CHANGE OF ACCOUNTING PERIOD

Form **990**

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service

SCANNED MAY 0 6 2019

Do not enter social security numbers on this form as it may be made public₁∠

► Go to www.irs.gov/Form990 for instructions and the latest information. A For the 2018 calendar year, or tax year beginning JAN 1, 2018 and ending JUN 30, Check if C Name of organization D Employer identification number В Address change MARINE CORPS SCHOLARSHIP FOUNDATION, Name change 22-1905062 Doing business as Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final 400 703-549-0060 909 N WASHINGTON STREET 19,197,508. City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ Amende ALEXANDRIA, VA 22314 H(a) Is this a group return Applica-F Name and address of principal officer ROBERT R. RUARK for subordinates? pendina SAME AS C ABOVE H(b) Are all subordinates included? Tax-exempt status X 501(c)(3) 」501(c) () ◀ (insert no.) 4947(a)(1) or If "No," attach a list (see instructions) J Website: WWW.MCSF.ORG H(c) Group exemption number ▶ Year of formation. 1962 M State of legal domicile: NJ K Form of organization: X Corporation Trust Association Part I Summary Briefly describe the organization's mission or most significant activities TO PROVIDE POST-SECONDARY Activities & Governance EDUCATIONAL SCHOLARSHIPS TO CHILDREN OF MARINES & NAVY CORPSMEN. 2 Check this box I if the organization discontinued its operations or disposed of more than 25% of its net assets 30 Number of voting members of the governing body (Part VI, line 1a) 29 Number of independent voting members of the governing body (Part VI, line 1b) 4 0 Total number of individuals employed in calendar year 2018 (Part V, line 2a) 5 225 6 Total number of volunteers (estimate if necessary) 0. 7 a Total unrelated business revenue from Part VIII, 7a 6,580. b Net unrelated business taxable income from 7b **Prior Year Current Year** 28,786,241 7,109,573. Contributions and grants (Part VIII, I) Ō. Program service revenue (Part VIII, line 29) 0. 9 Investment income (Part VIII, column A), lines 3.4, and 76 3,805,613. 2,074,999. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 96 -1,925,582. -1,291,473. 30,666,272. 7,893,099. Total revenue - add lines 8 through (14 must equal val) VIII, column (A), line 12) 7,138,857. 6,957,375. Grants and similar amounts paid (Part 1X) column (A), lines 1-3) 0. 14 Benefits paid to or for members (Part IX, column (A), line 4) 2,948,078. 1,650,521. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 482,795 313,475. 16a Professional fundraising fees (Part IX, column (A), line 11e) 2,043,018. b Total fundraising expenses (Part IX, column (D), line 25) 3,291,347 1,773,088. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 10,694,459. 13,861,077. 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) -2,801,360. 16,805,195. Revenue less expenses Subtract line 18 from line 12 Beginning of Current Year End of Year 111,455,358. 113,298,458. 20 Total assets (Part X, line 16) 9,148,553. 2,000,605 21 Total liabilities (Part X, line 26) 109,454,753. 104,149,905. Net assets or fund balances Subtract line 21 from line 20 | Part II | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sign PRESIDENT & CHIEF EXECUTIVE OFFICER ROBERT R. RUARK, Here Type or print name and title Date Check Print/Type preparer's name Preparer's signature Beckhan 03/18/2019 ₽01316131 Paid IVY BECKHAM Firm's name CLIFTONLARSONALLEN LLP 41-0746749 Preparer Firm's EIN Firm's address 901 N. GLEBE ROAD, SUITE 200 Use Only Phone no. 571-227-9500 ARLINGTON, VA 22203

No

X Yes

May the IRS discuss this return with the preparer shown above? (see instructions)

1	Check if Schedule O contains a res Briefly describe the organization's missio	<u> </u>		
•	SEE SCHEDULE O.			
			<u> </u>	
2	Did the organization undertake any signif	icant program services during the yea	ar which were not listed on the	
	prior Form 990 or 990-EZ?			Yes X
3	If "Yes," describe these new services on Did the organization cease conducting, or		conducts, any program services?	Yes X
3	If "Yes," describe these changes on Scho		sondato, any program controls	
4			three largest program services, as measui	
			nt of grants and allocations to others, the	total expenses, and
4a	revenue, if any, for each program service (Code) (Expenses \$ 7, \$	903,251. including grants of \$	6,957,375.) (Revenue \$	
	SEE SCHEDULE O			
				
				-
4b	(Code) (Expenses \$	including grants of \$) (Revenue \$	
		<u> </u>		
				
4c	(Code) (Expenses \$	including grants of \$) (Revenue \$	
				
			- ,	
4d	Other program services (Describe in Scho	edule O)		
4 :	•	recluding grants of \$ 7,903,251.) (Revenue \$)
4e	Total program service expenses	1,303,231.		Form 990 (

MARINE CORPS SCHOLARSHIP FOUNDATION, INC

22-1905

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors	2	X	
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		<u> </u>
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_		<u> </u>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		<u> X</u>
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?			37
	If "Yes," complete Schedule D, Part IV	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	40	х	
44	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X	10	A	
11	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 109 If "Yes," complete Schedule D,			
_	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		<u> </u>
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<u> </u>
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	401		Х
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b 13		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	170		
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		<u> </u>
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		<u> </u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	4-	х	
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	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	х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"		_	
. •	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		<u> </u>

Form 990 (2018)

Form	990 (2018) MARINE CORPS SCHOLARSHIP FOUNDATION, INC 22-1905	062	Р	age 5
Pa	TV Statements Regarding Other IRS Filings and Tax Compliance (continued)			
•			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	ļ	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
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		Х
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
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			l
	any contributions that were not tax deductible as charitable contributions?	6a		X
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).		<u></u> _	<u></u>
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	X	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			٠
	to file Form 8282?	7с	ļ	X
	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	ļ	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f	├ ──	X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 <u>g</u>	ļ	<u> </u>
_	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		ļ ,
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
_	sponsoring organization have excess business holdings at any time during the year?	8	<u> </u>	
9	Sponsoring organizations maintaining donor advised funds.			
_	Did the sponsoring organization make any taxable distributions under section 4966?	9a	_	
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10a 10b			
	Section 501(c)(12) organizations. Enter			
11	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against			
U	amounts due or received from them)] !
120	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		ــــــــــا
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
u	Note. See the instructions for additional information the organization must report on Schedule O			
h	Enter the amount of reserves the organization is required to maintain by the states in which the		ľ	
_	organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand			
_	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	Ī	
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		Х
	If "Yes," see instructions and file Form 4720, Schedule N			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
	If "Yes," complete Form 4720, Schedule O			
		Form	990	(2018)

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions

	Check if Schedule O contains a response or note to any line in this Part VI						X			
Sec	tion A. Governing Body and Management									
					[Yes	No			
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		30						
	If there are material differences in voting rights among members of the governing body, or if the governing				ŀ					
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.									
b	Enter the number of voting members included in line 1a, above, who are independent	1b	<u> </u>	29	ŀ					
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		Х			
3	Did the organization delegate control over management duties customarily performed by or under the	e dire	ct supervision				37			
	of officers, directors, or trustees, or key employees to a management company or other person?		41 45	_	3		X			
4	Did the organization make any significant changes to its governing documents since the prior Form 9	_	as filed?	- ⊢	<u>4</u> 5		X			
	5 Did the organization become aware during the year of a significant diversion of the organization's assets?									
6	Did the organization have members or stockholders?	.noint	000 01	-	6	Х				
/a	Did the organization have members, stockholders, or other persons who had the power to elect or as more members of the governing body?	point	one or	١,	7a	х				
h	Are any governance decisions of the organization reserved to (or subject to approval by) members, s	tockh	olders or	H	-					
b	persons other than the governing body?	LOCKII	olders, or	- 1 -	_{7b}		х			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	r bv th	e followina:	F						
	The governing body?		g -	-	— 3a	x				
b	Each committee with authority to act on behalf of the governing body?			[3b	Х				
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea	ched	at the							
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O				9		X			
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	evenu	e Code)							
				_	_	Yes	No			
	Did the organization have local chapters, branches, or affiliates?			1	0a		X			
b	If "Yes," did the organization have written policies and procedures governing the activities of such ch	apte	s, affiliates,	1.						
	and branches to ensure their operations are consistent with the organization's exempt purposes?				0ь	Х				
	Has the organization provided a complete copy of this Form 990 to all members of its governing bod	y beto	ore filing the form	′ ¦¹	1a	^_	 ,			
	Describe in Schedule O the process, if any, used by the organization to review this Form 990			-	_	<u>x</u>				
	Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	to cor	flicte2	_	2a 2b	X				
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yo			H	20					
L	in Schedule O how this was done	, u	0301120	₁	2c	х				
13	Did the organization have a written whistleblower policy?				13	X				
14	Did the organization have a written document retention and destruction policy?			_	14	Х				
15	Did the process for determining compensation of the following persons include a review and approva	ıl by ıı	ndependent							
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	•	·							
а	The organization's CEO, Executive Director, or top management official			1	5a	X				
b	Other officers or key employees of the organization			1	5b	X				
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)									
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arranger	nent v	vith a	_			<u> </u>			
	taxable entity during the year?			1	6a		X			
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate									
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	nizatio	n's	-	<u>-</u> -					
0	exempt status with respect to such arrangements?			1	6b		L			
	tion C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶AL , AR , AZ , CA , C	ਜ ਜ	T. CA HT	тт. 1	KS	κv	Τ.Δ			
17	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, an									
18	for public inspection. Indicate how you made these available. Check all that apply	u 950	-1 (3601130110)(0)3 (Jiliy	avalle	IDIC			
	X Own website Another's website X Upon request Other (explain	ın Sc	hedule (O)							
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, coi			and fi	nand	cial				
	statements available to the public during the tax year			•						
20	State the name, address, and telephone number of the person who possesses the organization's bor	oks aı	nd records >							
	RITA H. HSIEH - 571-384-2806									
	909 N WASHINGTON STREET, SUITE 400, ALEXANDRIA, VA	2	2314							
832006	SEE SCHEDULE O FOR FULL LIST OF STATES			F	orm	990	(2018)			

Form 990 (2018) Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See 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

X Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

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

(A) Name and Title	(B) Average hours per week	(do	not c	Pos heck ss pe	c) ition more rson		one h an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	the organization (W-2/1099-MISC)		organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) GEORGE J. TRAUTMAN III CHAIRMAN	1.00	x						0.	0.	0.
(2) ERIC J. CANDELORI	1.00				┢	一	 	· · · · · · · · · · · · · · · · · · ·		
VICE CHAIRMAN		X						0.	0.	0.
(3) RICHARD D. STEPHENS	1.00					-				
TREASURER		Х		х	İ			0.	0.	0.
(4) STEVEN M. POST	1.00									
GENERAL COUNSEL		x		Х				0.	0.	0.
(5) MICHEAL P. BARRETT	1.00									
DIRECTOR		X						0.	0.	0.
(6) CHARLES F. BOLDEN JR.	1.00									_
DIRECTOR		X						0.	0.	0.
(7) JON M. DAVIS	1.00								_	_
DIRECTOR		Х			L			0.	0.	0.
(8) JOSEPH L. DRISCOLL	1.00								_	
DIRECTOR		X			L			0.	0.	0.
(9) DONALD V. ESMOND	1.00	1								
DIRECTOR		X				<u> </u>	$ldsymbol{ld}}}}}}$	0.	0.	0.
(10) DONALD W. FAUL	1.00									
DIRECTOR		X	L			_		0.	0.	0.
(11) GEORGE J. FLYNN	1.00									
DIRECTOR		X	L	_	_		<u> </u>	0.	0.	0.
(12) MATTHEW GANTZ	1.00	ļ							_	,
DIRECTOR		X	ļ		_	┞	<u> </u>	0.	0.	0.
(13) TRACY GARRETT	1.00	l								_
DIRECTOR	1 2 2 2	X	_	_	L.	<u> </u>	ļ	0.	0.	0.
(14) FRANK J. GAUDIO	1.00	١								_
DIRECTOR	1 00	X	<u> </u>	_	_	╙	_	0.	0.	0.
(15) JOHN C. HEENAN	1.00	١.,						0.	0.	0.
DIRECTOR	1 00	X	\vdash	_	├	₩	\vdash	0.		- 0.
(16) ROBERT E. JOYCE, JR.	1.00	↓						0.	0.	0.
DIRECTOR	1.00	X	 - 	\vdash	\vdash	\vdash	 - -	<u> </u>	<u> </u>	<u>_</u>
(17) KAREN KELLY	1.00	_x				1		0.	0.	0.
DIRECTOR		<u> </u>	<u> </u>			<u> </u>		1 0.		- OOO (22.42)

832007 12-31-18

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Part VII Section A. Officers, Directors, T	rustees, Key Em	ploy	ees,	ane	d Hi	ghe	st C	ompensated Employe	es (continued)	
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average hours per week	box,	not cl unles er an	heck ss pe	rson	than is bot	h an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	кеу етріоуее	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(18) JAMES D. KING	1.00							_		
DIRECTOR		Х				L	_	0.	0.	0.
(19) THOMAS J. LYONS	1.00									
DIRECTOR		Х				<u> </u>		0.	0.	0.
(20) KATHERINE C. MCCALLUM	1.00							_		
DIRECTOR		X				L		0.	0.	0.
(21) JAMES P. MCGINTY	1.00							_		_
DIRECTOR		Х					<u> </u>	0.	0.	0.
(22) SUSAN E. MORRISON	1.00									_
DIRECTOR		X						0.	0.	0.
(23) BERNARD A. PEKALA	1.00								1	
DIRECTOR		X						0.	0.	0.
(24) PAMELA SCHMIDLE	1.00									
DIRECTOR		X			l .			0.	0.	0.
(25) ROBERT W. SCHRODER	1.00								Ĭ	
DIRECTOR		X						0.	0.	0.
(26) MANNING J. SMITH III	1.00									
DIRECTOR		Х			L			0.	0.	0.
1b Sub-total										
c Total from continuation sheets to Par	t VII, Section A									
d Total (add lines 1b and 1c)							<u> </u>			
2 Total number of individuals (including b	ut not limited to th	ose	liste	d al	bove	e) wł	no re	eceived more than \$100	0,000 of reportable	

compensation from the organization

			Yes	No
3	Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	 3		Ī
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual		-	<u>x</u>
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5		<u></u>

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from

(A) Name and business address	(B) Description of services	(C) Compensation
	<u> </u>	
Total number of independent contractors (including but not limited to the	ose listed above) who received more than	

\$100,000 of compensation from the organization

SEE PART VII, SECTION A CONTINUATION SHEETS

Form **990** (2018)

								JNDATION, IN		5062	
Part VII Section A. Officers, Directors, Tr		mplo I	oyee			ligh	est			(F)	
(A) Name and title	(B) Average hours	(C) Position (check all that apply)						(D) Reportable compensation from	(E) Reportable compensation from related	Estimated amount of other	
	per week (list any hours for related organizations below line)	Individual trustee or director	Institutional frustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations	
27) ROBERT J. STEVENS DIRECTOR	1.00	x		Ŀ				0.	0.	(
28) GAIL A. WALTERS DIRECTOR	1.00	x						0.	0.	(
29) BERNARD J. WILLETT DIRECTOR	1.00	x						0.	0.	(
30) ROBERT R. RUARK RESIDENT	- I.	ż		х				0.	0.		
31) RITA H. HSIEH DIRECTOR, ACCOUNTING AND FINANCE	40.00			х				0.	0.		
1											
. 7										-	
							-				
ye refer to the second		-									
•											
,		T									
			<u> </u>				<u> </u>				
,•					Г						
,			_		Г						
•							<u> </u>				
	<u> </u>		Ь	ш	ш	<u> </u>	<u> </u>		-		

	ion 501(c)(3) and 501(c)(4) organizations must com		ner organizations must co	mplete column (A)	
	Check if Schedule O contains a respon			,	
	not include amounts reported on lines 6b, 8b, 9b, 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 domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	ındıvıduals See Part IV, line 22	6,953,375.	6,953,375.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign	4 000	4 000		
	individuals See Part IV, lines 15 and 16	4,000.	4,000.		
4	Benefits paid to or for members		-		1
5	Compensation of current officers, directors,				
^	trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	1,411,440.	606,601.	186,969.	617,870.
8	Pension plan accruals and contributions (include	_,,		= = = = = = = = = = = = = = = = = = = =	,
,	section 401(k) and 403(b) employer contributions)	40,005.	17,193.	5,299.	17,513.
9	Other employee benefits	96,908.	41,649.	12,837.	42,422.
10	Payroli taxes	102,168.	43,909.	13,534.	44,725.
11	Fees for services (non-employees)				
а	Management				
b	Legal	27,865.		27,865.	
С	Accounting	55,154.		55,154.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17	313,475.			313,475.
f	Investment management fees	97,313.		97,313.	
g	•	400 540	52.054	65 504	000 000
	column (A) amount, list line 11g expenses on Sch O.)	408,510.	53,854.	65,724.	288,932.
12	Advertising and promotion	311,535.	42,590.	160,739.	108,206.
13	Office expenses	89,156.	21,075.	15,251.	52,830. 30,323.
.14	Information technology	89,561.	45,481.	13,757.	30,323.
15	Royalties	75,343.	31,536.	13,721.	30,086.
16	Occupancy	129,396.	17,989.	15,409.	95,998.
17	Travel	125,550.	11,505.	13, 103.	73,770.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials			ļ	
19	Conferences, conventions, and meetings	62,435.	9,397.	39,922.	13,116.
20	Interest	,	- ,		<u> </u>
21	Payments to affiliates	<u> </u>			
22	Depreciation, depletion, and amortization	33,567.	14,602.	5,035.	13,930.
23	Insurance	19,661.		19,661.	
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	OTHER FUNDRAISING EXP	310,395.			310,395.
b	DIRECT MAIL	44,584.			44,584.
c	PLANNED GIVING	18,613.			18,613.
d					
е	All other expenses				
25	Total functional expenses Add lines 1 through 24e	10,694,459.	7,903,251.	748,190.	2,043,018.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined		ļ	ļ	
	educational campaign and fundraising solicitation.				
	Check here If following SOP 98-2 (ASC 958-720)			L	Form 990 (2018)

Part Y | Balance Sheet

Pa	rt X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			
		•	(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	11,948,590.	1	8,970,900.
	2	Savings and temporary cash investments	1,856,989.	2	1,816,649.
	3	Pledges and grants receivable, net	28,152,201.	3	26,346,662.
	4	Accounts receivable, net	76,018.	4	. 86,395.
	5	Loans and other receivables from current and former officers, directors,			<u> </u>
		trustees, key employees, and highest compensated employees. Complete			
		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under	1	Ť	1
	ľ	section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
w	1	employees' beneficiary organizations (see instr) Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		7	
As	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	567,264.	9	739,516.
		Land, buildings, and equipment cost or other		Ť	
	100	basis Complete Part VI of Schedule D 10a 1,092,737.			
	h	Less accumulated depreciation 10b 931,225.	195,079.	10c	161,512.
	11	Investments - publicly traded securities	68,553,388.	11	75,074,946.
	12	Investments - other securities See Part IV, line 11	6,274.	12	2,672.
	13	Investments - program-related See Part IV, line 11	•	13	· · · · · · · · · · · · · · · · · · ·
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	99,555.	15	99,206.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	111,455,358.	16	113,298,458.
	17	Accounts payable and accrued expenses	198,976.	17	362,456.
	18	Grants payable	161,918.	18	6,950,508.
	19	Deferred revenue	371,713.	19	488,472.
	20	Tax-exempt bond liabilities		20	-
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
ý	22	Loans and other payables to current and former officers, directors, trustees,			
Liabilities		key employees, highest compensated employees, and disqualified persons		l	
abi		Complete Part II of Schedule L		22	
=	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third	·		
		parties, and other liabilities not included on lines 17-24) Complete Part X of		ļ	
		Schedule D	1,267,998.	25	1,347,117.
	26	Total liabilities. Add lines 17 through 25	2,000,605.	26	9,148,553.
		Organizations that follow SFAS 117 (ASC 958), check here ▶ X and			
es S		complete lines 27 through 29, and lines 33 and 34.			
auc	27	Unrestricted net assets	10,447,141.	27	10,291,758.
Bal	28	Temporarily restricted net assets	52,329,128.	28	46,463,857.
둳	29	Permanently restricted net assets	46,678,484.	29	47,394,290.
굡		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □□□			,
ō		and complete lines 30 through 34.			
iets	30	Capital stock or trust principal, or current funds		30	<u>-</u>
Ass	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds	100 454 752	32	104 140 005
~	33	Total net assets or fund balances	109,454,753.	33	104,149,905.
	34	Total liabilities and net assets/fund balances	111,400,000.	34	113,298,458. Form 990 (2018)

	990 (2018) MARINE CORPS SCHOLARSHIP FOUNDATION, INC	22-	1905	<u>062</u>	Pa	ge 12
Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					X
			_			
1	Total revenue (must equal Part VIII, column (A), line 12)	1			3,0	
2	Total expenses (must equal Part IX, column (A), line 25)	2			4,4	
3	Revenue less expenses Subtract line 2 from line 1	3			1,3	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	109			
5	Net unrealized gains (losses) on investments	5	-2	<u>,53</u>	0,3	21.
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain in Schedule O)	9		2	<u>6,8</u>	33.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,					
	column (B))	10	104	<u>,14</u>	<u>9,9</u>	<u>05.</u>
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII				,	<u>Ш</u>
	•				Yes	No
1	Accounting method used to prepare the Form 990					}
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0				ليدا
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		ļ	2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a				
	separate basis, consolidated basis, or both					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	Х	<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basıs	,			
	consolidated basis, or both					
	Separate basis Consolidated basis Both consolidated and separate basis]
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt,				
	review, or compilation of its financial statements and selection of an independent accountant?		,	2c	Х	L
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule C)			
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sil	ngle Au	dıt			l
	Act and OMB Circular A-133?		,	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ired aud	drt			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3b		
				Form	990	(2018)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

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

➤ Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

Open to Public Inspection

Employer identification number

22-1905062 MARINE CORPS SCHOLARSHIP FOUNDATION, Part Reason for Public Charity Status (All organizations must complete this part) See instructions The organization is not a private foundation because it is (For lines 1 through 12, check only one box) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ)) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(IV). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 \mathbf{X} An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. ☐ Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization f Enter the number of supported organizations Provide the following information about the supported organization(s) (iv) Is the organization lister (iii) Type of organization (v) Amount of monetary (vi) Amount of other (ı) Name of supported (ii) EIN ı your governing docume (described on lines 1-10 organization support (see instructions) support (see instructions) above (see instructions)) Total

Schedule A (Form 990 or 990-EZ) 2018 MARINE CORPS SCHOLARSHIP FOUNDATION, INC22-1905062 Page 2 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

Se	ction A. Public Support						•
Cal	endar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not			•		, ,	
	include any "unusual grants ")	20,227,816.	31,886,048.	18,807,333.	28,786,241.	7,109,573.	106,817,011.
2	Tax revenues levied for the organ-						
	ızatıon'ş benefit and either paid to					·	
	or expended on its behalf						
3	The value of services or facilities						
٠	furnished by a governmental unit to						
	the organization without charge					5 100 550	406 045 044
	Total. Add lines 1 through 3	20,227,816.	31,886,048.	18,807,333.	28,786,241.	7,109,573.	106,817,011.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included	1					
	on line 1 that exceeds 2% of the						
	amount shown on line 11, column (f)						26,700,785.
	.,						80 116 226.
	Public support. Subtract line 5 from line 4 ction B. Total Support	J		<u> </u>			00,110,220.
	endar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	Amounts from line 4	20,227,816.	31,886,048.	18,807,333.	28,786,241.	7,109,573.	106,817,011.
	Gross income from interest,					, ,	
0	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	1,052,195.	1,120,840.	1,391,078.	1,637,701.	885,136.	6,086,950.
a	Net income from unrelated business	_,,,	, , , , , , , , , , , , , , , , , , , ,		_, ,		, , ,
J	activities, whether or not the						
	business is regularly carried on		63,323.	40,416.	27,067.	10,550.	141,356.
10	Other income Do not include gain		i			·	· · ·
	or loss from the sale of capital						
	assets (Explain in Part VI)	67,553.					67,553.
11	Total support. Add lines 7 through 10	-					113,112,870.
12	Gross receipts from related activities,	etc (see instruction	ons)	<u>-</u>		12	
13	First five years. If the Form 990 is for	r the organization's	first, second, third	d, fourth, or fifth ta	x year as a sectio	n 501(c)(3)	
_	organization, check this box and stor	here			·		▶ □
	ction C. Computation of Publ						70.02
	Public support percentage for 2018 (I			olumn (f))		14	70.83 %
	Public support percentage from 2017	•				15	71.73 %
16a	33 1/3% support test - 2018. If the c	•		line 13, and line 1	4 is 33 1/3% or n	nore, check this bo	
	stop here. The organization qualifies						▶ X
t	33 1/3% support test - 2017. If the c				line 15 is 33 1/3%	or more, check th	nis box
	and stop here. The organization qual						
17a	10% -facts-and-circumstances tes						
	and if the organization meets the "fac					it VI now the organ	nization
	meets the "facts-and-circumstances"	-		- ::	=	170 and line 45 :-	100/ 07
t	10% -facts-and-circumstances test	•					
	more, and if the organization meets the						, ▶□
10	organization meets the "facts-and-circ						
10	Private foundation. If the organization	n did not check a t	JOA OIT III 10 10, 102	i, 100, 17a, 01 170		dule A (Form 990	
							 , · •

Schedule A (Form 990 or 990-EZ) 2018 MARINE CORPS SCHOLARSHIP FOUNDATION, INC22-1905062 Page 3 Part III | Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II) Section A. Public Support Calendar year (or fiscal year beginning in) (d) 2017 (e) 2018 ∕(f) Total (a) 2014 (b) 2015 (c) 2016 1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose 3 Gross receipts from activities that are not an unrelated trade or business under section 513 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 5 The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total, Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b 8 Public support. (Subtractine 7c from line 6.) Section B. Total Support Calendar year (or fiscal year beginning in) (d) 2017 (e) 2018 (f) Total (a) 2014 (b) 2015 (c) 20169 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 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 VI) Total support. (Add lines 9, 10c, 11, and 12) 14 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) organization, check this box and stop here Section C. Computation of Public Support Percentage 15 % 15 Public support percentage for 2018 (line 8, column (f), divided by line 13, column (f)) Public support percentage from 2017 Schedule A, Part III, line 15 16 % Section/D. Computation of Investment Income Percentage 17 Invéstment income percentage for 2018 (line 10c, column (f), divided by line 13, column (f)) 17 % 18 Investment income percentage from 2017 Schedule A, Part III, line 17 18 19a 33 1/3% support tests - 2018. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 3 1/3% support tests - 2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions 832023 10-11-18

Schedule A (Form 990 or 990-EZ) 2018 MARINE CORPS SCHOLARSHIP FOUNDATION, INC22-1905062 Page 4

Part IV | Supporting Organizations

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

	Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V)			
Sec	tion A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing	<u> </u>		
	documents? If "No," describe in Part VI how the supported organizations are designated. If designated by	<u> </u>		
	class or purpose, describe the designation If historic and continuing relationship, explain	1		
2	Did the organization have any supported organization that does not have an IRS determination of status			
	under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported			
	organization was described in section 509(a)(1) or (2)	2		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer			
	(b) and (c) below	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and			
	satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the			
	organization made the determination	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B)			
	purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If			
	"Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign			
	supported organization? If "Yes," describe in Part VI how the organization had such control and discretion			
	despite being controlled or supervised by or in connection with its supported organizations	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination			
	under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used			
	to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)			l .
	purposes	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"			
	answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN			
	numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action,	ĺ		
	(iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action	l	<u> </u>	
	was accomplished (such as by amendment to the organizing document)	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already			
	designated in the organization's organizing document?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c_		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to			
	anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class			
	benefited by one or more of its supported organizations, or (iii) other supporting organizations that also			
	support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in			
	Part VI.	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor			
	(as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with			
	regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 79			
	If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more			
	disqualified persons as defined in section 4946 (other than foundation managers and organizations described			
	in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a	 	
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which			
	the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b	_	
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit			
	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c	-	
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section			
	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated			
_	supporting organizations)? If "Yes," answer 10b below	10a		
h	Did the organization have any excess husiness holdings in the tay year? (I lise Schedule C. Form 4720, to			

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determine whether the organization had excess business holdings)

10b

	dule A (Form 990 or 990-EZ) 2018 MARINE CORPS SCHOLARSHIP FOUNDATION, INCZZ-1	90506	∠ P;	age 5
Pa	rt IV Supporting Organizations _(continued)	_	Tv	T
	the state of the fallowing garage.		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		ŀ	
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	445		
	below, the governing body of a supported organization?	11a	\vdash	-
	A family member of a person described in (a) above?	11b	\vdash	\vdash
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c	l	<u> </u>
Sec	tion B. Type I Supporting Organizations		Yes	No
	Details a least the state of th	Γ	162	140
1	Did the directors, trustees, or membership of one or more supported organizations have the power to		l	
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the	Ì		
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported	- <u>-</u> -	·	
_	organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1	 	-
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	- -		
	supervised, or controlled the supporting organization	2		
Sec	tion C. Type II Supporting Organizations		1	I
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors.			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed	<u>-</u> -	l	
	the supported organization(s)	1		l
Sec	tion D. All Type III Supporting Organizations		T.	T
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax	-		
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the		·	
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	ļ	-
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how		ļ	
	the organization maintained a close and continuous working relationship with the supported organization(s)	2	-	-
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's		ļ	
	supported organizations played in this regard	3		<u> </u>
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instruction	ns).		
а	The organization satisfied the Activities Test Complete line 2 below			
b	The organization is the parent of each of its supported organizations. Complete line 3 below			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see	nstruction		
2	Activities Test Answer (a) and (b) below.	<u> </u>	Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined		l	
	that these activities constituted substantially all of its activities	2a	ļ	
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these		l	
	activities but for the organization's involvement	2b	<u> </u>	┞
3	Parent of Supported Organizations Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			<u> </u>
	trustees of each of the supported organizations? Provide details in Part VI.	' 3a	<u> </u>	
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
_	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	3b		
	Schodulo A /Forn			

Schedule A (Form 990 or 990-EZ) 2018 MARINE CORPS SCHOLARSHIP FOUNDATION, INC22-1905062 Page 6 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 (explain in Part VI) See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E (B) Current Year Section A - Adjusted Net Income (A) Prior Year (optional) Net short-term capital gain 1 2 Recoveries of prior-year distributions 3 Other gross income (see instructions) 4 Add lines 1 through 3 5 Depreciation and depletion 5 6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) 6 Other expenses (see instructions) 7 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 (B) Current Year Section B - Minimum Asset Amount (A) Prior Year (optional) Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year) a Average monthly value of securities 1a b Average monthly cash balances 1b c Fair market value of other non-exempt-use assets 1c d Total (add lines 1a, 1b, and 1c) 1d e Discount claimed for blockage or other factors (explain in detail in Part VI) Acquisition indebtedness applicable to non-exempt-use assets 2 Subtract line 2 from line 1d 3 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions) Net value of non-exempt-use assets (subtract line 4 from line 3) 5 Multiply line 5 by 035 6 7 Recoveries of prior-year distributions Minimum Asset Amount (add line 7 to line 6) 8 Section C - Distributable Amount Current Year 1 Adjusted net income for prior year (from Section A, line 8, Column A) 1

emergency temporary reduction (see instructions)

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions)

Schedule A (Form 990 or 990-EZ) 2018

Enter 85% of line 1

Enter greater of line 2 or line 3

Income tax imposed in prior year

3 Minimum asset amount for prior year (from Section B, line 8, Column A)

Distributable Amount. Subtract line 5 from line 4, unless subject to

2

<u>3</u>

5

Schedule A (Form 990 or 990-EZ) 2018 MARINE CORPS SCHOLARSHIP FOUNDATION, INC22-1905062 Page 7 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D - Distributions **Current Year** Amounts paid to supported organizations to accomplish exempt purposes Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity 3 Administrative expenses paid to accomplish exempt purposes of supported organizations Amounts paid to acquire exempt-use assets 5 Qualified set-aside amounts (prior IRS approval required) Other distributions (describe in Part VI) See instructions Total annual distributions. Add lines 1 through 6 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions Distributable amount for 2018 from Section C, line 6 Line 8 amount divided by line 9 amount (ii) (iii) 60 Underdistributions Distributable **Excess Distributions** Section E - Distribution Allocations (see instructions) Amount for 2018 Pre-2018 Distributable amount for 2018 from Section C, line 6 Underdistributions, if any, for years prior to 2018 (reasonable cause required- explain in Part VI) See instructions Excess distributions carryover, if any, to 2018 a From 2013 b From 2014 c From 2015 d From 2016 e From 2017 Total of lines 3a through e g Applied to underdistributions of prior years h Applied to 2018 distributable amount i Carryover from 2013 not applied (see instructions) j Remainder Subtract lines 3g, 3h, and 3i from 3f Distributions for 2018 from Section D, a Applied to underdistributions of prior years b Applied to 2018 distributable amount c Remainder Subtract lines 4a and 4b from 4 Remaining underdistributions for years prior to 2018, if any Subtract lines 3g and 4a from line 2 For result greater than zero, explain in Part VI. See instructions Remaining underdistributions for 2018 Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI See instructions Excess distributions carryover to 2019. Add lines 3j Breakdown of line 7 a Excess from 2014 b Excess from 2015

Schedule A (Form 990 or 990-EZ) 2018

c Excess from 2016d Excess from 2017e Excess from 2018

Schedu Part		Sup Part I line 1 Secti	plemer V, Sectio	ntal I in A, I Secti es 5, 6	Informines 1, 2	nation 2, 3b, 3 nes 2 a	1. Provid 3c, 4b, 4 and 3. Pa	de the exp c, 5a, 6, 9 irt IV. Sec	olanations re la, 9b, 9c, 11 tion E. lines	quired by l la, 11b, an 1c. 2a. 2b.	Part II, II d 11c, F 3a. and	ne 10, Part IV, I 3b. Pa	Part II, line Section B art V. line	e 17a or 17b, Par I, lines 1 and 2, F 1, Part V, Section additional inform	rt III, line 12, Part IV, Section C, n B, line 1e, Part V,	<u>e 8</u>
PART	ı I	I,	SHORT	r Y	EAR	EXP:	LANA'	rion:								
THE	OR	GAN	IZAT]	ON	HAS	CH	ANGE	D ITS	ACCOU	NTING	PER	IOD	FROM	CALENDA	YEAR	
ENDE	ED	DEC	EMBEF	3	1 TO	FI	SCAL	YEAR	ENDED	JUNE	30,	201	L8.	<u> </u>		
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SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

▶ Attach to Form 990.

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

OMB No 1545-0047 Open to Public Inspection

Name of the organization

MARINE CORPS SCHOLARSHIP FOUNDATION, INC

Employer identification number 22-1905062

Pai	rt I Organizations Maintaining Donor Advise	ed Funds or Other Similar Fund	s or Accounts.Complete if the			
	organization answered "Yes" on Form 990, Part IV, Iir	ne 6				
		(a) Donor advised funds	(b) Funds and other accounts			
1	Total number at end of year					
2	Aggregate value of contributions to (during year)					
3	Aggregate value of grants from (during year)					
4	Aggregate value at end of year					
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor adv	sed funds			
	are the organization's property, subject to the organization's		Yes No			
6	Did the organization inform all grantees, donors, and donor a	advisors in writing that grant funds can be	e used only			
	for charitable purposes and not for the benefit of the donor					
	impermissible private benefit?		Yes No			
Pa	rt II Conservation Easements. Complete if the or	ganization answered "Yes" on Form 990,	Part IV, line 7			
1	Purpose(s) of conservation easements held by the organization	tion (check all that apply)				
	Preservation of land for public use (e.g., recreation or	education) Preservation of a his	torically important land area			
	Protection of natural habitat	Preservation of a ce	rtified historic structure			
	Preservation of open space					
2	Complete lines 2a through 2d if the organization held a quali	fied 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			
а	Total number of conservation easements		2a			
b	Total acreage restricted by conservation easements		2b			
С	Number of conservation easements on a certified historic str	ructure included in (a)	2c			
d	Number of conservation easements included in (c) acquired	after 7/25/06, and not on a historic struc	ture			
	listed in the National Register		2d			
3	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 ea					
5	Does the organization have a written policy regarding the pe	riodic monitoring, inspection, handling of				
	violations, and enforcement of the conservation easements		└── Yes			
6	Staff and volunteer hours devoted to monitoring, inspecting,	, handling of violations, and enforcing coi	nservation easements during the year			
	<u> </u>					
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conserv	ation easements during the year			
_	\$		04-1/41/01/2			
8	Does each conservation easement reported on line 2(d) abo	ve satisfy the requirements of section 17	∪(n)(4)(B)(l)			
_	and section 170(h)(4)(B)(ii)?					
9	In Part XIII, describe how the organization reports conservat					
	include, if applicable, the text of the footnote to the organization	ition's financial statements that describes	s the organization's accounting for			
Dai	conservation easements rt III Organizations Maintaining Collections o	of Art Historical Treasures or (Other Similar Assets			
Га	Complete if the organization answered "Yes" on Form					
	If the organization elected, as permitted under SFAS 116 (At		ament and halance sheet works of art			
ıa	historical treasures, or other similar assets held for public ex					
	the text of the footnote to its financial statements that descri		ance of public service, provide, art are xim,			
h	If the organization elected, as permitted under SFAS 116 (A)		ot and balance sheet works of art, historical			
ь	treasures, or other similar assets held for public exhibition, e					
	relating to these items	adoation, or research in future ance of p	dance convice, provide the following amounts			
	(i) Revenue included on Form 990, Part VIII, line 1		▶ \$			
	(ii) Assets included in Form 990, Part X		\$			
0	If the organization received or held works of art, historical tre	age irae or other similar assets for financi	al gain, provide			
2	the following amounts required to be reported under SFAS 1		ar gain, provide			
_	Revenue included on Form 990, Part VIII, line 1	1. 10 (1.00 500) relating to these items	▶ \$			
	Assets included in Form 990, Part X		\$			
- 5	Assets included in Form 330, Fall A		0.1.1.1.0.05			

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

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	<u> </u>	CORPS SCHO					05062	
Pai	t III Organizations Maintaining C							
3	Using the organization's acquisition, accessi	on, and other record	ls, check any of the	following that are a	significa	nt use of its	collection i	tems
	(check all that apply)							
а	Public exhibition	d		hange programs				
b	Scholarly research	е	Other					
С	Preservation for future generations							
4	Provide a description of the organization's co	ollections and explai	n how they further t	he organization's ex	empt pu	rpose in Pai	t XIII	
5	During the year, did the organization solicit of	r receive donations	of art, historical trea	sures, or other simil	ar assets	s _	_	
	to be sold to raise funds rather than to be m		-				Yes	<u> </u>
Pai	t IV Escrow and Custodial Arran reported an amount on Form 990, Pa	-	ete if the organization	on answered "Yes" o	n Form 9	990, Part IV,	line 9, or	
1a	Is the organization an agent, trustee, custod		liary for contribution	ns or other assets no	ot includ	ed		
	on Form 990, Part X?		,				Yes	X No
h	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing table					
	Tes, explain the arrangement in rate xiii	and complete the	moving table				Amount	
С	Beginning balance				10	:	,	
	Additions during the year				10	- 		
	Distributions during the year				16			
f	Ending balance				11	_		
	Did the organization include an amount on F	orm 990 Part Y line	21 for escrow or c	ustodial account hal		·	Yes	X No
	If "Yes," explain the arrangement in Part XIII					_		
Pai								
	T T T T T T T T T T T T T T T T T T T	(a) Current year	(b) Prior year	(c) Two years back	1	ee years back	(e) Four ye	ears back
1a	Beginning of year balance	58,925,152.	50,083,327.	41,715,078	+ > -	,128,843.		99,872.
b	Contributions	1,022,542.	3,679,771.		+	,510,172.	 	37,070.
	Net investment earnings, gains, and losses	-414,230.	6,330,436.		+	-805,382.		87,227.
	Grants or scholarships	1,435,487.	1,168,382.	1,179,715	+	,118,555.		95,326.
	Other expenditures for facilities	_,,		' - ' - '	1	, ,	 	
-	and programs							
	Administrative expenses				†			
	•	58,097,977.	58,925,152,	50,083,327	41	.,715,078.	41 1	28,843.
g	End of year balance Provide the estimated percentage of the cur				.,	, ,		
2	Board designated or quasi-endowment	• 00	%	ajj ficia as				
	04 50	%	— ⁷⁶					
	4	8.4 [%] %						
С								
٥-	The percentages on lines 2a, 2b, and 2c sho		ation that are hold o	and administered for	the era	nization		
Ja	Are there endowment funds not in the posse	ession of the organiz	ation that are nelo a	ino aoministereo foi	trie orga	ilization		es No
	by							X X
	(i) unrelated organizations						3a(i)	$\frac{x}{x}$
	(ii) related organizations						3a(ii)	
b	If "Yes" on line 3a(ii), are the related organization	· · · · · · · · · · · · · · · · · · ·					3b	
Par	Describe in Part XIII the intended uses of the tVI Land, Buildings, and Equipm		wment funds					
	Complete if the organization answere), Part IV, line 11a	See Form 990, Part	X, line 10).		
	Description of property	(a) Cost or o			Accumul		(d) Book v	/alue
		basis (investr		(other) d	epreciati	on		
1a	Land		1	1				··
	Buildings			1	•			
	Leasehold improvements		32	8,791.	218,	115.	110	,676.
	Equipment			3,946.		110.	50	,836.
	Other					*		
	. Add lines 1a through 1e (Column (d) must e	gual Form 990, Part	X, column (B), line	10c)		▶	161	,512.

Schedule D (Form 990) 2018

Schedi	ule D (Form 990) 2018 MARINE CORP	S SCHOLARSHI	P FOUNDATION,	INC	22-1905062 Page 3
Part					
	Complete if the organization answered "Yes"				
(a) De	escription of security or category (including name of security)	(b) Book value	(c) Method of valua	tion Cost	or end-of-year market value
(1) Fin	ancial derivatives				_
(2) Clo	sely-held equity interests		<u>-</u>		<u></u>
(3) Otl	ner				·
<u>(A)</u>					
<u>(B)</u>					
(C)		<u> </u>	-		
(D)					
<u>(E)</u>					
(F)					· · · · · · · · · · · · · · · · · · ·
(G)		l			······································
(H)	Col. (b) must equal Form 990, Part X, col. (B) line 12.)	<u> </u>			·
	VIII Investments - Program Related.	<u> </u>		-	***
	Complete if the organization answered "Yes"	on Form 990 Part IV line	e 11c. See Form 990. Par	t X line 13	
	(a) Description of investment	(b) Book value	(c) Method of valua	tion Cost	or end-of-year market value
(1)					
(2)					
(3)	· · · · · · · · · · · · · · · · · · ·		<u> </u>		
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					· -
	Col. (b) must equal Form 990, Part X, col. (B) line 13.)				
Part	 .				
	Complete if the organization answered "Yes"		e 11d See Form 990, Par	t X, line 15	T (I) Deal also
	(a)	Description			(b) Book value
(1)			<u> </u>		
(2)					
(3)					
(4)		··			
(5)			·		
(6)					
(7)		<u></u>			
<u>(8)</u> (9)		·			
-	Column (b) must equal Form 990, Part X, col (B) lin	e 15)			
Part		0.107			<u> </u>
	Complete if the organization answered "Yes"	on Form 990. Part IV. line	e 11e or 11f See Form 99	0, Part X, I	ine 25
1.	(a) Description of liability	<u></u>	(b) Book value	<u> </u>	
(1)	Federal income taxes				
(2)	OBLIGATIONS UNDER CHARITA	BLE			
(3)	TRUSTS AND ANNUITIES		1,154,480.		
(4)	DEFERRED RENT		192,637.		
(5)					
(6)					
(7)					
(8)					
(9)					
-	Column (b) must equal Form 990, Part X, col (B) lin	e 25)	1,347,117.		
	hility for uncortain tay positions. In Part VIII, provide		to the organization's finar	cial etatem	onts that reports the

Schedule D (Form 990) 2018

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

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Sche	dule D (Form 990) 2018 MARINE CORPS SCHOLARSHIP FOUNDATION, INC		<u> 1905062</u>	Page 4
Pa	t XI Reconciliation of Revenue per Audited Financial Statements With Revenue per F	Retur	า.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a			
1	Total revenue, gains, and other support per audited financial statements	1	6,718,	<u>517.</u>
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
а	Net unrealized gains (losses) on investments 2a -2,530,321.	-		
b	Donated services and use of facilities 2b 52,973.			
С	Recoveries of prior year grants 2c	_		
d	Other (Describe in Part XIII) 2d 26,833.			
е	Add lines 2a through 2d	2e	-2,450,	515.
3	Subtract line 2e from line 1	3	9,169,	032.
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 Other (Describe in Part XIII) 4a 97, 313. 4b -1, 373, 246.	4		
b	Other (Describe in Part XIII)	4	4 005	000
С	Add lines 4a and 4b	4c	-1,275	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	7,893,	099.
Pa	rt XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	Retu	ırn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	Т	12 022	265
1	Total expenses and losses per audited financial statements	1	12,023,	202.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25 Donated services and use of facilities 2a 52,973			
а		4		
b	Prior year adjustments 2b	-		
С	Other losses Other (Describe in Part XIII.) 2c 2d 1,373,246	+		
		7	1 426	210
	Add lines 2a through 2d	2e 3	1,426, 10,597,	116
3	Subtract line 2e from line 1	3	10,357,	140.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 Investment expenses not included on Form 990, Part VIII, line 7b 4a 97, 313			
a		4		
b	Other (Describe in Part XIII)	1 40	97	313.
_	Add lines 4a and 4b Table supersess. Add lines 2 and 4a. (This must equal Form 990. Part I, line 18.)	4c 5	10,694,	
F _a	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) It XIII Supplemental Information.	1	20,002,	
	de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line	4 Par	X line 2 Part)	 {I
	2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.	7,1 4	. , , , , , , , , , , , , , , , , , , ,	**,
III IC3	20 and 40, and 1 art Art, intes 20 and 45 7 450 complete this part to provide any additional information.			
PAI	RT V, LINE 4:			
TH	FOUNDATION'S ENDOWMENT FUNDS ARE USED TO PROVIDE SCHOLAR	RSHI	P AWARDS	TO
THO	OSE STUDENTS WHO ARE CHILDREN OF PERSONS WHO SERVED IN THE	<u>U.</u>	S. MARIN	<u>ie</u>
		. ~ ~		
COI	RPS, WHO APPLY AND QUALIFY ACCORDING TO THE REQUIREMENTS A	AS S	ET BY TE	ie
FO	JNDATION'S POLICY.			
D 3 1	om v ting 1.			
PA	RT X, LINE 2:			
mui	FOUNDATION ADOPTED THE INCOME TAX STANDARD FOR UNCERTAIN	J TN	COME TAX	ζ
1111	FOUNDATION ADDFIED THE INCOME TAX STANDARD FOR UNCERTAIN	1	COME III	
PO!	SITIONS. THE FOUNDATION EVALUATED ITS TAX POSITIONS AND DE	TER	MINED TH	TAI
ITS	S POSITIONS ARE MORE LIKELY THAN NOT TO BE SUSTAINED ON EX	IMA	NATION.	THE
	DIDAMIONIA INCOME MAY DEMINIA ADE GUDIECO DO DEVIEW AND EV	7 М К 5	אואיתדראו ד	3Y
FO	INDATION'S INCOME TAX RETURNS ARE SUBJECT TO REVIEW AND EX	727.7	MALION I	
FO	INDATION S INCOME TAX RETURNS ARE SUBJECT TO REVIEW AND EX	TAUTI	IMITON I	

Schedule D (Form 990) 2018 MARINE CORPS SCHOLARSHIP FOUNDATION, Part XIII Supplemental Information (continued)	INC22-1905062 Page 5
PART XI, LINE 2D - OTHER ADJUSTMENTS:	
REVERSAL OF GRANT EXPENSES	48,717.
CHANGE IN VALUES OF OBLIGATIONS UNDER CHARITABLE TRUSTS	-21,884.
TOTAL TO SCHEDULE D, PART XI, LINE 2D	26,833.
PART XI, LINE 4B - OTHER ADJUSTMENTS:	
FUNDRAISING EVENT EXPENSES	-1,373,186.
GAMING EVENT EXPENSES	-60.
TOTAL TO SCHEDULE D, PART XI, LINE 4B	-1,373,246.
PART XII, LINE 2D - OTHER ADJUSTMENTS:	
FUNDRAISING EVENT EXPENSES	1,373,186.
GAMING EVENT EXPENSES	60.
TOTAL TO SCHEDULE D, PART XII, LINE 2D	1,373,246.
	_

SCHEDULE G

(Form 990 or 990-EZ)

Name of the organization

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or If the organization entered more than \$15,000 on Form 990-EZ, line 6a.

2018

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

➤ Attach to Form 990 or Form 990-EZ.

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

GD to WWW.ii digoth of mode for mediations and the latest mediation

Employer identification number

MARINE	CORPS SCHOLARSHIP	FOU	NDA	TION, INC	122-1905	062
Part I Fundraising Activities required to complete this pa	Complete if the organization answert	ered "Y	'es" or	n Form 990, Part IV,	line 17 Form 990-E2	I filers are not
 1 Indicate whether the organization rail a X Mail solicitations b X Internet and email solicitation c Phone solicitations d X In-person solicitations 2 a Did the organization have a written key employees listed in Form 990, F b If "Yes," list the 10 highest paid ind compensated at least \$5,000 by the 	e X Solicita f Solicita g X Special or oral agreement with any individua Part VII) or entity in connection with prividuals or entities (fundraisers) pursi	tion of tion of fundra I (inclue profess	non-g gover alsing o ding o lonal f	overnment grants nment grants events fficers, directors, tru undraising services?	stees, or X Yes	
(i) Name and address of individual or entity (fundraiser)	(iı) Actıvıty	have c	Did raiser ustody itrol of utions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
DATOCWITTEN, INC 13145		Yes	No			
APPLEGROVE LANE, HERNDON, VA	EVENT MANAGEMENT		х	2,482,048.	60,125.	2,421,923.
PATRICIA J. HURLEY & ASSOCIATES - 205 WEST WACKER	EVENT MANAGEMENT		х	1,230,486.	40,000.	1,190,486.
GORDON C. JAMES PUBLIC	}					
RELATIONS - 5080 NORTH 40TH	EVENT MANAGEMENT		Х	836,855.	45,000.	791,855.
THE JFM GROUP - 629 FIFTH						
AVENUE, SUITE 106, PELHAM, NY	EVENT MANAGEMENT	_	Х	303,212.	25,000.	278,212.
THE FASHIONABLE EVENT - 1101						
WALNUT #F, HUNTINGTON BEACH,	EVENT MANAGEMENT		Х	231,930.	30,000.	201,930.
ANNE LEWIS STRATEGIES, LLC -	DIGITAL ADVERTISING AND					
120 EAST 1ST STREET,	MARKETING	1	Х	81,525.	49,300.	32,225.
CREATIVE DIRECT RESPONSE -						
16900 SCIENCE DRIVE, SUITE	DIRECT MARKETING PROGRAM		Х	76,957.	30,750.	46,207.
MASON JAY BLACHER &			l			
ASSOCIATES - 2210 FAIRVIEW	EVENT FUNDRAISING	<u> </u>	Х	21,150.	23,300.	-2,150.
CONVENTURES, INC ONE			l			
DESIGN CENTER PLACE, BOSTON,	EVENT MANAGEMENT		Х	0.	10,000.	-10,000.
Total		1		5,264,163.	313,475.	4,950,688.
3 List all states in which the organization or licensing						
AL,AK,AZ,AR,CA,CO,CT,	DE, FL, GA, HI, ID, IL,	IN,	IA,	KS, KY, LA, M	E,MD,MA,MI	,MN,MS,MO
MT, NE, NV, NH, NJ, NM, NY,	NC, ND, OH, OK, OR, PA,	RI,	SC,	SD,TN,TX,U	T,VT,VA,WA	.,WV,WI,WY
<u></u>						
				· .		
					· 	
	 			**		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

SEE PART IV FOR CONTINUATIONS

Schedule G (Form 990 or 990-EZ) 2018

		le G (Form 990 or 990-EZ) 2018 MARINE					
Pa	ırt İ	Fundraising Events. Complete if the of fundraising event contributions and gr	ie organization answered	l "Yes" on Form 990, Par NEZ lines 1 and 6h list i	t IV, line 18, or reported	more than \$15,000	
		or fundraising event contributions and gr	(a) Event #1	(b) Event #2	(c) Other events		
			1 ' '	PEBBLE BEACH		(d) Total events (add col (a) through	
			AWARDS DINNE	GOLF	21	col (c))	
ā			(event type)	(event type)	(total number)		
Revenue	1	Gross receipts	836,855.	825,647.	3,059,104.	4,721,606.	
	2	Less Contributions	830,707.	794,591.	3,025,145.	4,650,443.	
_	3	Gross income (line 1 minus line 2)	6,148.	31,056.	33,959.	71,163.	
	4	Cash prizes					
ĽΛ	5	Noncash prizes	6,148.	31,056.	34,600.	71,804.	
pense	6	Rent/facility costs					
Direct Expenses	7	Food and beverages	82,486.	228,254.	272,653.	583,393.	
△		Entartement	2,000.	13,205.	21,493.	36,698.	
	8	Entertainment Other direct expenses	45,399.	336,049.	297,045.	678,493.	
	10				•	1,370,388.	
		Net income summary Subtract line 10 from I	ine 3, column (d)			-1,299,225.	
Pa	rt l		answered "Yes" on Form	n 990, Part IV, line 19, or	reported more than		
		\$15,000 on Form 990-EZ, line 6a	T	4 > Dull tobe (notant		(A) T-4-1 (add	
e			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))	
Revenue							
<u>~</u>	1	Gross revenue					
ses	2	Cash prizes					
Expenses	3	Noncash prizes					
Direct	4	Rent/facility costs					
	5	Other direct expenses					
	6	Volunteer labor	Yes% No	Yes % No	Yes % No		
	7	Direct expense summary Add lines 2 through	h 5 ın column (d)		•		
	8	Net gaming income summary Subtract line 7	from line 1, column (d)				
9	Fn	ter the state(s) in which the organization condi	ucts gaming activities				
		the organization licensed to conduct gaming a		states?		Yes No	
	b If "No," explain						

Schedule G (Form 990 or 990-EZ) 2018

Yes No

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?

b If "Yes," explain

832082 10-03-18

Schedule G (Form 990 or 990-EZ) 2018 MARINE CORPS SCHOLARSHIP FOUNDATION, INC22-1905062 Page 3
11 Does the organization conduct gaming activities with nonmembers?
12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed
to administer charitable gaming?
13 Indicate the percentage of gaming activity conducted in
a The organization's facility b An outside facility 13a % 13b %
14 Enter the name and address of the person who prepares the organization's gaming/special events books and records
Name ▶
Address >
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
b If "Yes," enter the amount of gaming revenue received by the organization ▶\$ and the amount
of gaming revenue retained by the third party > \$
c If "Yes," enter name and address of the third party
Name ▶
Address ►
16 Gaming manager information
To Carming manager information
Name
Gaming manager compensation > \$
Description of services provided
Director/officer Employee Independent contractor
47. Mandalan, dahahada
17 Mandatory distributions a Is the organization required under state law to make charitable distributions from the gaming proceeds to
retain the state gaming license? Yes No
b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the
organization's own exempt activities during the tax year > \$
Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b,
15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions
SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:
(I) NAME OF FUNDRAISER: DATOCWITTEN, INC.
(-)
(I) ADDRESS OF FUNDRAISER: 13145 APPLEGROVE LANE, HERNDON, VA 20171
/ T NAME OF FUNDATORD, DAMPTOTA I THIRTEY C ACCOCTANGE
(I) NAME OF FUNDRAISER: PATRICIA J. HURLEY & ASSOCIATES
(I) ADDRESS OF FUNDRAISER:
205 WEST WACKER DRIVE, SUITE 1400, CHICAGO, IL 60606
832083 10-03-18 Schedule G (Form 990 or 990-EZ) 2018

Schedule G (Form 990 or 990-EZ) MARINE CORPS SCHOLARSHIP FOUNDATION, INC22-1905062 Page 4 Part IV Supplemental Information (continued)
(I) NAME OF FUNDRAISER: GORDON C. JAMES PUBLIC RELATIONS
(I) ADDRESS OF FUNDRAISER:
5080 NORTH 40TH STREET, SUITE 350, PHOENIX, AZ 85018
(I) NAME OF FUNDRAISER: THE JFM GROUP
(I) ADDRESS OF FUNDRAISER: 629 FIFTH AVENUE, SUITE 106, PELHAM, NY 10803
(I) NAME OF FUNDRAISER: THE FASHIONABLE EVENT
(I) ADDRESS OF FUNDRAISER: 1101 WALNUT #F, HUNTINGTON BEACH, CA 92648
(I) NAME OF FUNDRAISER: ANNE LEWIS STRATEGIES, LLC
(I) ADDRESS OF FUNDRAISER: 120 EAST 1ST STREET, PAPOLLION, NE 68046
(I) NAME OF FUNDRAISER: CREATIVE DIRECT RESPONSE
(I) ADDRESS OF FUNDRAISER: 16900 SCIENCE DRIVE, SUITE 210, BOWIE, MD 20715
(I) NAME OF FUNDRAISER: MASON JAY BLACHER & ASSOCIATES
(I) ADDRESS OF FUNDRAISER: 2210 FAIRVIEW AVENUE EAST, SEATTLE, WA 98102
(I) NAME OF FUNDRAISER: CONVENTURES, INC.
(I) ADDRESS OF FUNDRAISER: ONE DESIGN CENTER PLACE, BOSTON, MA 02210
PART I, LINE 2B, COLUMN (V):
MARINE CORPS SCHOLARSHIP FOUNDATION, INC. (THE FOUNDATION) PAID
PROFESSIONAL FUNDRAISERS FOR PROFESSIONAL FUNDRAISING SERVICES AND
ADMINISTRATIVE FEES.
IN 2018, THE FOUNDATION PAID ADMINISTRATIVE FEES AND EXPENSE
REIMBURSEMENTS TO THE FOLLOWING PROFESSIONAL FUNDRAISERS: Schedule G (Form 990 or 990-EZ)

Schedule G (Form 990 or 990-EZ) MARINE CORPS SCHOLARSHIP Part IV Supplemental Information (continued)	FOUNDATION,	INC22-1905062	Page 4
DATOCWITTEN, INC.: \$72,693			
THE JFM GROUP: \$26,740			
MASON JAY BLACHER & ASSOCIATES: \$587			
GORDON C. JAMES PUBLIC RELATIONS: \$3,622			
ANNE LEWIS, LLC: \$120,000			
CREATIVE DIRECT RESPONSE: \$13,834			
<u> </u>			
		<u>-</u>	
			<u></u>
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•			
	-	<u> </u>	
		Schedule G (Form 990 o	r 990-EZ)

SCHEDULEI (Form 990) Department of the Treasury Internal Revenue Service

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No 1545-0047

Open to Public

► Go to www.irs.gov/Form990 for the latest information. ▶ Attach to Form 990.

Name of	Name of the organization	Employer identification number
	MARINE CORPS SCHOLARSHIP FOUNDATION, INC	22-1905062
Part	Part General Information on Grants and Assistance	
1 Do	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	
crit	interia used to award the grants or assistance?	X Yes

<u>2</u>

Inspection

3	line 21, 10r any	(h) Purpose of grant or assistance					Schedule (Form 990) (2018)
1	es" on Form 990, Part IV,	(g) Description of noncash assistance					
	Inization answered	(f) Method of valuation (book, EMV, appraisal, other)					
d States	ompiete ir tne orga ded	(e) Amount of non-cash assistance					
funds in the Unite	c Governments. Used in the control of the control o	(d) Amount of cash grant				ne line 1 table	
oring the use of grant	ations and Domesti be duplicated if addit	(c) IRC section (f applicable)				ganizations listed in the	ons for Form 990.
cedures for montto	Jomestic Organiz 5,000 Part II can I	(a)				nd government org	see the Instructi
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	recipient that received more than \$5,000. Part II can be duplicated if additional space is needed	1 (a) Name and address of organization or government				2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 3 Enter total number of other organizations listed in the line 1 table	1 ~

(f) Description of noncash assistance 22-1905062 (e) Method of valuation (book, FMV, appraisal, other) THE SCHOLARSHIP FUNDS. EACH STUDENT AND THE EDUCATIONAL INSTITUTION WHERE THE STUDENT IS ENROLLED ELIGIBILITY AND NEED OF THE STUDENT. STUDENTS MUST PROVIDE INFORMATION TO Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information THE ORGANIZATION INCLUDING TRANSCRIPTS, VERIFICATION OF STUDENT EXPENSES Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed STUDENTS APPLY FOR THE SCHOLARSHIPS AND A POINT SYSTEM IS USED TO DETERMINE THE AWARD AMOUNT TO EACH STUDENT BASED ON (d) Amount of non-cash assistance Ö MARINE CORPS SCHOLARSHIP FOUNDATION, INC STATEMENT OF USE OF 6,953,375. (c) Amount of cash grant 2198 (b) Number of recipients ď AND AND AID FROM THE COLLEGES, (a) Type of grant or assistance BEFORE AWARDS ARE MADE 7 Schedule I (Form 990) (2018) PART I, LINE SCHOLARSHIP AWARDS Part III

Schedule I (Form 990) (2018)

OR THE UNUSED PORTION OF THE PAYMENT, MUST BE

AGREES THAT THE PAYMENT,

832102 11-02-18

Page 2

Schedule (Form 990) MARINE CORPS SCHOLARSHIP FOUNDATION, INC 22-1905062 Page 2 Part IV Supplemental Information
REFUNDED TO THE MARINE CORPS SCHOLARSHIP FOUNDATION IF 1) THE STUDENT
TRANSFERS, WITHDRAWS OR OTHERWISE LEAVES SCHOOL, 2) THE STUDENT DOES NOT
REMAIN IN SATISFACTORY ACADEMIC STANDING AS DEFINED BY THE SCHOOL, 3) THE
STUDENT'S BEHAVIOR IS NOT CONSISTENT WITH THE ACADEMIC INSTITUTION'S
STUDENT CONDUCT CODE, OR 4) STUDENT IS FOUND GUILTY OF ANY CIVIL CODE
VIOLATION.
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SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

Noncash Contributions

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

Attach to Form 990.

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

2018

Open to Public Inspection

Name of the organization

MARINE CORPS SCHOLARSHIP FOUNDATION, INC

Employer identification number 22-1905062

Pa	rt I Types of Property						
		(a) Check if applicable	(b) Number of contributions or	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of de noncash contribu	etermining	ts
4	A.A. Martin of art		items contributed	rom 950, Part VIII, line 1g			
1	Art - Works of art						
2	Art - Historical treasures				 -		
3	Art - Fractional interests						
4	Books and publications		<u>-</u> .				
5	Clothing and household goods				<u> </u>		
6	Cars and other vehicles						
7	Boats and planes						
8	Intellectual property	X	16	92 462	CHOCK MADKE	m orrom	TI C
9	Securities - Publicly traded		10	03,404.	STOCK MARKE	T QUOT	<u> </u>
10	Securities - Closely held stock						
11	Securities - Partnership, LLC, or		ĺ				
40	trust interests						
12	Securities - Miscellaneous						
13	Qualified conservation contribution -						
44	Historic structures						-
14	Qualified conservation contribution - Other		_				
15	Real estate - Residential						
16	Real estate - Commercial						
17	Real estate - Other						
18	Collectibles	·					—
19	Food inventory						
20 21	Drugs and medical supplies						
22	Taxidermy Historical artifacts						
23	Scientific specimens						
24	Archeological artifacts		l		·		
25	Other (DONATED GOODS)	X	3	35,013.	FMV		
26	Other (AUCTION ITEMS)	X	2	2,238.			
27	Other (GOLF ITEM)	X	$\frac{1}{1}$	1,334.			
28	Other ()						
29	Number of Forms 8283 received by the organic	zation durin	g the tax year for c	ontributions			
	for which the organization completed Form 820			, i			
		, , a, ,			··· ···· ·	Yes	No
30a	During the year, did the organization receive by	v contributio	on any property rec	orted in Part I, lines 1 through	oh 28. that it		
_	must hold for at least three years from the date	•	• • • • •	· ·	•		
	exempt purposes for the entire holding period?					30a	X
ь	If "Yes," describe the arrangement in Part II						
31	Does the organization have a gift acceptance p	oolicy that re	equires the review	of any nonstandard contribu	itions?	31 X	
	Does the organization hire or use third parties	-	•	•			
_	contributions?		J	,,		32a X	
b	If "Yes," describe in Part II						
33	If the organization didn't report an amount in c	olumn (c) fo	r a type of property	y for which column (a) is che	cked,		
	describe in Part II	(-, 10	Alexander	,	- •		
		_					

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Schedule M (Form 990) 2018

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
SCHEDULE M, PART I, COLUMN (B):
NUMBER OF DONORS
SCHEDULE M, LINE 32B:
STOCK CONTRIBUTIONS THROUGH EVENTS THAT USE THIRD PARTY SOLICITORS, AND
INVESTMENT MANAGER TO SELL STOCK CONTRIBUTIONS UPON RECEIPT.

Schedule M (Form 990) 2018

832142 10-18-18

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. ► Attach to Form 990 or 990-EZ.

Open to Public

OMB No 1545-0047

Department of the Treasury ► Go to www.irs.gov/Form990 for the latest information. Internal Revenue Service

Inspection

Name of the organization

MARINE CORPS SCHOLARSHIP FOUNDATION, INC **Employer identification number** 22-1905062

Schedule O (Form 990 or 990-EZ) (2018)

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: FOUNDED IN 1962, THE MARINE CORPS SCHOLARSHIP FOUNDATION IS THE NATION'S OLDEST AND LARGEST PROVIDER OF NEED-BASED SCHOLARSHIPS TO MILITARY CHILDREN. FOR MORE THAN 55 YEARS, WE'VE BEEN PROVIDING ACCESS TO AFFORDABLE EDUCATION FOR THE CHILDREN OF MARINES AND NAVY CORPSMAN ATTENDING POST-HIGH SCHOOL, UNDER-GRADUATE AND CAREER TECHNICAL EDUCATION PROGRAMS. IN THAT TIME, WE HAVE PROVIDED OVER 40,000 SCHOLARSHIPS VALUED AT OVER \$125 MILLION.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS: IN 2018 ALONE, THE MARINE CORPS SCHOLARSHIP FOUNDATION AWARDED \$7.7 MILLION TO MORE THAN 2,300 SONS AND DAUGHTERS OF MARINES AND NAVY CORPSMEN IN ALL 50 STATES. THIS CRITICAL SUPPORT COMES AT A TIME WHEN THE RISING COST OF EDUCATION FAR EXCEEDS THE AVERAGE MARINE FAMILY'S INCOME. THE RESULT IS A LANDSCAPE IN WHICH THOUSANDS OF PROMISING YOUNG AMERICANS FIND THEMSELVES PRICED OUT OF THE AMERICAN DREAM THEIR PARENTS SERVED TO DEFEND. IT'S AN UNEVEN BURDEN, AND ONE WE'RE DETERMINED TO CORRECT. WITH THE EAGLE, GLOBE, AND ANCHOR IN OUR LOGO, WE ALWAYS HOLD OURSELVES TO THE HIGHEST STANDARDS OF THE MARINE CORPS. THE RESULT IS AN APPROACH DRIVEN BY DONOR INTENT AND ANCHORED IN OUTCOMES FOR MARINES, THEIR FAMILIES, AND AMERICA'S FUTURE. THE MARINE CORPS SCHOLARSHIP FOUNDATION IS NOT ONLY A PROVEN STEWARD, DRIVEN BY OUTCOMES AND THE MOST POWERFUL SUCCESS METRICS IN OUR FIELD - WE'RE ALSO THE ONLY SCHOLARSHIP PROGRAM PROVIDING DEDICATED SUPPORT TO CHILDREN OF MARINES AND NAVY CORPSMEN THAT SERVED WITH MARINE CORPS UNITS. MEET A FEW OF OUR SCHOLARSHIP RECIPIENTS AND YOU'LL KNOW OUR

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

832211 10-10-18

Employer identification number Name of the organization MARINE CORPS SCHOLARSHIP FOUNDATION, INC 22-1905062 PROGRAM DELIVERS IMPACT FAR BEYOND TUITION ASSISTANCE. OUR SCHOLARS ARE DRIVEN TO DO MORE THAN SUCCEED. THANKS TO A LIFETIME OF MARINE CORPS VALUES, THEY'RE BORN LEADERS. WHEN THAT ABILITY IS MET WITH OPPORTUNITY, THE OUTCOMES ARE TRANSFORMATIONAL, WITH INSPIRING RESULTS FOR MARINE FAMILIES AND AMERICA'S FUTURE. OUR SCHOLARS ARE RAISED ON HONOR, COURAGE, AND COMMITMENT. AND BY THE TIME THEY'RE READY TO PUT THOSE VALUES TO WORK TOWARDS THEIR CAREER GOALS, STATISTICS SHOW THESE SAME YOUNG MEN AND WOMEN WILL BE OUTPERFORMING THEIR PEERS NEARLY 2 TO 1. AMONG OUR SCHOLARSHIP RECIPIENTS: 90 PERCENT GRADUATE OR ON TRACK TO GRADUATE (COMPARED TO 55 PERCENT NATIONALLY); 50 PERCENT FIRST-GENERATION COLLEGE STUDENTS (COMPARED TO 33 PERCENT NATIONALLY); 45 PERCENT ARE ENROLLED IN STEM (SCIENCE, TECHNOLOGY, ENGINEERING, AND MATH) AND HEALTH SCIENCE FIELDS; 70 PERCENT HAVE A GPA OF 3.0 OR HIGHER; 90 PERCENT STUDENT RETENTION FROM THE PREVIOUS ACADEMIC YEAR.

FORM 990, PART VI, SECTION A, LINE 1:

THE BOARD OF DIRECTORS, BY RESOLUTION ADOPTED BY A MAJORITY OF THE ENTIRE BOARD, SHALL APPOINT FROM AMONG THE DIRECTORS AN EXECUTIVE COMMITTEE (WHICH SHALL INCLUDE COMPENSATION AMONG ITS FUNCTIONS), AND FROM AMONG THE DIRECTORS AND, IN THE BOARD'S SOLE DISCRETION, PERSONS WHO ARE NOT DIRECTORS, A CORPORATE GOVERNANCE COMMITTEE (WHICH SHALL INCLUDE NOMINATIONS AMONG ITS FUNCTIONS), A SCHOLARSHIP COMMITTEE, A DEVELOPMENT COMMITTEE, A FINANCE AND INVESTMENT COMMITTEE, AND AN AUDIT COMMITTEE.

DIRECTORS SHALL COMPRISE A MAJORITY OF ANY SUCH STANDING COMMITTEE TO WHICH PERSONS WHO ARE NOT DIRECTORS MAY BE APPOINTED. THE BOARD, IN ITS SOLE DISCRETION, MAY ALSO APPOINT FROM AMONG THE DIRECTORS AND PERSONS WHO ARE NOT DIRECTORS ONE OR MORE OTHER COMMITTEES, EACH OF WHICH SHALL HAVE ONE OR MORE COMMITTEE MEMBERS INCLUDING AT LEAST ONE DIRECTOR. THE NUMBER OF

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DIRECTORS TO BE APPOINTED TO THE EXECUTIVE COMMITTEE SHALL NOT EXCEED TEN
AND SHALL INCLUDE THE CHAIRMAN, THE VICE CHAIRMAN OR, IF THERE IS MORE THAN
ONE, THE VICE CHAIRMAN DESIGNATED TO SUCCEED THE CHAIRMAN IN HIS OR HER
ABSENCE, THE PRESIDENT, THE CHAIR OF EACH OF THE OTHER STANDING COMMITTEES,
THE TREASURER AND THE GENERAL COUNSEL. THE EXECUTIVE COMMITTEE SHALL HAVE
AND EXERCISE THE FULL AUTHORITY OF THE BOARD OF DIRECTORS IN THE MANAGEMENT
OF THE CORPORATION. ALL OTHER COMMITTEES, TO THE EXTENT PROVIDED IN THEIR
RESPECTIVE ENABLING RESOLUTIONS AND NOT RESTRICTED BY LAW, SHALL HAVE AND
EXERCISE SUCH AUTHORITY AS THE BOARD OF DIRECTORS SHALL PRESCRIBE IN THE
MANAGEMENT OF THE CORPORATION. THE DESIGNATION OF ANY COMMITTEE, WHETHER
UNDER THESE BYLAWS OR BY RESOLUTION ADOPTED BY THE BOARD, AND THE
DELEGATION THERETO OF AUTHORITY SHALL NOT OPERATE TO RELIEVE THE BOARD OF
DIRECTORS, OR ANY INDIVIDUAL DIRECTOR, OF ANY RESPONSIBILITY IMPOSED ON IT,
HIM, OR HER BY LAW.

FORM 990, PART VI, SECTION A, LINE 6:

THE FOUNDATION HAS ONLY ONE CLASS OF MEMBERSHIP. NO PERSON MAY BE DENIED MEMBERSHIP ON THE BASIS OF SEX, RACE, CREED, AGE, COLOR, NATIONAL ORIGIN, OR ANY OTHER ILLEGALLY DISCRIMINATORY BASIS. AN APPLICANT FOR MEMBERSHIP SHALL, UPON HAVING FILED WITH THE FOUNDATION A SIGNED WRITTEN DOCUMENT EXPRESSING HIS OR HER INTEREST IN PROMOTING THE PURPOSES OF THE FOUNDATION AND ABSENT GOOD CAUSE FOR DENIAL, BE ACCEPTED AS A MEMBER.

FORM 990, PART VI, SECTION A, LINE 7A:

EACH MEMBER SHALL BE ENTITLED TO CAST ONE VOTE FOR EACH DIRECTOR TO BE
ELECTED IN ANY ELECTION OF DIRECTORS AND FOR THE REMOVAL OF ANY DIRECTOR.
NO MEMBER SHALL HAVE THE RIGHT TO VOTE ON ANY OTHER MATTER.

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FORM 990, PART VI, SECTION B, LINE 11B:

THE RETURN IS PREPARED BY AN OUTSIDE PUBLIC ACCOUNTING FIRM BASED ON

INFORMATION PROVIDED BY MANAGEMENT. ONCE THE DRAFT OF THE FILING IS

REVIEWED AND APPROVED BY MANAGEMENT, THE ORGANIZATION'S BOARD OF DIRECTORS

AND GENERAL COUNSEL REVIEWS THE FORM 990.

FORM 990, PART VI, SECTION B, LINE 12C:

THE BOARD MEMBERS ARE REQUIRED TO READ THE CONFLICT OF INTEREST POLICY ON AN ANNUAL BASIS. THEY MUST SIGN THAT THEY READ IT AND THEN COMPLETE A FORM THAT LISTS ANY CONFLICTS. THERE ARE PERIODIC REVIEWS TO ENSURE COMPLIANCE. AT SUCH TIME AS ANY MATTER COMES BEFORE THE BOARD IN SUCH A WAY AS TO GIVE RISE TO A CONFLICT OF INTEREST, THE INTERESTED OFFICER, IF ATTENDING THE MEETING, OR DIRECTOR SHALL MAKE KNOWN THE POTENTIAL CONFLICT, WHETHER OR NOT DISCLOSED BY HIS OR HER WRITTEN STATEMENT, AND AFTER ANSWERING ANY QUESTIONS THAT MIGHT BE ASKED OF SUCH OFFICER OR DIRECTOR, HE OR SHE SHALL WITHDRAW FROM THE MEETING FOR SO LONG AS THE MATTER SHALL CONTINUE UNDER DISCUSSION. SHOULD THE MATTER BE BROUGHT TO A VOTE, NEITHER THE INTERESTED DIRECTOR NOR ANY OTHER DIRECTOR HAVING A PECUNIARY BENEFIT TRANSACTION WITH THE FOUNDATION SHALL VOTE ON IT. A TWO-THIRDS (66 2/3%) VOTE OF THE ENTIRE BOARD IS REQUIRED TO AUTHORIZE ANY TRANSACTION OR OTHER MATTER IN WHICH AN OFFICER OR DIRECTOR HAS A POTENTIAL CONFLICT OF INTEREST. ALL PROCEEDINGS RELATED TO CONFLICTS OF INTEREST ARE DOCUMENTED IN THE MEETING MINUTES.

FORM 990, PART VI, SECTION B, LINE 15:

CHIEF EXECUTIVE OFFICER (CEO), EXECUTIVE DIRECTOR, MANAGEMENT: CONSULTATION
WITH HR CONSULTANT WHO PROVIDED A SALARY SURVEY OF COMPARABLE SIZED

NONPROFIT ORGANIZATIONS (NPOS) NATIONALLY AND IN THE DC AREA, INCLUDING
OTHER UNITED STATES MARINE CORPS (USMC)-RELATED NPOS. AN ADDITIONAL SURVEY
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WAS SENT TO ALL BOARD MEMBERS REQUESTING ANSWERS TO SPECIFIC

VICE-CHAIR. THE PROCESS WAS LAST UNDERTAKEN IN 2017.

PERFORMANCE-RELATED QUESTIONS. ANALYSIS OF MARKET DATA BY HR CONSULTANT AND PROFESSIONALS IN THE FIELD, COUPLED WITH SCOPE AND DEMANDS OF THE JOB, WAS PROVIDED DIRECTLY TO THE BOARD VICE-CHAIR. RECOMMENDED COMPENSATION WAS PROVIDED THROUGH WRITTEN COMMUNICATION TO MEMBERS OF THE EXECUTIVE COMMITTEE FOR APPROVAL, WITH EVIDENCE OF APPROVAL BEING MAINTAINED BY BOARD

OFFICERS, KEY EMPLOYEES: CONSULTATION WITH HR CONSULTANT, WHICH INCLUDES SALARY SURVEYS FOR RESPECTIVE POSITIONS AND/OR INTERVIEWS OF OTHER SIMILAR NPOS, AND CONSULTATION WITH EXECUTIVE RECRUITERS REGARDING THEIR RECOMMENDED SALARY BASED ON NATURE AND DUTIES OF THE POSITION. INFORMATION REVIEWED BY PRESIDENT/CEO AND DOCUMENTED BY THE HR CONSULTANT. THE PROCESS WAS LAST UNDERTAKEN IN FY 2018.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990: AL, AR, AZ, CA, CT, FL, GA, HI, IL, KS, KY, LA, MA, MD, MI, MN, MS, NC, NH, NJ, NM, NY, OK, OR, PA RI, SC, TN, UT, VA, WI, WV

FORM 990, PART VI, SECTION C, LINE 19:

THE FOUNDATION PUBLISHES AN ANNUAL REPORT THAT INCLUDES FINANCIAL DATA. THE ANNUAL REPORT, AS WELL AS AUDITED FINANCIAL STATEMENTS, ARE POSTED TO THE WEBSITE. THE GOVERNING DOCUMENTS AND CONFLICT OF INTEREST STATEMENT ARE AVAILABLE UPON REQUEST.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

REVERSAL OF GRANT EXPENSES

48,717.

CHANGE IN VALUES OF OBLIGATIONS UNDER CHARITABLE TRUSTS

-21,884.

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