

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2024

Department of the Treasury Internal Revenue Service

Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

A For the 2024 calendar year, or tax year beginning, 2024, and ending, 20

B Check if applicable: Address change, Name change, Initial return, Final return/terminated, Amended return, Application pending. C CROATIAN SCHOLARSHIP FUND, P.O. BOX 290, SAN RAMON, CA 94583. D Employer identification number 68-0231056. E Telephone number (530) 392-8467. F Name and address of principal officer: BARBARA JAGIELLO, SAME AS C ABOVE. G Gross receipts \$ 395,809. H(a) Is this a group return for subordinates? Yes No. H(b) Are all subordinates included? Yes No. I Tax-exempt status: 501(c)(3), 501(c) () (insert no.), 4947(a)(1) or 527. J Website: WWW.CROATIANSCHOLARSHIP.ORG. K Form of organization: X Corporation, Trust, Association, Other. L Year of formation: 1989. M State of legal domicile: CA.

Part I Summary

Table with 3 columns: Description, Prior Year, Current Year. Rows include: 1 Briefly describe the organization's mission... 2 Check this box... 3-7a Activities & Governance metrics. 8-12 Revenue. 13-19 Expenses. 20-22 Net Assets or Fund Balances.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here: Signature of officer BARBARA JAGIELLO, Date, Title PRESIDENT. Paid Preparer Use Only: Preparer's name DOUGLAS W. REGALIA, Signature DOUGLAS W. REGALIA, Date 04-18-2025, PTIN P00186389, Firm's name REGALIA & ASSOCIATES, CPAS, Firm's address 103 TOWN AND COUNTRY DRIVE, SUITE K, DANVILLE, CA 94526, Firm's EIN 68-0260103, Phone no. (925) 314-0390.

May the IRS discuss this return with the preparer shown above? See instructions. X Yes No

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

ATTEND A UNIVERSITY IN CROATIA OR BOSNIA AND HERZEGOVINA. FOR THE PAST 30 YEARS CSF HAS BEEN PROVIDING FINANCIAL ASSISTANCE TO THE FINANCIALLY DESERVING CROATIAN UNIVERSITY STUDENTS IN CROATIA AND BOSNIA-HERZEGOVINA.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 367,403. including grants of \$ 365,318.) (Revenue \$)

SCHOLARSHIPS AND INTERNSHIPS WERE GIVEN TO 119 STUDENTS OF CROATIAN DESCENT IN CROATIA AND BOSNIA AND HERCEGOVINA. THE EXECUTIVE BOARD ESTABLISHED FINANCIAL NEED CRITERIA AND RIGID ACADEMIC STANDARDS FOR ADMISSION INTO THE PROGRAM IN AN EFFORT TO SELECT THE MOST PROMISING STUDENTS WHO WOULD SOMEDAY BECOME QUALIFIED LEADERS TO HELP CROATIA ESTABLISH AND MAINTAIN A FREE DEMOCRACY AND A SOUND ENTERPRISE SYSTEM. THIS WOULD ENABLE CROATIA TO BECOME MORE COMPETITIVE IN THE WORLD GLOBAL ECONOMY. STUDENTS ACCEPTED INTO THE PROGRAM RECEIVE \$2,500 PER YEAR FOR A DURATION OF THREE YEARS OF UNDERGRADUATE AND TWO YEARS GRADUATE STUDY. NO RECIPIENT MAY BE AWARDED MORE THAN FIVE ONE-YEAR SCHOLARSHIPS. STUDENTS ARE NOTIFIED OF ACCEPTANCE INTO THE PROGRAM BY JULY 1 OF EACH YEAR. PAYMENTS ARE MADE ONCE A YEAR.

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

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

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 367,403.