Return of Organization Exempt From Income Tax

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.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Inspection

A F	or the	2023 calendar year, or tax year beginning and	dending											
B c	heck if pplicable	C Name of organization		D Employer identifi	cation number									
	Addres	SCRUM ALLIANCE, INC.												
	Name change			20-58250	34									
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/sui	ite E Telephone numbe	r									
	Final return/	7237 CHURCH RANCH BLVD	410											
	termin ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	56,043,217.									
	Ameno	WESTMINSTER, CO 60021		H(a) Is this a group re										
	Application pending			for subordinates										
		SAME AS C ABOVE		H(b) Are all subordinates in										
		empt status: 501(c)(3) X 501(c) (6) (insert no.) 4947(a)(1	or 5	–	list. See instructions									
	Vebsit		1. 7.	H(c) Group exemption										
	orm of ort I	organization: X Corporation Trust Association Other Summary	L Ye	ear of formation: 2006	M State of legal domicile: CO									
1 0			TM ΔT.T	TANCE'S MISS	TON IS TO									
çe		iefly describe the organization's mission or most significant activities: SCRUM ALLIANCE'S MISSION IS TO ROMOTE AND SUPPORT AS A COMMON BUSINESS INTEREST THE SUCCESSFUL												
Governance	l	heck this box if the organization discontinued its operations or disposed of more than 25% of its net assets.												
Veri	l			3	9									
ဗ္	ı	Number of independent voting members of the governing body (Part VI, line 1b)			5									
o ک		Total number of individuals employed in calendar year 2023 (Part V, line 2a)			57									
itie		Total number of volunteers (estimate if necessary)			88									
Activities		Total unrelated business revenue from Part VIII, column (C), line 12			0.									
_	b	Net unrelated business taxable income from Form 990-T, Part I, line 11		7b	0.									
			L	Prior Year	Current Year									
ē	l	Contributions and grants (Part VIII, line 1h)		0.	0.									
en	l	Program service revenue (Part VIII, line 2g)		18,888,213.	19,617,891.									
Revenue		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		109,968.	1,240,220.									
	l	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		19,009,251.	12,350. 20,870,461.									
_		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1-3)		273,915.	276,151.									
	l	5 5 11 5 1 75 1 75 1 75 1		0.	0.									
	45	Benefits paid to or for members (Part IX, column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		6,354,760.	8,050,515.									
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.									
ben	b	Total fundraising expenses (Part IX, column (D), line 25)	0.	•										
Ĕ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		5,634,508.	10,159,698.									
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		12,263,183.	18,486,364.									
	19	Revenue less expenses. Subtract line 18 from line 12		6,746,068.	2,384,097.									
Net Assets or Fund Balances				Beginning of Current Year	End of Year									
sets	20	Total assets (Part X, line 16)		49,636,846.	55,034,460.									
ot As	21	Total liabilities (Part X, line 26)		19,480,012.	18,627,758.									
Ž∄	22	Net assets or fund balances. Subtract line 21 from line 20		30,156,834.	36,406,702.									
	ırt II				. Important and halist it is									
		ties of perjury, I declare that I have examined this return, including accompanying schedul t. and complete. Declaration of preparer (other than officer) is based on all information of v			/ knowledge and belief, it is									
uue,	COLLEC	t, and complete. Decial ation of preparer (other than officer) is based on an information of v	mich prepai	rei nas any knowieuge.										
Sigr	,	Signature of officer		Date										
Her		TRISTAN BOUTROS, CEO												
		Type or print name and title												
		Print/Type preparer's name Preparer's signature		Date Check	PTIN									
Paid		CASSE TATE CASSE TATE		11/05/24 self-employ	P01271193									
Prep	arer	Firm's name KSM BUSINESS SERVICES, INC			5-2123203									
	Only	Firm's address PO BOX 40857												
		INDIANAPOLIS, IN 46240		Phone no. 31	7.580.2000									
May	the IF	S discuss this return with the preparer shown above? See instructions			X Yes No									

Form **8868**

(Rev. January 2024)

Application for Extension of Time To File an Exempt Organization Return or Excise Taxes Related to Employee Benefit Plans

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

File a separate application for each return.

Go to www.irs.gov/Form8868 for the latest information.

	nic filing (e-file). You can electronically file Form 8868 to			•									
	low except for Form 8870, Information Return for Transfe												
request	for Form 8870 must be sent to the IRS in a paper format ((see instrud	ctions). For more details on the elect	ronic filing	g of Form								
<u>8868, vi</u>	sit www.irs.gov/e-file-providers/e-file-for-charities-and-non-p	orofits.											
Caution	If you are going to make an electronic funds withdrawal (direct deb	t) with this Form 8868, see Form 84	53-TE and	l Form 8879-1	TE for payment							
instructi	ons.												
All corp	orations required to file an income tax return other than Fo	orm 990-T	including 1120-C filers), partnership	s, REMICs	s, and trusts								
must us	e Form 7004 to request an extension of time to file income	e tax returi	ns.										
Part I -	dentification												
Type or Name of exempt organization, employer, or other filer, see instructions. Taxpayer identification number													
Print													
File by the	SCRUM ALLIANCE, INC.				20-582	25034							
due date for filing your	te for Number, street, and room or suite no. If a P.O. box, see instructions.												
return. See instruction			ess. see instructions.										
	WESTMINSTER, CO 80021												
Enter th	e Return Code for the return that this application is for (file	e a separat	e application for each return)			01							
	tion Is For		Application Is For			Return							
		Code				Code							
Form 99	0 or Form 990-EZ	01	Form 4720 (other than individual)			09							
	20 (individual)	03	Form 5227			10							
Form 99		04	Form 6069	11									
	0-T (sec. 401(a) or 408(a) trust)	05	Form 8870			12							
	0-T (trust other than above)	06	Form 5330 (individual)			13							
	0-T (corporation)	07	Form 5330 (other than individual)			14							
Form 10		08	remineses (ether than maintaga)										
	ou enter your Return Code, complete either Part II or Part	t III. Part III	. including signature, is applicable o	nlv for an	extension of	<u> </u>							
	ile Form 5330.		,	,									
	application is for an extension of time to file Form 5330, y	ou must ei	nter the following information.										
	an Name		3										
	an Number												
	an Year Ending (MM/DD/YYYY)												
	Automatic Extension of Time To File for Exempt Organi	izations (s	ee instructions)			-							
	pooks are in the care of SCRUM ALLIANCE, I												
			, STE 410 - WESTMI	NSTER	1, CO 8	0021							
Teler	hone No. 317-452-3970		Fax No.		•								
	organization does not have an office or place of business	in the Uni											
	is for a Group Return, enter the organization's four-digit (
box	. If it is for part of the group, check this box	_	ch a list with the names and TINs of										
1 Ir	equest an automatic 6-month extension of time until				npt organizati								
	e organization named above. The extension is for the orga												
X	calendar year 20 23 or												
Ē		. 20	, and ending			, 20							
_		,	, ,		-								
2 If	the tax year entered in line 1 is for less than 12 months, cl	heck reasc	n: Initial return	Final retur	'n								
3a lf	this application is for Forms 990-PF, 990-T, 4720, or 6069	enter the	tentative tax less										
	ry nonrefundable credits. See instructions.	, जात्वा ताष	toritative tax, 1655	3a	\$	0.							
_	•			Ja	Ψ	J •							
 b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b \$ 													
		ayment all	owed as a credit.	3b	\$	0.							

332002 12-21-23

Form 990 (2023) SCRUM ALLIANCE, INC. 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		
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	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		Х
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>			
	Schedule D, Part III	8		Х
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?			
	If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10		x
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.			
_	Part VI	11a	Х	
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
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
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	Х	
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	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
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	Х	
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	Х	
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		х
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		х
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		Х
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

Form 990 (2023) SCRUM ALLIANCE, INC.

Part IV Checklist of Required Schedules (continued)

	Continued)		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		163	110
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		<u> </u>
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
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	25a		
D	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	25b		
26	Schedule L, Part I Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	230		
20	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		Х
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		Х
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	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_
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			l
	"Yes," complete Schedule L, Part IV	28c		_X_
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29		_X_
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			v
0.4	contributions? If "Yes," complete Schedule M	30		<u>X</u>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	32		х
33	Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		
00	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	"		
	Part V, line 1	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
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	35b		
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		<u> </u>
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	37		_X_
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?		7.	
Par	Note: All Form 990 filers are required to complete Schedule O 't V Statements Regarding Other IRS Filings and Tax Compliance	38	Х	
· ui	Check if Schedule O contains a response or note to any line in this Part V			
	Oneon il Solieudie O contains a response di note to any ille in tilis fait v		Vcc	No
10	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 56		Yes	INO
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0	-		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
,	(gambling) winnings to prize winners?	1c	х	
332004	\$ 12-21-23	Form	990	(2023)

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Form 990	(2023)	SCRU	M ALLIANCE,	INC.		20-5825034	Page 5
Part V	St	atements Regardin	a Other IRS Filin	as and 1	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 2a 57			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on 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		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		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).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
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 required			
	to file Form 8282?	7c		
d	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		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
•	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966?	9a		
a b		9b		
10	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter:	30		
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	1		
11	Section 501(c)(12) organizations. Enter:	1		
а	Gross income from members or shareholders			
		1		
	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	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.			
а	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	4		
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
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		X
	If "Yes," see the instructions and file Form 4720, Schedule N.			77
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.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes," complete Form 6069.			

332005 12-21-23

SCRUM ALLIANCE INC. 20-5825034 Form 990 (2023) 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 Section 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 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 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 of officers, directors, trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 6 Did the organization have members or stockholders? 6 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? Х 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? Х 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? Х 8b 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο 10a Did the organization have local chapters, branches, or affiliates? Х 10a 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? Х Х 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe on Schedule O the process, if any, used by the organization to review this Form 990. Х 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Х b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe Х 12c on Schedule O how this was done Did the organization have a written whistleblower policy? Х 13 13 Did the organization have a written document retention and destruction policy? 14 Х 14 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? Х The organization's CEO, Executive Director, or top management official 15a Х Other officers or key employees of the organization 15b 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 Х taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16h Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed $\,$ IN , CA Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. X Own website Another's website X Upon request __ Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records

Form **990** (2023)

SCRUM ALLIANCE, INC. - 317-452-3970

7237 CHURCH RANCH BLVD, STE 410, WESTMINSTER,

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.

(A) Name and title	(B) Average hours per week	(do box	not c	Pos heck i ss per id a di	ition	than o	one n an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)		Institutional trustee	Officer	Key employee Highest compensated employee Former		Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(1) TRISTAN BOUTROS CHIEF EXECUTIVE OFFICER	40.00	х		Х				750,960.	0.	16,278.
(2) RENEE MZYK	40.00	77						750,500.	0.	10,270.
CHIEF COMMUNITY OFFICER- THRU NOV	40.00	1			Х			521,033.	0.	16,205.
(3) ANGELA STECOVICH	40.00							322,0331		
CHIEF OPERATING OFFICER					х			385,979.	0.	29,130.
(4) TRACEE JEAN ALIOTTI	40.00							·		•
CHIEF MARKETING OFFICER					Х			230,820.	0.	15,137.
(5) SEAN KERSTIENS	40.00									
HEAD OF TECHNOLOGY						Х		174,502.	0.	42,359.
(6) LISA REEDER	40.00									
HEAD OF SERVICE PROVIDERS						X		184,489.	0.	30,406.
(7) PAUL BALLEW	40.00								_	
SENIOR SOFTWARE ENGINEER						X		172,434.	0.	29,419.
(8) IAN CARR	40.00									
HEAD OF PRODUCT	1000					X		149,790.	0.	41,167.
(9) DAVID CHAD MUELLER	40.00	-				l		140 604	•	22 542
SENIOR SOFTWARE ENGINEER	10.00					X		142,634.	0.	33,540.
(10) MICHAEL MEISSNER	10.00	.,		,,				42 202	0	0
CHAIR	10 00	Х		Х				43,203.	0.	0.
(11) SOREN FILBERT VICE CHAIR- BEGINING JAN	10.00	Х		х				27 140	0.	0
(12) MARJAN POURAN	10.00	^		^				37,140.	0.	0.
TREASURER	10.00	Х		х				36,255.	0.	0.
(13) EVELYN TIAN	10.00	77						30,233.	0.	<u>_ </u>
SECRETARY	10:00	х		х				33,875.	0.	0.
(14) AANU GOPALD	6.00							3370731		
DIRECTOR		х						31,875.	0.	0.
(15) MICHAEL SCHIEBEL	6.00									
DIRECTOR		Х						27,000.	0.	0.
(16) MALENE MARIE BENDIXEN JACOBSEN	6.00									
DIRECTOR		Х						24,900.	0.	0.
(17) MARC BROWN	6.00									
DIRECTOR- BEGINING JAN		Х						19,125.	0.	0 . Form 990 (2023)

332007 12-21-23

20-5825034

Par	t VII Section A. Officers, Directors, Trus	tees, Key Emp	oloy	ees,	and	iH t	ghes	st C	ompensated Employee	s (continued)					
	(A)	(B)			(0	C)			(D)			(F)			
	Name and title	Average hours per	box	not c , unle: cer ar	ss pe	more rson i	than	h an	Reportable compensation	Reportable compensation	on		stimate nount		
		week (list any hours for related organizations below line)	tee or director	Institutional trustee	Officer P	Key employee	Highest compensated employee		from the organization (W-2/1099-MISC/ 1099-NEC)	from related organization (W-2/1099-MIS 1099-NEC)	ns SC/	fr org an	other pensa om the anizat d relat anizati	e ion ed	
(18)	KEN BERRYMAN	10.00													
VICE	CHAIR- THRU JAN		X		Х				9,440.		0.			0.	
1b	Subtotal								2,975,454.		0.	25	3,6		
	Total from continuation sheets to Part VI								0.		0.	2.5	2 (0.	
	Total (add lines 1b and 1c)								2,975,454.	000 of reportable	0.	<u> </u>	3,6	<u>41.</u>	
2	Total number of individuals (including but n compensation from the organization	ot illilited to tri	ose	IISLE	ual	JOVE	e) vvi	10 16	ceived more than \$100,	000 or reportable	3			21	
	compensation from the organization												Yes	No	
3	Did the organization list any former officer,	director, trust	ee, k	кеу е	empl	loye	e, or	r hig	hest compensated emp	loyee on	ſ				
	line 1a? If "Yes," complete Schedule J for s	uch individual										3		Х	
4	For any individual listed on line 1a, is the su	•							•	•					
_	and related organizations greater than \$150										}	4	Х		
5	Did any person listed on line 1a receive or a					•			•			_		Х	
Sec	rendered to the organization? If "Yes," comtion B. Independent Contractors	plete Schedule	e <i>J f</i>	or st	ıch į	oers	on					5		Λ	
1	Complete this table for your five highest course the organization. Report compensation for	· ·	-								 pensat	tion fro	om		
	(A) Name and business	•					**		(B) Description of s		С		(C) mpensation		

(A)	(B)	(C)
Name and business address	Description of services	Compensation
PWC HOLDINGS NO. 21 LLC	LONG RANGE PLANNING,	
4040 W. BOY SCOUT BLVD , TAMPA, FL 33607	CONSULTING SERVICES	1,391,259.
JACKSONWALKER, LLP		
P.O. BOX 130989, DALLAS , TX 75313-0989	LEGAL SERVICES	661,886.
RAI AMSTERDAM CONVENTION CENTRE, P.O. BOX	EVENT FOOD,	
77777, 1070 MS, AMSTERDAM, NETHERLANDS	BEVERAGE, & FACILITY	429,868.
OREGON CONVENTION CENTER	EVENT FOOD,	
600 NE GRAND AVE , PORTLAND, OR 97232	BEVERAGE, & FACILITY	399,623.
CODAL INC.		
433 VAN BUREN SUITE 205, CHICAGO, IL 60607	MARKETING SERVICES	349,118.
2 Total number of independent contractors (including but not limited to those listed	d above) who received more than	
\$100,000 of compensation from the organization 15		
		000

Form 990 (2023) SCRUM ALLIANCE, INC.
Part VIII Statement of Revenue

			Check if Schedule O contains	a response o	or note to any lin	e in this Part VIII			
					· · · · · · · · · · · · · · · · · · ·	(A)	(B)	(C)	(D)
						Total revenue	Related or exempt	Unrelated	Revenue excluded from tax under
							function revenue	business revenue	sections 512 - 514
SS	1	_	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts			Membership dues						
S S			Fundraising events						
fts,			Related organizations						
ij gi									
ons,			Government grants (contributions)	1e					
utic		T	All other contributions, gifts, grants, an	1 1					
ĕ			similar amounts not included above						
ont		-	Noncash contributions included in lines 1a-1f	1g \$					
O g		n	Total. Add lines 1a-1f		B				
	_		EDUCATION DEVENUE		Business Code	10 422 201	10422201		
<u>ic</u> e	2		EDUCATION REVENUE		611430	18,432,291.	18432291.		
erv		b	EVENT REVENUE		611430	1,185,600.	1,185,600.		
n S		С							
ran 3ev		d							
Program Service Revenue		е							
Ē			All other program service revenue		900099				
		g	Total. Add lines 2a-2f			19,617,891.			
	3	,			st, and				
		other similar amounts)			1,244,785.			1244785.	
	4		Income from investment of tax-exe						
	5		Royalties			12,350.			12,350.
				(i) Real	(ii) Personal				
	6	а	Gross rents 6a						
			Less: rental expenses 6b						
		С	Rental income or (loss) 6c						
		d	Net rental income or (loss)						
	7	а	Gross amount from sales of (i)	Securities	(ii) Other				
			assets other than inventory 7a 35	,168,191.					
		b	Less: cost or other basis						
ē			and sales expenses 7b 35	,172,756.					
her Revenue		С	Gain or (loss) 7c	-4,565.					
Şe			Net gain or (loss)	·		-4,565.			-4,565.
e	8		Gross income from fundraising events						
퉏	_	_	including \$	·					
			contributions reported on line 1c).	_					
			Part IV, line 18	I					
		h	Less: direct expenses						
			Net income or (loss) from fundraisi						
			Gross income from gaming activitie						
	·	_	Part IV, line 19	I					
		h	Less: direct expenses						
			Net income or (loss) from gaming a						
			Gross sales of inventory, less retur						
	10	а	and allowances	I					
		h							
			Less: cost of goods sold						
\dashv		Ü	Net income or (loss) from sales of i	iiv e iilory	Business Code				
S		_			Business Code				
Miscellaneous Revenue	11								
llar ven		b							
sce Be		C	All alla succession						
Ξ̈́			All other revenue						
			Total. Add lines 11a-11d			20 070 461	10615001		1050550
	12		Total revenue. See instructions			20,870,461.	19617891.	0.	1252570.

332009 12-21-23

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 (C) Management and general expenses (**D**) Fundraising 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 8,110. 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 16 268,041. Benefits paid to or for members Compensation of current officers, directors, 2,228,355. 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) 4,632,081. Other salaries and wages 7 Pension plan accruals and contributions (include 145,706. section 401(k) and 403(b) employer contributions) 585,916. Other employee benefits 9 458,457. 10 Payroll taxes Fees for services (nonemployees): Management 655,115. Legal 139,891. Accounting Lobbying Professional fundraising services. See Part IV, line 17 186,900. Investment management fees Other. (If line 11g amount exceeds 10% of line 25, 618,075 column (A), amount, list line 11g expenses on Sch O.) 1,283,315 Advertising and promotion 12 65,811. Office expenses 13 059,254. Information technology 14 Royalties 15 575,769 16 Occupancy 408,309. 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 19 20 Payments to affiliates _____ 21 83,406. Depreciation, depletion, and amortization 22 91,121. 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.) 1,937,021. ADMIN AGENCY & CONTRACT **EVENT EXPENSES** 1,914,108. 589,528. 546,177. MERCHANT FEES EDUCATION AND TRAINING 5.898. e All other expenses 18,486,364. 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

Form 990 (2023)

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

	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			5,151,172.	1	5,863,390		
2	Savings and temporary cash investments			10,437,017.	2	7,731,972		
3	Pledges and grants receivable, net				3			
4	Accounts receivable, net			3,550.	4	9,840		
5	Loans and other receivables from any current or f							
	trustee, key employee, creator or founder, substa	ntial c	ontributor, or 35%					
	controlled entity or family member of any of these	perso	ns		5			
6	Loans and other receivables from other disqualified							
	under section 4958(f)(1)), and persons described		6					
7	Notes and loans receivable, net				7			
8	Inventories for sale or use				8			
9	Prepaid expenses and deferred charges			559,077.	9	603,374		
10a								
			1,421,600.					
b				10c	209,639			
11		31,927,465.		39,545,540				
12		22.654		24 224				
13	. 3			31,384				
14				90,000				
15						949,321		
16				55,034,460				
17		896,5/5.		1,335,592				
		17 505 000		16 521 014				
				17,545,699.		16,531,814		
					21			
22								
00								
			· · · · · · · · · · · · · · · · · · ·					
					24			
25								
	•	17-24).	Complete Part A	1 057 538.	25	760,352		
26						18,627,758		
20				13 / 100 / 012 .	20	10/02///30		
	-	K HOLC	, <u></u>					
27				30.156.834.	27	36,406,702		
		00,200,002		00,100,701				
	· ·	0, 0110						
29		•						
30								
31								
32				30,156,834.		36,406,702		
33						55,034,460		
	7 8 9 10 a b 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32	Loans and other receivables from other disqualific under section 4958(f)(1)), and persons described Notes and loans receivable, net Inventories for sale or use Prepaid expenses and deferred charges Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D Less: accumulated depreciation Investments - publicly traded securities Investments - other securities. See Part IV, line 11 Investments - program-related. See Part IV, line 11 Intangible assets Other assets. See Part IV, line 11 Total assets. Add lines 1 through 15 (must equal Accounts payable and accrued expenses Grants payable Deferred revenue Tax-exempt bond liabilities Escrow or custodial account liability. Complete Pascer or custodial account liability. Complete Pascer or relative to the secure of any of these controlled entity or family member of any of these controlled entity or family member of any of these Secured mortgages and notes payable to unrelated Unsecured notes and loans payable to unrelated Unsecured notes and loans payable to unrelated Other liabilities (including federal income tax, pay parties, and other liabilities not included on lines of Schedule D Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check and complete lines 27, 28, 32, and 33. Net assets with donor restrictions Organizations that do not follow FASB ASC 95 and complete lines 29 through 33. Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equals retained earnings, endowment, accumulated income Total net assets or fund balances	Loans and other receivables from other disqualified persunder section 4958(f)(1)), and persons described in sect Notes and loans receivable, net Inventories for sale or use Prepaid expenses and deferred charges Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D Less: accumulated depreciation Investments - publicly traded securities Investments - other securities. See Part IV, line 11 Intangible assets Other assets. See Part IV, line 11 Intangible assets. Add lines 1 through 15 (must equal line 3: Grants payable Deferred revenue Tax-exempt bond liabilities Escrow or custodial account liability. Complete Part IV of Controlled entity or family member of any of these persons Secured mortgages and notes payable to unrelated third Unsecured notes and loans payable to unrelated third pother liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33. Net assets with donor restrictions Organizations that do not follow FASB ASC 958, check and complete lines 29 through 33. Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment Retained earnings, endowment, accumulated income, of Total Intertained earnings, endowment, accumulated income, of	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) Notes and loans receivable, net Inventories for sale or use Prepaid expenses and deferred charges Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D Less: accumulated depreciation Investments - publicity traded securities Investments - other securities. See Part IV, line 11 Investments - program-related. See Part IV, line 11 Intangible assets Other assets. See Part IV, line 11 Total assets. Add lines 1 through 15 (must equal line 33) Accounts payable and accrued expenses Grants payable Deferred revenue Tax-exempt bond liabilities Escrow or custodial account liability. Complete Part IV of Schedule D Loans and other 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 Secured mortgages and notes payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33. Net assets with donor restrictions Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds Total net assets or fund balances	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 1,421,600. b Less: accumulated depreciation 10b 1,211,961. 223,308. 11 Investments - publicly traded securities 11 Investments - publicly traded securities 12 Investments - other securities. See Part IV, line 11 13 Investments - program-related. See Part IV, line 11 14 Intangible assets 15 Other assets. See Part IV, line 11 15 Total assets. Add lines 1 through 15 (must equal line 33) 16 Total assets. Add lines 1 through 15 (must equal line 33) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 17,525,899. 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Loans and other 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 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 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 Schedule D 26 Total liabilities. Add lines 17 through 25 26 Organizations that tollow FASB ASC 958, check here and complete lines 29 through 33. 27 Net assets with donor restrictions 28 Net assets with donor restrictions 29 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 32 Total net assets or fund balances 30 1,156,834.	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepald expenses and deferred charges 559,077. 9 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 1,421,600. b Less: accumulated depreciation 10b 1,211,961. 223,308. 10c. 11 Investments - publicly traded securities 12 Investments - other securities. See Part IV, line 11 13 Investments - program-related. See Part IV, line 11 14 Intangible assets 9 0,000. 14 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 33) 49,636,846. 16 17 Accounts payable and accrued expenses 18 Grants payable 17,525,899. 19 20 Tax-exempt bond liabilities 18 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Loans and other 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 22 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties 26 Other liabilities not included on lines 17:24). Complete Part X of Schedule D 27 Total liabilities and tone restrictions 28 Net assets with our forner estrictions 29 Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33. Net assets with onor restrictions 29 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 30 Paid-in or capital surplus, or land, building, or equipment fund 30 Paid-in or capital surplus, or land, building, or equipment fund 30 Paid-in or capital surplus, or land, building, or equipment fu		

Pa	T XI Reconciliation of Net Assets								
	Check if Schedule O contains a response or note to any line in this Part XI								
1	Total revenue (must equal Part VIII, column (A), line 12)	1			0,4				
2	Total expenses (must equal Part IX, column (A), line 25)	2			6,3				
3	Revenue less expenses. Subtract line 2 from line 1	3			4,0				
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	30	, 15	6,8	<u>34.</u>			
5									
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	36	40	6,7	02.			
Pa	t XII Financial Statements and Reporting								
	Check if Schedule O contains a response or note to any line in this Part XII					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 O.								
2a	2a Were the organization's financial statements compiled or reviewed by an independent accountant?								
	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:								
	Separate basis X 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	X				
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche								
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the								
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?			За		х			
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required		· · ·						
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b					
				Form	990	(2023)			

332012 12-21-23

SCHEDULE C

Department of the Treasury

Internal Revenue Service

(Form 990)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under Section 501(c) and Section 527

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2023

Open to Public Inspection

If the organization answered "Yes" on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then:

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes" on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then:

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes" on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then:

Section 501(c)(4), (5), or (6) organizations: Complete Part III.

)1(c)(4), (5), or (6) organizat	ions: Complete Part III.		1.		
Nam	ne of orgar				1	Emplo	oyer identification number
_		SCRUM A	LLIANCE, INC.	1. 504()			20-5825034
Ра	rt I-A	Complete if the org	anization is exempt unde	er section 501(c) o	or is a section 52	org	janization.
2	Political of	campaign activity expendit	ation's direct and indirect politica ures gn activities				
Pa	rt I-B	Complete if the org	anization is exempt unde	er section 501(c)(3	3).		
1	Enter the	amount of any excise tax	incurred by the organization und	er section 4955		\$	
			incurred by organization manage				
			n 4955 tax, did it file Form 4720 t				
4a	Was a co	rrection made?					Yes No
		describe in Part IV.					
Pa	rt I-C	Complete if the org	anization is exempt unde	er section 501(c), o	except section 50	01(c)	(3).
1	Enter the	amount directly expended	by the filing organization for sec	ction 527 exempt functi	on activities	\$	
2		0 0	ization's funds contributed to oth	J			
						\$	
3			. Add lines 1 and 2. Enter here ar	•			
			1120-POL for this year?				
5			nployer identification number (Ell				
		·	tion listed, enter the amount paid comptly and directly delivered to a				•
		•	additional space is needed, provi		•	ourato	oogrogatoa laria or a
	•	(a) Name	(b) Address	(c) EIN	(d) Amount paid fr	om	(e) Amount of political
		(a) Name	(b) Address	(6) 2.114	filing organization		contributions received and
					funds. If none, ente	r -0	promptly and directly
							delivered to a separate political organization.
							If none, enter -0
					1		
				1	1		

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

Schedule C (Form 990) 2023

c Total lobbying expenditures

d Grassroots nontaxable amount
e Grassroots ceiling amount
(150% of line 2d, column (e))

Schedule C (Form 990) 2023

2a Lobbying nontaxable amountb Lobbying ceiling amount(150% of line 2a, column(e))

f Grassroots lobbying expenditures

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

the year, did the filing organization attempt to influence foreign, national, state, or gislation, including any attempt to influence public opinion on a legislative matter endum, through the use of: ers? If or management (include compensation in expenses reported on lines 1c through 1i)? Idvertisements? It is to members, legislators, or the public? It ions, or published or broadcast statements? It ions, or published or broadcast statements? It ions, or published or broadcast statements? In other organizations for lobbying purposes? In other organizations, their staffs, government officials, or a legislative body? Indemonstrations, seminars, conventions, speeches, lectures, or any similar means? In other organization in line 1 cause the organization to not be described in section 501(c)(3)? If enter the amount of any tax incurred under section 4912 If enter the amount of any tax incurred by organization managers under section 4912 In organization incurred a section 4912 tax, did it file Form 4720 for this year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).		No Properties of the second se	tion	ount
pislation, including any attempt to influence public opinion on a legislative matter endum, through the use of: ers? Iff or management (include compensation in expenses reported on lines 1c through 1i)? Indivertisements? It to members, legislators, or the public? It too, or published or broadcast statements? It to other organizations for lobbying purposes? It to other organizations, their staffs, government officials, or a legislative body? It demonstrations, seminars, conventions, speeches, lectures, or any similar means? It to through 1i It activities in line 1 cause the organization to not be described in section 501(c)(3)? If enter the amount of any tax incurred under section 4912 If enter the amount of any tax incurred by organization managers under section 4912 If enter the amount of any tax incurred by organization managers under section 4912 If enter the amount of any tax incurred by organization managers under section 4912 If enter the amount of any tax incurred by organization managers under section 4912 If enter the amount of any tax incurred by organization managers under section 4912 If enter the amount of any tax incurred by organization managers under section 4912 If enter the amount of any tax incurred by organization managers under section 4912 If enter the amount of any tax incurred by organization managers under section 501(c)(4), section 501(c)(6).	01(c)(5), d	or sec	tion	
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tions, or published or broadcast statements? to other organizations for lobbying purposes? ontact with legislators, their staffs, government officials, or a legislative body? demonstrations, seminars, conventions, speeches, lectures, or any similar means? ctivities? dd lines 1c through 1i activities in line 1 cause the organization to not be described in section 501(c)(3)? enter the amount of any tax incurred under section 4912 enter the amount of any tax incurred by organization managers under section 4912 ng organization incurred a section 4912 tax, did it file Form 4720 for this year? Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6).	01(c)(5), d	or sec	tion	
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ng organization incurred a section 4912 tax, did it file Form 4720 for this year? Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6).	01(c)(5), d	or sec	tion	
Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6).	01(c)(5), d	or sec	tion	
501(c)(6).	01(c)(5), (or sec	tion	
hatasi'alla all (000/ access) da caracidad asi'illa baccessa o			Yes	N
		4	100	
ubstantially all (90% or more) dues received nondeductible by members? organization make only in-house lobbying expenditures of \$2,000 or less?		2	X	
organization make only inflouse lobbying expenditures of \$2,000 or less? organization agree to carry over lobbying and political campaign activity expenditures from the pr		3	21	
		1		
162(e) nondeductible lobbying and political expenditures (do not include amounts of political				
es for which the section 527(f) tax was paid).				
year		2a		
er from last year		2b		
		2c		
		3		
s were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess				
e organization agree to carryover to the reasonable estimate of nondeductible lobbying and politic	cal			
		4		
		5		
••				
	; Part II-A, lii	nes 1 ar	nd 2 (see	
and Part II-B, line 1. Also, complete this part for any additional information.				
	,		(000	
	Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No answered "Yes." ssessments and similar amounts from members 162(e) nondeductible lobbying and political expenditures (do not include amounts of political es for which the section 527(f) tax was paid). year er from last year ate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues as were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess e organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures. See instructions Supplemental Information	Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) answered "Yes." ssessments and similar amounts from members 162(e) nondeductible lobbying and political expenditures (do not include amounts of political es for which the section 527(f) tax was paid). year ter from last year ate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues as were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess are organization agree to carryover to the reasonable estimate of nondeductible lobbying and political intures next year? amount of lobbying and political expenditures. See instructions Supplemental Information escriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, line	Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III answered "Yes." ssessments and similar amounts from members 162(e) nondeductible lobbying and political expenditures (do not include amounts of political es for which the section 527(f) tax was paid). year er from last year 2a the amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues as were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess e organization agree to carryover to the reasonable estimate of nondeductible lobbying and political intures next year? amount of lobbying and political expenditures. See instructions 5 Supplemental Information escriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 are	Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line answered "Yes." sessments and similar amounts from members 1 1 62(e) nondeductible lobbying and political expenditures (do not include amounts of political es for which the section 527(f) tax was paid). year 2a 2b 2c atte amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues as were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess e organization agree to carryover to the reasonable estimate of nondeductible lobbying and political intures next year? amount of lobbying and political expenditures. See instructions Supplemental Information escriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see

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 Inspection

Name of the organization

SCRUM ALLIANCE, INC.

Employer identification number 20-5825034

Pai	rt I Organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line		imilar Funds or <i>F</i>	Accounts. Complete if the
		(a) Donor advise	ed 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 w	riting that the assets he	eld in donor advised fu	ınds
	are the organization's property, subject to the organization's e	exclusive legal control?		Yes No
6	Did the organization inform all grantees, donors, and donor ad			
	for charitable purposes and not for the benefit of the donor or	donor advisor, or for ar	y other purpose confe	erring
	impermissible private benefit?			Yes No
Pai	rt II Conservation Easements. Complete if the organic	anization answered "Ye	s" on Form 990, Part I	IV, line 7.
1	Purpose(s) of conservation easements held by the organization	n (check all that apply).		
	Preservation of land for public use (for example, recreati	ion or education)	Preservation of a his	storically important land area
	Protection of natural habitat		Preservation of a ce	ertified historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualifie	ed conservation contrib	ution 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				
С				
d	Number of conservation easements included on line 2c acquir	red after July 25, 2006,	and not	
	on a historic structure listed in the National Register	• • •		2d
3	Number of conservation easements modified, transferred, rele			
	year	-		-
4	Number of states where property subject to conservation ease	ement is located		
5	Does the organization have a written policy regarding the period		tion, handling of	
	violations, and enforcement of the conservation easements it I	holds?		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, h			
7	Amount of expenses incurred in monitoring, inspecting, handli	ing of violations, and en	forcing conservation e	easements during the year
8	Does each conservation easement reported on line 2d above s	satisfy the requirements	of section 170(h)(4)(B	B)(i)
	and section 170(h)(4)(B)(ii)?			Yes No
9	In Part XIII, describe how the organization reports conservation			
	balance sheet, and include, if applicable, the text of the footnot	ote to the organization's	financial statements t	that describes the
	organization's accounting for conservation easements.			
Pai	rt III Organizations Maintaining Collections of	Art, Historical Tre	asures, or Other	Similar Assets.
	Complete if the organization answered "Yes" on Form 9	990, Part IV, line 8.		
1a	If the organization elected, as permitted under FASB ASC 958	3, not to report in its rev	enue statement and ba	alance sheet works
	of art, historical treasures, or other similar assets held for publ	lic exhibition, education	, or research in further	rance of public
	service, provide in Part XIII the text of the footnote to its finance	cial statements that des	cribes these items.	
b	If the organization elected, as permitted under FASB ASC 958	3, to report in its revenue	e statement and balan	ce sheet works of
	art, historical treasures, or other similar assets held for public	exhibition, education, o	r research in furtheran	ce of public service,
	provide the following amounts relating to these items.			
	(i) Revenue included on Form 990, Part VIII, line 1			\$
	(m)			^
2	If the organization received or held works of art, historical trea-	sures, or other similar a	ssets for financial gair	n, provide
	the following amounts required to be reported under FASB AS	SC 958 relating to these	items:	
а	Revenue included on Form 990, Part VIII, line 1			\$
	Assets included in Form 990, Part X			<u> </u>
LHA	For Paperwork Reduction Act Notice, see the Instructions		<u></u>	Schedule D (Form 990) 2023

332051 09-28-23

Sobo	dule D (Form 990) 2023 SCRUM A	LLIANCE, II	۵C .					20-58	25034	Dr	ago 2
	t III Organizations Maintaining C			orical Tre	asures, o	Other					ige –
3	Using the organization's acquisition, accession								(00		
	collection items (check all that apply).	,	,	,	Ü	Ŭ					
а	Public exhibition	d		Loan or exc	hange progra	ım					
b	Scholarly research	е			0 1 0						
С	Preservation for future generations										
4	Provide a description of the organization's co	llections and explair	n how th	ev further th	ne organizatio	n's exemi	ot purpo:	se in Part	XIII.		
5	During the year, did the organization solicit o										
	to be sold to raise funds rather than to be ma							\square	Yes		No
Par	t IV Escrow and Custodial Arran								ne 9, or		
	reported an amount on Form 990, Par			· ·				•	,		
1a	Is the organization an agent, trustee, custodi	an, or other intermed	diary for	contribution	s or other as	sets not ir	cluded				
	on Form 990, Part X?								Yes		No
b	If "Yes," explain the arrangement in Part XIII										
									Amount		
С	Beginning balance						1c				
d	Additions during the year						1d				
	Distributions during the year						1e				
	Ending balance						1f				
	Did the organization include an amount on Fo						/?		Yes		No
b	If "Yes," explain the arrangement in Part XIII.	Check here if the ex	planatio	n has been	provided in P	art XIII]
Par	t V Endowment Funds Complete if	the organization ans	wered "	Yes" on For	m 990, Part I	V, line 10.					
		(a) Current year	(b) F	rior year	(c) Two year	s back (d) Three y	ears back	(e) Four	years	back
1a	Beginning of year balance										
b	Contributions										
	Net investment earnings, gains, and losses										
d	Grants or scholarships										
е	Other expenditures for facilities										
	and programs										
f	Administrative expenses										
	End of year balance										
2	Provide the estimated percentage of the curr	ent year end balance	e (line 1ç	g, column (a)) held as:						
а	Board designated or quasi-endowment		_%								
b	Permanent endowment	%									
С	Term endowment	%									
	The percentages on lines 2a, 2b, and 2c show	uld equal 100%.									
За	Are there endowment funds not in the posses	ssion of the organiza	tion tha	t are held ar	nd administer	ed for the			_		
	organization by:									Yes	No
	(i) Unrelated organizations?								3a(i)		
	(m) = 1 · · · · · · · ·								3a(ii)		
b	If "Yes" on line 3a(ii), are the related organiza	tions listed as requir	ed on S	chedule R?					3b		
4	Describe in Part XIII the intended uses of the	organization's endo	wment f	unds.							
Par	t VI Land, Buildings, and Equipm										
	Complete if the organization answered	d "Yes" on Form 990	, Part IV	<u>',</u> line 11a. S	ee Form 990	, Part X, lii	ne 10.				
	Description of property	(a) Cost or o	ther	(b) Cost	or other	(c) Ac	cumulate	ed	(d) Book	value	∍
		basis (investr	nent)	basis	(other)	depi	eciation				

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		460,813.	410,699.	50,114.
d Equipment		802,210.	642,685.	159,525.
e Other		158,577.	158,577.	0.
Total. Add lines 1a through 1e. (Column (d) must equa	al Form 990 Part X line 1	Oc. column (R))		209,639.

Schedule D (Form 990) 2023

chedule D (Form 990) 2023 SCRUM ALLIAN	ICE, INC.	20	-5825034 Page
Part VII Investments - Other Securities Complete if the organization answered "Yes" o	n Form 000 Dort IV line	11b See Form 000 Part V line 12	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or en	d-of-vear market value
	(b) Dook value	(c) Method of Valuation. Cost of Cit	d of year market value
Financial derivatives Closely held equity interests			
N 011			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
otal. (Col. (b) must equal Form 990, Part X, line 12, col. (B))			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" of	n Form 990, Part IV, line		
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or en	d-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
otal. (Col. (b) must equal Form 990, Part X, line 13, col. (B)) Part IX Other Assets			
Complete if the organization answered "Yes" o	n Form 990 Part IV line	11d See Form 990 Part Y line 15	
	Description	Tru. Gee Form 390, Fart X, line 13.	(b) Book value
(1)	2000 I ptiori		(b) Book value
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
otal. (Column (b) must equal Form 990, Part X, line 15, col. Part X Other Liabilities	(B))		
Complete if the organization answered "Yes" o	n Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 25	j.
(a) Description of liability	<u> </u>		(b) Book value
(1) Federal income taxes			

(1) Federal income taxes
(2) LEASE LIABILITY
(3)
(4)
(5)
(6)
(7)
(8)
(9)

Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))
(5)
(6)
(7)
(8)
(9)

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ... X

Schedule D (Form 990) 2023

Pa	rt XI	Reconciliation of Revenue per Audited Financial Statement	s With	n Revenue per Re	turn	9
		Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1	Total r	evenue, gains, and other support per audited financial statements			1	24,549,332.
2	Amou	nts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net ur	realized gains (losses) on investments	2a	3,865,771.		
b	Donate	ed services and use of facilities	2b			
С		eries of prior year grants	2c			
d	Other	(Describe in Part XIII.)	2d			
е	Add lir	nes 2a through 2d			2e	3,865,771.
3	Subtra	act line 2e from line 1			3	20,683,561.
4		nts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Invest	ment expenses not included on Form 990, Part VIII, line 7b	4a	186,900.		
b	Other	(Describe in Part XIII.)	4b			
С		nes 4a and 4b			4c	186,900.
5	Total r	evenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	20,870,461.
Pa	rt XII	Reconciliation of Expenses per Audited Financial Statemen	ts Wit	th Expenses per R	Retur	n
		Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1	Total e	expenses and losses per audited financial statements			1	18,299,464.
2	Amou	nts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donate	ed services and use of facilities	2a			
b	Prior y	ear adjustments	2b			
С	Other	losses	2c			
d	Other	(Describe in Part XIII.)	2d			
е	Add lir	nes 2a through 2d			2e	0.
3		act line 2e from line 1			3	18,299,464.
4		nts included on Form 990, Part IX, line 25, but not on line 1:				
а	Invest	ment expenses not included on Form 990, Part VIII, line 7b	4a	186,900.		
b	Other	(Describe in Part XIII.)	4b			
С	Add lir	nes 4a and 4b			4c	186,900.
5	Total e	expenses. Add lines 3 and 4c. (This must equal Form 990. Part I. line 18.)			5	18,486,364.
Pa	rt XIII	Supplemental Information				
		descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any addition			; Part)	X, line 2; Part XI,

PART X, LINE 2:

SCRUM IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(6) OF THE INTERNAL REVENUE CODE, THOUGH IT IS SUBJECT TO TAX ON INCOME UNRELATED TO ITS EXEMPT PURPOSE, UNLESS THAT INCOME IS OTHERWISE EXCLUDED BY THE INTERNAL REVENUE CODE. THERE WAS NO UNRELATED BUSINESS INCOME TAX FOR 2023 AND 2022.

SCRUM FILES U.S. FEDERAL INFORMATION RETURNS. SCRUM IS NO LONGER SUBJECT TO U.S. FEDERAL AND STATE INCOME TAX EXAMINATIONS BY TAX AUTHORITIES FOR FISCAL YEARS BEFORE 2020. MANAGEMENT BELIEVES THAT SCRUM'S INCOME TAX FILING POSITIONS WILL BE SUSTAINED ON AUDIT AND DOES NOT ANTICIPATE ANY ADJUSTMENTS THAT WILL RESULT IN A MATERIAL CHANGE.

Schedule D (Form 990) 2023

Schedule D (Form 990) 2023 Part XIII Supplemental Inform	SCRUM ALLIANCE,	INC.	20-5825034	Page 5
Part XIII Supplemental Inform	mation _(continued)			

SCHEDULE F (Form 990)

Department of the Treasury

Statement of Activities Outside the United States

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

Open to Public

OMB No. 1545-0047

Internal Revenue Service Name of the organization Go to www.irs.gov/Form990 for instructions and the latest information.

Inspection

Employer identification number 20-5825034 SCRUM ALLIANCE, INC. General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b. 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, X Yes the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States 3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (e) If activity listed in (d) (b) Number of (c) Number of (d) Activities conducted in the region (f) Total (a) Region employees, (by type) (such as, fundraising, proexpenditures offices is a program service, agents, and for and in the region gram services, investments, grants to describe specific type independent investments contractors recipients located in the region) of service(s) in the region in the region in the region GATHERING FOR MEMBER AND SPONSORSHIPS OF OTHER ORGANIZATION'S GATHERING EAST ASIA AND THE PACIFIC 0 0 PROGRAM SERVICES CVENTS 83,572. SPONSORSHIP OF OTHER ORGANIZATION'S GATHERING EUROPE (INCLUDING EVENTS & SAI GSG 815,905. ICELAND & GREENLAND) 0 0 PROGRAM SERVICES AMSTERDAM 2023 GATHERING FOR MEMBER AND SPONSORSHIPS OF OTHER ORGANIZATION'S GATHERING 0 0 EVENTS SOUTH AMERICA PROGRAM SERVICES 44,272. GATHERING FOR MEMBER AND SPONSORSHIPS OF OTHER ORGANIZATION'S GATHERING EVENTS SOUTH ASIA 0 0 PROGRAM SERVICES 14,999. SPONSORSHIP OF OTHER ORGANIZATION'S GATHERING SUB-SAHARAN AFRICA 0 0 PROGRAM SERVICES EVENTS 19,820. GATHERING FOR MEMBER AND SPONSORSHIPS OF OTHER ORGANIZATION'S GATHERING NORTH AMERICA 0 0 PROGRAM SERVICES EVENTS 1,965. GATHERING FOR MEMBER AND SPONSORSHIPS OF OTHER ORGANIZATION'S GATHERING CENTRAL AMERICA AND THE CARIBBEAN 0 0 PROGRAM SERVICES EVENTS 1,000. 0 0 981,533. 3 a Subtotal **b** Total from continuation 0 0 sheets to Part I c Totals (add lines 3a

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

Schedule F (Form 990) 2023

and 3b)

981,533.

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

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV appraisal, other)
			GATHERING FOR MEMBER					
			AND SPONSORSHIPS OF					
		EAST ASIA AND THE	OTHER ORGANIZATION'S					
		PACIFIC	GATHERING EVENTS	83,572.	снеск	0.		
		EUROPE (INCLUDING	SPONSORSHIP OF OTHER					
		ICELAND &	ORGANIZATION'S					
		GREENLAND)	GATHERING EVENTS	102,413.	СНЕСК	0.		
			GATHERING FOR MEMBER					
			AND SPONSORSHIPS OF					
			OTHER ORGANIZATION'S					
		SOUTH AMERICA	GATHERING EVENTS	44,272.	СНЕСК	0.		
			GATHERING FOR MEMBER	-				
			AND SPONSORSHIPS OF					
			OTHER ORGANIZATION'S					
		SOUTH ASIA	GATHERING EVENTS	14,999.	СНЕСК	0.		
		SUB-SAHARAN	SPONSORSHIP OF OTHER ORGANIZATION'S GATHERING EVENTS	19,820.	CHECK	0.		
		AFRICA	GAIRERING EVENIS	19,620.	CHECK	0.		

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

33

3 Enter total number of other organizations or entities

Schedule F (Form 990) 2023

Part III Grants and Other Assistanc Part III can be duplicated if ac			ites. Complete it	f the organization answered "Yes	" on Form 990, Part	IV, line 16.	
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see the Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see the Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see the Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see the Instructions for Form 8621)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see the Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see the Instructions for Form 5713; don't file with Form 990)	Yes	X No

Schedule F (Form 990) 2023

332075 11-29-23 Schedule F (Form 990) 2023

SCHEDULE J (Form 990)

Department of the Treasury

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

Open to Public

20-5825034

Internal Revenue Service Name of the organization

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

Inspection
Employer identification number

OMB No. 1545-0047

SCRUM ALLIANCE, INC.

Pa	art I Questions Regarding Compensation			
	·		Yes	No
1 a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	X Compensation committee X Written employment contract			
	X Independent compensation consultant X Compensation survey or study			
	X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a	X	
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		X
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		
b	Any related organization?	5b		
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а	The organization?	6a		
b	Any related organization?	6b		
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7		
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		
a	If "Vee" on line 8, did the organization also follow the rebuttable presumption procedure described in			

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

Schedule J (Form 990) 2023

Regulations section 53.4958-6(c)?

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred benefits		(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) TRISTAN BOUTROS	(i)	600,000.	150,000.	960.	16,278.	0.	767,238.	0.
CHIEF EXECUTIVE OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) RENEE MZYK	(i)	248,224.	75,000.	197,809.	16,205.	0.	537,238.	0.
CHIEF COMMUNITY OFFICER- THRU NOV	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) ANGELA STECOVICH	(i)	279,519.	105,500.	960.	16,500.	12,630.	415,109.	0.
CHIEF OPERATING OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) TRACEE JEAN ALIOTTI	(i)	196,300.	33,800.	720.	7,715.	7,422.	245,957.	0.
CHIEF MARKETING OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) SEAN KERSTIENS	(i)	161,542.	12,000.	960.	8,725.	33,634.	216,861.	0.
HEAD OF TECHNOLOGY	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) LISA REEDER	(i)	164,939.	18,590.	960.	9,224.	21,182.	214,895.	0.
HEAD OF SERVICE PROVIDERS	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) PAUL BALLEW	(i)	158,490.	12,984.	960.	8,237.	21,182.	201,853.	0.
SENIOR SOFTWARE ENGINEER	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) IAN CARR	(i)	137,790.	11,040.	960.	7,533.	33,634.	190,957.	0.
HEAD OF PRODUCT	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) DAVID CHAD MUELLER	(i)	129,774.	11,900.	960.	0.	33,540.	176,174.	0.
SENIOR SOFTWARE ENGINEER	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III	Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PART I, LINE 3:

THE ORGANIZATION'S BOARD COMPENSATION & HUMAN RESOURCE COMMITTEE REVIEWS

CEO AND EXECUTIVE COMPENSATION ANNUALLY. IN CONNECTION WITH THIS REVIEW,

THIRD PARTY SALARY SURVEYS, INPUT FROM OUTSIDE CONSULTANTS AND OTHER PUBLIC

INFORMATION FOR PEER GROUPS ARE EVALUATED. THE COMPENSATION OF THESE

INDIVIDUALS IS APPROVED BY THE BOARD IN CONNECTION WITH ITS ANNUAL BUDGET

APPROVAL PROCESS.

CEO COMPENSATION, THE BOARD COMPENSATION AND HR COMMITTEE CONDUCTS AN

ANNUAL COMPENSATION STUDY WITH AN EXTERNAL CONSULTANT. BASED ON THE

FINDINGS OF THE STUDY THE COMPENSATION AND HR COMMITTEE RECOMMEND THE CEO

COMPENSATION TO THE FULL BOARD FOR APPROVAL.

PART I, LINE 4A:

RENEE MZYK -\$196,929.

SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service

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 Form 990-EZ.

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

2023
Open to Public Inspection

OMB No. 1545-0047

Name of the organization

SCRUM ALLIANCE, INC.

Employer identification number 20-5825034

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

ADOPTION OF SCRUM AND OTHER AGILE PRODUCT DEVELOPMENT AND PROJECT

MANAGEMENT PRACTICES ON A NONPROFIT BASIS, TO THE END OF ENHANCING

PROJECT MANAGEMENT AND PRODUCT DEVELOPMENT PRACTICES ACROSS VARIOUS

ADOPTING ENTERPRISES.

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

BOARD MEMBERS ARE ELECTED BY MEMBERS AND BOARD MEMBERS

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

THE FORM 990 WAS REVIEWED AND APPROVED BY THE BOARD OF DIRECTORS BEFORE FILING.

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

ANNUAL DECLARATION IS REQUIRED FOR ALL DIRECTORS, AND TRAINING IS CONDUCTED

ANNUALLY FOR CURRENT AND INCOMING DIRECTORS. DIRECTORS SUBMIT ANY POTENTIAL

CONFLICT THAT MAY ARISE THROUGHOUT THE YEAR VIA AN INTERNAL FORM. EACH

SUBMISSION IS REVIEWED BY THE AUDIT & FINANCE COMMITTEE, THEN RECOMMENDED

TO THE BOARD FOR THEIR CONSIDERATION.

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

THE ORGANIZATION'S BOARD COMPENSATION & HUMAN RESOURCE COMMITTEE REVIEWS

CEO AND EXECUTIVE COMPENSATION ANNUALLY. IN CONNECTION WITH THIS REVIEW,

THIRD PARTY SALARY SURVEYS, INPUT FROM OUTSIDE CONSULTANTS AND OTHER PUBLIC

INFORMATION FOR PEER GROUPS ARE EVALUATED. THE COMPENSATION OF THESE

INDIVIDUALS IS APPROVED BY THE BOARD IN CONNECTION WITH ITS ANNUAL BUDGET

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

Schedule O (Form 990) 2023

Schedule O (Form 990) 2023 Page 2

Name of the organization SCRUM ALLIANCE, INC. Employer identification number 20-5825034

APPROVAL PROCESS.

CEO COMPENSATION, THE BOARD COMPENSATION AND HR COMMITTEE CONDUCTS AN

ANNUAL COMPENSATION STUDY WITH AN EXTERNAL CONSULTANT. BASED ON THE

FINDINGS OF THE STUDY THE COMPENSATION AND HR COMMITTEE RECOMMEND THE CEO

COMPENSATION TO THE FULL BOARD FOR APPROVAL.

EXECUTIVE COMPENSATION - IN 2022, THE COMPENSATION AND HR COMMITTEE HIRED

AN EXTERNAL CONSULTANT TO EVALUATE EXECUTIVE COMPENSATION RANGES FOR THE

EXECUTIVE TEAM. SALARY RANGES FOR NEW EXECUTIVES' ARE DETERMINED BY AN

INDEPENDENT HR SPECIALIST. EXECUTIVE SALARY RANGES ARE REVIEWED AND

APPROVED BY THE COMPENSATION AND HR COMMITTEE.

FORM 990, PART VI, SECTION C, LINE 18:

THE FORMS 990 AND FORM 1024 ARE AVAILABLE FOR DOWNLOAD ON SCRUM ALLIANCE'S WEBSITE: WWW.SCRUMALLIANCE.ORG.

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

THE BYLAWS ARE AVAILABLE ON THE ORGANIZATION'S WEBSITE. CONFLICT OF

INTEREST POLICY AND FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST.

FORM 990, PART XII, LINE 2C:

THE INDEPENDENT AUDITORS ARE ENGAGED BY THE AUDIT AND FINANCE

COMMITTEE, WHICH ALSO REVIEWS AND ACCEPTS THE INDEPENDENT AUDITED

FINANCIAL STATEMENTS. THE AUDIT AND FINANCE COMMITTEE PROVIDES TO THE

BOARD OF DIRECTORS A COPY OF THE AUDITED FINANCIALS AND AN OVERVIEW OF

THE AUDIT ENGAGEMENT, FINDINGS, AND ITS MEETINGS WITH THE INDEPENDENT

AUDITORS.

Schedule O (Form 990) 2023	Page 2
Name of the organization SCRUM ALLIANCE, INC.	Employer identification number 20-5825034
Bellett Induttivelly Tive	1 20 3023031
FORM 990, PART V, LINE 2A	
THE ORGANIZATION USED A PROFESSIONAL EMPLOYER ORGANIZATION	N FOR ITS
PAYROLL. PAYROLL FORMS WERE FILED UNDER THE NAME AND EIN (OF THE PEO.