Return of Organization Exempt From Income Tax

Department of the Treasury Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 Inspection

AF	or the	e 2023 calendar year, or tax year beginning an	a enaing							
B c	heck if pplicabl	C Name of organization		D Employer identific	cation number					
	Addre	ARKANSAS SINGLE PARENT SCHOLARSHIP FU	ND	_						
	Name chang	Doing business as		71-07040	88					
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number						
	Final return	PO BOX 854		479-927-						
	termin ated			G Gross receipts \$ 2,800,532.						
	Amen	SPRINGDALE, AR 72704		H(a) Is this a group re						
	Application	F Name and address of principal officer: UENN MOREHEAD		for subordinates? Yes X No						
	pendir	SAME AS C ABOVE		H(b) Are all subordinates in	ncluded? Yes No					
<u> </u>	ax-ex	empt status: X 501(c)(3) 501(c)() (insert no.) 4947(a)(1) or 527	If "No," attach a	list. See instructions					
	Vebsi			H(c) Group exemptio						
K F	orm of	organization: X Corporation Trust Association Other	L Year	of formation: 1990 N	M State of legal domicile; AR					
Pa	rt I	Summary								
a)		Briefly describe the organization's mission or most significant activities: $\underline{\mathrm{THE}}$								
ü		PARENT SCHOLARSHIP FUND IS TO ENABLE SIN	GLE PAI	RENTS TO OBT	AIN					
rna	2	Check this box if the organization discontinued its operations or disposit	osed of more	than 25% of its net ass	1					
OVE	3	Number of voting members of the governing body (Part VI, line 1a)		3	14					
2		Number of independent voting members of the governing body (Part VI, line 1b)			14					
es 8		Total number of individuals employed in calendar year 2023 (Part V, line 2a)			22					
Ϋ́Ε	6	Total number of volunteers (estimate if necessary)		6	413					
Activities & Governance	l			7a	0.					
_	b	Net unrelated business taxable income from Form 990-T, Part I, line 11	<u></u>		0.					
				Prior Year	Current Year					
ē	l	Contributions and grants (Part VIII, line 1h)		1,240,937.	973,611.					
en	l	Program service revenue (Part VIII, line 2g)		0.	0.					
Revenue	ı	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		104,036.	344,753.					
_	l	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	12,663.					
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,344,973.	1,331,027.					
	l	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		10,121.	23,482.					
	l	Benefits paid to or for members (Part IX, column (A), line 4)		0. 1,232,754.	0.					
Ses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		1,232,734.	1,265,021.					
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) 454, 7	722	0.	0.					
Ϋ́	_ b			2,017,314.	1 670 050					
_	٠٠' ا	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		3,260,189.	1,679,958. 2,968,461.					
	l	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		-1,915,216.	-1,637,434.					
_ v		Revenue less expenses. Subtract line 18 from line 12		eginning of Current Year	End of Year					
Net Assets or und Balances	200	Total assets (Part X, line 16)		9,598,450.	8,132,741.					
Sse Bala	20			222,749.	179,608.					
let/	21 22	Total liabilities (Part X, line 26) Net assets or fund balances. Subtract line 21 from line 20		9,375,701.	7,953,133.					
_	rt II	Signature Block		J, 313, 101.	7,555,155					
		Ities of perjury, I declare that I have examined this return, including accompanying schedul	es and statem	ents, and to the hest of my	knowledge and helief it is					
		t, and complete. Declaration of preparer (other than officer) is based on all information of v			knowledge and boller, it is					
ii uo,	001100	t, and complete. Declaration of proparer (editor than embery to baced on an information of t	villori propuror	nao any knowleage.						
Sigr	1	Signature of officer		Date						
Her		JENN MOREHEAD, EXECUTIVE DIRECTOR								
	-	Type or print name and title								
		Print/Type preparer's name Preparer's signature		Date Check	PTIN					
Paid		JOHN D. EVANS		08/15/24 if self-employ	P00736358					
	arer	Firm's name LANDMARK PLC, CPAS			1-0355269					
	Only	Firm's address 2003 SOUTH HORSEBARN ROAD, SUITE	4	1 2 2						
		ROGERS, AR 72758		Phone no. (4	79) 636-4461					
May	the If	RS discuss this return with the preparer shown above? See instructions			X Yes No					

4d	Other program services	(Describe on Schedule O.)

(Expenses \$ including grants of \$

) (Revenue \$

4e Total program service expenses

1,972,032.

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Form 990 (2023) ARKANSAS SINGLE PARENT SCHOLARSHIP FUND 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? See instructions	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		X
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		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
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,	Ť		
-	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? <i>If</i> "Yes," <i>complete</i>	<u> </u>		
Ü	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for	۰		1
9	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
		9		X
40	If "Yes," complete Schedule D, Part IV	9		
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	40	Х	
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10		
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		37	
	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		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		X
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		X
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	Х	

Part IX, column (A), line 27 if "Yes," complete Schedule I, Parts I and III 22 I Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule I, Part III and				Yes	No
23 Dit the organization answer "Yes" to Part VII Section A, line 3. 4, or 5, about Compensation of the organization sourcet and former officers, directors, trustees, key employees, and highest compensated employees? "If "Yes," complete Schedule I, Part II "Yes," asswer lines 24th through 24th and complete Schedule I, Part II "Yes," asswer lines 24th through 24th and complete Schedule I, Part II "Yes," asswer lines 24th through 24th and complete Schedule II I "Yes," asswer lines 24th through 24th and complete Schedule II I I I I I I I I I I I I I I I I I	22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
and former officiars, directors, frustees, key employees, and highest compensated employees? If "Yes," complete Schedule J. 24a Did the organization have a tax exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," canvel lines 24b through 24d and complete Schedule K If "No," go to line 26a. 24b Did the organization mixest any proceeds of fax-exempt bonds beyond a temporary period exception? 24b Did the organization mixest any proceeds of fax-exempt bonds outstanding at any time during the year to defease any tax-exempt bonds? 24c Did the organization are as an 'on behalf of issuer for bonds outstanding at any time during the year? 24d Did the organization as an 'on behalf of issuer for bonds outstanding at any time during the year? 24d Did the organization are as an 'on behalf of issuer for bonds outstanding at any time during the year? 24d Did the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization provides of provides Schedule L, Part I . 25a X 25b Is the organization provide a grown of the assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II . 26b Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor? If "Yes," complete Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions; 27c A Soft controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part IV, "Yes," complete Schedule L, Part IV 28b X X A farmly member of any of themeter of the organization organization foreceive controlled entity within the me		Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
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Schedule K. If "No." go to line 25a bill the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax exempt bonds? did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax exempt bonds? did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I or that the transaction has not been reported on any of the organizations prior Forms 900 or 990.E27 If "Yes," complete Schedule L, Part I or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part I or Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity of family member of any of these persons? If "Yes," complete Schedule L, Part I or Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor? If "Yes," complete Schedule L, Part IV, instructions for applicable filling thresholds, conditions, and exceptions); a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV as A family member of any individual described in line 28a or 28b? If "Yes," complete Schedule II, Part IV as A family member of any individual described in line 28a or 28b? If "Yes," complete Schedule II, Part IV as Did the organization receive more than 425,000 in noncash contributions? If "Yes," complete Schedule	24a				
b Did the organization mental any proceeds of tax exempt bonds beyond a temporary period exception? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax exempt bonds? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25e Section 501(5)(3, 501(6)4), and 501(c)(29 organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule I, Part I 25e X b is the organization aware that it engaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule I, Part I 25e X b is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization sprior Forms 990 or 990 E27 If "Yes," complete Schedule I, Part II 25e X Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or former officer, director, trustee,			١		, v
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25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? # "yes," complete Schedule L, Part I 25a X b is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization sprior Forms 990 or 990 EZ? # "Yes," complete Schedule L, Part I 25b X 26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, truste, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? # "Yes," complete Schedule L, Part II 26	Ч				\vdash
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b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization sprior Forms 99 or 990 c 990 E27 if "Yes," complete Schedule L, Part I 25b IX 200 the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II 27 IX 28 IX 28 IX 28 IX 29 IX	Lou	· · · · · · · · · · · · · · · · · · ·	25a		x
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Schedule L, Part I 26 b X 10 bid the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II 26 X 11 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV 28a X b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV 28b X c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV 28b X 29 Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M 29 X 10 Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M 29 X 11 Did the organization injudicate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 X 12 Did the organization injudicate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 X 13 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301,7701-37 If "Yes," complete Schedule R, Part I, III, or IV, and Part V, Iine 1 34 X X 15 Did the organization have a controlled entity within the meaning of section 512(b)(13	~				
Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II 26 X 27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III 27 X 28 Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV 18 A family member of any of threse persons? If "Yes," complete Schedule L, Part IV 18 A family member of any individual described in line 288? If "Yes," complete Schedule L, Part IV 18 A 18 A standard or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV 18 B 18 A		\cdot	25b		X
or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II 26	26	, , , , , , , , , , , , , , , , , , ,			
controlled entity or family member of any of these persons? // "Yes," complete Schedule L, Part // Livete, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? // "Yes," complete Schedule L, Part // instructions for applicable fling thresholds, conditions, and exceptions?" (See the Schedule L, Part I// instructions for applicable fling thresholds, conditions, and exceptions): a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? // "Yes," complete Schedule L, Part I// 28b X A family member of any individual described in line 28a? // "Yes," complete Schedule L, Part I// 28b X X D A family member of any individual described in line 28a? // "Yes," complete Schedule L, Part I// 28b X X Did the organization receive more than \$25,000 in noncash contributions? // "Yes," complete Schedule M 29 X X Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? // "Yes," complete Schedule N, Part I 31 X X Did the organization includiate, terminate, or dissolve and cease operations? // "Yes," complete Schedule N, Part I 31 X X Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? // "Yes," complete Schedule N, Part I 31 X X Did the organization or low of the self of the organization related to any tax-exempt or taxable entity? // "Yes," complete Schedule R, Part II, Ill, or IV, and Part V, line 1 34 X X Sab Did the organization related to any tax-exempt or taxable entity? // "Yes," complete Schedule R, Part V, line 2 35 Did the organization or part of the organization or neceive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(3)? // "Yes," complete Schedule R, Part V, line 2 35 Did the organization conduct more than 5% of its ac					
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Part V, line 1 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O 28 X Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V 1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	34		-55		
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b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V 1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable apyments to vendors and reportable gaming	35a				_
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36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 36 X 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V 10 In Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			35b		
If "Yes," complete Schedule R, Part V, line 2 36 X 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V 10 In Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	36				
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V Yes No 1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			36		X
Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V Yes No 1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	37				
Note: All Form 990 filers are required to complete Schedule O Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V Yes No 1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V Yes No 1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	38				
Check if Schedule O contains a response or note to any line in this Part V Yes No 1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	D-	Note: All Form 990 filers are required to complete Schedule 0	38	X	
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	Pa				
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 1 b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		Uneck if Schedule U contains a response or note to any line in this Part V			L.
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1.	Enter the number reported in box 3 of Form 1006. Enter 0, if not applicable.		res	NO
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	_				
	Ü		1c		

ARKANSAS SINGLE PARENT SCHOLARSHIP FUND

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

					Yes	No
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		2.2			
	filed for the calendar year ending with or within the year covered by this return	2a	22	01	v	
	If at least one is reported on line 2a, did the organization file all required federal employment tax return	าร?		2b	X	Х
	-			3a		
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule			3b		
48	At any time during the calendar year, did the organization have an interest in, or a signature or other a			4a		Х
h	financial account in a foreign country (such as a bank account, securities account, or other financial a If "Yes," enter the name of the foreign country	CCOunt):	4 a		- 22
b	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Ac	counts				
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
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a						
	any contributions that were not tax deductible as charitable contributions?			6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contribution					
	were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	vices pr	ovided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	ıs requi	red			
	to file Form 8282?	1 1		7с		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				v
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co		'	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra	-	0 00 100 110 100	7f		
g h	If the organization received a contribution of qualified intellectual property, did the organization file Fo If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			7g 7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained			711		
Ŭ	sponsoring organization have excess business holdings at any time during the year?	by the		8		
9	Sponsoring organizations maintaining donor advised funds.					
а	Did the arrangement arrangement of a real control of the best of the control of t			9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter:					
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter:					
а	Gross income from members or shareholders	11a				
b	Gross income from other sources. (Do not net amounts due or paid to other sources against					
40-	amounts due or received from them.)	11b		40-		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041?		12a		
13	If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers.	120				
	Is the organization licensed to issue qualified health plans in more than one state?			13a		
	Note: See the instructions for additional information the organization must report on Schedule O.					
b	Enter the amount of reserves the organization is required to maintain by the states in which the					
	organization is licensed to issue qualified health plans	13b				
С	Enter the amount of reserves on hand	13c				
				14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedul			14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner					٠,,
	excess parachute payment(s) during the year?			15		Х
40	If "Yes," see the instructions and file Form 4720, Schedule N.		-0	40		v
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	incom	er	16		X
17	If "Yes," complete Form 4720, Schedule O. Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any act	tivitios				
.,	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?			17		
	If "Yes," complete Form 6069.			- '		

Form 990 (2023) ARKANSAS SINGLE PARENT SCHOLARSHIP FUND /1-0704088 Page
Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

	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 14			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b 14			
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		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3_		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes." provide the names and addresses on Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	on Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	X	
	Other officers or key employees of the organization	15b	Х	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed AR			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3))	only)	availal	ole
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	l finan	cial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	THE ORGANIZATION - 479-927-1402			
	PO BOX 854 SPRINGDALE AR 72764			

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

 List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.
- Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

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

- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

Compensation Comp	(A) Name and title			(C) Position				(D) Reportable	(E) Reportable	(F) Estimated	
RUTHANNE HILL	Name and title	hours per	box	, unles	ss per	son is	s both	an	compensation	compensation	amount of
EXECUTIVE DIRECTOR		hours for related organizations below line)	Individual trustee or director	In stitutio nal tru ste e	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC/	(W-2/1099-MISC/	from the organization and related
C2 SHARMANE ANDREWS C2.00 X X X X 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.		40.00								_	
VICE PRECIDENT	-				X				124,028.	0.	0.
O. DAN BREWER		2.00									
DIRECTOR	-		X		X				0.	0.	0.
(4) RYAN MORROW		0.50									
Director X			Х						0.	0.	0.
S VENTRELL THOMPSON		0.50	ļ								
Director X		0.50	Х						0.	0.	0.
Color		0.50	ļ								
DIRECTOR		0.50	X						0.	0.	0.
Color		0.50									•
RESIDENT X		0 00	X						0.	0.	0.
SETSY BAKER		2.00	3,7		37					0	0
DIRECTOR		0 50	X		X				0.	0.	0.
O		0.50	·							0	0
DIRECTOR X		0 50	Λ						0.	0.	0.
Color		0.50	v							0	0
DIRECTOR		0.50	Δ						0.	0.	0.
Column		0.50	v						_	0	0
DIRECTOR X		0.50	Λ						0.	0.	0.
DIRECTOR		0.50	v						0	0	0
DIRECTOR		0.50	21						0.	0.	0.
TREASURER		0.30	x						0.	0.	0.
X X 0. 0. 0.		0.50							•		
O.50 DIRECTOR X O.			x		x				0.	0.	0.
DIRECTOR X 0. 0. 0. (15) EDDIE THOMAS 0.50 X 0. 0. 0. 0.		0.50									
DIRECTOR X 0. 0. 0.			x						0.	0.	0.
DIRECTOR X 0. 0. 0.		0.50	T-								3.
	DIRECTOR		Х						0.	0.	0.

332007 12-21-23 Form **990** (2023)

Section A. Officers, Directors, Trust	ees, Key Emp	ploy	ees,	anc	Hiç	ghes	t C	ompensated Employee	s (continued)				
(A)	(B)			_ (0				(D)	(E)			(F)	
Name and title	Average	Position (do not check more than one		Reportable Report			Es	stimate	ed				
	hours per	box	, unles	nless person is both an and a director/trustee)			n an	compensation	compensation	on	ar	nount	of
	week		uer an	iu a di	recto	π≀trus T	ree)	from from relate				other	
	(list any	rector						the	organization			pensa	
	hours for related	or di	e e			ated		organization	(W-2/1099-MIS		I		
	organizations	ustee	trust		au.	bens		(W-2/1099-MISC/	1099-NEC)	,			
	below	ualtr	ional		ploye	e col		1099-NEC)				d relati anizatio	
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				orga	ailizati	JI 15
	,	드	트	0	<u>~</u>	± 5	Œ						
1b Subtotal								124,028.		0.			0.
c Total from continuation sheets to Part VII	. Section A							0.		0.			0.
d Total (add lines 1b and 1c)								124,028.		0.			0.
2 Total number of individuals (including but no									000 of reportable	,			
compensation from the organization						,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	ooo or roportaion				1
												Yes	No
3 Did the organization list any former officer,	director truste	م مد	(AV 6	mnl	OVA	e or	hia	hest compensated emp	lovee on	1			
,	,	,	,	•	,	1	_		,		3		Х
line 1a? If "Yes," complete Schedule J for su 4 For any individual listed on line 1a, is the su											3		
•	•							•	•		4		Х
and related organizations greater than \$150											4		- 22
5 Did any person listed on line 1a receive or a	•				•			•			_		Х
rendered to the organization? If "Yes," comp Section B. Independent Contractors	<u> olete Schedule</u>	e J to	or su	ıch <u>r</u>	oers	on .					5		Λ
								t i t t t	100,000 - f				
1 Complete this table for your five highest cor										bensat	tion fro	וווכ	
the organization. Report compensation for t	ne calendar ye	ear e	ndir	ng w	ith c	or wi	thin T		ear.				
(A) Name and business	addross	NT/	\ \ TT	7				(B) Description of s	orvicos	_)) omno	ز) nsatioı	2
- Name and business	audiess	TAC	ONE	<u>. </u>			\dashv	Description of s	ei vices		ompe	iisalioi	
							\dashv						
							_						
2 Total number of independent contractors (in	cluding but no	ot lin	nited	d to t	thos	se lis	ted	above) who received mo	ore than				
\$100,000 of compensation from the organiz	ation				()							

Form 990 (2023) ARKANSA
Part VIII Statement of Revenue

	Check if Schedule O contains a response or note to any line in this Part VIII									
		·	_	(A)	(B)	(C)	(D)			
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under			
					lunction revenue	business revenue	sections 512 - 514			
S S	1 :	a Federated campaigns1a								
Contributions, Gifts, Grants and Other Similar Amounts		o Membership dues 1b								
جَ ۾		Fundraising events 1c								
fts,		d Related organizations 1d								
ig ig		e Government grants (contributions)	211,380.							
Sin		All other contributions, gifts, grants, and	,							
ig ig		similar amounts not included above	762,231.							
흕		Noncash contributions included in lines 1a-1f 1g \$,							
o d				973,611.						
Oa		1 Total. Add lines 1a-1f	Business Code	373,011.						
<u>i</u>										
er ne										
n S										
gra Re		d								
Program Service Revenue		•								
"		All other program service revenue								
		Total. Add lines 2a-2f								
	3	Investment income (including dividends, intere		110 700			110 700			
		other similar amounts)		118,722.			118,722.			
	4	Income from investment of tax-exempt bond p	roceeds							
	5	Royalties								
		(i) Real	(ii) Personal							
		Gross rents 6a								
		Less: rental expenses 6b								
		Rental income or (loss)								
		d Net rental income or (loss)								
	7 8	a Gross amount from sales of (i) Securities	(ii) Other							
		assets other than inventory 7a 1,695,536.								
	١	Less: cost or other basis								
an l		and sales expenses 7b 1,469,505.								
ther Revenue	(Gain or (loss) 7c 226,031.								
æ		d Net gain or (loss)		226,031.			226,031.			
her	8 8	a Gross income from fundraising events (not								
გ		including \$ of								
		contributions reported on line 1c). See								
		Part IV, line 18								
		Less: direct expenses8b								
		Net income or (loss) from fundraising events								
	9 8	a Gross income from gaming activities. See								
		Part IV, line 19								
	ı	Less: direct expenses 9b								
		Net income or (loss) from gaming activities	 T							
	10 a	a Gross sales of inventory, less returns								
		and allowances10a								
	ı	Less: cost of goods sold10b								
\perp	(Net income or (loss) from sales of inventory								
_ω			Business Code							
o o	11 a	OTHER	900099	12,663.	12,663.					
Miscellaneous Revenue	ı	o								
e sel	(:								
∄iš	(d All other revenue								
_	(Total. Add lines 11a-11d		12,663.						
	12	Total revenue. See instructions		1,331,027.	12,663.	0.	344,753.			

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (**D**) Fundraising (C) Management and general expenses Do not include amounts reported on lines 6b. Program service expenses Total expenses 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations 23,482. 23,482. and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 124,029. 55,813. 29,767. 38,449. trustees, and key employees Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages 938,316. 422,242. 225,196. 290,878. 7 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 56,165. 124,811. 29,955. 38,691. Other employee benefits 9 77,865. 35,039. 18,688. 24,138. 10 Payroll taxes 11 Fees for services (nonemployees): Management Legal Accounting Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, 62,453. column (A), amount, list line 11g expenses on Sch O.) 62,453. 26,018. 21,856. 1,301. 2,861. Advertising and promotion 12 13 Office expenses Information technology 14 Royalties 15 14,839. 22,215. 6,256. 43,310. 16 Occupancy 51,509. 22,149. 17,513. 11,847. 17 Travel Payments of travel or entertainment expenses 18 for any federal, state, or local public officials 20,817. 11,866. 8,535. 416. Conferences, conventions, and meetings 19 20 Payments to affiliates 21 7,791. 7,791. Depreciation, depletion, and amortization 22 6,067. 6,067. 23 Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.) 1,306,264. 1,306,264. SCHOLARSHIP AND STUDENT DUES AND SUBSCRIPTIONS 115,243. 1,152. 111,786. 2,305. 37,661. 38,826. 1,165. **FUNDRAISING** 429. d OTHER EXPENSES 1,660. 1,231. e All other expenses 2,968,461. 1,972,032. 541,696. 454,733. Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.

Check here

if following SOP 98-2 (ASC 958-720)

Form 990 (2023)
Part X Balance Sheet

Pai	τx	Balance Sneet							
		Check if Schedule O contains a response or no	te to an	y line in this Part X					
					(A) Beginning of year		(B) End of year		
	1	Cash - non-interest-bearing	212,899.	1	189,427.				
	2	Savings and temporary cash investments			1,688,382.	2	1,259,458.		
	3	Pledges and grants receivable, net			3,675,658.	3	2,105,564.		
	4	Accounts receivable, net			4				
	5	Loans and other receivables from any current of							
		trustee, key employee, creator or founder, sub-	stantial o	contributor, or 35%					
		controlled entity or family member of any of the	ese pers	ons		5			
	6	Loans and other receivables from other disqua							
		under section 4958(f)(1)), and persons describe		6					
S	7	Notes and loans receivable, net				7			
Assets	8	Inventories for sale or use				8			
Ä	9	D ::			26,656.	9	43,968.		
	10a	Land, buildings, and equipment: cost or other							
		basis. Complete Part VI of Schedule D	10a	72,139.	9,346.		2,486.		
	b	Less: accumulated depreciation	50 5=0						
	11	Investments - publicly traded securities	3,985,509.	11	4,531,838.				
	12	Investments - other securities. See Part IV, line		12					
	13	Investments - program-related. See Part IV, line		13					
	14	Intangible assets		14					
	15	Other assets. See Part IV, line 11		15					
	16	Total assets. Add lines 1 through 15 (must eq			9,598,450.	16	8,132,741.		
	17	Accounts payable and accrued expenses		129,617.	17	86,476.			
	18	Grants payable		18					
	19	Deferred revenue				19			
	20	Tax-exempt bond liabilities		l l		20			
	21	Escrow or custodial account liability. Complete				21			
es	22	Loans and other payables to any current or for							
Liabilities		trustee, key employee, creator or founder, sub-							
iak		controlled entity or family member of any of the				22			
_	23	Secured mortgages and notes payable to unre				23			
	24	Unsecured notes and loans payable to unrelate				24			
	25	Other liabilities (including federal income tax, p		I					
		parties, and other liabilities not included on line of Schedule D	s 17-24)	. Complete Part X	93,132.	25	93,132.		
	06			·····	222,749.	<u>25</u> 26	179,608.		
	26	Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, ch		e X	222,747.	20	175,000		
S		and complete lines 27, 28, 32, and 33.	eck Hei						
nce	27				1,188,869.	27	685,411.		
sala	28	Net assets with donor restrictions	8,186,832.	28	7,267,722.				
J E		Organizations that do not follow FASB ASC			0,200,0021		.,,,,		
Fur		and complete lines 29 through 33.	000, 0110						
ō	29	Capital stock or trust principal, or current fund	s			29			
ets	30	Paid-in or capital surplus, or land, building, or e				30			
Ass	31	Retained earnings, endowment, accumulated i				31			
Net Assets or Fund Balances	32	Total net assets or fund balances			9,375,701.	32	7,953,133.		
~	33	Total liabilities and net assets/fund balances		l l	9,598,450.	33	8,132,741.		
	33	lotal liabilities and net assets/fund balances			7,370,430.	33	0,134,		

Form **990** (2023)

	n 990 (2023) ARKANSAS SINGLE PARENT SCHOLARSHIP FUND	71-	07040	188	Pag	ge 1 2
Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI	<u></u>	<u></u>	<u></u>		
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,	, 331	L,0:	27.
2	Total expenses (must equal Part IX, column (A), line 25)	2		, 968		
3	Revenue less expenses. Subtract line 2 from line 1	3		, 637		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	9,	375	7,7	01.
5	Net unrealized gains (losses) on investments	5		214	1,8	66.
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	7,	<u>, 953</u>	3,1	33.
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII	<u></u>	<u></u>	<u></u>		X
			_		Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Э.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			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	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,				
	consolidated basis, or both:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,				
	review, or compilation of its financial statements and selection of an independent accountant?			2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	dule O				

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the

or audits, explain why on Schedule O and describe any steps taken to undergo such audits

Uniform Guidance, 2 C.F.R. Part 200, Subpart F?

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

Form **990** (2023)

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X