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Department of the Treasury

Return of Private Foundation
or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation
Note: The foundation may be able to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0052

2009

F	or ca	lendar	year 2009, c	r tax year beginning				, 2009	, and end	ing		, 20
G	Che	ck all t	hat apply	Initial return		Initia	l return o	of a former p	oublic cha	rity	L	Final return
				Amended return	<u> </u>		Addres	ss change			Name change	
			Name of four	ndation							A Employer ident	ification number
	Jse th	ne IRS	1									
	label. WORLD EDUCATION FOUNDAT				ATION					20)-0634413	
	Other		Number and	street (or P O box numb	er if mail is	s not delive	red to street	address)	Room/su	ute	B Telephone number (see page 10 of the instructions)
	pr or t	int 'ne										
5		pecific	PO BOX 2						l		<u> </u>	102) 505-6878
		ctions.	City or town,	state, and ZIP code							C If exemption appl pending, check his	ication is
											D 1. Foreign organi	zations, check here
_			OMAHA, N		_							zations meeting the k here and attach
H	_	• •	e of organizat			1						
1	s	ection 4	1947(a)(1) non	exempt charitable trust				ivate founda			E If private founda	tion status was terminated
I	Fair	marke	et value of all	assets at end JAc		-	d X C	ash [] Acc	crual		under section 503	7(b)(1)(A), check here .
			m Part II, col	(c), line		(specify)						is in a 60-month termination
_		▶ \$				mn (d) m	ust be on	cash basıs)			under section 507	(b)(1)(B), check here
j	art			nue and Expenses (T nlumns (b), (c), and (d)	he (a	a) Revenu	e and	(b) Net inve	estment	١,	(c) Adjusted net	(d) Disbursements for charitable
		may n	not necessarily	equal the amounts in		expenses	per	incom		'	income	purposes
_	1			e 11 of the instructions)	- 	books						(cash basis only)
	1	Contribut	tions, gifts, grants, e	etc , received (attach schedule) bundation is not required to	·	52	8,255.					
	2	Check]	attach S	Sch B	′.							
	3		•	temporary cash investments			10.		10.			Ameri 1
	4	Divider	nds and interes	st from securities	•		104		10.			ATCH 1
	5 a	Gross r	ents		·		_					<u> </u>
				s)		24	2,812.					
ne	6a h	Net gair	n or (loss) from s ales price for all	ale of assets not on line 10 251, 29	,		2,012.			ļ		
Revenue		assets o	on line 6a ⊸		-⊢-			24	2,812.			
Re	7	-	=	me (from Part IV, line 2)	1			-	2,012.			
	8		•	Igain								
	9 10 a		e modifications ales less returns		•							
		and allo	wances · · ·		+				•			
			ost of goods sold									
				(attach schedule)	-		15.					ATCH 2
				schedule)	L	77	1,092.	24	2,822.		-	1110112
	12								-	_		
1	13			s, directors, trustees, etc					.			
ses	14			ries and wages								
Sus.	15		• •	yee benefits	· (·	
Expenses				nedule)			_			_	<u>/</u> ED	<u> </u>
ė m				es (attach schedule) .*.		2	1,800.		RE	CE	IVED	
¥i∨	17			es (attach scheddie) HMENT 4			14.				18	
Administrative	18			(see page 14 of the instructions	<u>*</u> **		2,960.	15	S NO	/ 1	5 2010	
Ë	19		•	schedule) and depletion				3073	31 190	*	3 2010	
튬	20				!				i			
	21		-	and meetings			3,395.		OG	DE	N, UT	
and	22			ons								
ng	23			ch schedule) ATCH			322.					
Operating	24			administrative expense	- 1							
per			-	23	1		8,491.					
0	25		_	grants paid	- 1		3,701.					1,113,701
	26_			sements Add lines 24 and		1,14	2,192.					1,113,701
_	27		ct line 26 from									
				enses and disbursements		-37	1,100.					
				me (if negative, enter -0	-)			24	2,822.	ļ		
	1			(if negative, enter -0-).		_					-0-	-

For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions. * ATCH 3 JSA 9E1410 2 0000 4 60 2 4 P 2 XCG 10/21/2010 10:08:47 AM V 09-8.3

Cash - non-interest-bearing General Communication of the Revenue of the Reve	P)	art li	Ralance Sheets	Attached schedules and amounts in the	Beginning of year	End o	f year
2 Savengs and temporary cash investments . 3 Accounts receivable . Less allowance for doubtful accounts ▶ Less allowance for for saler or use Less allowance for doubtful accounts ▶ Less allowance for for saler or use Less allowance for saler day Less allowanc	_			amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
2 Savengs and temporary cash investments . 3 Accounts receivable . Less allowance for doubtful accounts ▶ Less allowance for for saler or use Less allowance for doubtful accounts ▶ Less allowance for for saler or use Less allowance for saler day Less allowanc		1	Cash - non-interest-bear	ing			
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10 a Investments - US and state government obligations (states herbidulo)					··		
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1 1 1 1 1 1 1 1 1 1	- 1	b	Investments - corporate	e stock (attach schedule) $ATCH$.7 $oxedsymbol{igspace}$	534,56/.	347,642.	4,799,970
Less accumulated depreciation (attach scriedule) (attach scriedul			Investments - land, building				
12 Investments - mortgage loans			and equipment basis Less accumulated deprecia (attach schedule)	ation			
Land, buildings, and everywhere the procession Cattack schedule)	ı	12					
Securing the state Securi		13	Investments - other (atta	ach schedule)			
15 Other assets (describe 16 Total assets (for be completed by all filers - see the instructions Also, see page 1, tem I) 534, 567 347, 642 4, 799, 970 17 Accounts payable and accrued expenses 51,848 107,632 18 Grants payable 20 Leans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable (attach schedule) 22 Other liabilities (describe 20 Other liabilities (describe 21 Mortgages and other notes payable (attach schedule) 23 Total liabilities (add lines 17 through 22) 51,848 107,632 10 Total liabilities (add lines 17 through 22) 51,848 107,632 10 Total notes that follow SFAS 117, check here 10 10 10 10 10 10 10 Total notes that do not follow SFAS 117, check here and complete lines 27 through 31 10 10 10 10 10 10 Total net assets or fund balances (see page 17 of the instructions) 482,719 240,010 10 10 10 10 10 Total net assets or fund balances (see page 17 of the instructions) 482,719 240,010 10 10 10 10 10 Total net assets or fund balances (see page 17 of the instructions) 482,719 240,010 10 10 10 10 10 10 10	- 1	14		>			
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31 Total liabilities and net assets/fund balances (see page 17 of the instructions)	Se	24	Unrestricted				
31 Total liabilities and net assets/fund balances (see page 17 of the instructions)	a	25					
31 Total liabilities and net assets/fund balances (see page 17 of the instructions)	Ba	26	Permanently restricted				
31 Total liabilities and net assets/fund balances (see page 17 of the instructions)	힏						
31 Total liabilities and net assets/fund balances (see page 17 of the instructions)			check here and com	plete lines 27 through 31.			
31 Total liabilities and net assets/fund balances (see page 17 of the instructions)	5	27			428,568.	428,568.	
31 Total liabilities and net assets/fund balances (see page 17 of the instructions)	ţ	28		· · ·			
31 Total liabilities and net assets/fund balances (see page 17 of the instructions)	Se	29		1	54,151.	-188,558.	
31 Total liabilities and net assets/fund balances (see page 17 of the instructions)	As	30	- -	· ·			
31 Total liabilities and net assets/fund balances (see page 17 of the instructions)	힐	30		1	482,719.	240,010.	
of the instructions)	- 1		Total liabilities and not	t secote/fund halances (see page 17			
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	<u>6</u>	Tota	I net assets or fund ba	alances at end of year (line 4 minus li	ne 5) - Part II, column (b),	line 30 6	

···	s and Losses for Tax on Inv		(b) How	(c) Date	(d) Data cold
	d describe the kind(s) of property sold (brick warehouse, or common stock, 200	- '	P-Purchase D-Donation	acquired	(d) Date sold (mo , day, yr)
1a SEE PART IV SCHE			D-Donassi,		
b					
С					
d					
е		, -	ļ	<u> </u>	
(e) Gross sales price	(f) Deprectation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) min	
a					
<u>b</u>			 		
<u>c</u>					···· ·· · · · · · · · · · · · · · · ·
<u>d</u>			 	 	
Complete only for exects o	l howing gain in column (h) and owr	and by the foundation on 12/31/69			
Complete only for assets s		(k) Excess of col (i)		Gains (Col (h) g (k), but not less	
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	over col. (j), if any		Losses (from co	
a					
<u>b</u>					
С			-		
<u>d</u>				·	
е	- 16	non also anton in Dort I line 7			
2 Capital gain net income or	· (not canital loce)	gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2		242,812.
	n or (loss) as defined in sections 12	•			
If gain, also enter in Part I,	, line 8, column (c) (see pages 13	and 17 of the instructions)			
If (loss), enter -0- in Part I,	line 8	<u> </u>	3		
Part V Qualification U	nder Section 4940(e) for Redu	uced Tax on Net Investment Inc	come		
	the section 4942 tax on the distrib not qualify under section 4940(e)		ase perio	d۶ [Yes X No
	ount in each column for each year		efore mal	king any entries	
(a)	(b)	(c)		(d)	
Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of nonchantable-use assets		Distribution r (col (b) divided by	
2008	1,253,359.	2,403,249.			0.521527
2007	911,081.	2,115,803.			0.430608
2006	397,540.	2,112,510.			0.188184
2005	1,203,867.	2,241,255.			0.537140
2004	889,000.	2,048,751.	ļ		0.433923
a Takal af laa da aalumam (d)					2.111382
2 Total of line 1, column (d))	the total on line 2 by 5, or by the	2		2.111302
•	- · · · · · · · · · · · · · · · · · · ·		,		0.422276
number of years the foun	dation has been in existence if less	s man 5 years	3		0.42270
4 Enter the net value of nor	ncharitable-use assets for 2009 fro	m Part X, line 5	4	3,	569,103.
5 Multiply line 4 by line 3			5	1,	507,147.
6 Enter 1% of net investme	ent income (1% of Part I, line 27b)		6		2,428.
7 Add lines 5 and 6			7	1,	509,575.
8 Enter qualifying distribution	ons from Part XII, line 4		8	1,	113,701.
If line 8 is equal to or gr Part VI instructions on page	eater than line 7, check the box i	n Part VI, line 1b, and complete			

Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of t	ne ins	tructio	ons)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1			
	Date of ruling or determination letter (attach copy of ruling letter if necessary - see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		4,8	56.
	here and enter 1% of Part I, line 27b			
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4%			
	of Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2		4 0	56.
3	Add lines 1 and 2		4,0	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4		1 0	0. 56.
5	Tax based on Investment Income. Subtract line 4 from line 3 If zero or less, enter -0		4,0	50.
6	Credits/Payments 2009 estimated tax payments and 2008 overpayment credited to 2009 6a 1, 400.			
	2000 communication payments and 2000 everyayment ordaned to 2000			
b	Exempt foreign organizations-tax withheld at source			
	Tax paid with application for extension of time to life (Form 6666)			
_ d	Backup withholding erroneously withheld		1,4	00.
7	Total credits and payments Add lines 6a through 6d			18.
8				43.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ATTACHMENT 9 • 9			
10 11	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Enter the amount of line 10 to be Credited to 2010 estimated tax O Refunded 11			
	t VII-A Statements Regarding Activities			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
ıa	participate or intervene in any political campaign?	1a		X
h	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19			
•	of the instructions for definition)?	1 b		Χ
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities			
С	Did the foundation file Form 1120-POL for this year?	1c		Х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation >\$ (2) On foundation managers > \$,	
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers > \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," attach a detailed description of the activities			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4 a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?			_X_
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that		Х	
	conflict with the state law remain in the governing instrument?	6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	^	
8 a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the instructions) $ ightharpoonup CA$,			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		,,	
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8ь	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
	4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page			v
	27)? If "Yes," complete Part XIV	9		<u>X</u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			Х
	names and addresses	10		^

Form 990-PF (2009)

X

Х

3 b

4a

3a Did the foundation hold more than a 2% direct or indirect interest in any business

b If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its

Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?

If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000

(b) Title, and average hours per week devoted to position

(c) Compensation

(d) Contributions to employee benefit plans and deferred compensation

(e) Expense account, other allowances

NONE

Total number of other employees paid over \$50,000

Part VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employand Contractors (continued)	/ees,
3 Five high	est-paid independent contractors for professional services (see page 23 of the instructions). If none,	enter "NONE."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
· · ·		
NONE		
Total number	r of others receiving over \$50,000 for professional services	▶ NONE
Part IX-A	Summary of Direct Charitable Activities	
List the found of organization	ation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number in and other beneficianes served, conferences convened, research papers produced, etc.	Expenses
1 N/A		
'-=		
2		
-		
3		
~ -		
-		
4		
Part IX-B	Summary of Program-Related Investments (see page 23 of the instructions)	-
	two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE		
2		
All other prog	ram-related investments. See page 24 of the instructions	
3 NONE		
Total. Add li	nes 1 through 3	

Pa		linimum Investment Return (All domestic foundations must complete this part. Foreige page 24 of the instructions.)	gn foundati	ons,
1	Fair mar	ket value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes			
а	Average	monthly fair market value of securities	1a	3,555,498.
b	Average	of monthly cash balances	1b	67,957.
C	Fair mar	ket value of all other assets (see page 24 of the instructions)	1c	0.
d	Total (ad	d lines 1a, b, and c)	1d	3,623,455.
е	Reductio	n claimed for blockage or other factors reported on lines 1a and		
	1c (attac	h detailed explanation)]	
2	Acquisition	on indebtedness applicable to line 1 assets	2	0.
3	Subtract	line 2 from line 1d	3	3,623,455.
4	Cash de	emed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see page 25		
	of the ins	structions)	4	54,352.
5	Net value	e of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	3,569,103.
6	Minimun	n investment return. Enter 5% of line 5	6	178,455.
Pa		istributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) prival undations and certain foreign organizations check here ▶ ☐ and do not complete this page 25.		
1	Mınımum	investment return from Part X, line 6	1	178,455.
2a	Tax on in	vestment income for 2009 from Part VI, line 5 2a 4,856.		
b	Income t	ax for 2009 (This does not include the tax from Part VI) 2b		
C	Add lines	2a and 2b	2c	4,856.
3	Distributa	2a and 2b	3	173,599.
4	Recover	es of amounts treated as qualifying distributions	4	
5	Add lines		5	173,599.
6		n from distributable amount (see page 25 of the instructions)	6	
7		able amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		-
			7	173,599.
Pa		ualifying Distributions (see page 25 of the instructions)		· · · · · · · · · · · · · · · · · · ·
1	Amount	s paid (including administrative expenses) to accomplish charitable, etc., purposes		
a		es, contributions, gifts, etc - total from Part I, column (d), line 26	1a	1,113,701.
b		n-related investments - total from Part IX-B	1b	0.
2	Amount	s paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
•	purpose	s	2	0.
3		s set aside for specific charitable projects that satisfy the		^
а	Suitabili	ty test (prior IRS approval required)	3a	0.
b	Cash di	stribution test (attach the required schedule)	3 b	0.
4		g distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	1,113,701.
5		tions that qualify under section 4940(e) for the reduced rate of tax on net investment income	_); /p
		% of Part I, line 27b (see page 26 of the instructions)	5	N/A
6	Adjuste	d qualifying distributions. Subtract line 5 from line 4	6	1,113,701.
	Note: T	he amount on line 6 will be used in Part V, column (b), in subsequent years when calculating w ualifies for the section 4940(e) reduction of tax in those years	hether the fo	oundation

Pa	The Undistributed Income (see page	e 26 of the instruction	115)		
1	Distributable amount for 2009 from Part XI,	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
	line 7				173,599.
2	Undistributed income, if any, as of the end of 2009				
а	Enter amount for 2008 only				
ь	Total for prior years 20 07 ,20 06 ,20 05				
3	Excess distributions carryover, if any, to 2009				
а	From 2004				
ь	From 2005 1,092,604.				
c	From 2006				
d	From 2007 806, 691.				
	From 2008				
	Total of lines 3a through e	4,115,807.			
4					
	line 4 ▶ \$1,113,701.				
а	Applied to 2008, but not more than line 2a			······································	
b	Applied to undistributed income of prior years (Election required - see page 26 of the instructions)				
c	Treated as distributions out of corpus (Election required - see page 26 of the instructions)				
d	Applied to 2009 distributable amount				173,599.
8	Remaining amount distributed out of corpus	940,102.			
5	Excess distributions carryover applied to 2009				
	(If an amount appears in column (d), the same amount must be shown in column (a))				
6	Enter the net total of each column as				İ
	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	5,055,909.			
b	Prior years' undistributed income Subtract				
c	line 4b from line 2b Enter the amount of prior years' undistributed				
Ū	income for which a notice of deficiency has been				
	issued, or on which the section 4942(a) tax has				
	been previously assessed			······································	
d	Subtract line 6c from line 6b Taxable				
A	amount - see page 27 of the instructions				
Ū	4a from line 2a Taxable amount - see page				
	27 of the instructions				
f	Undistributed income for 2009 Subtract lines				
	4d and 5 from line 1. This amount must be				
7	distributed in 2010				
•	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see page 27 of the				
8	instructions)			<u> </u>	
٠	applied on line 5 or line 7 (see page 27 of the	787,681.			
	instructions)	7077001.			
9	Excess distributions carryover to 2010.	4,268,228.			
4.0	Subtract lines 7 and 8 from line 6a	1,200,2201			
	Analysis of line 9 Excess from 2005 1,092,604.				
b	200 601				
C	1 105 005				
đ	2,0000 110111 2000				
e	Excess from 2009 940, 102.		L,		L

Form	1 990√PF (2009)			20-0	634413	Page 10
Рa	rt XIV Private Oper	rating Foundations	(see page 27 of the	e instructions and Pa	rt VII-A, question 9)	NOT APPLICABLE
1 a	If the foundation has	received a ruling or d	letermination letter the	at it is a private oper	ating	
	foundation, and the rulin					
b	Check box to indicate wh			•)(3) or 4942(j)(5)
		Tax year	 	Prior 3 years		
2 a		(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
	justed net income from Part I or the minimum investment		(0) 2000	(0) 2007	(4) 2000	
	return from Part X for each					
	year listed					
Ь	85% of line 2a					
C	Qualifying distributions from Part					
	XII, line 4 for each year listed .					
đ	Amounts included in line 2c not used directly for active conduct					
	of exempt activities					
e	Qualifying distributions made					
	directly for active conduct of exempt activities Subtract line					
	2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon					
а	"Assets" alternative test - enter					
	(1) Value of all assets					
	(2) Value of assets qualifying					
	under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test-					
	enter 2/3 of minimum invest-	j				
	ment return shown in Part X, line 6 for each year listed					
С	"Support" alternative test - enter					
	(1) Total support other than					
	gross investment income					
	(interest, dividends, rents, payments on securities					
	loans (section 512(a)(5)),					
	or royalties) (2) Support from general			 		
	public and 5 or more					
	exempt organizations as provided in section 4942					
	(j)(3)(B)(III)			 		
	(3) Largest amount of sup- port from an exempt					
	organization			 		
Do	(4) Gross investment income	any Information (C	omplete this part	only if the found	ation had \$5 000	or more in assets
Pa	rt XV Supplement at any time (during the year - se	e page 28 of the ir	nstructions.)	auon nau \$5,000	or more in assets
1	Information Regardin					
а	List any managers of	the foundation who h	nave contributed moi	re than 2% of the total	I contributions receiv	ed by the foundation
	before the close of any	y tax year (but only if th	ney have contributed	more than \$5,000) (S	ee section 507(d)(2))	
	NONE					
b	List any managers of	the foundation who	own 10% or more o	of the stock of a corp	oration (or an equally	large portion of the
-	ownership of a partner	rship or other entity) o	f which the foundatio	n has a 10% or greater	r interest	•
	NONE					
2	Information Regardin	g Contribution, Grant	, Gift, Loan, Scholars	hip, etc., Programs:		
	Check here ► X if t	the foundation only i	makes contributions	to preselected chara	table organizations a	nd does not accept
	unsolicited requests 1					
	organizations under of	her conditions, comple	ete items 2a, b, c, and	bb		
а	The name, address, a	nd telephone number	of the person to who	m applications should b	e addressed	
	The form in which app	lications should be su	bmitted and informat	ion and materials they	should include	
	Any submission dead	ines				
	-					
			1		ship Balde III I	
d	Any restrictions or lifactors	imitations on awards	, sucn as by geogr	apnicai areas, charita	ible itelds, kinds of	institutions, or other
	Idolois					

Part XV Supplementary Information (c 3 Grants and Contributions Paid Duri	ing the Year or Appl	roved for F	uture Payment	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of		Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Purpose of grant or contribution	Amount
a Paid during the year				
ATTACHMENT 11				
Total				1,113,701.
b Approved for future payment				
, ,				
		1		
	<u> </u>	<u></u>	<u> </u>	
Total			▶ 3b	I

er gross amounts unless otherwise indicated		ated business income		y section 512, 513, or 514	(e) Related or exempt function income
Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(See page 28 of the instructions)
a					
b					
С					
d					
e					
f					
g Fees and contracts from government agencies					
Membership dues and assessments			<u> </u>		
Interest on savings and temporary cash investments				10	
Dividends and interest from securities			14	10.	
Net rental income or (loss) from real estate					
a Debt-financed property					· · ·
b Not debt-financed property			-		
Net rental income or (loss) from personal property .					<u> </u>
Other investment income			18	242,812.	
Gain or (loss) from sales of assets other than inventory			18	242,012.	
Net income or (loss) from special events			 		
Gross profit or (loss) from sales of inventory			+		
Other revenue a h STATE REFUND			-	15.	
b STATE REFUND		-		15.	
c			+		
d					
e				l I	
0.44.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1	-			242 837	
Total. Add line 12, columns (b), (d), and (e) . e worksheet in line 13 instructions on page 28 fort XVI-B Relationship of Activities	to verify calc	ulations)	cempt Purp	oses	242,8
Total. Add line 12, columns (b), (d), and (e) . e worksheet in line 13 instructions on page 28 fart XVI-B Relationship of Activities ne No. Explain below how each activities the accomplishment of the form	to verify calc	ulations) complishment of Ex	kempt Purp	oses (e) of Part XVI-A con	242,8
Total. Add line 12, columns (b), (d), and (e) . e worksheet in line 13 instructions on page 28 fact XVI-B Relationship of Activities ne No. Explain below how each activity	to verify calc	ulations) complishment of Ex	kempt Purp	oses (e) of Part XVI-A con	242,8
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Total. Add line 12, columns (b), (d), and (e) . e worksheet in line 13 instructions on page 28 fart XVI-B Relationship of Activities ne No. Explain below how each activities the accomplishment of the form	to verify calc	ulations) complishment of Exch income is reporte exempt purposes (complishment)	kempt Purp d in column other than t	oses (e) of Part XVI-A con	242,8
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Explain below how each activities the accomplishment of the fo	to verify calc	ulations) complishment of Exch income is reporte exempt purposes (complishment)	kempt Purp d in column other than t	oses (e) of Part XVI-A con	242,8
rotal. Add line 12, columns (b), (d), and (e) . e worksheet in line 13 instructions on page 28 fart XVI-B Relationship of Activities ine No. Explain below how each activities the accomplishment of the form	to verify calc	ulations) complishment of Exch income is reporte exempt purposes (complishment)	kempt Purp d in column other than t	oses (e) of Part XVI-A con	242,8
Total. Add line 12, columns (b), (d), and (e) . we worksheet in line 13 instructions on page 28 to art XVI-B Relationship of Activities me No. Explain below how each activities the accomplishment of the form	to verify calc	ulations) complishment of Exch income is reporte exempt purposes (complishment)	kempt Purp d in column other than t	oses (e) of Part XVI-A con	242,8

Рa	rt XVI	Information Exempt Orga		Transfers To and T	Fransaction	s and Relati	ionships With	Nonci	harit	able
1 a	ın se	ction 501(c) of the C	ode (other than	engage in any of the n section 501(c)(3) organioncharitable exempt organization	nizations) or in				Yes	No
										X
h		ther assets			• • • • • • •			1a(2)		<u> </u>
_	-		naritable exempt	organization				1b(1)		X
				exempt organization						X
				ets				1 1	_	X
										X
				fundraising solicitations				1 1		X
C				other assets, or paid employer "Yes," complete the foll					fair r	
u				vices given by the repo						
	value	in any transaction or	sharing arran	igement, show in colum	n (d) the valu	ue of the good	ls, other assets, or	service	s red	eived
(a)	Line no	(b) Amount involved	(c) Name of	noncharitable exempt organiza	ition (d) D	Description of transf	fers, transactions, and sha	anng arrar	ngeme	nts
(-/		N/A	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		N/A					
			-			····	· · · · · · · · · · · · · · · · · · ·			
					-					
			<u> </u>							
										
						·				
2 a	is the	foundation directly or	indirectly affilia	ated with, or related to,	one or more ta	ix-exempt organi	zations described in			
	section	on 501(c) of the Code (oth	ner than section	501(c)(3)) or in section 527	"			Ye	s 🔼	No
b	If "Ye	s," complete the following (a) Name of organization		(b) Type of organ	uzation	1	(c) Description of relation	ship		
_		(a) Hame of organization		(c) Type or organ						
							<u>.</u>			
	-									
	Under belief,	penalties of perjury, I deci it is true, correct, and com	are that I have explete Declaration	remuned this return, including of preparer (other than taxpa	accompanying so yer or fiduciary) is	chedules and stater s based on all infor	ments, and to the best mation of which prepar	of my kn er has an	owled y know	ge and wiedge
<u>ə</u>	▶ -s	ignature of officer or trustee	* ()	10	Date	—	Title			
Sign Here	Paid Preparer's Use Only	Preparer's signature	Jul S	Muser	Date W/8/10	Check if self-employ	Preparer's number (\$ page 30 of P00056	ee Signa the instru	ture o	
••	Pal Prepa Use (Firm's name (or yours if	LUTZ	& COMPANY, PC			EIN ▶ 47-0625	816		
	ر ہ	self-employed), address and ZIP code	, 13616 OMAHA		-	E 300 68154-5336	Phone no 402-4	196-8	800	
			OPIANA	, NE		22124 2220	17.110110	Form 99		(2000)

Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury

Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, 990-EZ, or 990-PF.

OMB No 1545-0047

2009

Name of the organization Employer identification number WORLD EDUCATION FOUNDATION 20-0634413 Organization type (check one) Filers of: Section: 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor Complete Parts I and II Special Rules For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 331/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Parts I and II For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals Complete Parts I, II, and III For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF) Schedule B (Form 990, 990-EZ, or 990-PF) (2009) For Privacy Act and Paperwork Reduction Act Notice, see the Instructions

for Form 990, 990-EZ, or 990-PF.

Employer Identification number 20-0634413

Page

(a)	(b)	(c) Aggregate contributions	(d)
No.	Name, address, and ZIP + 4		Type of contribution
1	VINOD GUPTA CHARITABLE REMAINDER TRUST PO BOX 27395 OMAHA, NE 68127	\$ 500,255.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a)	(b)	(c) Aggregate contributions	(d)
No.	Name, address, and ZIP + 4		Type of contribution
2	MARK & ANNE HANSEN FOUNDATION 1615 M ST, STE 400 WASHINGTON, DC 20036-3215	\$25,000.	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a)	(b)	(c) Aggregate contributions	(d)
No.	Name, address, and ZIP + 4		Type of contribution
-		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a)	(b)	(c) Aggregate contributions	(d)
No.	Name, address, and ZIP + 4		Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a)	(b)	(c) Aggregate contributions	(d)
No.	Name, address, and ZIP + 4		Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

WORLD EDUCATION FOUNDATION

FORM 990-PF - PART IV

Kınd of P	roperty		Descri	ption		Date Date Date	Date sold
Gross sale price less expenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj basis as of 12/31/69	Excess of FMV over adj basis	Gain or (loss)	
34,120.		INFOGROUP 1,060.	COMMON STOCK			09/18/2001 33,060.	08/25/200
34,140.		INFOGROUP 1,060.	COMMON STOCK			09/18/2001 33,080.	08/25/200
8,228.		INFOGROUP 254.	COMMON STOCK			09/18/2001 7,974.	08/24/200
59,636.		INFOGROUP 1,866.	COMMON STOCK			09/18/2001 57,770.	08/24/200
33,841.		INFOGROUP 1,060.	COMMON STOCK			10/03/2001 32,781.	08/21/200
31,934.		INFOGROUP 1,060.	COMMON STOCK			10/03/2001 30,874.	08/18/200
24,544.		INFOGROUP 1,060.	COMMON STOCK			09/20/2001 23,484.	05/12/200
448.		INFOGROUP 21.	COMMON STOCK			09/20/2001	05/11/200
24,401.		INFOGROUP 1,039.	COMMON STOCK			09/20/2001 23,362.	05/11/200
OTAL GAIN(LC	oss)					<u>242,812.</u>	
					-		

- DIVIDENDS AND INTEREST FROM SECURITIES PART I FORM 990PF,

NET INVESTMENT INCOME	10.	10.
REVENUE AND EXPENSES PER BOOKS	10.	10.
		TOTAL
DESCRIPTION	NORTHERN TRUST	

FORM 990PF, PART I - OTHER INCOME

REVENUE AND EXPENSES

DESCRIPTION STATE REFUND PER BOOKS

15.

TOTALS

<u> 15.</u>

FORM 990PF, PART I - OTHER PROFESSIONAL FEES

REVENUE

AND

EXPENSES

PER BOOKS

PROFESSIONAL FEES

DESCRIPTION

21,800.

TOTALS

21,800.

FORM 990PF, PART I - INTEREST EXPENSE

REVENUE

AND

EXPENSES

PER BOOKS

DESCRIPTION

.

INTEREST

14.

TOTALS

14.

FORM 990PF, PART I - TAXES

REVENUE AND EXPENSES

DESCRIPTION

EXPENSES PER BOOKS

FEDERAL TAXES
STATE REGISTRATION

2,800. 160.

TOTALS

2,960.

DESCRIPTION

BANK CHARGES

OFFICE SUPPLIES

ATTACHMENT 6

FORM 990PF, PART I - OTHER EXPENSES

REVENUE

AND

EXPENSES

PER BOOKS

63. 59.

200.

322.

TOTALS

- CORPORATE STOCK PART II FORM 990PF,

DESCRIPTION

ENDING BOOK VALUE

ENDING

SECURITIES

347,642.

4,799,970.

TOTALS

347,642.

4,799,970.

ATTACHMENT 7

FORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR FUND BALANCES

DESCRIPTION

AMOUNT

UNREALIZED GAIN ON STOCK TRANSFER

128,391.

TOTAL

128,391.

NAME AND ADDRESS

TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION

VINOD GUPTA

9017 GREENSBORO LANE LAS VEGAS, NV 89134

TRUSTEE

9017 GREENSBORO LANE LAS VEGAS, NV 89134 JESS GUPTA

TRUSTEE

9017 GREENSBORO LANE LAS VEGAS, NV 89134 BENJAMIN K GUPTA

TRUSTEE

RICHARD J GUGGENHIME OMAHA, NE 68127 PO BOX 27395

TRUSTEE

HAROLD ANDERSON PO BOX 27395 OMAHA, NE 68127

GRAND TOTALS

TRUSTEE

ATTACHMENT 10

20-0634413

ATTACHMENT 11

l	l
WILL THE CHILD THE BALL BUILD THE	
7	
2	
7	
2	
L DIVI	
i	

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
VINOD GUPTA CHARITABLE FOUNDATION F-10/1, VASANT VIHAR 110057 NEW DELHI INDIA	PUBLIC	GENERAL AND CAPITAL EXPANSION	71,395.
UNIVERSITY OF NEBRASKA AT OMAHA 6001 DODGE STREET EPPLEY ADMINISTRATION BUILDING, ROOM 208 OMAHA, NE 68182	NONE PUBLIC	EDUCATION ASSISTANCE	6,140
THE JOHN F KENNEDY CENTER FOR THE PERFORMING ARTS 2700 F STREET NW WASHINGTON, DC 20566	NONE PUBLIC	MARK TWAIN PRIZE EVENT AND NSO SEASON OPENING BALL	23,000
WILLIAM J CLINTON FOUNDATION 55 WEST 125TH STREET NEW YORK, NY 10027	NONE 501(C)3	PROGRAMS OF THE FOUNDATION	1,000
THE FUND FOR THE TIGER PO BOX 2 WOODACRE, CA 94973	NONE 501 (C) 3	Operating	1,000
BLAIR HOUSE RESTORATION FUND PO BOX 27208 WASHINGTON, DC 20038	NONE PUBLIC	Е В В В В В В В В В В В В В В В В В В В	4,341

ATTACHMENT 11 (CONT'D)

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
THE IIT FOUNDATION KHARAGPUR INDIA	NONE	OPERATING AND CAPITAL EXPANSION	186,000
THE JOHN F KENNEDY CENTER 2700 F STREET NW WASHINGTON, DC 20566	NONE PUBLIC	OPERATING	29,900
BLAIR HOUSE RESTORATION FUND PO BOX 27208 WASHINGTON, DC 20038	NONE 501(C)(3)	ENDOWMENT	46,665
THE SAN FRANCISCO SYMPHONY 201 VAN NESS AVENUE SAN FRANCISCO, CA 94102	NONE	OPERATING	21,660
PHILLIPS EXETER ACADEMY 20 MAIN ST EXETER, NH 03833	NONE	OPERATING AND EDUCATIONAL ASSISTANCE	22,600

TOTAL CONTRIBUTIONS PAID

1,113,701.

PAGE 30 ATTACHMENT 11

SCHEDULE D (Form 1041)

Department of the Treasury Internal Revenue Service

Capital Gains and Losses

► Attach to Form 1041, Form 5227, or Form 990-T. See the instructions for Schedule D (Form 1041) (also for Form 5227 or Form 990-T, if applicable).

OMB No 1545-0092

2009

Employer Identification number Name of estate or trust 20-0634413 WORLD EDUCATION FOUNDATION Note: Form 5227 filers need to complete only Parts I and II Short-Term Capital Gains and Losses - Assets Held One Year or Less (e) Cost or other basis (f) Gain or (loss) for (a) Description of property (b) Date acquired (c) Date sold (d) Sales price (see page 4 of the the entire year (Example 100 shares 7% preferred of "Z" Co) (mo dav. vr) (mo day, yr) Subtract (e) from (d) instructions) 1a b Enter the short-term gain or (loss), if any, from Schedule D-1, line 1b Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 2 3 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts Short-term capital loss carryover Enter the amount, if any, from line 9 of the 2008 Capital Loss Net short-term gain or (loss). Combine lines 1a through 4 in column (f) Enter here and on line 13, column (3) on the back . . Long-Term Capital Gains and Losses - Assets Held More Than One Year (e) Cost or other basis (f) Gain or (loss) for (a) Description of property (b) Date acquired (c) Date sold (d) Sales price (see page 4 of the the entire year (Example 100 shares 7% preferred of "Z" Co) (mo , day, yr) (mo, day, yr) Subtract (e) from (d) instructions) 6a 242,812. **b** Enter the long-term gain or (loss), if any, from Schedule D-1, line 6b...... 6b Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 7 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts 8 8 9 Gain from Form 4797, Part I 10 10 Long-term capital loss carryover Enter the amount, if any, from line 14 of the 2008 Capital Loss Net long-term gain or (loss). Combine lines 6a through 11 in column (f) Enter here and on line 14a, 242,812. Schedule D (Form 1041) 2009 For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Sched	fule D (Form 1041) 2009				Page Z
Par	Summary of Parts I and II		(1) Beneficiaries'	(2) Estate's	i istintal
	Caution: Read the instructions before completing this p		(see page 5)	or trust's	
13	Net short-term gain or (loss)	13			
14	Net long-term gain or (loss):	440			242,812.
a		14a 14b			212,012.
	, , , , , , , , , , , , , , , , , , , ,	140 14c			
	28% rate gain				242,812.
	: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Form		-T Part I line 4a) If line	es 14a and 15 co	
	rt V, and do not complete Part IV If line 15, column (3), is a net loss, complete Pa				
Par	t IV Capital Loss Limitation				
	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Pa	ırt I, İı	ne 4c, if a trust), the sr	naller of	
					. ()
Note	The loss on line 15, column (3) or b \$3,000	i, lın	e 22 (or Form 990-T, li	ne 34), is a loss,	complete the Capital Loss
				-	
Par	·		····		dia Darilar Darilland
	n 1041 filers. Complete this part only if both lines 14a and 15 in colunt is is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more			rount is entere	o in Part i or Part ii ano
	ion: Skip this part and complete the worksheet on page 8 of the instruct				
	ther line 14b, col (2) or line 14c, col (2) is more than zero, or		•		
	oth Form 1041, line 2b(1), and Form 4952, line 4g are more than zero				
	n 990-T trusts. Complete this part only if both lines 14a and 15 are				
	orm 990-T, and Form 990-T, line 34, is more than zero. Skip this part	and	complete the works	sheet on page	8 of the instructions if
eithe	r line 14b, col (2) or line 14c, col (2) is more than zero			 	
17	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34) .	17		
18	Enter the smaller of line 14a or 15 in column (2)				
	but not less than zero		[
19	Enter the estate's or trust's qualified dividends				
	from Form 1041, line 2b(2) (or enter the qualified				
	dividends included in income in Part I of Form 990-T) 19				
20	Add lines 18 and 19		_		
21	If the estate or trust is filing Form 4952, enter the				
	amount from line 4g, otherwise, enter -0 ▶ 21				
22	Subtract line 21 from line 20 If zero or less, enter -0		22	-	
23	Subtract line 22 from line 17 If zero or less, enter -0		23		
24	Enter the smaller of the amount on line 17 or \$2,300		24		
25	is the amount on line 23 equal to or more than the amount on line 24?	,			
	Yes. Skip lines 25 and 26, go to line 27 and check the "No" box.		0.5		
	No. Enter the amount from line 23	• •			
26	Subtract line 25 from line 24		26		
27	Are the amounts on lines 22 and 26 the same?		27		
	Yes. Skip lines 27 thru 30; go to line 31 No. Enter the smaller of line 17 or line	122	21		
20	Enter the amount from line 26 (If line 26 is blank, enter -0-)		28		
28	Enter the amount from line 20 (if line 20 is blank, enter -0-)	• •	20		
29	Subtract line 28 from line 27		29		
30	Multiply line 29 by 15% (15)			30	
31	Figure the tax on the amount on line 23 Use the 2009 Tax Rate			· · · · · · 	
~ '	(see the Schedule Ginstructions in the instructions for Form 1041)			l l	
	TOO HIS SSHOULD SHOULD HE HIS HOURS WHO IN TOTAL	• •	• • • • • • • • • • •		
32	Add lines 30 and 31			32	: [
33	Figure the tax on the amount on line 17 Use the 2009 Tax Rate	Sch	edule for Estates ar		
-	(see the Schedule Ginstructions in the instructions for Form 1041)				3
34	Tax on all taxable income. Enter the smaller of line 32 or line 33 he				
	G, line 1a (or Form 990-T, line 36)				
					hadula D (Earm 1041) 2009

. 9

Name of estate or trust as shown on Form 1041 Do not enter name and employer identification number if shown on the other side WORLD EDUCATION FOUNDATION

Employer identification number 20-0634413

Long-Term Capital Gains and Losses - Assets Held More Than One Year (b) Date (d) Sales price (see page 4 of the (e) Cost or other basis (f) Gain or (loss) Subtract (e) from (d) (a) Description of property (Example 100 sh 7% preferred of "Z" Co) (c) Date sold (see page 4 of the instructions) acquired (mo , day, yr) (mo, day, yr) instructions) 6a 1,060. 08/25/2009 33,060. INFOGROUP COMMON STOCK 09/18/2001 34,120. 1,060 33,080. 09/18/2001 08/25/2009 34,140. INFOGROUP COMMON STOCK 7,974. 254. 09/18/2001 08/24/2009 8,228. INFOGROUP COMMON STOCK INFOGROUP COMMON STOCK 09/18/2001 08/24/2009 59,636. 1,866. 57,770. 1,060. 10/03/2001 33,841. 32,781. 08/21/2009 INFOGROUP COMMON STOCK 31,934. 30,874. 10/03/2001 08/18/2009 1,060. INFOGROUP COMMON STOCK 1,060 24,544. 23,484. INFOGROUP COMMON STOCK 09/20/2001 05/12/2009 21 427. 09/20/2001 05/11/2009 448. INFOGROUP COMMON STOCK 1,039 23,362. INFOGROUP COMMON STOCK 09/20/2001 05/11/2009 24,401. 242,812. 6b Total. Combine the amounts in column (f) Enter here and on Schedule D, line 6b . . .

Fgrm 8868 (Ri	ev 4-2009)		Page 2			
	re filing for an Additional (Not Automatic) 3-Month Extension, complete only	Part II and check this box				
	y complete Part II if you have already been granted an automatic 3-month ex					
	re filing for an Automatic 3-Month Extension, complete only Part I (on page					
	Additional (Not Automatic) 3-Month Extension of Time. Only		ies needed).			
	Name of Exempt Organization	Employer identific				
Type or	WORLD EDUCATION FOUNDATION	20-063441	3			
File by the Number, street, and room or suite no. If a P.O. box, see instructions For IRS use only						
extended	PO BOX 27395	,				
due date for filing the	City, town or post office, state, and ZIP code. For a foreign address, see instructions	-l				
return See	OMAHA, NE 68127					
	pe of return to be filed (File a separate application for each return)					
	m 990 X Form 990-PF	Form 1041-A	Form 6069			
⊢ ⊣ ' ' '	m 990-BL Form 990-T (sec 401(a) or 408(a) trust)	Form 4720	Form 8870			
├ ─	m 990-EZ Form 990-T (trust other than above)	Form 5227				
	not complete Part II if you were not already granted an automatic 3-mo		usly filed Form 8868.			
	oks are in the care of GARY HATFIELD					
	one No ▶ 402 505-6878 FAX No ▶					
	rganization does not have an office or place of business in the United States, of	check this box	▶ □			
	for a Group Return, enter the organization's four digit Group Exemption Numb		his is			
	nole group, check this box If it is for part of the group, check this		h a			
	e names and EINs of all members the extension is for		., -			
	uest an additional 3-month extension of time until 11/15/2010					
	calendar year 2009, or other tax year beginning	and ending	_			
		-,	e in accounting period			
	e in detail why you need the extension	<u> </u>	o m accessming person			
TA	XPAYER REQUESTS ADDITIONAL TIME TO GATHER INFORMAT	ION TO FILE A				
	MPLETE AND ACCURATE RETURN.					
		· · · · · · · · · · · · · · · · · · ·				
8a If the	is application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the	tentative tax less any	<u> </u>			
	efundable credits. See instructions	terretive tax, less arry	8a \$			
	s application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable	e credits and estimated	-			
	payments made Include any prior year overpayment allowed as a credit					
		and any amount paid	8b \$			
	nously with Form 8868 Ince Due. Subtract line 8b from line 8a Include your payment with this form	or if required deposit	00 4			
			80 8			
with	with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions 8c \$					
Linder nensi	Signature and Verification ties of perjury, I declare that I have examined this form, including accompanying schedules ar		f my knowledge and belief.			
	rect, and complete, and that I am authorized to prepare this form		,			
Signature >	Title ▶	Date I	•			
	LUTZ & COMPANY, PC	Date)	Form 8868 (Rev 4-2009)			
	HOLE & COULTMI, IC					

13616 CALIFORNIA STREET, SUITE 300 OMAHA, NE 68154-5336