SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

Φ Attach to Form 990 or Form 990-EZ. © See separate instructions.

OMB No. 1545-0047

2018

Open to Public to Inspection

Name of the organization	<u></u>						Employe	r identificat	ion number
Global Encounters							20	8	974266
Part Reaso	n for Public Ch	arity Status (All ord	ganizatio	ns must	comple	te this	oart.) (se	e instru	ctions)
Part I Reaso The organization is 1	n for Public Ch not a private foun convention of chur escribed in section or a cooperative harms, city, and su ation operated for (0(b)(1)(A)(iv). (Constate, or local goveration that normally in section 170(b)) ation that normally that the corribed ation that normally on activities related	the benefit of a colleg	(Please coof church each Scheization de junction version versi	heck only nos described of escribed ovith a hose versity own described its support complete of its support to contract to cont	y one organized in sections pital descriptions or organized in sections from a Part II.)	panization ection 1 n 170(b)(scribed in eperated in government m contributed in eceptions	a.) 70(b)(1)(A)(iii). In section by a gove b)(1)(A)(V) nental uni utions, mand (2)	(Attach S 170(b)(1 ernmental	Schedule H.))(A)(iii). Enter the I unit described in the general public up fees, and gross than 33/3 % of its
acquired by 10	y the organization attion organized attain organized attains or more put the check the box that the last box the check than foundation section 509(a)(2)	after June 30, 1975. Ind operated exclusive and operated exclusive and operated exclusive blicly supported organit describes the type and that the organization managers and other	See sected to test vely for the nizations of supposition is not retain than one	tion 509(t for publine benefit described riting orga be III—Fundat or controlle or more	a)(2). (Co ic safety. t of, to p d in secti anization ctionally led direct publicly	see sec conform to on 509(a) and com- integrate tly or ind supporte	Part III.) Ition 509 the function (1) or second income directly bed organized	(a)(4). (se ons of, o ction 509(es 11e the d — y one or zations de	e instructions) or to carry out the (a)(2). See section rough 11h. Type III-Other more disqualified escribed in section
organization organ	on, check this box ust 17, 2006, has persons?	the organization acce	pted any	gift or c	ontribution	on from a	 any of the	•	ــــــــــــــــــــــــــــــــــــــ
and (iii) (Ii) A fami (iii) A 35%) below, the gover ly member of a pe controlled entity	r indirectly controls, on ming body of the supports on described in (i) a of a person described	ported of above? d in (i) or	rganizatio (ii) above	n? .		ns descril	bed in (ii)	11g(i) 11g(ii)
h Provide the (i) Name of supported organization		(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	izations the organization supports. (M) Is the organization (V) Did you notify the organization in col. (i) listed in your governing document? col. (i) of your support?			rou notify hization in of your	(vi) is the organization in col. (i) organized in the U.S.?		(vii) Amount of support
			Yoo	No	You	No	Yes	No	
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	1								
						Ì			
			 		-				
					<u> </u>				
Total									

EIN: 20-8974266

Pari	Support Schedule for Org	ganizations D	escribed in	Sections 17	(VI)(A)(T)(d)O	and 170(b)(1	I)(A)(VI)
	(Complete only if you chec	ked the box	on line 5, 7,	or 8 of Part I.)		
	ion A. Public Support	,			10.0007	1. (-) 0000	/O Total
Cal	endar year (or fiscal year beginning in) o	(a) 2004	(b) 2005	(c) 2008	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add Ilnes 1-3					 	
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the emount shown on line 11, column (f)						
<u>6</u>	tion B. Total Support	J					
	lendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
	Amounts from line 4						
7 8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10 .	L	.l	L	<u> </u>	10	ــــــــــــــــــــــــــــــــــــــ
12	Gross receipts from related activities, et	c. (see instructi	ons)			12	
13	First five years. If the Form 990 is fo organization, check this box and stop h	010	 	nd, third, fourth	n, or fifth tax	year as a secti	on 501(c)(3)
	tion C. Computation of Public Se			1 column /6\		14	%_
14	Public support percentage for 2008 (line					15	
15 16a	Public support percentage from 2007 S 33% % support test - 2008. If the organ and stop here. The organization qualifie	nization did not	check the box	on line 13, and	line 14 is 331/a	% or more, che	ock this box
b	33% % support test - 2007. If the organization quality and stop here. The organization quality and stop here.	nization did not Jalifies as a pub	check a box or licly supported	ilne 13 or 16a, organization .	and line 15 is	33⅓% or more	o, check this
17a	10%-facts-and-circumstances test —2 more, and if the organization meets the organization meets the "facts-and-circumstance" organization meets the organization	facts-and-circu	mstances" test	check this box	and stop here	. Explain in Par	t IV how the
b	10%-facts-and-circumstances test—200 more, and if the organization meets the organization meets the "facts-and-circums Private foundation. If the organization d	"facts-and-circur tances" test. The	mstances" test, e organization qu	check this box alifies as a publi	and stop here. cly supported o	. Explain in Part Irganization .	IV how the

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Page 3 Schedule A (Form 990 or 990-EZ) 2008 Support Schedule for Organizations Described in Section 509(a)(2) Part III (Complete only if you checked the box on line 9 of Part I.) Section A. Public Support (d) 2007 (e) 2008 (f) Total Calendar year (or fiscal year beginning in) p (c) 2006 (b) 2005 (a) 2004 contributions. and Gifts, grants, membership fees received. (Do not include 13,546.00 33,576.00 47122.00 N/A N/A N/A any "unusual grants.") Gross receipts from admissions, merchandise sold or services performed, or facilities fumished in any activity that is related to the 50,672,00 76,988.00 122,766.00 N/A N/A N/A organization's tax-exempt purpose. Gross receipts from activities that are not an N/A N/A 0 0 0 N/A unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on 0 0 N/A N/A 0 N/A its behalf The value of services or facilities furnished by a governmental unit to the 0 N/A NVA NVA organization without charge . . . 110,564.00 174,782,00 64,218.00 NA NA N/A Total. Add lines 1-5 7a Amounts included on lines 1, 2, and 3 0 -NA 0 0 N/A N/A received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the 0 0 N/A N/A N/A 0 N/A N/A 0 NA c Add lines 7a and 7b Public support (Subtract line 7c from 174,782.00 line 6.) Section B. Total Support (c) 2006 (f) Total Catendar year (or fiscal year beginning in) o (a) 2004(b) 2005 (d) 2007 (e) 2008 64,218.00 174,782.00 110,564.00 N/A N/A NA Amounts from line 6 . . 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar N/A n 0 N/A N/A sources , b Unrolated business taxable income (less section 511 taxes) from businesses 0 N/A NA NA O acquired after June 30, 1975 . . . 0 n 0 N/A N/A N/A c Add lines 10a and 10b Net income from unrelated business activities not included in line 10b. whether or not the business is regularly 0 0 0 NA NA NA carried on Other income. Do not include gain or loss from the sale of capital assets 0 NA NA n O NA (Explain In Part IV.) Total support. (Add lines 9, 10c, 11, 13 174,782.00 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 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f) . . . 15 % Public support percentage from 2007 Schedule A, Part IV-A, line 27g . 16 % 16 Section D. Computation of Investment Income Percentage 17 % Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f)). 17 % _18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h 19a 331/3 % support tests-2008. If the organization did not check the box on line 14, and line 15 is more than 331/3 %, and line 17 is not more than 33% %, check this box and stop here. The organization qualifies as a publicly supported organization $\,^{\circ}$ 331/3 % support tests - 2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33/4 %, and line 18 is not more than 331/3 %, check this box and stop here. The organization qualifies as a publicly supported organization of \Box Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions © Schedule A (Form 980 or 990-EZ) 2008

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GLOBAL ENCOUNTERS INC PO BOX 15 RIMFOREST CA 92378

DECLARATION

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Under penalties of perjury, I declare that I have examined the return identified in this letter, including any accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete. I understand that this declaration will become a permanent part of that return.

Signature of officer or trustee

9-20 09

Director of Operations

A Requested info was returned within 30 days of receipt of this request.