporte												
Other Reve		See Part IV, line 18 .		· a	0									
ŧ	b	Less: direct expenses												
	С	Net income or (loss) f		_	events . >	0		0						
	9a	Gross income from ga												
		See Part IV, line 19 .		· a	0				İ					
	b	Less: direct expenses												
		Net income or (loss) f			vities	0	0	0						
	10a	Gross sales of ir	•											
		returns and allowance		_	2,100									
	þ	Less: cost of goods s				·								
	c	Net income or (loss) f		of inv		2,490	2,490	0	(
	<u> </u>	Miscellaneous F	Revenue		Business Code									
	11a					0	0	0						
	b					0	0							
	C	All				0	0	0						
	d	All other revenue .		•	L	0		0						
	12	Total. Add lines 11a- Total revenue. See in	–		🟲	0			ļ <u> </u>					
	112	rotarrevenue. See I	ISTUCTIONS	· ·		3,467,331	174,084	0						
									Form 990 (2013					

Part IX Statement of Functional Expenses

Section	n 501(c)(3) and 50)1(c)(4) organizations must o	complete all columns.	All other org	ganizations must co	mplete column (A).

	Check if Schedule O contains a respon	se or note to any lin	ne in this Part IX .		
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	307,818	307,818		
2	Grants and other assistance to individuals in the United States. See Part IV, line 22	1,580	1,580		
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16	49,339	49,339		
4 5	Benefits paid to or for members	29,080	29,080	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)	0	0	0	0
7 8	Other salaries and wages	18,219	18,219	0	0
9	Other employee benefits	0	0	0	
10 11 a	Payroll taxes	3,618	3,618	0	0
b	Legal	2,590	0	2,590	
c	Accounting	370	0	370	
d	Lobbying	370	0	0	
e	Professional fundraising services. See Part IV, line 17	0			
f	Investment management fees		0		
	Other. (If line 11g amount exceeds 10% of line 25, column	629	- 0	629	
g	(A) amount, list line 11g expenses on Schedule O.)				
40		0	0	0	
12	Advertising and promotion	0	0	0	
13	Office expenses	17,950	15,321	0	2,629
14	Information technology	0	0	0	
15	Royalties	0	0	0	(
16	Occupancy	0	0	0	(
17	Travel	730	730	0	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	0	0	(
19	Conferences, conventions, and meetings .	77,421	77,421	0	
20	Interest	0	0	0	
21	Payments to affiliates	0	0	0	
22	Depreciation, depletion, and amortization .	0	0	0	
23	Insurance	17,383	0	17,383	
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
а	Grounds	892	892	0	
b	Utilities	15,987	15,987	0	
c	<u> </u>	15,587	15,367	0	
d		0	0	0	
e	All other expenses	0	0	0	
25	Total functional expenses. Add lines 1 through 24e	543,606			2,629
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here lift following SOP 98-2 (ASC 958-720)	343,000	320,003	20,372	2,02
		1 0	. 0	· OI	

33

34

Page 11 Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year Cash-non-interest-bearing 190,633 1 244,228 2 Savings and temporary cash investments 2 14,750 246.427 3 Pledges and grants receivable, net 3 ol 0 4 4 ol Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. 5 0 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and . ~<u>}</u> sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L. 6 0 0 1,074,529 7 274,529 Inventories for sale or use 8 ol 0 Prepaid expenses and deferred charges 0 9 n Land, buildings, and equipment; cost or other basis. Complete Part VI of Schedule D 10a Less: accumulated depreciation 10b 1,948,198 10c 1,948,198 11 Investments – publicly traded securities 79,648 11 12 Investments—other securities. See Part IV, line 11 . 12 0 2.759.400 13 Investments - program-related. See Part IV, line 11 . . . 13 ol 0 14 14 ol 0 Other assets. See Part IV, line 11 15 0 15 0 Total assets. Add lines 1 through 15 (must equal line 34) . . 16 3,307,758 16 5,472,782 17 Accounts payable and accrued expenses 0 17 0 18 18 0 0 Deferred revenue . . . 19 ol 19 0 20 ol 20 0 Escrow or custodial account liability. Complete Part IV of Schedule D . 21 21 0 0 Loans and other payables to current and former officers, directors, iabilities trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 0 0 23 Secured mortgages and notes payable to unrelated third parties . . . 23 0 0 24 Unsecured notes and loans payable to unrelated third parties . . . ol 24 0 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 25 n۱ 0 26 Total liabilities. Add lines 17 through 25 26 0 0 Organizations that follow SFAS 117 (ASC 958), check here ▶ Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 27 1,359,560 27 3,524,584 28 0 28 1,948,198 29 1,948,198 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 0 30 0 Paid-in or capital surplus, or land, building, or equipment fund . . . 31 31 0 0 32 Retained earnings, endowment, accumulated income, or other funds. 0 32

Total liabilities and net assets/fund balances

5,472,782

5,472,782

3,307,758

3,307,758

33

34

0

Form 9	90 (2013)				Pa	ge 12
Par	XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					✓
1	Total revenue (must equal Part VIII, column (A), line 12)	1				7,331
2	Total expenses (must equal Part IX, column (A), line 25)	2			54	3,606
3	Revenue less expenses. Subtract line 2 from line 1	3			2,92	3,725
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			3,30	7,758
5	Net unrealized gains (losses) on investments	5			(758	3,701)
6	Donated services and use of facilities	6				0
7	Investment expenses	7				0
8	Prior period adjustments	8	•			0
9	Other changes in net assets or fund balances (explain in Schedule O)	9				0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				_	
	33, column (B))	10			5,47	2,782
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		7.		· 5½	
	If the organization changed its method of accounting from a prior year or checked "Other," ex	plain	in i		"	1
	Schedule O.		<u>.</u>			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. 2	2a		✓
	If "Yes," check a box below to indicate whether the financial statements for the year were com	piled o	or 🗍			
	reviewed on a separate basis, consolidated basis, or both:		i.	.		
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		3	·\$		
b	Were the organization's financial statements audited by an independent accountant?		. [2	2b		√
	If "Yes," check a box below to indicate whether the financial statements for the year were audite	ed on	а 📑		y (1	Ę
	separate basis, consolidated basis, or both:			5		35- 0
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		_		3	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or					
	of the audit, review, or compilation of its financial statements and selection of an independent accou	intant'	? <u>[</u> :	2c		
	If the organization changed either its oversight process or selection process during the tax year, ex	(plain	1.4		, 4, %	
	Schedule O.			fn. (× .
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth	in			
	the Single Audit Act and OMB Circular A-133?		· [:	3a		✓

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

3b

Form **990** (2013)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

20**13**

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ.
► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name	of the organization				-		E	mployer ic	ientificatio	n number
	Student Work Development Foundation, Inc.						51-0168187			
Par			rity Status (All orga						<u>nstructio</u>	ons.
The c 1 2 3 4	A church, condition A school descord A hospital or a A medical rese	vention of churcl ribed in section i cooperative hos	tion because it is: (Fo nes, or association of 170(b)(1)(A)(ii). (Attac spital service organiza on operated in conjunc	churches th Schede ation desc	s describe ule E.) cribed in s	ed in sec section	tion 170(170(b)(1)(b)(1)(A)(i A)(iii).		(iii). Enter the
5	☐ An organization	•	the benefit of a colleg	ge or uni	versity ov	wned or	operated	by a go	vernmen	tal unit described in
6 7	An organization described in s	on that normally ection 170(b)(1)	nment or governmenta receives a substantia (A)(vi). (Complete Par	I part of t II.)	its suppo	ort from a	170(b)(1 a governr)(A)(v). nental ur	nit or fror	n the general public
8 9	An organization receipts from support from	on that normally activities related gross investme	n section 170(b)(1)(A) receives: (1) more that it to its exempt functi nt income and unrel fter June 30, 1975. Se	an 331/3% ions—sul lated bus	of its subject to disiness tax	upport fro certain ex xable inc	ceptions	s, and (2) ss sectio	no more	e than 331/3% of its
10 11	An organization	on organized an one or more pub	operated exclusively of operated exclusive flicly supported organ describes the type of s	ely for th	e benefit described	t of, to p	perform to 100 t	the funct ()(1) or se	ions of, ection 50	9(a)(2). See section
е		indation manage	II c Type III that the organization irs and other than one	is not co	ntrolled d	- lirectly or	indirectly	y by one	or more	
f			written determination				a Type	I, Type	ll, or Typ	pe III supporting
g	_	17, 2006, has tl	ne organization accep				n from a	ny of the	•	
			ndirectly controls, eithody of the supported o							nd Yes No
			on described in (i) abo	-						11g(ii)
			a person described in							11g(in)
h	Provide the fo	llowing informati	on about the supporte	ed organi	ization(s).					
(1)	Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	in col (i) lis	organization sted in your document?	the organ	ou notify nization in of your port?	organizat (i) organi	ls the tion in col zed in the S ?	(vii) Amount of monetary support
				Yes	No	Yes	No	Yes	No	
(A)										
(B)										
(C)										
(D)										
(E)										

Schedule A (Form 990 or 990-EZ) 2013 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 gualify 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) 2009 (b) 2010 (c) 2011 (d) 2012 (e) 2013 (f) Total grants, contributions, and membership fees received. (Do not include any "unusual grants.") . 395.265 425,762 306,081 390,360 3,034,809 4,552,277 revenues levied for organization's benefit and either paid to or expended on its behalf . . . 0 Λ The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3. . . . 395,265 425,762 306,081 390,360 3.034.809 4.552.277 The portion of total contributions by each person (other than а governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 2,688,736 Public support. Subtract line 5 from line 4. 1,863,541 Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2009 (b) 2010 (c) 2011 (d) 2012 (e) 2013 (f) Total Amounts from line 4 395,265 425,762 306,081 390,360 3,034,809 4,552,277 8 Gross income from interest, dividends, payments received on securities loans. rents, royalties and income from similar sources 18,025 17,107 16,370 42,940 150,603 245,045 Net income from unrelated business activities, whether or not the business is regularly carried on 0 0 Other income. Do not include gain or 10 loss from the sale of capital assets (Explain in Part IV.) 1,580 617 4,541 1,972 2,490 11,200 11 Total support. Add lines 7 through 10 4,808,522 Gross receipts from related activities, etc. (see instructions) 12 60.875 First five 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 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f)) 14 39 % Public support percentage from 2012 Schedule A, Part II, line 14 15 84 % 331/3% support test-2013. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this \checkmark 331/3% support test-2012. 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 10%-facts-and-circumstances test-2013. 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 IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported

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

(Complete only if you checked the box on line 9 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.)

Section	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(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						
Ū	unrelated trade or business under section 513		j i				
4	Tax revenues levied for the						
4	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 .						
	·			<u>.</u>			
b	Amounts included on lines 2 and 3						
	received from other than disqualified	ļ					
	persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
_	•						
	Add lines 7a and 7b	.,	a Characteristati	anderay w	×	\	
8	Public support (Subtract line 7c from line 6.)						
Casti	<u> </u>	x^\ _*,	, ,, strate 1 like	were the second			
	on B. Total Support	(-) 0000	(1.) 0040	(-) 0044	(1) 0040	4.) 0040	10 T L L
	dar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	Amounts from line 6		 				
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties and income from similar sources .					-	
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses	1					
	acquired after June 30, 1975						
С	Add lines 10a and 10b		ļ				
11	Net income from unrelated business						
	activities not included in line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part IV)		<u> </u>		ļ		
13	Total support. (Add lines 9, 10c, 11,						
4.4	and 12.)	<u></u>	1	1		L	
14	First five years. If the Form 990 is for the						
Cooki	organization, check this box and stop he			: 		 	
15	on C. Computation of Public Support Public Support percentage for 2013 (line			(0)		146	
16	Public support percentage for 2013 (line Public support percentage from 2012 Sc						<u>%</u>
	on D. Computation of Investment In			• • • • •		10	<u>%</u>
17	Investment income percentage for 2013			v line 13 colu	mp (f)\	17	
18	Investment income percentage for 2013						<u>%</u> %
19a	331/3% support tests—2013. If the organ						
170	17 is not more than 331/3%, check this box						
ь	331/3% support tests—2012. If the organi						
	line 18 is not more than 33½%, check this						
20	Private foundation. If the organization d						
				, ,	**	hadule A (Form 99	

chedule A (Form 990 or 990-EZ) 2013 Page 4						
Part IV	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).					
Part II Line	10					
These amo	ounts are attributable to the revenue generated from the sale of Real Purpose of Life Publications which is a part of					
Student W	ork Development Foundation, Inc. The revenue generated from the sale of Real Purpose of Life Publications is used					
n college	and university dorms and churches across the country to spread the Word of Christ.					
	······································					

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

OMB No 1545-0047 20**13**

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Student Work Development Foundation, Inc. 51-0168187 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds 1 Total number at end of year 2 Aggregate contributions to (during year) . 3 Aggregate grants from (during year) 4 Aggregate value at end of year . . . 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year 2a Total acreage restricted by conservation easements b 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ 4 Number of states where property subject to conservation easement is located ▶ 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶\$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) ☐ Yes ☐ No In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 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 SFAS 116 (ASC 958) relating to these items: Assets included in Form 990, Part X

Schedi	le D (Form 990) 2013						Page 2
	Organizations Maintaining	Collections of	Art. Histo	rical T	reasures, or (Other Similar As	
3	Using the organization's acquisition, collection items (check all that apply):	accession, and of					
а	☐ Public exhibition		d□	Loan	or exchange pro	grams	
b	☐ Scholarly research						
c	☐ Preservation for future generations	3				· · · · · · · · · · · · · · · · · · ·	
4	Provide a description of the organization.	tion's collections	and explair	how t	hey further the c	rganization's exem	pt purpose in Part
5	During the year, did the organization assets to be sold to raise funds rather						
Part	Complete if the organization 990, Part X, line 21.		" to Form	990, P	art IV, line 9, o	r reported an amo	ount on Form
1a							
							☐ Yes ☐ No
р	If "Yes," explain the arrangement in P	art XIII and compl	ete the folio	owing ta	able:	Δr	nount
С	Beginning balance				<u>-</u>		
d	Additions during the year				<u> </u>	1c 1d	
e	Distributions during the year					1e	···
f	Ending balance				⊢	1f	
2a	Did the organization include an amount						□ Vac □ Na
	If "Yes," explain the arrangement in P						
	Endowment Funds. Complete if the organization					dod iii i dit Xiii .	· · · <u> </u>
		(a) Current year	(b) Prior		(c) Two years back	(d) Three years back	(e) Four years back
1a	Beginning of year balance		, , ,			1	(-, ,
b	Contributions						
С	Net investment earnings, gains, and						
	losses		1				
d	Grants or scholarships						
е	Other expenditures for facilities and						
	programs						
f	Administrative expenses						
g	End of year balance					<u> </u>	
2	Provide the estimated percentage of t	the current year er	nd balance	(line 1g	, column (a)) hel	d as:	
а	Board designated or quasi-endowme	nt ▶	%				
ь	Permanent endowment ▶	%					
C	Temporarily restricted endowment ▶	%					
	The percentages in lines 2a, 2b, and 2						
3a	Are there endowment funds not in the	e possession of t	ne organiza	ation tha	at are held and	administered for the	e
	organization by:						Yes No
	••						3a(i)
							3a(ii)
	If "Yes" to 3a(ii), are the related organ						3b
4	Describe in Part XIII the intended uses	s of the organization	on's endov	vment fi	unds.		

Land, Buildings, and Equipment.

Complete if the organization answer Part VI

Complete if the organization ans	wered tes to For	m 990, Part IV, line	e i ia. See Form 99	υ, Part X, line 10
Description of property	(a) Cost or other basis	(h) Cost or other basis	(c) Accumulated	(d) Pook value

	Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a	Land		1,948,198		1,948,198
b	Buildings				
С	Leasehold improvements				
d	Equipment				
е	Other				
otal	. Add lines 1a through 1e. (Column (d) must o	egual Form 990. Part	X. column (B), line 10((c).)	1 0/9 100

Part VII	Investments—Other Securi Complete if the organization		n 990. Part IV. line	e 11b. See Form 990, Part X, line 12.
	(a) Description of security or cat (including name of security	egory	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial	derivatives			
	neld equity interests		2,726,200	Cost
(3) Other				
(A)				
(B)				
(C)				
(D) (E)		•••••		
(F)	••••••			
(G)				
(H)				
	b) must equal Form 990, Part X, col. (B) line 12	1 ▶	2,726,200	A,
Part VIII	Investments-Program Rel		2,720,200	<u> </u>
			m 990, Part IV, line	e 11c. See Form 990, Part X, line 13.
	(a) Description of investme		(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)				
(2)				
(3)				
(4)		· · · · · · · · · · · · · · · · · · ·		
(5)				
(6)				
<u>(7)</u> <u>(8)</u>				
(9)				
	b) must equal Form 990, Part X, col. (B) line 13) >		- May 2 - 2
Part IX	Other Assets.	•		
	Complete if the organization	answered "Yes" to For	m 990, Part IV, line	e 11d. See Form 990, Part X, line 15.
		(a) Description		(b) Book value
(1)				
(2)				
(3)				
_(4)			··-	
(5)				
<u>(6)</u> <u>(7)</u>			 -	
(8)				
(9)		 ·		
Total. (Colu	mn (b) must equal Form 990, Part	X, col (B) line 15.)		
Part X	Other Liabilities.			
	Complete if the organization	answered "Yes" to For	m 990, Part IV, line	e 11e or 11f. See Form 990, Part X,
	line 25.			
1.	(a) Description of liability	(b) Book value		
	ncome taxes			
(2)	· · · · · · · · · · · · · · · · · · ·		···	
(4)	· · · · · · · · · · · · · · · · · · ·			
(5)			—	
(6)				
(7)	· · · · · · · · · · · · · · · · · · ·			
(8)				
(9)				
	(b) must equal Form 990, Part X, col. (B) line 2	5.) ▶		
2. Liability fo	r uncertain tax positions. In Part XIII,	provide the text of the footr	ote to the organizatio	n's financial statements that reports the

organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Part			Return.
	Complete if the organization answered "Yes" to Form 990, P		
1	Total revenue, gains, and other support per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	
С	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
е	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:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
C	Add lines 4a and 4b		4c
_5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line		5
Part			er Return.
	Complete if the organization answered "Yes" to Form 990, P	art IV, line 12a.	
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:		772
а	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
С	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
е	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.)	4b	[7] -M.
_	Cities (Describe in Fair Amily	40	
c	Add lines 4a and 4b		4c
с 5	Add lines 4a and 4b		
c 5 Part	Add lines 4a and 4b		5
5 Part Provid	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18)	5; Part V, line 4; Part X, line
5 Part Provid 2; Par	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	d 4, Part IV, lines 1b and 2t to provide any additional ir	5; Part V, line 4; Part X, line aformation.
5 Part Provid 2; Par	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4, Part IV, lines 1b and 2t to provide any additional ir	5; Part V, line 4; Part X, line aformation.
5 Part Provid 2; Par	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	d 4, Part IV, lines 1b and 2t to provide any additional ir	5; Part V, line 4; Part X, line aformation.
5 Part Provid 2; Par	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	d 4, Part IV, lines 1b and 2t to provide any additional ir	5; Part V, line 4; Part X, line aformation.
5 Part Provid 2; Par	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	d 4, Part IV, lines 1b and 2t to provide any additional ir	5; Part V, line 4; Part X, line aformation.
5 Part Provid 2; Par	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	d 4, Part IV, lines 1b and 2t to provide any additional ir	5; Part V, line 4; Part X, line aformation.
5 Part Provid 2; Par	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	d 4, Part IV, lines 1b and 2t to provide any additional ir	5; Part V, line 4; Part X, line aformation.
5 Part Provid 2; Par	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	d 4, Part IV, lines 1b and 2t to provide any additional ir	5; Part V, line 4; Part X, line aformation.
5 Part Provid 2; Par	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	d 4, Part IV, lines 1b and 2t to provide any additional ir	5; Part V, line 4; Part X, line aformation.
5 Part Provid 2; Par	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	d 4, Part IV, lines 1b and 2t to provide any additional ir	5; Part V, line 4; Part X, line aformation.
5 Part Provid 2; Par	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	d 4, Part IV, lines 1b and 2t to provide any additional ir	5; Part V, line 4; Part X, line aformation.
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5 Part Provid 2; Par	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	d 4, Part IV, lines 1b and 2t to provide any additional ir	5; Part V, line 4; Part X, line aformation.
5 Part Provid 2; Par	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	d 4, Part IV, lines 1b and 2t to provide any additional ir	5; Part V, line 4; Part X, line aformation.
5 Part Provid 2; Par	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	d 4, Part IV, lines 1b and 2t to provide any additional ir	5; Part V, line 4; Part X, line aformation.
5 Part Provid 2; Par	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	d 4, Part IV, lines 1b and 2t to provide any additional ir	5; Part V, line 4; Part X, line aformation.
5 Part Provid 2; Par	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	d 4, Part IV, lines 1b and 2t to provide any additional ir	5; Part V, line 4; Part X, line aformation.
5 Part Provid 2; Par	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	d 4, Part IV, lines 1b and 2t to provide any additional ir	5; Part V, line 4; Part X, line aformation.
5 Part Provid 2; Par	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	d 4, Part IV, lines 1b and 2t to provide any additional ir	5; Part V, line 4; Part X, line aformation.
5 Part Provid 2; Par	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	d 4, Part IV, lines 1b and 2t to provide any additional ir	5; Part V, line 4; Part X, line aformation.
5 Part Provid 2; Par	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	d 4, Part IV, lines 1b and 2t to provide any additional ir	5; Part V, line 4; Part X, line aformation.
5 Part Provid 2; Par	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	d 4, Part IV, lines 1b and 2t to provide any additional ir	5; Part V, line 4; Part X, line aformation.
5 Part Provid 2; Par	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	d 4, Part IV, lines 1b and 2t to provide any additional ir	5; Part V, line 4; Part X, line aformation.
5 Part Provid 2; Par	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	d 4, Part IV, lines 1b and 2t to provide any additional ir	5; Part V, line 4; Part X, line aformation.

chedule D (Form 990) 2013 Page 5						
Part XIII	Supplemental Information (continued)					
		•••••				

	•••••••••••••••••••••••••••••••••••••••	***************************************				
		•••••••••••				

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SCHEDULE F · (Form 990)

Statement of Activities Outside the United States

OMB No 1545-0047

2013

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

► Attach to Form 990. ► See separate instructions. ▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization Employer Identification number Student Work Development Foundation, Inc. 51-0168187 General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Part I Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the √Yes No For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (a) Region (b) Number of offices in the (c) Number of (d) Activities conducted in (e) If activity listed in (d) is (f) Total a program service, describe specific type of service(s) in region employees, agents, and region (by type) (e.g., fundraising, program services, expenditures for and investments region independent contractors investments, grants to recipients in region in region located in the region) (1) Europe 0 0 Grant Making 49,339 (2)(3) (4)(5) (6) (7) (8) (9) (10)(11)(12)(13) (14)(15) (16)

0

0

0

0

0

0

Sub-total

Total from continuation sheets to Part I

c Totals (add lines 3a and 3b)

(17)

49,339

49,339

0

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

	, אמת ו	IINe 13, 10r a	iny recipient who r	Par IV, line 15, for any recipient who received more than 35,000. Part in carl be duplicated if additional space is needed.	Syour rail il cal	I De auplicateu II a	dullioniai space is	needed.	
-	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
Ξ			Europe	General/Support	49,339 Check	Check			
ন									
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₹									
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(13)									
(14)									
(15)									
(16)									
(-	:	-	4 to 1 to 1 to 1 to 1 to 1 to 1 to 1 to		4	

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

Schedule F (Form 990) 2013

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed. Schedule F (Form 990) 2013

Part III Grants an

(1) (2) (4) (6) (6) (7) (10) (11) (12) (13) (14) (15) (16) (16) (17) (18) (19) (19) (19) (10) (11) (11) (12) (13) (14) (15) (16) (17) (18) (18) (19) (19) (10) (11) (12) (13) (14) (15) (16) (17) (18) (18) (18) (18) (18) (18) (18) (18	(a) Type of grant or assistance (b) Region (c) Number of recipients	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
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1077	(11)							:
	(18)							

Schedule	С	/Earn	000	2012

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Part	V Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)		☑ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S Owner (see Instructions for Forms 3520 and 3520-A)	•	☑ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations. (see Instructions for Form 5471)		✓ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)		✓ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships (see Instructions for Form 8865)		☑ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)		☑ No

Schedule F (I	Form 990) 2013 Page 5
Part V	Supplemental Information
	Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).
Part 1 Line	2
Student W	ork Development Foundation, Inc. grants funds only to foreign organizations similar in purpose to Student Work Development
Foundation	n, Inc., which are recognized as being charities by the foreign country and/or tax exempt by IRS. Student Work Development
Foundation	n, Inc. does not monitor the use of the funds by each foreign charitable organization but it does request that any foreign
charitable	organization that Student Work Development Foundation, Inc. makes grants to provide it with periodic reports as to how the
grant is be	ing used in order to insure that such funds are being used for purposes similar to that of Student Work Development
Foundation	n, Inc. Student Work Development Foundation, Inc. also makes reasonable efforts to monitor the charitable or tax exempt
status of the	ne foreign organization it grants funds to.

SCHEDULE 1 (Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

OMB No 1545-0047

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Department of the Treasury	34	Cato a chouse Coho	Attach to Form 990.	rorm 99U. d its instructions i	manuficon ori manus to o	9	Inspection
Name of the organization		rmation about sche	dule i (roim 330) an	d its instructions	Illiotination about schedule I (Form 330) and its instructions is at www.its.gov/formsax.		Employer Identification number
Wor	Foundation, Inc.			į			51-0168187
Part I General Info	General Information on Grants and Assistance	d Assistance					
1 Does the organization the selection criteria	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?	ostantiate the amou	int of the grants or	assistance, the g	rantees' eligibility for	the grants or assista	ince, and
2 Describe in Part IV t	Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	ires for monitoring	the use of grant fur	nds in the United			3
E	Other Assistance to G	overnments and	Organizations i	n the United S	tates. Complete if t	the organization an	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990,
Part IV, line 2	Part IV, line 21, for any recipient that received	received more the	ıan \$5,000. Part	II can be duplic	more than \$5,000. Part II can be duplicated if additional space is needed.	sace is needed.	
1 (a) Name and address of organization or government	anization (b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) OK Baptist Student Union	uo						
1320 W. Lindsey St. Norman, OK	OK 73-062188	501 (c) (3)					General Support
(2) SWDF-Seminary							
P. O. Box 2100, Norman, OK	51-0168187	501 (c) (3)					General Support
(3) Chinese Trinity Baptist Church	:						
801 N. Peters, Norman, OK	73-0658201	501 (c) (3)					General Support
(4) SWDF-CO Christian Challenge	llenge						
P. O. Box 2100, Norman, OK	51-0168187	501 (c) (3)					General Support
(5) SWDF-Campus Discipleship	-		-				
P. O. Box 2100, Norman, OK	51-0168187	501 (c) (3)					General Support
(9)							
ω							
(8)							
(6)							
(10)							
(11)							
(12)							
	Enter total number of section 501(c)(3) and government	vernment organiza	organizations listed in the line 1 table	ne 1 table			\$
3 Enter total number o	Enter total number of other organizations listed in the line 1 table	d in the line 1 table					0
For Paperwork Reduction Act Notice, see the Instructions for Form 990.	t Notice, see the Instruction	ns for Form 990.		Ö	Cat. No 50055P		Schedule I (Form 990) (2013)

Schedule I (Fo	Schedule I (Form 990) (2013)	Pag
Part III	Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.	
	Part III can be duplicated if additional space is needed.	

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
-						
8						
က						
4						
5						
9						
7						
Part IV	Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.	the information r	equired in Part I, lin	e 2, Part III, column	(b), and any other additi	onal information.

Part 1 Line 2 Student Work Development Foundation, Inc. grants funds only to organizations similar in purpose to Student Work Development Foundations, Inc., which are recognized as organization that Student Work Development Foundation, Inc. makes grants to provide it with periodic reports as to how the grant is being used in order to insure that such funds are being used for purposes similar to that of Student Work Development Foundation, Inc. Student Work Development Foundation, Inc. also makes reasonable efforts to monitor the being tax-exempt by the IRS. Student Work Development Foundation, Inc. does not monitor the use of the funds by each charitable organization, but it does request that any charitable tax-exempt status of the organizations it grants funds to. Schedule I (Form 990) (2013)

SCHEDULE M (Form 990)

Noncash Contributions

OMB No 1545-0047

2013

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Department of the Treasury Internal Revenue Service ► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

▶ Attach to Form 990.

▶ Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization Employer identification number Student Work Development Foundation, Inc. 51-0168187 Types of Property (c) (a) (b) (d) Noncash contribution Check if Number of contributions or Method of determining amounts reported on applicable items contributed noncash contribution amounts Form 990, Part VIII, line 1g Art-Works of art 2 Art - Historical treasures . . 3 Art - Fractional interests . . 4 Books and publications . 5 Clothing and household 1,72 goods 6 Cars and other vehicles . 7 Boats and planes 8 Intellectual property . . . 9 Securities-Publicly traded . . 10 Securities - Closely held stock . 11 Securities—Partnership, LLC, or trust interests . . . 21,270 LLC units 2,726,200 Book value 12 Securities - Miscellaneous . . 13 Qualified conservation contribution - Historic structures . . . 14 Qualified conservation contribution - Other 15 Real estate - Residential . 16 Real estate - Commercial . Real estate - Other. 17 18 Collectibles . . Food inventory . 19 20 Drugs and medical supplies . 21 Taxidermy Historical artifacts 22 23 Scientific specimens . . 24 Archeological artifacts . . 25 Other ► (_____) 26 Other ► (_____) 27 Other ► (_____) 28 29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement 29 O Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 - 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? 30a **b** If "Yes," describe the arrangement in Part II. Does the organization have a gift acceptance policy that requires the review of any non-standard 31 31 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a b If "Yes," describe in Part II. 33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,

describe in Part II.

Schedule M (Form 990) (2013) Page 2
Part II	Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received,
	or a combination of both. Also complete this part for any additional information.
These are I	LLC units given to Student Work Development Foundation, Inc. by a charitable remainder annuity trust.

SCHEDULE O (Form 990 or 990-EZ)

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.

OMB No 1545-0047 20**13**

Employer identification number

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or 990-EZ. ▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization Student Work Development Foundation, Inc. 51-0168187 Part III, Line 4d Other Program Services Student Work Development Foundation, Inc. provides assistance to IRC Section 501 (c) (3) organizations outside the U. S. such as Connexxion Campus Ministries located in Europe, to evangelize young men and women with the Gospel of the Lord Jesus Christ and disciple them in the Word of God. Part VI, Governance, Management and Disclosure, Section A, Line 2 Charles Yohn is Secretary/Treasurer of Student Work Development Foundation, Inc. Brett Yohn is a Board Member of Student Work Development Foundation, Inc. Charles and Brett have a "family" relationship. Part VI, Governance, Management and Disclosure, Section B, Line 11a and Line 11b Student Work Development Foundation, Inc. provides the return preparer with a draft version for the Form 990 with all supporting documentation for review. The return preparer: (1) reviews the Form 990 with all supporting documentation; (2) makes any changes thereto; and (3) provides Student Work Development Foundation, Inc. with the revised version of the Form 990 for its review. Student Work Development Foundation, Inc. distributes the revised version of the Form 990 to the President and Vice-President and Board Members for review. If there are no changes to the Form 990, then Student Work Development Foundation, Inc. delivers a final version of the Form 990 to an officer of Student Work Development Foundation, Inc. with signature authority for his or her signature. If there are changes to the Form 990 then the return preparer makes such changes, and provides Student Work Development Foundation, Inc. with a revised version of the Form 990 for review, approval and signature. Part VI, Governance, Management and Disclosure, Section C, Line 19 Student Work Development Foundation, Inc. makes its governing documents and financial statements available to the public by providing members of the public with copies of any of these documents upon request.

Name of the organization	Employer identification number
	
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