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Form **990** 

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## **Return of Organization Exempt From Income Tax**

2008 No 1545-0047

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

**2008** 

Open to Public Department of the Treasure ▶ The organization may have to use a copy of this return to satisfy state reporting requirements. Inspection For the 2008 calendar year, or tax year beginning 09/01 2008, and ending 20 09 Employer identification number C Name of organization American Bankers Assoc. Education Foundation Check if applicable use IRS Doing Business As 0397856 Address change Telephone number print or Number and street (or P O box if mail is not delivered to street address) Room/suite Name change type. 1120 CONNECTICUT AVE. NW 663-5054 Initial return (202)City or town, state or country, and ZIP + 4 ☐ Termination **WASHINGTON, DC 20036** G Gross receipts \$ 5,803,644 Amended return F Name and address of principal officer **VIRGINIA DEAN** Application pending 1120 CONNECTICUT AVE, NW, WASHINGTON, DC 20036 H(b) Are all affiliates included? ☐Yes ☐ No N/A Tax-exempt status √ 501(c) ( 3 ) 
✓ (insert no.) 
☐ 4947(a)(1) or If "No," attach a list (see instructions) Website: ► WWW.ABA.COM/ABAEF/default.htm H(c) Group exemption number ▶ N/A Type of organization ✓ Corporation ☐ Trust ☐ Association ☐ Other ▶ L Year of formation 2004 M State of legal domicile DC Part I Summary 1 Briefly describe the organization's mission or most significant activities: WORKING TO BUILD A GENERATION OF WELL INFORMED CONSUMERS. Governance AMERICAN BANKERS ASSOCIATION EDUCATION FOUNDATION PROMOTES UNDERSTANDING OF PERSONAL BANKING AND FINANCIAL SERVICES BY ENHANCING THE PUBLIC KNOWLEDGE OF ECONOMIC SYSTEMS. 2 Check this box ▶ ☐ If the organization discontinued its operations or disposed of more than 25% of its assets. 11 Number of voting members of the governing body (Part VI, line 1a) . . . . . 4 11 Number of independent voting members of the governing body (Part VI, line 1b) 5 0 Total number of employees (Part V, line 2a) . . . . 6 20.000 Total number of volunteers (estimate if necessary) 7a 0 7a Total gross unrelated business revenue from Part VIII, line 12, column (C) b Net unrelated business taxable income from Form 990-T, line 34 0 **Current Year** 6,270 2,500 8 Contributions and grants (Part VIII, line 1h) 129,755 209,166 Program service revenue (Part VIII, line 2g) . . . 377.882 (626,659) Investment income (Part VIII, column (A), lines 3, 4, and 7d) 139,413 Other revenue (Part VIII) column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 56,518 Total reverse and lines 8 through 11 (must equal Part VIII, column (A), line 12) 653,320 (358,475) Grants-and similar airounts paid (Part IX, column (A), lines 1-3) . 2,250 283,451 314,670 6a Professional fundraisin fees (Part IX, column (A), line 11e) . . . . . . . Total fundralsing expenses (Part IX, column (D), line 25) ▶ ...... 217,835 291,107 expenses (Part IX, column (A), lines 11a-11d, 11f-24f) . . . . . . 503,536 605,777 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25). 19 Revenue less expenses. Subtract line 18 from line 12 149,784 (964,252) Beginning of Year End of Year 7,221,224 6,517,452 20 Total assets (Part X, line 16) 139,779 111,535 Total liabilities (Part X. line 26) Net assets or fund balances. Subtract line 21 from line 20 7.081.445 6.405.917 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 7-6-10 Sign \ ol Signature of officer Here ROBERT G. CFÓ EADY Type or print name and title Date Check if Preparer's identifying number Preparer's self-(see instructions) signature employed ▶ □

Yes No\_

Phone no ► (

Par	t III Statement of Program Service Accomplishments (see instructions)
1	Briefly describe the organization's mission: WORKING TO BUILD A GENERATION OF WELL INFORMED CONSUMERS.  AMERICAN BANKERS ASSOCIATION EDUCATION FOUNDATION (ABAEF) PROMOTES UNDERSTANDING OF PERSONAL BANKING AND FINANCIAL SERVICES BY ENHANCING THE PUBLIC KNOWLEDGE OF ECONOMIC SYSTEMS.
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
4	If "Yes," describe these changes on Schedule O.  Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.  Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
	(Code:) (Expenses \$ 105,430 including grants of \$) (Revenue \$ 56,000 ) CONSUMER EDUCATION AND TRAINING:  ABA EDUCATION FOUNDATION DEVELOPS BOOKLETS AND MATERIALS THAT HELP BANKERS PROVIDE FINANCIAL EDUCATION IN THEIR COMMUNITIES. AS THE BANKING INDUSTRY HAS EVOLVED, SO HAVE THE PRODUCTS OFFERED AND THE NUMBER OF PRODUCTS. IT IS IMPORTANT FOR CONSUMERS TO UNDERSTAND THEIR CHOICES.  THESE ACTIVITIES EDUCATE AND INFORM MEMBERS ABOUT THE BANKING INDUSTRY, CHANGES IN BANKING PRACTICES AND ISSUES REGARDING PERSONAL FINANCE AND THE RECESSION, NEW CREDIT CARD ACT, HOMEOWNERSHIP INFORMATION, AND BANKING SAFETY TIPS INCLUDING ATMS, CURRENT CONSUMER SCAMS, IDENTITY THEFT, PHISHING SCAMS AND PREDATORY LENDING.
4b	(Code:) (Expenses \$ 233,764 including grants of \$) (Revenue \$ 124,166 ) TEACH CHILDREN TO SAVE: THE TEACH CHILDREN TO SAVE PROGRAM HAS PARTNERED BANKS WITH STUDENTS FOR LESSONS ON THE IMPORTANCE OF SAVINGS. THE PROGRAM'S GOAL IS TO ENCOURAGE BANKERS TO REACH 5 MILLION STUDENTS BEFORE THE END OF 2011, THE 15TH ANNIVERSARY OF TEACH CHILDREN TO SAVE. "MONEY TALKS" NEWSLETTER FOR YOUNGSTERS THAT CENTERS ON THE POWER OF SAVING AND BUDGETING FOR BEGINNERS. IT FEATURES A FUN CROSSWORD PUZZLE, A FAMILY BUDGETING WORK SHEET AND GLOSSARY. BANKS ARE JOINING IN TO SPREAD THE SAVINGS MESSAGE AT SCHOOLS THROUGHOUT THE COUNTRY.
4c	(Code: ) (Expenses \$ 54,598 including grants of \$ ) (Revenue \$ 29,000 ) GET SMART ABOUT CREDIT: GET SMART ABOUT CREDIT IS A NATIONAL FINANCIAL EDUCATION PROGRAM THAT HELPS BANKERS TEACH YOUNG ADULTS THE ABCs OF WISE CREDIT USE. FOR SEVEN YEARS THE GET SMART ABOUT CREDIT PROGRAM HAS PARTNERED BANKS WITH YOUNG ADULTS FOR LESSONS ON THE RESPONSIBLE USE OF CREDIT. BANKS ARE JOINING IN TO EDUCATE YOUNG ADULTS THROUGHOUT THE COUNTRY ON THE RESPONSIBILITIES OF CREDIT. "MONEY TALKS" NEWSLETTER FOR YOUNG ADULTS THAT FOCUSES ON USING CREDIT RESPONSIBLY
	Other program services. (Describe in Schedule O ) (Expenses \$ including grants of \$ ) (Revenue \$ )
4e	Total program service expenses ► \$ 393,792 (Must equal Part IX, Line 25, column (B).)

Pai	t 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	1	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		1
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		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		1
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5	N	/A
6	Did the organization maintain any donor advised funds or any accounts where 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		1
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		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.	8_		1
9	Did the organization report an amount in Part X, line 21, 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		1
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	<b>√</b>	ļ 
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VIII, IX, or X as applicable	11	✓	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12		✓
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		<b>√</b>
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		✓
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b		1
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		✓
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		<b>√</b>
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		1
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18 19		<b>V</b>
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		<u></u>
20 21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		7
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		1
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23	<b>√</b>	
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 questions 24b–24d and complete Schedule K. If "No," go to question 25.	24a		✓
b		24b		<b>✓</b>
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		<b>√</b>
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<b>✓</b>
	Section 501(c)(3) and 501(c)(4) 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		<b>✓</b>
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I	25b		<b>√</b>
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		✓
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		<b>/</b>

Pa	Checklist of Required Schedules (continued)			
			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L,		ny hindrone singa se	
	Part IV	28a	_	✓
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV.	28b		1
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV.	28c		✓
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		✓
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	✓	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35	✓	
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	<b>✓</b>	
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		

Form **990** (2008)

Par	Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns. Enter -0- if not applicable			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			لـــــا
	gaming (gambling) winnings to prize winners?	1c	✓	<del>                                     </del>
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 0		N	/A
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	IN.	<del>                                     </del>
	<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by			
	this return?	3a 3b	N.	×
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	30	14/	<del>^</del>
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		1
b	If "Yes," enter the name of the foreign country: ► N/A			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank			
	and Financial Accounts.	- <u>-</u>		
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		<b>-</b>
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		_
С	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity	5c	N/	Α
60	Regarding Prohibited Tax Shelter Transaction?	6a		1
		<u> </u>		<u> </u>
D	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	N	Α
7	Organizations that may receive deductible contributions under section 170(c).			i
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than	7a		J - 1
_	\$75?	7b	N/	<u> </u>
D	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			<u> </u>
C	required to file Form 8282?	7c		✓
d	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization, during the year, 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	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? .	7g	N/	Α
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as		N/	Α
	required?	7h		<u> </u>
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section			
	509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring	8		
_	organization, have excess business holdings at any time during the year?	-		_
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.	9a		1
a b	Did the organization make any taxable distributions under section 4966?	9b		<del></del>
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12			i
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b N/A			,
11	Section 501(c)(12) organizations. Enter:			, [
а	Gross income from members or shareholders			į
b	Gross income from other sources (Do not net amounts due or paid to other sources against			! :
	amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	N	Α
D	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.   12b   N/A			

Governance, Management, and Disclosure (Sections A, B, and C request information about policies not Part VI required by the Internal Revenue Code.) Section A. Governing Body and Management No For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions. **1a** Enter the number of voting members of the governing body . . . . 1b 11 **b** Enter the number of voting members that are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?. Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a material diversion of the organization's assets? 6 7a Does the organization have members, stockholders, or other persons who may elect one or more members 7a of the governing body? 7b **b** Are any decisions of the governing body subject to approval by members, stockholders, or other persons? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a a The governing body? . . . . . . . . . . . . . . a8 **b** Each committee with authority to act on behalf of the governing body? 9a 9a Does the organization have local chapters, branches, or affiliates? b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, NA 9b affiliates, and branches to ensure their operations are consistent with those of the organization? . . . . . Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990 . . . . . . 10 Is there any officer, director or 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 in Schedule O Section B. Policies 12a 12a Does the organization have a written conflict of interest policy? If "No," go to line 13. b Are officers, directors or trustees, and key employees required to disclose annually interests that could give 12b rise to conflicts? c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12¢ describe in Schedule O how this is done 13 Does the organization have a written whistleblower policy? 14 14 Does the organization have a written document retention and destruction policy? . . . . 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision: 2.4 The organization's CEO, Executive Director, or top management official? . . . . . 15a 15b **b** Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement 16a b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ NONE Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. ☐ Another's website ☑ Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. State the name, physical address, and telephone number of the person who possesses the books and records of the

organization: ▶ Barry Epstein, 1120 Connecticut Ave, NW, Washington, DC 20036 (202)663-5054

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

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

- 1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- 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 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- 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.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons

Check this box if the organization did not co	mpensate	any o	offic	er,	dire	ctor,	trus	tee, or key em	ployee.	
(A)	(B)			(6	C)			(D)	(E)	(F)
Name and Title	Average		ion (		-	that ap		Reportable	Reportable compensation	Estimated
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
Nicki P. Brown Board Member	1	1						None	None	None
David S. Hickman Board Member	1	1						None	None	None
Jennifer Jolley Board Member	1	1						None	None	None
Robert R. Jones, III Board Member	1	1						None	None	None
Warren K.K. Luke Board Member	1	1						None		None
Donna J. Petrocco Board Member	1	1						None		None
Austin L. Roberts, III Board Member	1	1					L	None	None	None
Brian Wilson Board Member	1	1					_	None	None	None
Teresa L. Ziebarth Board Member	1	✓						None	None	None
Stephen R. Martin Chairman	1			1				None	None	None
Natalie Abatemarco <u>Vice Chairman</u>	1			1				None	None	None
Virginia Dean Executive Director	1				1			None	315,712	160,078
Laura Fisher Director	19		_			✓		None	100,807	20,645
	_									

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Pa	t VII Section A. Officers, Directors, Tru	ustees, Key	/ Emp	loy	ees,	an	d Hig	hest	Compensated	Employee:	s (conti	inued)		
	(A)	(B)			•	C)			(D)	(E)		(F)		
	Name and title	Average hours per week	P or director	nstrtutional trustee	Officer	Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from relate organization (W-2/1099-M	on ed ns	Estimat amount other compensa from th organiza and rela organizat	of ation ne tion ted	
										<del> </del>				
	Total	<del></del>	··	•			-	<u> </u>	0	416,			723	
2 —	Total number of individuals (including those organization ► NONE	e in 1a) wh	o rec	eive	ed n	nore	than	n \$10 ——	00,000 in repo	rtable comp	pensati	on from	<del>,</del>	
3	Did the organization list any former office employee on line 1a? If "Yes," complete S	er, director chedule J	or tru for su	uste ich i	e, k indi	ey vidu	emplo	oyee	e, or highest o	ompensated	d [	3	<b>√</b>	
4	For any individual listed on line 1a, is the sthe organization and related organizations individual.										ו ל	4 🗸		
5	Did any person listed on line 1a receive services rendered to the organization? If "	or accrue Yes." comp	comp olete S	oens S <i>ch</i> e	satio edu	on f Je J	rom a	any uch	unrelated organic	anization fo	r	5	1	
Sec	ction B. Independent Contractors	, , , , , , , , , , , , , , , , , , , ,							,			<u> </u>		
1	Complete this table for your five highest co- compensation from the organization.	ompensate	d ind	epe	nde	nt c	ontra	ctor	s that received	more than	\$100,	000 of		
	(A) Name and business add	iress							(B) Description of se	ervices	Cor	(C) mpensation	n	
NO	NE													
		<del></del> -												
					_									
2	Total number of independent contractors compensation from the organization ► N	(including t	hose	in 1	l) w	ho	receiv	/ed	more than \$10	0,000 in		<del> </del>	į	

art	VIII		venue	<del></del>			_	
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
and other similar amounts	1a	Federated campaigns	<u>1a</u>					
20	þ	Membership dues	1b				•	
<b>a</b>	С	Fundraising events .	1c	<del></del>				*
ā	d	Related organizations	<u>1d</u>				•	
sir	е	Government grants (contri	ibutions). 1e				-	
ĕ	f	All other contributions, gifts, g	grants,	0.500				-
듁		and similar amounts not inclu		2,500	, ·	à	× × , ×	
and	•	Noncash contributions include <b>Total.</b> Add lines 1a–1f	ed in lines 1a-11 \$ .		2,500	ž	. (	_
		Total. Add lines to 11	<del> </del>	Business Code	.,			
Ž	2a	CONSUMER EDUCAT	TION	900099	56,000	56,000	granagitaning agriculture as a second	
Rev	za b	TEACH CHILDREN TO		900099	124,166	124,166	= 11 ==	
8	0	GET SMART ABOUT	900099	29,000	29,000			
Σ	ď	d						
Program Service Revenue	e							
ogra	f	All other program servi	ce revenue .					
ă	g	Total. Add lines 2a-2f	<u> </u>	<u> </u>	209,166	` .		****
	3	Investment income (incother similar amounts)	luding dividends		180,698			180,698
	4 5	Income from investment of Royalties	of tax-exempt bone					
			(i) Real	(ii) Personal				N. XI J
	6a	Gross Rents			» · · "	•		
	b	Less: rental expenses						
		Rental income or (loss)			and one timesterning assumed		خُنْ مُنْ مُنْ مُنْ مُنْ مُنْ مُنْ مُنْ م	
	d	Net rental income or (ic	<del></del>	<u> </u>			,,	
	7a	Gross amount from sales of assets other than inventory	(i) Securities 5,289,618	(II) Other				
	b	Less. cost or other basis and sales expenses .	6,096,975		~		*	>
		Gain or (loss)	(807,357)			manama - ramberse		
	d	Net gain or (loss)		▶	(807,357)			(807,357)
	8a	Gross income from events (not including \$	fundraising		40.	*		*
2		of contributions reported				_ ^ -		
-		See Part IV, line 18	· · · · a					* .
		Less: direct expenses	b			- Day	lede Lande E	
<b>'</b>	С	Net income or (loss) from	om tundraising e	vents ▶	F 100	×* 3 9,***	- <del> </del>	
	9a	Gross income from gam	ning activities.					
	_	See Part IV, line 19						
		Less: direct expenses, Net income or (loss) fro		ities .	· · · · · · · · · · · · · · · · · · ·	· ~ , ~ , , , , , , , , , , , , , , , ,	* * *	<u> </u>
					X 2 2 2 3 3 1	* 1/2/2	**	, ,
	va	Gross sales of inverteurns and allowances		121,662			3 ·	×
	b	Less: cost of goods so		65,144				
		Less: cost of goods sold <b>b</b> L Net income or (loss) from sales of inventor			56,518	56,518		
ſ		Miscellaneous Reve		Business Code				
1	1a				- Inches			
	b							
	С							
	d	All other revenue						
		Total. Add lines 11a-1						
1	2	Total Revenue. Add lings, 10c, and 11e	nes 1h, 2g, 3, 4,	5, 6d, 7d, 8c,	(358,475)	268,184	0	(626,659)

# Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	Section 501(c)(3) and 501 All other organizations must complete colu	l(c)(4) organization ımn (Δ) but are not	s must complete a t required to comp	all columns. olete columns (B). (	(C), and (D).
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
2	organizations in the U.S. See Part IV, line 21 Grants and other assistance to individuals in				
3	the U.S. See Part IV, line 22 Grants and other assistance to governments,				
	organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	219,230	134,177	85,053	
8	Pension plan contributions (include section 401(k)	94,297	70,224	24,073	
9	and section 403(b) employer contributions) Other employee benefits	1,143	851	292	
10	Payroll taxes				
11	Fees for services (non-employees).				
	Management				
	Legal				
	Accounting				
	Lobbying				
	Professional fundraising services. See Part IV, line 17				
	Investment management fees				
	Other	20,716	18,460	2,256	
12	Advertising and promotion	·			
13	Office expenses	14,348	4,084	10,264	
14	Information technology	30,713	25,091	5,622	
15	Royalties				
16	Occupancy	87,939	75,376	12,563	
17	Travel	26,992	9,944	17,048	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization.				
23	Insurance				
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
а	PRINTING & PUBLICATIONS	4,096	3,181	915	
a b	CHARITABLE CONTRIBUTIONS	7,500	0	7,500	
C	OVERHEAD	56,026	48,663	7,363	
d	INVESTMENT FEES	32,407	0	32,407	
e	MEMBERSHIP & DUES	5,000	0	5,000	
	All other expenses MISCELLANEOUS	5,370	3,741	1,629	
<u> 25</u>	Total functional expenses. Add lines 1 through 24f	605,777	393,792	211,985	
26	Joint Costs. Check here ▶ ☐ if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Pa	rt X	Balance Sheet			<del></del>		
			(A) Beginning of year		End (	B) of year	
	1	Cash—non-interest-bearing		1_			
	2	Savings and temporary cash investments	169,548	2		356,	269
	3	Pledges and grants receivable, net		3			
Assets	4	Accounts receivable, net		4			
	5	Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L.		5			
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L	<u> </u>		t the same of the	-	****
જ	7	Notes and loans receivable, net		7			
set	8	Inventories for sale or use	86,878	8		48,	238
As	9	Prepaid expenses and deferred charges	750	9			0
	10a	Land, buildings, and equipment: cost basis 10a				\$ . 5m	1.81
	b			10c		- 12	
	11	Investments—publicly traded securities	6,938,795	11		6,098,	371
	12	Investments—other securities. See Part IV, line 11		12			
	13	Investments—program-related. See Part IV, line 11		13			
	14	Intangible assets		14			
	15	Other assets See Part IV, line 11	25,253	15		14,	574
	16	Total assets. Add lines 1 through 15 (must equal line 34)	7,221,224	16		6,517,	452
	17	Accounts payable and accrued expenses	35,617	17		44,	438
	18	Grants payable		18			
	19	Deferred revenue	101,666	19		59,	999
	20	Tax-exempt bond liabilities		20			
es	21	Escrow account liability. Complete Part IV of Schedule D		21			
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified		22			- 3
		persons. Complete Part II of Schedule L		23	<del></del>		
	23	Secured mortgages and notes payable to unrelated third parties		24			
	24	Unsecured notes and loans payable	2,496	25		7	098
	25 26	Total liabilities. Add lines 17 through 25	139,779		<del> </del>	111,	
es -		Organizations that follow SFAS 117, check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.	100,110				500
Ē	^=		467,834	27		490.	603
Balances	27	Unrestricted net assets	407,004	28	<del> </del>	-100,	-
	28 29	Temporarily restricted net assets	6,613,611	29	<del> </del>	5,915,	314
or Fund	29	Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 30 through 34.				* 3. 3.	-
	30	Capital stock or trust principal, or current funds		30		i	
set	31	•		31			
As	32	Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds		32			
Net Assets	33	Total net assets or fund balances	7,081,445	33		6,405,	917
Z	34	Total liabilities and net assets/fund balances	7,221,224	34		6,517,	
Pa	rt XI	Financial Statements and Reporting					
_	Λ		I ☐ Other			Yes	No
1					2a		1
		te the organization's financial statements compiled or reviewed by an including the organization's financial statements audited by an independent according to the organization of the org	•	ır.	2b	<del>  -</del>	<u>,</u>
		e the organization's financial statements audited by an independent acc 'es" to lines 2a or 2b, does the organization have a committee that assumes		 sidht :			<u> </u>
·		audit, review, or compilation of its financial statements and selection of an ir		-		NA	·
<b>3</b> a	Asa	a result of a federal award, was the organization required to undergo an	•				
		Single Audit Act and OMB Circular A-133?			. <u>3a</u>	<del>     </del>	✓_
	) IT "Y	es," did the organization undergo the required audit or audits?			.   3b	I N/A	١

### **SCHEDULE A**

(Form 990 or 990-EZ)

# **Public Charity Status and Public Support**

OMB No 1545-0047

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

AMERICAN BANKERS ASSOCIATION EDUCATION FOUNDATION    83 : 0.397856  237856  237851  The organization is not a private foundation because it is: (Please check only one organization.)  1	on number	r identificat	Employe							he organization	e of t	Nam
The organization is not a private foundation because it is: (Please check only one organization.)  A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).  A chorol described in section 170(b)(1)(A)(ii). (Attach Schedule E.)  A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule E.)  A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). (Enter hospital's name, city, and state.  5	<del></del>										ERIC	AM
A church, convention of churches, or association of churches described in section 170(b)(1)(A)(ii). Attach Schedule E.)  A school described in section 170(b)(1)(A)(iii), (Attach Schedule E.)  A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). (Attach Schedule H.)  A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter hospital's name, city, and state.  An organization operated for the benefit of a college or university owned or operated by a governmental unit describes section 170(b)(1)(A)(iii). (Complete Part II.)  A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).  A organization that normally receives a substantial part of its support from a governmental unit or from the general pudescribed in section 170(b)(1)(A)(iii). (Complete Part III.)  A community trust described in section 170(b)(1)(A)(iii). (Complete Part III.)  A community trust described in section 170(b)(1)(A)(iii). (Complete Part III.)  An organization that normally receives: (1) more than 33½ % of its support from contributions, membership fees, and greceipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33½ % o support from gross investment income and unrelated business taxable income (less section 511 tax) from busines acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out purposes of one or more publicly supported organizations described in section 509(a)(2). (see section 509(a)(2). See section 509(	tions)	e instruc	part.) (se	ete this j	t comple	ons mus	ganizatio	harity Status (All org	for Public Ch	Reason	irt I	Pa
3		A)(i).			-	hes desci	of churcl	urches, or association	onvention of chu	A church, co	_	1
A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter hospital's name, city, and state.  5  □ An organization operated for the benefit of a college or university owned or operated by a governmental unit describe section 170(b)(1)(A)(iv). (Complete Part II.)  6  □ A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).  7  □ An organization that normally receives a substantial part of its support from a governmental unit or from the general pudescribed in section 170(b)(1)(A)(vi). (Complete Part II.)  8  □ A community frust described in section 170(b)(1)(A)(vi). (Complete Part II.)  9  □ An organization that normally receives: (1) more than 33/9 % of its support from contributions, membership fees, and greceipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33/4 % of support from gross investment income and unrelated business taxable income (less section 511 tax) from busines acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)  10  □ An organization organized and operated exclusively to test for public safety. See section 509(a)(4). (see instructions) and organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See see 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h.  a □ Type II b □ Type II c □ Type IIII—Functionally integrated d ☑ Type III—Oth  By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disquall persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).  If the organization received a written determination from the IRS that it is											닏	2
hospital's name, city, and state.  An organization operated for the benefit of a college or university owned or operated by a governmental unit describes section 170(b)(1)(A)(iv).  An organization that normally receives a substantial part of its support from a governmental unit or from the general pudescribed in section 170(b)(1)(A)(vi). (Complete Part II.)  An organization that normally receives: (1) more than 33½ % of its support from contributions, membership fees, and grecipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33½ % of support from gross investment income and unrelated business taxable income (less section 511 tax) from businest acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)  An organization organized and operated exclusively to test for public safety. See section 509(a)(4). (see instructions) for a governmental unit or generated exclusively to test for public safety. See section 509(a)(4). (see instructions) for public safety. See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h.  a ☐ Type I b ☐ Type III c ☐ Type IIII—Functionally integrated d d ☑ Type IIII—Oth even than foundation managers and other than one or more publicly supported organizations described in sec 509(a)(1) or section 509(a)(2).  f If the organization received a written determination from the IRS that it is a Type I, Type III, or Type III supporting organization, check this box  Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?  (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?  (ii) A family member of a person described in (i) above?  (iii) A family member of a person described in (i) above?  (iv) Is the organization in col (i) organization in col (i) organization in col (i												-
section 170(b)(1)(A)(iv). (Complete Part II.)  A rederal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).  An organization that normally receives a substantial part of its support from a governmental unit or from the general pudescribed in section 170(b)(1)(A)(vi). (Complete Part II.)  An organization that normally receives: (1) more than 33% % of its support from contributions, membership fees, and greeipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33% % of support from contributions, membership fees, and greeipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33% % of support from contributions, membership fees, and greeipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33% % of support from contributions, membership fees, and greeipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33% % of supporting from activities and green acquired by the organization acquired by the organization acquired by the organization acquired by the organization organized and operated exclusively to test for public safety. See section 509(a)(4). (see instructions)  An organization organized and operated exclusively to the benefit of, to perform the functions of, or to carry out purposes of one or more publicly supported organizations described in section 509(a)(1). Cerclify that that describes the type of supporting organization and complete lines 11e through 11h.  a								tate.	ame, city, and st	hospital's na		4
An organization that normally receives a substantial part of its support from a governmental unit or from the general pudescribed in section 170(b)(1)(A)(vi). (Complete Part II.)	unit described in							mplete Part II.)	(b)(1)(A)(iv). (Co	section 170		5
described in section 170(b)(1)(A)(vi). (Complete Part II.)    A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)   An organization that normally receives: (1) more than 33/5 % of its support from contributions, membership fees, and greceipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33/5 % or support from gross investment income and unrelated business taxable income (less section 511 tax) from busines acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)												6
9	he general public	t or from t	nental uni	governm	ort from a	its suppo						7
receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33/4 % or support from gross investment income and unrelated business taxable income (less section 511 tax) from businest acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)  10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). (see instructions) 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See sec 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h.  a Type I b Type II c Type III—Functionally integrated d Type III—Othe Part III.)  e We show that the organization is not controlled directly or indirectly by one or more disquall persons other than foundation managers and other than one or more publicly supported organizations described in sec 509(a)(1) or section 509(a)(2).  f If the organization received a written determination from the IRS that it is a Type II, Type III, or Type III supporting organization, check this box												8
An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See sec 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h.  a ☐ Type I	than 331/4 % of its from businesses	no more 511 tax)	, and (2) s section Part III.)	cceptions ome (les: omplete F	certain ex xable inc (a)(2). (Co	bject to d siness tax tion 509(	ions-su lated bus See <b>sec</b>	ed to its exempt funct nent income and unrein n after June 30, 1975.	n activities relate n gross investm the organization	receipts from support from acquired by		9
e  By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disquality persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).  f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box  g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?  (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?  (ii) A family member of a person described in (i) above?  (iii) A 35% controlled entity of a person described in (i) above?  (iii) A 35% controlled entity of a person described in (i) or (ii) above?  (iv) Is the organization supports.  (v) Did you notify the organization in the organization in coli (i) of your support?  (vi) Is the organization in coli (i) organization in coli (i) organization in the governing document?  (vii) Is the organization in coli (i) organization in the governing document?  (viii) Is the organization in coli (i) organization in coli (i) organization in the governing document?  (vii) Is the organization in coli (i) organization in the governing document?  (viii) Is the organization in the governing document?  (vii) Is the organization in the governing document?  (viii) A mount organization in the governing document?  (viiii) A mount organization in the governing document?	to carry out the a)(2). See section ough 11h.	anization organized and operated exclusively for the benefit of, to perform the functions of, or to carry ses of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(1) or section 509(a)(2).						An organiza purposes of 509(a)(3). Cl				
organization, check this box  g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?  (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?  (ii) A family member of a person described in (i) above?  (iii) A 35% controlled entity of a person described in (i) or (ii) above?  (i) Name of supported organization about the organizations the organization supports.  (i) Name of supported organization (iii) EIN  (iii) Type of organization ((v) listed in your governing document?  (iv) Did you notify the organization in col (i) organization in col (ii) organization in col (ii) organization in col (iii) organization in col (iii) organization in col (iii) organization in	more disqualified	y one or	irectly by	tly or ind	led direc	t control	ion is no	tify that the organizat	this box, I cert er than foundation	By checking persons other	• 🗷	е
following persons?  (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?  (ii) A family member of a person described in (i) above?  (iii) A 35% controlled entity of a person described in (i) or (ii) above?  h Provide the following information about the organizations the organization supports.  (i) Name of supported organization described on lines 1-9 above or IRC section (see instructions))  (iii) Type of organization in col. (i) listed in your governing document?  (iv) Is the organization in col. (i) of your support?  (vi) Is the organization in col. (i) organized in the US?  Yes No Yes No Yes No  AMERICAN	III supporting							<b>.</b>	, check this box	organization		f
(ii) A family member of a person described in (i) above?  (iii) A family member of a person described in (i) above?  (iii) A 35% controlled entity of a person described in (i) or (ii) above?  (i) Name of supported organization  (ii) EIN  (iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))  (iv) Is the organization in col (i) organization in col (ii) orga	<del></del>		-			_		•	rsons?	following pe	I	g
(iii) A 35% controlled entity of a person described in (i) or (ii) above?  h Provide the following information about the organizations the organization supports.  (i) Name of supported organization  (ii) EIN  (iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))  (iv) Is the organization in col. (i) listed in your governing document?  (vi) Did you notify the organization in col. (i) of your support?  (vii) S the organization in col. (i) organized in the US?  Yes No Yes No Yes No  AMERICAN	11g(i) 🗸	oed in (ii)	is descrit	th person								
h Provide the following information about the organizations the organization supports.  (i) Name of supported organization  (ii) EIN  (iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))  (iv) Is the organization the organization in col. (i) listed in your governing document?  (vi) Did you notify the organization in col (i) of your support?  (vii) S the organization in col (i) organized in the US?  Yes No Yes No Yes No  AMERICAN												
(ii) Name of supported organization (described on lines 1-9 above or IRC section (see instructions))  (iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))  (iv) Is the organization in col. (i) Isted in your governing document?  (vi) Did you notify the organization in col. (i) of your support?  (vi) Is the organization in col. (i) of your support?  (vi) Is the organization in col. (i) of your support?  Ves No Yes No Yes No	11g(iii)  ✓											
organization (described on lines 1-9 above or IRC section (see instructions))  (described on lines 1-9 in col. (i) listed in your governing document?  The organization in col. (i) of your support?  The organization in col. (i) organized in the U.S?  Yes No Yes No Yes No  AMERICAN  9									T		·	
AMERICAN 9		zion in col zed in the	organızat (i) organı	nization in of your	the organ	sted in your	in col. (i) h	(described on lines 1–9 above or IRC section	(II) EIN			(1)
		No	Yes	No	Yes	No	Yes					
	0		1		1		<b>√</b>	9	52-1001304			
		_										

Total

N/A

Sched	dule A (Form 990 or 990-EZ) 2008							Page 2
Par	Support Schedule for Org (Complete only if you chec					and	170(b)(1	)(A)(vi)
Sec	tion A. Public Support		<u> </u>					
Ca	lendar year (or fiscal year beginning in) 🕨	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e	2008	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")							
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
3	The value of services or facilities furnished by a governmental unit to the organization without charge							
4	<b>Total.</b> Add lines 1-3					<u> </u>		
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)		1			-		
6	Public support. Subtract line 5 from line 4.	後	<u> </u>			-2		
	tion B. Total Support	1 11222		4 ) 2222				
Ca	lendar year (or fiscal year beginning in) ▶	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e	2008	(f) Total
7	Amounts from line 4							
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							<u>-</u>
9	Net income from unrelated business activities, whether or not the business is regularly carried on							
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)							
11	Total support. Add lines 7 through 10 .		<u> </u>		<u> </u>			
12	Gross receipts from related activities, etc	•	,			12		
13	First five years. If the Form 990 is for organization, check this box and stop he	re	<u> </u>	nd, third, fourth	ı, or fifth tax y	ear a	s a section	on 501(c)(3)
	tion C. Computation of Public Su	-				1	ī	
14	Public support percentage for 2008 (line	, ,,	•		•	14		
15	Public support percentage from 2007 Sci					15_	<u> </u>	%_
16a	a 33% % support test—2008. If the organization did not check the box on line 13, and line 14 is 33% % or more, check this box							
	and stop here. The organization qualifies as a publicly supported organization							
b								_
47-	box and stop here. The organization qua	•	• • •	· ·				▶ ∟ 4.00/.ar
1/a	a 10%-facts-and-circumstances test—2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.							
b 18	10%-facts-and-circumstances test—2007 more, and if the organization meets the "forganization meets the "facts-and-circumstate Private foundation. If the organization did	acts-and-circum ances" test. The	nstances" test, o organization qua	check this box a difies as a public	and <b>stop here.</b> bly supported or	Expla ganıza	in in Part	IV how the
	=							

N/A

	rt III Support Schedule for Orga (Complete only if you checke	nizations De ed the box or	scribed in S In line 9 of Pa	Section 509(a art I.)	a)(2) 		
	tion A. Public Support			· · · · · · · · · · · · · · · · · · ·	T	<del>,</del>	
C	alendar year (or fiscal year beginning in) 🕨	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include						
2	any "unusual grants.")  Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1-5				<u>-</u>		
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons .						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
C	Add lines 7a and 7b			ļ	<del></del>		
8	Public support (Subtract line 7c from line 6)		* * *. *. *. *. *. *. *. * * * * * * *	\$ 1.80 P.		. >	
	tion B. Total Support				<del> </del>	1	
C	alendar year (or fiscal year beginning in) ▶	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 10a	Amounts from line 6						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975		<b>-</b>				
C	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11,					+,	
14	First five years. If the Form 990 is for to organization, check this box and stop l	he organizatio		<del> </del>		year as a se	ction 501(c)(3)
Sec	tion C. Computation of Public Su		ntage	·	····	•	
15	Public support percentage for 2008 (lin	•	<del> </del>	ne 13 column	/f)\	15	%
16	Public support percentage from 2007 S					16	%
Sec	tion D. Computation of Investmen					•	
17	Investment income percentage for 2008	3 (line 10c, col	umn (f) dıvıde	d by line 13, c	olumn (f)) .	17	%
18	Investment income percentage from 20					18	%
19a	17 is not more than 331/3 %, check this be	ox and <b>stop he</b>	e <b>re.</b> The organ	ızatıon qualifies	s as a publicly	supported o	rganization 🕨 🗀
b	33\% % support tests - 2007. If the organ line 18 is not more than 33\% %, check this						

Part IV	Supplemental Part II, line 17a	Information. a or 17b; or P	Complete art III, line	this part to 12. Provide	provide tany other	he explana additional i	tion required nformation. (s	by Part II, line 10; see instructions)
							-	
						••••		
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				••••				

### SCHEDULE D (Form 990)

# **Supplemental Financial Statements**

OMB No 1545-0047

Department of the Treasury Internal Revenue Service ► Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Open to Public Inspection

	ne of the organization	Employer identification number
	MERICAN BANKERS ASSOCIATION EDUCATION FOUNDATION	83 : 0397856
Par	Organizations Maintaining Donor Advised Funds or Other Similar the organization answered "Yes" to Form 990, Part IV, line 6.	
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year .	
5	Did the organization inform all donors and donor advisors in writing that the assets he funds are the organization's property, subject to the organization's exclusive legal control or the organization or th	
3	Did the organization inform all grantees, donors, and donor advisors in writing that gused only for charitable purposes and not for the benefit of the donor or donor advisimpermissible private benefit?	rant funds may be sor or other
Par	Conservation Easements. Complete if the organization answered "Yes"	to Form 990, Part IV, line 7.
2	, , , , , , , , , , , , , , , , , , , ,	on of an historically important land area on of certified historic structure
	of the last day of the tax year.	Held at the End of the Yea
a b c d	Number of conservation easements on a certified historic structure included in (a) .	2a 2b 2c
3	Number of conservation easements modified, transferred, released, extinguished, or the taxable year ▶	
4	Number of states where property subject to conservation easement is located ▶	
5	Does the organization have a written policy regarding the periodic monitoring, inspect enforcement of the conservation easements it holds?	ction, violations, and
6	Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements	
7	Amount of expenses incurred in monitoring, inspecting, and enforcing easements du	
8	Does each conservation easement reported on line 2(d) above satisfy the requirement 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	
9	In Part XIV, describe how the organization reports conservation easements in its reverbalance sheet, and include, if applicable, the text of the footnote to the organization the organization's accounting for conservation easements.	enue and expense statement, and s financial statements that describes
Par	Organizations Maintaining Collections of Art, Historical Treasures, or Complete if the organization answered "Yes" to Form 990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116, not to report in its revenue art, historical treasures, or other similar assets held for public exhibition, education, or in provide, in Part XIV, the text of the footnote to its financial statements that describes	research in furtherance of public service
b	historical treasures, or other similar assets held for public exhibition, education, or reprovide the following amounts relating to these items:  (i) Revenues included in Form 990, Part VIII, line 1	esearch in furtherance of public service
2	(ii) Assets included in Form 990, Part X  If the organization received or held works of art, historical treasures, or other similar following amounts required to be reported under SEAS 116 relating to these items:	
a b		<b>&gt;</b> \$

Schedule D (Form 990) 2008 N/A Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued) Part III Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply): Public exhibition Loan or exchange programs а Scholarly research b Preservation for future generations C Provide a description of the organization's collections and explain how they further the organization's exempt purpose in 4 Part XIV. During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes N/A Trust, Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? . . . Yes No. . . . . . . . . . **b** If "Yes," explain the arrangement in Part XIV and complete the following table: 1c c Beginning balance . . . 1d d Additions during the year . . . . Distributions during the year . . . 1e 1f Ending balance Yes No Did the organization include an amount on Form 990, Part X, line 21? If "Yes," explain the arrangement in Part XIV. Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10. Part V (c) Two years back (b) Prior year (d) Three years back (e) Four years back (a) Current year 6,613,611 1a Beginning of year balance . . . Contributions . . . . . . . (698, 297)× Investment earnings or losses d Grants or scholarships . . . Other expenditures for facilities and programs . . . . . . Administrative expenses . . . End of year balance. 5,915,314 q Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment ▶ ......% Permanent endowment ► 100 % Term endowment ▶ .....% 3a Are there endowment funds not in the possession of the organization that are held and administered for the Yes No organization by: 3a(i) (i) unrelated organizations 3a(ii) (ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 3b Describe in Part XIV the intended uses of the organization's endowment funds. Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10. (a) Cost or other basis (b) Cost or other Description of investment (c) Depreciation (d) Book value (investment) basis (other) 1a Land . . Buildings Leasehold improvements Other Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).)

		s. See Form 990, Part	73, 1110 121		
<ul><li>(a) Description of security or categor</li><li>(including name of security)</li></ul>	ory	(b) Book value		(c) Metho Cost or end-o	od of valuation f-year market value
Financial derivatives and other financial		-	<del>-  </del>		· · · · · · · · · · · · · · · · · · ·
		ì			
Closely-held equity interests Other					<u> </u>
		· <del>                                    </del>		<del></del>	<del></del>
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		• <del>† • • • • • • • • • • • • • • • • • •</del>			
		-			
		· <del>  </del>			
		· - <del></del>			
Total. (Column (b) should equal Form 990, Part X, co.	I (R) line 121				
		ed. See Form 990, Par	Y line 13		<u> </u>
			1 7, 1116 10.	4-2-84-45-	
(a) Description of investment type	9	(b) Book value			od of valuation of-year market value
				<del></del>	<u> </u>
				<del></del>	
<u></u>		·-			
		+			
		<u> </u>			· · ·
		<del>- </del>	<del></del>		
		+		<del></del>	
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					(5) (5)
Part IX Other Assets. See F		art X, line 15. (a) Description			(b) Book valu
Part IX Other Assets. See F ACCRUED INTEREST					13
Part IX Other Assets. See F					
Part IX Other Assets. See F ACCRUED INTEREST					13
Part IX Other Assets. See F ACCRUED INTEREST					13
ACCRUED INTEREST					13
Part IX Other Assets. See F ACCRUED INTEREST					13
Part IX Other Assets. See F ACCRUED INTEREST					13
Part IX Other Assets. See F ACCRUED INTEREST					13
Part IX Other Assets. See F ACCRUED INTEREST					13
Part IX Other Assets. See F ACCRUED INTEREST PENDING INVESTMENT SALES	Form 990, P	(a) Description			13
Part IX Other Assets. See F ACCRUED INTEREST PENDING INVESTMENT SALES  Total. (Column (b) should equal Form S	Form 990, P	(a) Description  Oi. (B) line 15 )			13
Part IX Other Assets. See F  ACCRUED INTEREST PENDING INVESTMENT SALES  Total. (Column (b) should equal Form 9  Part X Other Liabilities. See	Form 990, P	(a) Description  Oi. (B) line 15 )			13
Part IX Other Assets. See F  ACCRUED INTEREST PENDING INVESTMENT SALES  Total. (Column (b) should equal Form 9  Part X Other Liabilities. Se  (a) Description of liability	Form 990, P	(a) Description  Oi. (B) line 15 )			13
ACCRUED INTEREST PENDING INVESTMENT SALES  Total. (Column (b) should equal Form 9 Part X Other Liabilities. Se  (a) Description of liability Federal income taxes	Form 990, P	(a) Description  ol. (B) line 15)  Part X, line 25.			13
Part IX Other Assets. See F  ACCRUED INTEREST PENDING INVESTMENT SALES  Total. (Column (b) should equal Form 9  Part X Other Liabilities. Se  (a) Description of liability	Form 990, P	(a) Description  ol. (B) line 15 ) , Part X, line 25.  (b) Amount		<	13
ACCRUED INTEREST PENDING INVESTMENT SALES  Total. (Column (b) should equal Form 9 Part X Other Liabilities. Se  (a) Description of liability Federal income taxes	Form 990, P	(a) Description  ol. (B) line 15 ) , Part X, line 25.  (b) Amount			13
ACCRUED INTEREST PENDING INVESTMENT SALES  Total. (Column (b) should equal Form 9 Part X Other Liabilities. Se  (a) Description of liability Federal income taxes	Form 990, P	(a) Description  ol. (B) line 15 ) , Part X, line 25.  (b) Amount			13
ACCRUED INTEREST PENDING INVESTMENT SALES  Total. (Column (b) should equal Form 9 Part X Other Liabilities. Se  (a) Description of liability Federal income taxes	Form 990, P	(a) Description  ol. (B) line 15 ) , Part X, line 25.  (b) Amount			13
Part IX Other Assets. See F  ACCRUED INTEREST PENDING INVESTMENT SALES  Total. (Column (b) should equal Form S  Part X Other Liabilities. Se  (a) Description of liability Federal income taxes	Form 990, P	(a) Description  ol. (B) line 15 ) , Part X, line 25.  (b) Amount			13
Part IX Other Assets. See F  ACCRUED INTEREST PENDING INVESTMENT SALES  Total. (Column (b) should equal Form S  Part X Other Liabilities. Se  (a) Description of liability Federal income taxes	Form 990, P	(a) Description  ol. (B) line 15 ) , Part X, line 25.  (b) Amount			13
Part IX Other Assets. See F  ACCRUED INTEREST PENDING INVESTMENT SALES  Total. (Column (b) should equal Form S  Part X Other Liabilities. Se  (a) Description of liability Federal income taxes	Form 990, P	(a) Description  ol. (B) line 15 ) , Part X, line 25.  (b) Amount			13
ACCRUED INTEREST PENDING INVESTMENT SALES  Total. (Column (b) should equal Form 9 Part X Other Liabilities. Se  (a) Description of liability Federal income taxes	Form 990, P	(a) Description  ol. (B) line 15 ) , Part X, line 25.  (b) Amount			13
ACCRUED INTEREST PENDING INVESTMENT SALES  Total. (Column (b) should equal Form 9 Part X Other Liabilities. Se  (a) Description of liability Federal income taxes	Form 990, P	(a) Description  ol. (B) line 15 ) , Part X, line 25.  (b) Amount			13
ACCRUED INTEREST PENDING INVESTMENT SALES  Total. (Column (b) should equal Form S Part X Other Liabilities. Se  (a) Description of liability Federal income taxes	Form 990, P	(a) Description  ol. (B) line 15 ) , Part X, line 25.  (b) Amount			13
ACCRUED INTEREST PENDING INVESTMENT SALES  Total. (Column (b) should equal Form S Part X Other Liabilities. Se  (a) Description of liability Federal income taxes	990, Part X, coe Form 990	ol. (B) line 15 )			13

	tille D (FORM 990) 2008		ugo
Par	t XI Reconciliation of Change in Net Assets from Form 990 to Financial Statement		·
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	(358,475)
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	605,777
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	(964,252)
4	Net unrealized gains (losses) on investments	4	288,724
5	Donated services and use of facilities	5	
6	Investment expenses	<u>6</u> 7	
7	Prior period adjustments	8	
8	Other (Describe in Part XIV)	9	
9	Total adjustments (net). Add lines 4–8	10	(675,528)
10 Den	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue		
	Total revenue, gains, and other support per audited financial statements	1	11.55
1 2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	200 720	1	
Ь	Donated services and use of facilities		
C	Recoveries of prior year grants		
d	Other (Describe in Part XIV)	4	
	Add lines 2a through 2d	2	e 353,868
3	Subtract line 2e from line 1		3 (358,475)
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV)		
C	Add lines <b>4a</b> and <b>4b</b>	4	С
5	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)		(000) 0
Pa	t XIII Reconciliation of Expenses per Audited Financial Statements With Expense	ses	
1	Total expenses and losses per audited financial statements	_1	670,921
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities	4	
b	Prior year adjustments	-	
С	Losses reported on Form 990, Part IX, line 25	_	
d	Other (Describe in Part XIV)		
е	Add lines 2a through 2d	2	<del></del>
3	Subtract line 2e from line 1	-	605,777
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	┥	
b	Other (Describe in Part XIV)	-	
C	Add lines <b>4a</b> and <b>4b</b>	4	
5 Pat	t XIV Supplemental Information	`	003,777
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a a 2b; Part V, line 4; Part X; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.	nd 4	; Part IV, lines 1b
Pai	t X:		
Pei	FASB Staff Position FIN 48-3, "Effective Date of FASB Interpretation No. 48 for Certain Nonp	ubli	c Enterprises",
the	adoption of FASB Interpretation 48 was deferred to fiscal years beginning after December 1	5, 20	08.
Pai	t XII, lines 2d: Cost of Goods Sold \$65,144 reported on Form 990 Part VIII, Line 10b.		
Pai	t XIII, lines 2d: Cost of Goods Sold \$65,144 reported on Form 990 Part VIII, Line 10b.		

Schedule D (For	n 990) 2008 Page 5 Supplemental Information (continued)
Part V, Line	· 4:
An annually	determined amount of income from the endowment funds is used for the general exempt purposes of the
organizatio	n.
•	

### **SCHEDULE J** (Form 990)

Department of the Treasury

in Part III

Internal Revenue Service

### **Compensation Information**

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

▶ Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

OMB No 1545-0047

Employer identification number

Open to Public Inspection

0397856 83 AMERICAN BANKERS ASSOCIATION EDUCATION FOUNDATION **Questions Regarding Compensation** Yes No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. ☐ Housing allowance or residence for personal use ☐ First-class or charter travel ☐ Payments for business use of personal residence ☐ Travel for companions Health or social club dues or initiation fees ☐ Tax indemnification and gross-up payments Personal services (e.g., maid, chauffeur, chef) ☐ Discretionary spending account b If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or 1b provision of all of the expenses described above? If "No," complete Part III to explain Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all 2 officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply. ķ, ☐ Compensation committee ☐ Written employment contract ☐ Compensation survey or study ☐ Independent compensation consultant Approval by the board or compensation committee Form 990 of other organizations During the year, did any person listed in Form 990, Part VII, Section A, line 1a: 4b **b** Participate in, or receive payment from, a supplemental nonqualified retirement plan? . . . . 4c c Participate in, or receive payment from, an equity-based compensation arrangement?. If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only 501(c)(3) and 501(c)(4) organizations must complete lines 5-8. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: 5a a The organization?. . 5b If "Yes" to line 5a or 5b, describe in Part III X For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: 6a a The organization?........... 6b If "Yes" to line 6a or 6b, describe in Part III. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed 7 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe 8

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed. Schedule J (Form 990) 2008

Part | Officers,

For each individual whose compensation must be reported in 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 are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

		(B) Breakdown of	W-2 and/or 1099-MISC compensation	C compensation	700000		To the state of	
(A) Name	<u>l</u>	(i) Base compensation		(iii) Other reportable compensation	compensation	benefits	(a)+(j)(a)	reported in prior Form 990 or Form 990-EZ
Virginia Dean	E E	276,590	35,000	4,122	147,000	13,078	475,790	
	(6)							
	€ €							
	88							
	6							
	(6)							
	(E)							
	6							
	(1)							
	(I) (II)							
	(i)							
	E E							
	E E							
	€ <b>E</b>							

Schedule J (Form 990) 2008

4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part Executive Director, Virginia Dean, is a participant in a supplemental nonqualified retirement plan of the American Bankers Association (ABA), a related organization. American Bankers Association Education Foundation relied on its related organization, American Bankers Association (FEIN: 52-1001304), to establish the top The plan is designed as a benefit restoration for the qualified plans sponsored by the American Bankers Association (ABA) Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, Approval by the board or compensation committee of the American Bankers Association Compensation survey or study done by American Bankers Association The accrued present value estimated benefits for the year is \$63,600. Compensation committee of the American Bankers Association management official's compensation by the following methods: Supplemental Information for any additional information. Part I, Line 4b Part I, Line 3:

Schedule J (Form 990) 2008

### **SCHEDULE O** (Form 990)

# Supplemental Information to Form 990

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

Open to Public Inspection

Employer identification number

83

AMERICAN BANKERS ASSOCIATION EDUCATION FOUNDATION	83	0397856
Part IV, Line 12:		
		mané iè in implicated in
Although the organization does not receive a separate stand alone GAAP audited financia	state	ment, it is included in
its related organization's, American Bankers Association, consolidated GAAP audited fina	ncial	statement from an
independent public accounting firm.	<b></b>	
Part VI, Line 6:		
The sole member of the American Bankers Association Education Foundation is the American	ican F	Rankers Association
The Sole member of the American Dankers Association Luncation 1 outlands in 18 the American	ican D	direis Association.
Part VI, Line 7a:	<b>-</b>	
The trustees and officers of the American Bankers Association Education Foundation are	appoi	nted and elected annually
by the American Bankers Association.		
<del></del>		
Part VI, Line 7b:	·	
The supreme authority of the Foundation is vested at the Annual Meeting.		
The Chairman of the American Bankers Association appoints the Foundation's Board of T	rustee	s at the Annual Meeting.
The Board of Trustees administers the affairs of the Foundation and has full authority to a	ct bet	ween Annual Meetings.
Part VI, Line 10:		
		······································
ABA's management, which includes certified public accountants, prepared the return and	then c	onducted several internal
reviews of the completed Form 990.		
	·	
	<b></b>	

Page 2 er identification number 0397856
each officer, member
and are in compliance
unity to discuss its
r to monitor compliance
Board.
loyees shown on Part VII,
Compensation
of the Foundation's top
ttee is made in
ensation study in 2008
AE, jobs were
rked position information
•••••
nplexity.
pensation arrangements.

Name of the organization  AMERICAN BANKERS ASSOCIATION EDUCATION FOUNDATION	Employer identification number 83 0397856
Part VI, Line 12c:	
The Foundation monitors and enforces its Conflicts of Interest Policy by, at least annual	y, having each officer, member
of the Board of Trustees, and key employees attest by signature that they have read, und	erstand, and are in compliance
with the policy. On an annual basis, the Board is provided a copy of the policy, offered a	n opportunity to discuss its
requirements, and have any questions answered. Staff attends the meetings of the board	d in order to monitor compliance
with the requirements and that the minutes of the meetings fairly represent the discussion	ns of the Board.
Part VI, Line 15b:	•••••
The American Bankers Association Education Foundation (ABAEF) has no employees.	Key employees shown on Part VII,
Section A, are employees of the related organization, American Bankers Association (AB	A). The Compensation
Committee of the American Bankers Association is responsible for reviewing the compe	nsation of the Foundation's top
management officers and key employees. The process used by the ABA's Compensation	n Committee is made in
conjunction with an outside independent consulting firm that conducted a comprehensive	e compensation study in 2008
for the Association. The methodology used included the following:	
Utilizing salary surveys, including those from Mercer, Watson Wyatt, PRM Consulting	, and ASAE, jobs were
benchmarked to comparable positions.	
The outside compensation consulting firm reviewed applicable market data and the b	enchmarked position information
and developed a market-based pay structure.	
Additional factors considered were position requirements, organizational impact, and	l job complexity.
Minutes are kept of the compensation committee's deliberations and decisions regard	ding compensation arrangements.
•	
Part VI, Line 19:	
The Foundation does not make its governing documents, conflict of interest policy, or its	financial statements available to
the public. The Foundation's Form 990 is available for public inspection upon request.	
Part VII, Column (B) - Average hours per week:	
Executive Director, Virginia Dean, and Director, Laura Fisher devote 36.5 and 18.5 hours	per week respectively to the
related organizations, American Bankers Association (FEIN:52-1001304).	

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

**AMERICAN BANKERS ASSOCIATION EDUCATION FOUNDATION** Identification of Disregarded Entities N/A

Related Organizations and Unrelated Partnerships

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Open to Public Inspection 2008

OMB No 1545-0047

Employer identification number

0397856

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► Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

Part I Identification of Disregarded Entities N/A					
(A) Name, address, and EIN of disregarded entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Total income	(E) End-of-year assets	(F) Direct controlling entity
Part II Identification of Related Tax-Exempt Organizations	ons				
(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Exempt Code section	(E) Public charity status (if section 501(c)(3))	(F) Direct controlling entity
AMERICAN BANKERS ASSOCIATION (52-1001304) 1120 CONNECTICUT AVE, NW, WASHINGTON, DC 20036	TRADE ASSOCIATION	DC	501 (C) (6)	N/A	N/A

Schedule R (Form 990) 2008

Cat No. 50135Y

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

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Identification of Related Organizations Taxable as a Partnership

Schedule R (Form 990) 2008

Part III

(J) General or managing partner? Yes No (H) Percentage ownership (I)
Code V—UB!
amount in box 20 of
Schedule K-1
(Form 1065) Share of end-of-year assets g (H)
Disproportionate
allocations? Yes No (F) Share of total income (G) Share of end-of-year assets Type of entity (C corp, S corp, or trust) Œ (F) Share of total income (D)
| Direct controlling entity Identification of Related Organizations Taxable as a Corporation or Trust N/A (E)
Predominant
income (related,
investment,
unrelated) (C)
Legal domicile
(state or
foreign country) (D) (Direct controlling entity Primary activity <u>@</u> (C)
Legal
domicile
(state or
foreign Name, address, and EIN of related organization Primary activity <u>@</u> Name, address, and EIN of related organization Part IV

Part V Transactions With Related Organizations			1
Note. Complete line 1 if any entity is listed in Parts II. III. or IV.		Yes No	٥
	d in Parts II–IV?		
a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity		1a /	_
Gift, grant, or capital contribution to other organization(s		16	
c Gift grant, or capital contribution from other organization(s)		1c /	
		/ Pt	
	•	1e /	
f Sale of assets to other organization(s)		11 /	
g Purchase of assets from other organization(s)		19 /	_
		1h /	
		<b>1</b>	
j Lease of facilities, equipment, or other assets from other organization(s)		1j /	ͺl
k Performance of services or membership or fundraising solicitations for other organization(s)		1k /	
1 Performance of services or membership or fundraising solicitations by other organization(s)		1= /	
m Sharing of facilities, equipment, mailing lists, or other assets		1m /	
n Sharing of paid employees		1n <	
			7
o Reimbursement paid to other organization for expenses		10 <	1
p Reimbursement paid by other organization for expenses		1p ~	
<b>q</b> Other transfer of cash or property to other organization(s)		, 19 \	- [
r Other		. 1r /	
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.	d relationships and tra	ansaction thresholds.	ان ا
(A) Name of other organization(s)	(B) Transaction type (a-r)	(C) Amount involved	
(1)	٤	\$106,080	اي
American Bankers Association (52-1001304)	E	\$314,669	ളി
American Bankers Association (52-1001304)	0	\$638,272	2
American Bankers Association (52-1001304)	٥	\$284.669	<u>g</u>

Schedule R (Form 990) 2008

\$284,669

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# AMERICAN BANKERS ASSOCIATION EDUCATION FOUNDATION

Schedule R (Form 990) 2008

Part VI Uni

Unrelated Organizations Taxable as a Partnership

N/A

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

or gross revenue) that was not a related organization, dee manufacturing exclusion for certain myestiment partitionally.	oli uctionis regarding exc	daile de l'alle l'el	vestinient part	ersinps.	ę	Į.	100
	(i)		2	, ( <u>1</u> )	<u> </u>		<u>E</u>
Name, address, and Ein of entity	Primary activity	Legal domicile (state or foreign country)	Are all partners section 501(c)(3) organizations?	Share of end-of-year assets	Oisproportionate altocations?	Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	General or managing partner?
			Yes		Yes		Yes No
					-		
			:				
		:					

Schedule R (Form 990) 2008