Form **1023-EZ**

Department of the Treasury

Internal Revenue Service

(Rev. June 2014)

Streamlined Application for Recognition of Exemption Under Section 501(c)(3) of the Internal Revenue Code

OMB No. 1545-0056

Do not enter Social Security numbers on this form as it will be made public.

Note: If exempt status is approved, this application will be open for public inspection.

Information about Form 1023-EZ and its separate instructions is at <u>www.irs.gov/form1023</u>

🖂 Ch	🔀 Check this box to attest that you have completed the Form 1023-EZ Eligibility Worksheet in the current instructions, are							
eli	eligible to apply for exemption using Form 1023-EZ, and have read and understand the requirements to be exempt under							
section 501(c)(3).								
Part I	Identification of Applicant							

1a	Full Name of Organization GDI										
b					5.	c City CAMARILLO			d State CA	e Zip code + 4 93010-3003	
2						4 Person to Contact if More Information is Needed					
	77-0573902	12		JOEL MORRIS							
5	Contact Telephone Number			6 Fax Number (o			nal)		7 Use	7 User Fee Submitted	
	805-908-7111			805-445-7111				\$400.00			
8	List the names, titles, and mailing addr	esses of yo	1		or trus	tees. (If you have r	more		instructions	5.)	
First Na	^{ime:} RALPH		Last Name:	RITTENH	IOUSE			Title: PRES	SIDENT		
Street A	Address: 3068 DOUGLAS ROAD			^{City:} FER	NDAL	.E	Sta	^{te:} WA	Zip c	ode + 4: 98248-8909	
First Na	^{ime:} JOEL		Last Name:	e: MORRIS				Title: SECRETARY			
Street A	Address: 515 ALIENTO WAY			City: CAMARILLO			Sta	^{te:} CA	ode + 4: 93012-5274		
First Na	^{ime:} WILLIAM		Last Name:	Name: MOYER			Title: CHIE	F FINANCIAL OFFICER			
Street A	Address: 1572 PRIMA COURT			City: CAN	MARIL	LO	Sta	^{te:} CA	Zip c	ode + 4: 93010-3147	
First Na	^{ime:} CLAUDIA		Last Name:	ast Name: TOLBERT RHEA				Title: TREASURER			
Street A	Address: 947 VALLEY VISTA DRIVE			City: CAN	MARIL	LO	Sta	^{te:} CA	Zip c	ode + 4: 93010-3003	
First Na	^{ime:} GREG		Last Name:	OGDEN				Title: CHA	IRMAN OF	THE BOARD	
Street A	Address: 243 VIA DEL PINAR			^{City:} MO	NTER	EY	Sta	^{te:} CA	Zip c	ode + 4: 93940-2504	
9a	Organization's Website (if available):	WW	W.GLOBALD	ISCIPLESHI	PINITI	ATIVE.ORG					
b	Organization's Email (optional):		_@CAMCC.N	ET							
Part I					<u> </u>						
1	To file this form, you must be a corpora		-			UST. Check the bo	3X TO	r the type of or	ganization.		
	Corporation Uning	orporated	association		rust						
2	2 Check this box to attest that you have the organizing document necessary for the organizational structure indicated above. (See the instructions for an explanation of necessary organizing documents.)										
3	Date incorporated if a corporation, or f			-			(06082001			
4	State of Incorporation or other formati	on: C	alifornia			_			_		
5	Section 501(c)(3) requires that your org	ganizing do	ocument mus	t limit your p	urpose	es to one or more e	exen	npt purposes w	ithin sectio	n 501(c)(3).	
	Check this box to attest that you	ır organizir	ng document	contains this	limita	tion.					
6	6 Section 501(c)(3) requires that your organizing document must not expressly empower you to engage, otherwise than as an insubstantial part of your activities, in activities that in themselves are not in furtherance of one or more exempt purposes.										
	Check this box to attest that you activities, in activities that in the							ge, otherwise t	han as an ir	nsubstantial part of your	
7	7 Section 501(c)(3) requires that your organizing document must provide that upon dissolution, your remaining assets be used exclusively for section 501(c)(3) exempt purposes. Depending on your entity type and the state in which you are formed, this requirement may be satisfied by operation of state law.										
	Check this box to attest that you express dissolution provision in y dissolution provision.										

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Your Specific Activ	/ities								
Enter the appropriate 3-character NTEE Code that best describes your activities (See the instructions): X20									
To qualify for exemption as a section 501(c)(3) organization, you must be organized and operated exclusively to further one or more of the following purpose: checking the box or boxes below, you attest that you are organized and operated exclusively to further the purposes indicated. Check all that apply .									
Charitable	Religious	Educational							
Scientific	Literary	Testing for public safety	1						
To foster national or inte	rnational amateur sports competition	Prevention of cruelty to	children or a	nimals					
To qualify for exemption as a s	section 501(c)(3) organization, you must:								
Refrain from supporting	or opposing candidates in political campaigns in any	y way.							
 Ensure that your net earnings do not inure in whole or in part to the benefit of private shareholders or individuals (that is, board members, officers, key management employees, or other insiders). 									
Not further non-exempt	purposes (such as purposes that benefit private inter	rests) more than insubstantially.							
 Not be organized or oper 	rated for the primary purpose of conducting a trade	or business that is not related to your exempt p	ourpose(s).						
Not devote more than an insubstantial part of your activities attempting to influence legislation or, if you made a section 501(h) election, not ne expenditures in excess of expenditure limitations outlined in section 501(h).									
Not provide commercial-type insurance as a substantial part of your activities.									
Check this box to attest that you have not conducted and will not conduct activities that violate these prohibitions and restrictions.									
	Yes	No							
	Yes	No							
Do you or will you donate fun		Yes	No						
	Yes	No No							
	Yes	No							
Do you or will you have unrela	Do you or will you have unrelated business gross income of \$1,000 or more during a tax year?								
Do you or will you operate bir	ngo or other gaming activities?		Yes	No					
Do you or will you provide dis	aster relief?		Yes	No					
	Your Specific Active Enter the appropriate 3-chara To qualify for exemption as a schecking the box or boxes bell Charitable Scientific To foster national or inter To qualify for exemption as a schecking the box or boxes bell Charitable Scientific To foster national or inter To qualify for exemption as a schecking the top science Refrain from supporting of Ensure that your net earr management employees Not further non-exempt Not be organized or oper Not devote more than ar expenditures in excess of Not provide commercial- X Check this box to attest Do you or will you attempt to (If yes, consider filing Form 57 Do you or will you conduct ac States? Do you or will you conduct ac States? Do you or will you engage in for trustees, or any entities the Do you or will you have unrelated bo you or will you operate bin	Your Specific Activities Enter the appropriate 3-character NTEE Code that best describes your activities (Second activities) To qualify for exemption as a section 501(c)(3) organization, you must be organized checking the box or boxes below, you attest that you are organized and operated Charitable Religious Scientific Literary To foster national or international amateur sports competition To qualify for exemption as a section 501(c)(3) organization, you must: Refrain from supporting or opposing candidates in political campaigns in any Ensure that your net earnings do not inure in whole or in part to the benefit or management employees, or other insiders). Not further non-exempt purposes (such as purposes that benefit private intered Not devote more than an insubstantial part of your activities attempting to in expenditures in excess of expenditure limitations outlined in section 501(h). Not provide commercial-type insurance as a substantial part of your activities Check this box to attest that you have not conducted and will not conduct a Do you or will you approxemption of compensation.) Do you or will you conduct activities or provide grants or other assistance to indivisitates? Do you or will you conduct activities or provide grants or other assistance to indivisitates? Do you or will you operate business gross income of \$1,000 or more during Do you or will you operate business gross income of \$1,000 or more during Do you or will you operate busin	Your Specific Activities Enter the appropriate 3-character NTEE Code that best describes your activities (See the instructions): X20 To qualify for exemption as a section 501(c)(3) organization, you must be organized and operated exclusively to further one or m checking the box or boxes below, you attest that you are organized and operated exclusively to further the purposes indicated. C Charitable Religious Educational Scientific Literary Testing for public safety. To foster national or international amateur sports competition Prevention of crueity to further the purposes indicates in political campaigns in any way. Ensure that your net earnings do not inure in whole or in part to the benefit of private shareholders or individuals (that is, bot management employees, or other insiders). Not further non-exempt purposes (such as purposes that benefit private interests) more than insubstantially. Not devote more than an insubstantial part of your activities attempting to influence legislation or, if you made a section 50 expenditures in excess of expenditure limitations outlined in section 501(h). Not provide commercial-type insurance as a substantial part of your activities. Check this box to attest that you have not conducted and will not conduct activities that violate these prohibitions and rest (fyes, consider filing form 5768. See the instructions for more details.) Do you or will you appension to any of your officers, directors, or trustees? (Refer to the instr	Your Specific Activities Enter the appropriate 3-character NTEE Code that best describes your activities (See the instructions): X20 To qualify for exemption as a section 501(c)(3) organization, you must be organized and operated exclusively to further one or more of the folichecking the box or boxes below, you attest that you are organized and operated exclusively to further the purposes indicated. Check all that Charitable Religious Educational Scientific Literary Testing for public safety To foster national or international amateur sports competition Prevention of crueity to children or a To qualify for exemption as a section 501(c)(3) organization, you must: Refrain from supporting or opposing candidates in political campaigns in any way. Ensure that you net earnings do not inure in whole or in part to the benefit of private shareholders or individuals (that is, board members management employees, or other insiders). Not further non-exempt purposes (such as purposes that benefit private interests) more than insubstantial part of your activities attempting to influence legislation or, if you made a section 501(h) election, expenditures in excess of expenditure limitations outlined in section 501(h). Not devole more than an insubstantial part of your activities attempting to influence legislation or, if you made a section 501(h) election, expenditures in excess of expenditure limitations outlined in section 501(h). Not devole more than an insubstantial part of your activities atempting to influence legislation or, if you made a section 501(h)					

Part IV Foundation Classification

Part IV is designed to classify you as an organization that is either a private foundation or a public charity. Public charity status is a more favorable tax status than private foundation status.

- 1 If you qualify for public charity status, check the appropriate box (1a 1c below) and skip to Part V below.
 - a Check this box to attest that you normally receive at least one-third of your support from public sources or you normally receive at least 10 percent of your support from public sources and you have other characteristics of a publicly supported organization. Sections 509(a)(1) and 170(b)(1)(A)(vi).
 - b Check this box to attest that you normally receive more than one-third of your support from a combination of gifts, grants, contributions, membership fees, and gross receipts (from permitted sources) from activities related to your exempt functions and normally receive not more than one-third of your support from investment income and unrelated business taxable income. Section 509(a)(2).
 - c Check this box to attest that you are operated for the benefit of a college or university that is owned or operated by a governmental unit. Sections 509(a)(1) and 170(b)(1)(A)(iv).
- 2 If you are not described in items 1a 1c above, you are a private foundation. As a private foundation, you are required by section 508(e) to have specific provisions in your organizing document, unless you rely on the operation of state law in the state in which you were formed to meet these requirements. These specific provisions require that you operate to avoid liability for private foundation excise taxes under sections 4941-4945.
 - Check this box to attest that your organizing document contains the provisions required by section 508(e) or that your organizing document does not need to include the provisions required by section 508(e) because you rely on the operation of state law in your particular state to meet the requirements of section 508(e). (See the instructions for explanation of the section 508(e) requirements.)

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Part V Reinstatement After Automatic Revocation

Complete this section only if you are applying for reinstatement of exemption after being automatically revoked for failure to file required annual returns or notices for three consecutive years, and you are applying for reinstatement under section 4 or 7 of Revenue Procedure 2014-11. (Check only one box.)

- 1 Check this box if you are seeking retroactive reinstatement under section 4 of Revenue Procedure 2014-11. By checking this box, you attest that you meet the specified requirements of section 4, that your failure to file was not intentional, and that you have put in place procedures to file required returns or notices in the future. (See the instructions for requirements.)
- 2 Check this box if you are seeking reinstatement under section 7 of Revenue Procedure 2014-11, effective the date you are filling this application.

Part VI Signature

I declare under the penalties of perjury that I am authorized to sign this application on behalf of the above organization and that I have examined this application, and to the best of my knowledge it is true, correct, and complete.

JOEL MORRIS

(Type name of signer)

SECRETARY

(Date)

(Type	title	or au	utnori	ty of	signe	er)

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