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Form **990**

(HTA)

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

▶ The organization may have to use a copy of this return to satisfy state reporting requirements

A	For the	2009 cal	endar ye	ar, or tax yea	ar beginnir	ng ·			and e	nding					
В	Check if ap	plicable	Please	C Name of o	rganization	SME E	ducation For	undation			D Employe	r identifi	cation nur	nber	
	Address	change	use IRS label or	Doing Bus	iness As						38-274684	1			
	Name cha	ange	print or	Number ar	nd street (or I	P O box if mai	l is not delivered	to street address)	Ro	oom/suite	E Telephor	e numbe	r		
\sqcap	Initial retu	ırn	type See	One SME [Orive P.O.	Box 930		,	İ		(313) 425-	3000			
=	Terminate		Specific			ountry, and ZIF	2+4				(010) 420	0000			
=	Amended		Instruc- tions.	Dearborn	.,,			VII 48	121-0	930	G Gross re	ceipts \$		5.3	92,981
=		n pending		lame and add	ress of non	cinal officer	· · ·	***	12.10	1			(C) -1 O	$\overline{}$	\vdash
L,	прричение				•	•					his a group re		milates /	Yes	=
				omlinson 1 S						⊣ '′	e all affiliates i			Yes	No No
<u> </u>	ax-exer	mpt status	X 50)1(c) (3) ⋖ (inse	ert no)	4947(a)(1)	or 527		_ If "	No," attach a	ıst (see ı	nstructions)	
JV	Vebsite	: ► ww	w smeef	org						H(c) Gro	oup exemption	number	>		
KF	orm of o	rganization	X co	orporation	Trust	Association	Other >	•	L Yea	ar of forma	tion 198	7 М 9	State of leg	al domicile	• MI
	art I	Sui	mmary												
				the organiza	ation's mis	sion or mos	st significant	activities To	stimu	ulate inte	eraction arr	ong an	d betwee	en SME	the
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Ž.	2			▶ Lifthe		itian discon	tinuad its one	erations or disp	need	of more	than 25%	of ite no	at accate	· 	
B	3				-		y (Part VI, lin	· ·	JUSCU	or more	tilali 2570	3	ci assets		13
١	<u>a</u>			-	_			y (Part VI, line	1h)	•		4			13
	5		-	employees	_	_	overning bod	y (1 dit vi, iii)	,			5			0
[5]	6			volunteers (•	•	/)					6			19
23	7a							(C) line 12				7a			0
6	1 Briefly describe the organization's mission or most significant activities To stimulate interaction amedicational community, industry, and government by providing grants and scholarships to colleges at advancement of manufacturing engineering and technology, educational opportunities including the payouth activities 2 Check this box if the organization discontinued its operations or disposed of more than 25% of Number of voting members of the governing body (Part VI, line 1a) 4 Number of independent voting members of the governing body (Part VI, line 1b) 5 Total number of employees (Part V, line 2a) 6 Total number of volunteers (estimate if necessary) 7a Total gross unrelated business revenue from Part VIII, column (C), line 12 b Net unrelated business taxable income from Form 990. The Section 156 8 Contributions and grants (Part VIII line 1b)										7b			0	
Õ											Prior Year	1.72	Cı	urrent Yea	
W?	8	Contribu	itions an	nd grants (Pa	art VIII. lin	e 1h) 🚗	116	S			1.5	22,193			94,461
ne	9			revenue (P				Ö				0			0
Revenue	10	Investm	ent incor	me (Part VII	l. column	(A). lines 3.	4) (1) (1) (1) (1) (1)	(ن 2010 ا			1.1	57,880			293,656
å	11	Other re	venue (Part VIII. col	lumn (A). I	ines 5. 6d.	8c, 9c, 10c,	and 11e)	1			0			0
	12					u 11	+ VIII, column		1		2.6	30,073		2.3	888,117
	13									31,363			04,862		
	14			or for memb				•				0			0
	15		•					umn (A), lines :	5–10)		0				0
Expenses	16a			draising fee			•	` ''	•			0			0
per	b			g expenses (32	28,628	3					
ũ	17	Other ex	penses	(Part IX, co	lumn (A),	lines 11a–1	1d, 11f-24f)				1,4	59,011		1,2	19,317
	18	Total ex	penses	Add lines 1	3–17 (mus	st equal Par	rt IX, column	(A), line 25)				00,374			324,179
	19	Revenue	e less ex	xpenses Su	btract line	18 from lin	e 12				-1,4	20,301			36,062
٠ <u>.</u>	3									Begini	ning of Curre	nt Year	E	nd of Yea	r
sets rela	20	Total as	sets (Pa	irt X, line 16)					<u></u>		48,668		18,1	27,009
t As	20 21 22	Total lia	bilities (F	Part X, line 2	26)					L	1,1	32,272		6	43,309
ž	22			nd balances	Subtract	line 21 fror	m line 20			<u> </u>	15,2	66,396		17,4	183,700
Pa	art II		nature												
								ding accompanying han officer) is base							
		anu	Sellet, It Isl	rae, correct, an	id complete.	Decialation of	preparer (other i	man onicer) is base	eu on an	imormand	on or which pre	eparer na	s any know	leage	
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Sig	gn		Signature	of officer							Date		,00	_010	
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_		Prep	arer's					Date	Тс	Check if		Prepa	rer's identif	ying numb	oer
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	e Only	FIIM	's name (or f-employed		eloitte Tax	x LLP					EIN	<u> </u>			
			ess, and Z	<u>iP+4</u> 6	00 Renais	sance Cen	ter, Suite 600	Detroit, MI 48	B243		Phone no	<u> </u>			
Ma	y the IF	RS discus	ss this re				ove? (see ins							Yes	No
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						,									- (-000)

GIT

Form 990 (2009)

Part III

4a (Code

4b (Code

						Form 990 (2009)
4e	Total program service expens		2,751,470			
	(Expenses \$	0 including grants	of \$	0)(Revenue \$	0)	
4d	Other program services (Descri	be in Schedule O)		 		
	Awards given to schools, both ca	ash and non-cash ba	ased on a review	process of applicants		
-70	ENGINEERING EDUCATION	303 Ψ	o.uumg gran	ιο οι ψ	/ (revenue ψ	<i>-</i>
<u> </u>	(Code) (Expen	ses \$ 775.25	7 including gran	ts of \$ 772 778	\ (Revenue \$	0.)
						
			·			

Dar	Switz Education 1 during School 10 30-2/40	54 1	P	age 3						
Far	t IV Checklist of Required Schedules		V							
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Yes	No						
	complete Schedule A	1	x	1						
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х							
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		х						
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C,									
	Part II	4		х						
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								
6	Did the organization maintain any donor advised funds or any similar funds or 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		Х						
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X						
8										
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part			Х						
	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			ļ						
	complete Schedule D, Part IV .	. 9		Х						
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or			l						
	quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х							
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,			l						
	VII, VIII, IX, or X as applicable	11	X	<u> </u>						
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete		5 2 2 2 3 3 3 5 0	<i>\$</i> `						
	Schedule D, Part VI	~ E	53	Profit.						
•	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	,	7	N.						
•	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more	7 (- 3							
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	, 3°,	* e '							
•	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			. ·.						
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	-	N".	, č.,						
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	,								
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that		. ,	 7247						
	addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X		0.0							
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		4.4	,, -						
	Schedule D, Parts XI, XII, and XIII	12	Х							
2A	Was the organization included in consolidated, independent audited financial statements for the tax Yes No	· \								
	year? If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	<u> </u>		، استندا						
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х						
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		_X_						
D	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,		i							
15	business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		_X_						
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									
16		15		_X						
. 0	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	40		V						
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services	16		Х						
• •	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	47	.	v						
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	17		X						
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		х						
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	.0								
	If "Yes," complete Schedule G, Part III	19		Х						

20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H

Form	990 (2009) SME Education Foundation 3	38-2746841	F	age 4
Pai	t IV Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations	s		
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the			
	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	. 22	X	<u> </u>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			Ì
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	X	<u> </u>
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	1		
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines	1		l
L	24b through 24d and complete Schedule K. If "No," go to line 25	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	<u> </u>	X
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	1		i
و.	to defease any tax-exempt bonds?	24c		Х
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Х
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction	1	1	
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
D	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a			}
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or			
20	990-EZ? If "Yes," complete Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
27	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,	İ		
	substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III			V
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	27		X_
20	Part IV instructions for applicable filing thresholds, conditions, and exceptions)	,	,	`
а	A current or former officer, director, trustee, or key employee? <i>If</i> "Yes," <i>complete Schedule L, Part IV</i> .	202		
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	28a	-	Х
-	Schedule L, Part IV	28b		
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a	260		X
•	family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L,			
	Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	 ^-
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	23	 ^	
	conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?	<u> </u>		
	If "Yes," complete Schedule N, Part II	32	l	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	\ <u>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</u>		
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,			- ,
	III, IV, and V, line 1	34	x	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete	<u> </u>		
	Schedule R, Part V, line 2	35	x	
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		Х
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	27	1 1	v

38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O

Par	t V Statements Regarding Other IRS Filings and Tax Compliance			<u> </u>
			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	i		ļ
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c		
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	i		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see			
	instructions)	:		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by			
	this return?	3a		Х
þ	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		Х
b	If "Yes," enter the name of the foreign country			
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank			
	and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding			
•	Prohibited Tax Shelter Transaction?	5c		ļ
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			J
L	organization solicit any contributions that were not tax deductible?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	C.L.		
7	Organizations that may receive deductible contributions under section 170(c).	6b		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
а	and services provided to the payor?	7a		x
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		 ^
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	10		_
_	required to file Form 8282?	7c		×
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			<u> </u>
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
	benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as			
	required?	7h		L
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
a	Initiation fees and capital contributions included on Part VIII, line 12			
þ	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			1
11	Section 501(c)(12) organizations. Enter			
a	Gross income from members or shareholders 11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
40-	against amounts due or received from them)		,	-
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	 	
b_	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	L		<u>L</u>

Form 990 (2009) SME Education Foundation Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and Part VI for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule'O See instructions Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body 1a Enter the number of voting members that are independent 1b 13 h 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors or trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a material diversion of the organization's assets? 5 Does the organization have members or stockholders? 6 Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? 7a b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 7b Χ Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following The governing body? 8a Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII. Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O 9a Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) Yes No 10a Does the organization have local chapters, branches, or affiliates? 10a Х b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? 10b Has the organization provided a copy of this Form 990 to all members of its governing body before filing the 11 form? 11 Х 11A Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 12a Х Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done 12c 13 Does the organization have a written whistleblower policy? Χ 13 14 Does the organization have a written document retention and destruction policy? Х 14 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? The organization's CEO, Executive Director, or top management official 15a Other officers or key employees of the organization 15b Х If "Yes" to line 15a or 15b, 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 with a taxable entity during the year? 16a 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? 16b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ► Mi Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) 18 available for public inspection. Indicate how you make these available. Check all that apply Another's website X Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest 19 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

ONE SME DRIVE, PO BOX 930, DEARBORN, MI, DEARBORN, MI 48121-0930

20

organization ► Robert D Harris

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. Report compensation for the calendar year ending with or within the organization's tax year. 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 Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 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

X Check this box if the organization did not compensate any current officer, director, or trustee

(A)	(B)			(0	2)			(D)	(E)	(F)
Name and Title	Average					that ap		Reportable	Reportable	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
Khalil S Taraman President	0	Х		х				0	0	0
Charles M Chambers Vice President/Secretary	0	Х		х				0	0	0
Peter F Mackie Treasurer	0	х		х				0	0	0
Kenneth Vedra Assistant Treasurer	0	х		x				0	0	0
Douglas E Booth Director	0	х		_				0	0	0
F Brian Holmes Director	0	Х						0	0	0
Glen H Pearson Director	0	Х						0	0	0
Monica Pfarr Director	0	х						0	0	0
Brian A Ruestow Director	0	х						0	0	0
Pamela J Ruschau Director	0	Х						0	0	0
William R Segar Director	0	х						0	0	0
Albert Wavering Director	0	Х						0	0	0
Robert T Williams Director	0	х						0	0	0
Bart Aslin Director of SME Education Foundation	40			x		х		0	166,618	20,173
								,		

	990 (2009) SME Education Foundation									38-	274684	1	Page 8
Pai	t VII Section A. Officers, Directors, Tru	istees, Key En	ploy	ees	, and	l Hig	hest	Cor	npensated Em	ployees (c	ontinue	d)	
	(A)	(B)			(0	C)			(D)	(E)		(F)	
	Name and title	Average hours per week	or director	Institutional trustee	(chec Officer		Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportab compensat from relat organizatio (W-2/1099-N	tion ed ons	Estimat amount other compens from the organization	t of r ation ne ation ited
		· · · · · · · · · · · · · · · · · · ·											
											-		
			-										
									:				
												. =	
				-									
1b	Total							>	0		6,618		20,173
2	Total number of individuals (including but no reportable compensation from the organization)		e list	ed a	bove 0	e) wh	o rec	eive	d more than \$10	00,000 in			
3	Did the organization list any former officer, employee on line 1a? <i>If "Yes," complete Sch</i>					yee,	or hi	ghes	st compensated		3	Yes	No_X
4	For any individual listed on line 1a, is the suithe organization and related organizations gundividual	m of reportable	com	pens	atior							x	
5	Did any person listed on line 1a receive or a services rendered to the organization? If "Yo								ganization for		4	Î	
Sec	tion B. Independent Contractors	sa, complete s		uie c	, 101 .	SUCT	pers	,011			5		_ <u>X</u>
1	Complete this table for your five highest con compensation from the organization	npensated inde	pend	ent c	ontra	actor	rs tha	it rec	ceived more that	n \$100,000	of		
	(A) Name and business a	ddress							(B) Description of ser	vices	Comp	(C) ensation	
								<u> </u>	- <u></u>		_		0
								<u> </u>					0
	· · · · · · · · · · · · · · · · · · ·							 		\rightarrow	_		<u>0</u>
											-		0
2	Total number of independent contractors (in more than \$100,000 in compensation from t	-		ed to	thos	e lis	ted a		e) who received				

Par	: VIII	Statement of Revenue							
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ts s	1a	Federated campaigns		1a	0				
gifts, grants Iar amounts	b	Membership dues	Ĭ	1b	0			Ï	
<u>ت</u> و	c	Fundraising events	ŀ	1c					
fts	d	Related organizations	ł	1d	385,052				
g la		Government grants (contributions)	ŀ	1e	363,032				
shr	e	- ,		16	·				
uţi.	f	All other contributions, gifts, grants,			4 700 400				
윤동		similar amounts not included above	-	1f	1,709,409				
Contributions, gifts, grants and other similar amounts	g	Noncash contributions included in l	ines 1a-1f \$		755,910				
_ <u>o</u>	<u>h</u>	Total. Add lines 1a-1f		_	▶	2,094,461			
Ę					Business Code	_			
e e	2a					. 0			
Ž.	b					0			
Š	С					0			
Ser	d					0			
듩	е					0			
Program Service Revenue	f	All other program service revenue				0			
<u> </u>	g_	Total. Add lines 2a-2f				0			
	3 4 5	Investment income (including divide other similar amounts) Income from investment of tax-exer Royalties.	mpt bond prod		ls ►	492,520 0 0			492,520
			(ı) Real		(ii) Personal				
	6a	Gross Rents	ļ			Į.		ļ	
	b	Less rental expenses							
	C	Rental income or (loss)		0	0	•			
	d	Net rental income or (loss)	· · · · · · · · · · · · · · · · · · ·		▶	0			
	7a	Gross amount from sales of	(i) Securities	3	(II) Other		•		
		assets other than inventory	2,806,	000	0				
	b	Less cost or other basis							
		and sales expenses	3,004,	864					
	С	Gain or (loss)	-198,	864	0				
	d	Net gain or (loss)			>	-198,864			-198,864
	8a	Gross income from fundraising							
venue		events (not including \$	0				-		
Je v]	of contributions reported on line 1c							
		See Part IV, line 18		а	ol		*	1	
	Ь	Less direct expenses		b	0				
Other Re	c	Net income or (loss) from fundraisir	na events	-	•	o	-	1	
0	l .	Gross income from gaming activitie	-						
	"	See Part IV, line 19	•	а	o			ļ	
	l h	Less direct expenses		b	0				
		Net income or (loss) from gaming a	ctivities			0			<u></u>
		Gross sales of inventory, less	Oli Villes				·		
	''	returns and allowances		а	٥				
	h	Less cost of goods sold		b	0				
	•	Net income or (loss) from sales of i	nventory	U		o		}	
		Miscellaneous Revenue	ilveillory		Business Code				
	11a				Dusilless Cone	0	-		
	b					0			
						0			
	C d	All other revenue				0			
	e	Total. Add lines 11a–11d			<u>_</u>	0		 	
	12	Total revenue. See instructions				2,388,117	0	0	293,656
		TOTAL TETELING, OCC MONITORIS				2,30 <u>0,1</u> 17	U		293,030

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	All other organizations must complete column	(A) but are not req	uired to complete o	columns (B), (C), and	d (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				
	organizations in the U.S. See Part IV, line 21	2,020,416	2,020,416		
2	Grants and other assistance to individuals in			-	
	the U.S. See Part IV, line 22	584,446	584,446		,
3	Grants and other assistance to governments,			,	•
	organizations, and individuals outside the		1		
	U S See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors,				
_	trustees, and key employees	0			<u> </u>
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
7	persons described in section 4958(c)(3)(B)	0			
7	Other salanes and wages	0			
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)			1	
9	Other employee benefits	0			
10	Payroll taxes	0		-	•
11	Fees for services (non-employees)				
a	Management	749,289	100,537	438,098	210 654
a b	Legal	600	100,037	438,098	210,654
Č	Accounting	15,815		15,815	
d	Lobbying	0		15,615	
e	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	20,419		20,419	
g	Other .	0		20,410	
12	Advertising and promotion	73,050	15,000	50,571	7,479
13	Office expenses	42,117	219	32,012	9,886
14	Information technology	66	210	66	5,000
15	Royalties	0			
16	Occupancy	0			
17	Travel	137,379		70,049	67,330
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	o			
19	Conferences, conventions, and meetings	3,702		3,702	
20	Interest	28,373	28,373		
21	Payments to affiliates	100,000		73,500	26,500
22	Depreciation, depletion, and amortization	21,666	21,667	0	0
23	Insurance	0			
24	Other expenses Itemize expenses not				
	covered above (Expenses grouped together			,	
	and labeled miscellaneous may not exceed			į	
	5% of total expenses shown on line 25 below)				
a	Bank/Credit Card Charges	3,825		3,825	
b	Education/Training	6,638		6,090	548
c	Taxes	20		20	
d	Misc Awards/Prizes	12,671	2,479	7,648	2,544
e	Maintenance Services	3,687			3,687
	All other expenses	0			
_25	Total functional expenses. Add lines 1 through 24f	3,824,179	2,773,137	722,415	328,628
26	Joint costs. Check here ▶ if following				
	SOP 98-2 Complete this line only if the organization		ł		
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising		Į.		
	solicitation				
					Form 990 (2009)

	1 990 (20 art X	Balance Sheet				38-2746841 Page 11
	are A	Balaines ellect		(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing		186,591	1	100,777
	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net		50,000	3	0
	4	Accounts receivable, net		0	4	0
	5	Receivables from current and former officers,	directors, trustees, key			
		employees, and highest compensated employ Schedule L	ees Complete Part II of	0	5	
	6	Receivables from other disqualified persons (a 4958(f)(1)) and persons described in section 4 Part II of Schedule L		0	6	
2	7	Notes and loans receivable, net	F	0	7	0
Assets	8	Inventories for sale or use	<u> </u>		8	
As	9	Prepaid expenses and deferred charges	<u> </u>		9	1,499
	10a	Land, buildings, and equipment cost or	10a 76,537			1,755
	''-	other basis Complete Part VI of Schedule D	70,007			
	ь	Less accumulated depreciation	10b 71,692	26,511	10c	4,845
	11	Investments—publicly traded securities	71,002	16,185,566	11	18,019,888
	12	Investments—other securities See Part IV, lin	e 11	0	12	0
	13	Investments—program-related See Part IV, II	0	13	0	
	14	Intangible assets	F	0	14	0
	15	Other assets See Part IV. line 11	F	0	15	0
	16	Total assets. Add lines 1 through 15 (must ed	aual line 34)	16,448,668	16	18,127,009
	17	Accounts payable and accrued expenses	,		17	
	18	Grants payable		659,750	18	210,686
	19	Deferred revenue	· · · · · · · · · · · · · · · · · · ·	19		
	20	Tax-exempt bond liabilities	Γ	0	20	
S	21	Escrow or custodial account liability Complete	Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, direct employees, highest compensated employees, persons Complete Part II of Schedule L	ors, trustees, key	0	22	
	23	Secured mortgages and notes payable to unre	elated third parties	0	23	0
	24	Unsecured notes and loans payable to unrelate		0	24	0
	25	Other liabilities Complete Part X of Schedule	D	522,522	25	432,623
	26	Total liabilities. Add lines 17 through 25		1,182,272	26	643,309
ces		Organizations that follow SFAS 117, check complete lines 27 through 29, and lines 33				
lan	27	Unrestricted net assets		4,285,892	27	4,192,189
Ba	28	Temporarily restricted net assets		3,276,453	28	5,507,261
pu	29	Permanently restricted net assets	<u></u>	7,704,051	29	7,784,250
or Fund Baland		Organizations that do not follow SFAS 117 and complete lines 30 through 34.	, check here ▶			
ets	30	Capital stock or trust principal, or current fund	s	-	30	-
SS	31	Paid-in or capital surplus, or land, building, or			31	T
Net Assets	32	Retained earnings, endowment, accumulated			32	
Ž	33	Total net assets or fund balances	Γ	15,266,396	33	17,483,700
	34	Total liabilities and net assets/fund balances	Γ	16,448,668	34	18,127,009

-oim	(2009) SME Education Foundation		Р	age 12
Par	XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			
	Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? .	2a		Х
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	Χ	
	If the organization changed either its oversight process or selection process during the tax year, explain in			
	Schedule O			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			
	issued on a consolidated basis, separate basis, or both			
	Separate basis X Consolidated basis Both consolidated and separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			
	the Single Audit Act and OMB Circular A-133?	3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		
		Fo	rm 990	(2009)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

SME Education Foundation

Employer identification number 38-2746841

Pa	_			parity Status (All or						<u>nstructio</u>	ns.		
The	o <u>rga</u> i			ation because it is (Fo									
1	닏	A church, co	nvention of chui	rches, or association o	of churche	s describe	ed in sec	tion 170(b)(1)(A)(i).			
2		A school des	scribed in sectio	on 170(b)(1)(A)(ii). (At	ttach Sche	edule E)							
3		A hospital or	r a cooperative h	iospital service organia	zation des	scribed in	section	170(b)(1)	(A)(iii).				
4			esearch organiza ime, city, and sta	ition operated in conju	nction wit	h a hospit	al descrit	oed in se	ction 170	(b)(1)(A)	(iii). Ent	er the	
5				the benefit of a colleg (Complete Part II)	ge or unive	ersity own	ed or ope	erated by	a governr	nental un	ıt descri	bed	
6		A federal, sta	ate, or local gove	ernment or governmer	ntal unit de	escribed i	n sectioi	n 170(b)(1)(A)(v).				
7	X	-		y receives a substantia (1)(A)(vi). (Complete l		ts suppor	t from a g	overnme	ntal unit o	r from the	e genera	l public	5
8	\Box			in section 170(b)(1)(omplete f	Part II)						
9		An organization receipts from support from	tion that normall n activities relate n gross investme	y receives (1) more the ed to its exempt function and income and unrelated after June 30, 1975	nan 33 1/3 ons—subj ed busine	% of its sect to cert ess taxable	support from except ann except except ann except ex	otions, an (less sec	d (2) no m tion 511 ti	ore than	33 1/3 9	% of its	
10	\Box	An organizat	tion organized a	nd operated exclusive	ly to test f	or public :	safety Se	e sectio	n 509(a)(4).			
11 e		purposes of 509(a)(3). C a Type By checking persons othe 509(a)(1) or	one or more put heck the box tha I b this box, I certifier than foundation section 509(a)(2)	nd operated exclusive blicly supported organiat describes the type of Type II cythat the organization managers and othe written determination	izations de if supporti Type is not coi r than one	escribed ing organice III–Fundatrolled die or more	n section zation and ctionally in rectly or in publicly s	509(a)(1) d complet ntegrated ndirectly t upported	or section te lines 11 by one or organizat	n 509(a)(e throug d	2) See h 11h Type III- qualified cribed in	sectio -Other	
		_	, check this box				,,,	, -,	, , , ,				
g		Since Augus	st 17, 2006, has	the organization accep	oted any o	gift or conf	tribution f	rom any c	of the				
		following per											
				or indirectly controls, e		-		persons c	lescribed	ın (II)		Yes	No
			-	verning body of the sup		rganızatıo	n?				11g(i)		
			•	person described in (i)		6 X = L = = =	•				11g(ii)		
L				y of a person describe			′				11g(iii)	ļ	
<u>h</u>				ation about the suppor		organization	(v) Did v	ou notify	(vi)	s the	(vii	Amount	of
(î)		e of supported anization	(II) ÉIN	(described on lines 1–9 above or IRC section (see instructions))	in col (i) lis	sted in your document?	the organ	nization in of your port?	organiza (i) organi	tion in col zed in the S ?		support	
					Yes	No	Yes	No	Yes	No	1		
										<u> </u>			0
													0
													0
													0
													0
Tota	1												0

Schedule A (Form 990 or 990-EZ) 2009 SME Education Foundation 38-2746841 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 1,311,871 1,126,428 1,439,618 7,494,571 1,522,193 2,094,461 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf n 0 0 The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 1.311.871 1,126,428 1,439,618 1,522,193 2,094,461 7.494,571 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) 1.680.802 Public support. Subtract line 5 from line 4 5,813,769 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2005 **(b)** 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total Amounts from line 4 1,311,871 1,126,428 1,439,618 1,522,193 2,094,461 7,494,571 8 Gross income from interest, dividends. payments received on securities loans. rents, royalties and income from similar sources 367.980 566.537 531,737 500.542 492,520 2,459,316 9 Net income from unrelated business activities, whether or not the business is regularly carried on 0 Other income Do not include gain or 10 loss from the sale of capital assets (Explain in Part IV) 11 Total support. Add lines 7 through 10 9,953,887 Gross receipts from related activities, etc (see instructions) 12 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 13 organization, check this box and stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) 14 58 41% 15 Public support percentage from 2008 Schedule A, Part II, line 14 15 61 48% 33 1/3% support test-2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box 16a and stop here. The organization qualifies as a publicly supported organization ► X b 33 1/3% support test-2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test-2009. 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 10%-facts-and-circumstances test-2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 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. Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

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Schedule A (Form 990 or 990-EZ) 2009 SME Education Foundation 38-2746841 Page 3 Support Schedule for Organizations Described in Section 509(a)(2) Part III (Complete only if you checked the box on line 9 of Part I) Section A. Public Support (a) 2005 Calendar year (or fiscal year beginning in) (d) 2008 (b) 2006 (c) 2007 (e) 2009 (f) Total Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 0 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 0 Gross receipts from activities that are not an unrelated trade or business under section 513 0 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 0 0 5 The value of services or facilities furnished by a governmental unit to the organization without charge 0 Total, Add lines 1 through 5 0 0 7a Amounts included on lines 1, 2, and 3 received from disqualified persons 0 **b** Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year 0 Add lines 7a and 7b 0 0 0 0 Public support (Subtract line 7c from 0 line 6) Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (d) 2008 (e) 2009 (c) 2007 (f) Total 0 Amounts from line 6 10a Gross income from interest, dividends. payments received on securities loans, rents, royalties and income from similar sources 0 Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 0 Add lines 10a and 10b 0 O 0 Ω 0 C Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on 0 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 0 13 Total support. (Add lines 9, 10c, 11, 0 and 12) 0 0 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage O 00% Public support percentage for 2009 (line 8, column (f) divided by line 13, column (fi) 15 10 S <u>%</u> 17 18

_			
20	Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and	see inst	tructions ►
	line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported of	rganızat	
b	33 1/3% support tests-2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than	33 1/3%	6 and _
	not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported		
19a	33 1/3% support tests-2009. If the organization did not check the box on line 14, and line 15 is more that		
18	Investment income percentage from 2008 Schedule A, Part III, line 17	18	0 009
17	Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	17	0 009
Sec	tion D. Computation of Investment Income Percentage		
16	Public support percentage from 2008 Schedule A, Part III, line 15	16	0 00%
13	rubile support percentage for 2009 (line o, column (f) divided by line 15, column (f))	13	0 00 2

	m 990 or 990-EZ) 2009	SME Education F	oundation			38-2746841	Page 4
Part IV	Supplemental	Information. Con	nplete this part	to provide the	explanations require	d by Part II, line	10,
	Part II, line 17a	or 17b; and Part	II, line 12 Prov	vide any other a	additional information	See instruction	is
			· • • • • • • • • • • • • • • • • • • •			· • • • • • • • • • • • • • • • • • • •	- -
	- 			·		• • • • • • • • • • • • • • • • • • • •	
	· · · · · · · · · · · · · · · · · · ·						
							- -
				·			
.							

SCHEDULE D (Form 990)

Supplemental Financial Statements

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

 OMB No 1545-0047 2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Name of the organization
SME Education Foundation

Employer identification number 38-2746841

Par	Organizations Maintaining Dong	or Advised Funds or Other Similar F	unds or Accounts Complete if
u au	the organization answered "Yes" t		unus of Accounts. Complete II
	the organization answered Tes t	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	(a) Bollor davised lands	(b) Funds and other accounts
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 d	nnor advisors in writing that the assets hal	d in donor advised
•	funds are the organization's property, subject		
6	Did the organization inform all grantees, dor		
•	used only for charitable purposes and not fo		
	purpose conferring impermissible private be		Yes No
Par		lete if the organization answered "Yes	
			to rollingso, Farriv, line r
1	Purpose(s) of conservation easements held		
	Preservation of land for public use (e g	recreation or pleasure) [Preservation	n of an historically important land area
	Protection of natural habitat	Preservation	n of a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organiza	tion held a qualified conservation contribu	tion in the form of a conservation
	easement on the last day of the tax year		
			Held at the End of the Tax Year
а	Total number of conservation easements	-	2a
b	Total acreage restricted by conservation eas	sements	2b -
C	Number of conservation easements on a ce	tified historic structure included in (a)	2c
d	Number of conservation easements included	d in (c) acquired after 8/17/06	2d
3	Number of conservation easements modified	d, transferred, released, extinguished, or to	erminated by the organization
	during the tax year		
4	Number of states where property subject to	-	
5	Does the organization have a written policy		
_	violations, and enforcement of the conserva-		Yes No
6	Staff and volunteer hours devoted to monito	ring, inspecting, and enforcing conservation	n easements during the year
_	•		
7	Amount of expenses incurred in monitoring,	inspecting, and enforcing conservation ea	sements during the year
_	\$		
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)?		. Yes No
9	In Part XIV, describe how the organization re		
	balance sheet, and include, if applicable, the		inancial statements that describes
Par	the organization's accounting for conservations Maintaining Collection	ons of Art, Historical Treasures, or Othe	r Similar Assats
. Gi	Complete if the organization answere		ommar Assets.
12	If the organization elected, as permitted und		tatement and halance sheet works of
·u	art, historical treasures, or other similar asse		
	service, provide, in Part XIV, the text of the		
b	If the organization elected, as permitted und		
	historical treasures, or other similar assets h	eld for public exhibition, education, or rese	earch in furtherance of public
	service, provide the following amounts relati	ng to these items	•
	(i) Revenues included in Form 990, Part VII	I, line 1	. ▶ \$_
	(ii) Assets included in Form 990, Part X.		. ► \$
2	If the organization received or held works of	art, historical treasures, or other similar as	ssets for financial gain, provide the
	following amounts required to be reported up		3
а	Revenues included in Form 990, Part VIII, III		▶ \$
b	Assets included in Form 990, Part X		▶ \$

Pari	III Organizations Maintaining	Collections of	Art, His	torical T	reasures,	or Oth	er Similar As	ssets (co	ntınu	ed)
3	Using the organization's acquisition, use of its collection items (check all		her recor	ds, checl	k any of the	followir	ng that are a si	gnificant		
а	Public exhibition	. 11 77	d \square	Loan	or exchange	progra	ıms			
b	Scholarly research		e 🗍	Other						
c	Preservation for future general	tions	٠ ـــا	Other						
4	Provide a description of the organiza		and expla	in how th	ney further t	he orga	nızatıon's exer	npt purpo	se in	
5	During the year, did the organization assets to be sold to raise funds rather							「 ☐ Ye	s 🔲	No
Part	IV Escrow and Custodial Ar IV, line 9, or reported an ar	-		_	•	answei	red "Yes" to F	orm 990	, Par	t
1a	Is the organization an agent, trustee included on Form 990, Part X?			•		ns or oth	ner assets not	Ye	s 🔲	No
b	If "Yes," explain the arrangement in	Part XIV and com	plete the	following	table				 -	
						<u> </u>	<u> </u>	Amount		
C	Beginning balance					1c	 			0
d	Additions during the year					1d	ļ			
e	Distributions during the year					1e	ļ ———			
f	Ending balance					_1f	<u> </u>			0
2a	Did the organization include an amo		Part X, Iır	ne 21?				Ye	s []	No
b	If "Yes," explain the arrangement in									
Part	V Endowment Funds. Com									
		(a) Current year	(b) Pno	<u> </u>	(c) Two year	s back	(d) Three years ba	ck (e) Fou	ır years	back
1a	Beginning of year balance	14,633,650		699,519		 +				
b	Contributions	80,199		898,685						
С	Net investment earnings, gains,	0.700.005	_	005.004]				
	and losses	3,793,835		985,891						
d	Grants or scholarships	1,062,048		880,894		∤-				
е	Other expenditures for facilities	44 500		07.700		[
	and programs	11,598		97,769						
f	Administrative expenses	3,601		000.050						
g	End of year balance	17,430,437		633,650	L					
2	Provide the estimated percentage of			as						
a	Board designated or quasi-endowm		26%							
b	Permanent endowment	45%								
C		9%		4 45.						
3a	Are there endowment funds not in the	ie possession of th	ie organii	zaแบก เกิล	at are neid a	но аоп	mustered for tr		Yes	No
	organization by								Tes	
	(i) unrelated organizations							3a(i)		<u>X</u>
_	(ii) related organizations If "Yes" to 3a(ii), are the related organizations	anizations listed of	rogurod	lon Sobo	dula D2			3a(ii) 3b		<u> </u>
b 4	Describe in Part XIV the intended us							30 1		<u> </u>
Part						rt Y Jun	ne 10			
Henr		(a) Cost or ot			st or other			(d) 0a		
4-	Description of investment	(a) Cost of oil	ent)		s (other)		accumulated preciation	(a) Boi	ok value	
1a	Land		0		0					0
b	Buildings		0		0		0			$\frac{0}{0}$
C	Leasehold improvements	-	0				71 603			0
d	Equipment		0		76,537 0		71,692		<u> </u>	4,845
e_	Other I. Add lines 1a through 1e (Column (d) must equal For		art Y col		0 10/01	0		_	0
TOTA	. Add lines to through te (Column)	aj iliusi eyuai i-Oli	111 330, PC	art A, COI	umi (D), illi	5 (U(C)		hedule D (Fo		4,845

organization's liability for uncertain tax positions under FIN 48

Schedule D (Form 990	1 2009
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Part VII Investments—Other Securities	. See Form 990, Part X,	line 12	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valu Cost or end-of-year ma	
Financial derivatives	0		
Closely-held equity interests	0		
Other	0		
	0		
	0		
	0		·
	0	<u> </u>	 _
	0		
	0		
			
	0		
Total (Column (b) must equal Form 990, Part X, col. (B) line 12.)	0		····
Part VIII Investments—Program Related	J. See Form 990, Part X,	line 13	
(a) Description of investment type	(b) Book value	(c) Method of valu Cost or end-of-year ma	
	0		
	0		
	0		
	0		
	0		
	0		
	0		
	0		
	0		
Total (Column (b) must equal Form 990 Part X, col (B) line 13)	0		
Part IX Other Assets. See Form 990, P	art X, line 15		
(a) Description		(b) Book value
			0
			0
			0
			0
 			0
			0
			0
			0
			0
Total. (Column (b) must equal Form 990, Part X, c	ol (B) line 15)	>	0
Part X Other Liabilities. See Form 990	, Part X, line 25		
1. (a) Description of liability	(b) Amount		,
Federal income taxes		<u> </u>	
Annuity Obligations	352,2		
Due to Society of Manufacturing Engineers			
		_0	
		0	
		0	
		0	
		0	
		0	
		- 0	
Total (Column (b) must equal Form 990, Part X, col (B) line 25)	432,6		
2 FIN 48 Footpote In Part YIV provide the text of			

Sched	ule D (Form 990) 2009				Page 4
Par	Reconciliation of Change in Net Assets from Form 990	to Aud	ited Financial	State	ements
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1	2,388,117
2	Total expenses (Form 990, Part IX, column (A), line 25)		<u> </u>	2	3,824,179
3	Excess or (deficit) for the year Subtract line 2 from line 1			3	-1,436,062
4	Net unrealized gains (losses) on investments			4	3,653,365
5	Donated services and use of facilities		<u> </u>	5	
6	Investment expenses		1	6	
7	Prior period adjustments .		1	7	
8	Other (Describe in Part XIV)			8	1
9	Total adjustments (net) Add lines 4 through 8			9	3,653,366
10 Pari	Excess or (deficit) for the year per audited financial statements. Combine			10	2,217,304
1	Reconciliation of Revenue per Audited Financial Stater Total revenue, gains, and other support per audited financial statements	ments v	vitn Revenue	per r	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			 '	6,021,064
a	Net unrealized gains on investments	2a	3,653,36	35	
b	Donated services and use of facilities	2b	3,033,30	-	
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d		1	
e	Add lines 2a through 2d			1 20	3,653,366
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	1 1			2,007,000
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	20,4	19	
b	Other (Describe in Part XIV)	4b			
С	Add lines 4a and 4b			40	20,419
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line	12)		5	
Par	XIII Reconciliation of Expenses per Audited Financial State	ements	With Expense	s pe	r Return
1	Total expenses and losses per audited financial statements		-	1	-3,803,760
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b		_	
C	Other losses .	2c		_	
d	Other (Describe in Part XIV)	2d		_	
е	Add lines 2a through 2d			26	
3	Subtract line 2e from line 1	1 1		3	-3,803,760
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	-20,4	19	
b	Other (Describe in Part XIV) Add lines 4a and 4b	4b		\dashv $_{\perp}$	20.440
с 5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, Iir	10 10 1		40	
_	XIV Supplemental Information	16 10)] 3	-3,824,179
Compand 2	olete this part to provide the descriptions required for Part II, lines 3, 5, and b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and art to provide any additional information	d Part XI	ll, lines 2d and 4	lb Als	so complete
	(I Line 8 Rounding adjustment				
	(II Line 2d Rounding adjustment				
	Line 4 The SME Education Foundation classifies donations as permanen / Line 4 The SME Education Foundation classifies donations as permanen				
	maintained in perpetuity for the benefit of the Foundation. The Foundation				
	ed to the earnings of such funds for operating purposes or such other purpo				
sneci	fied by the donor. Farnings from permanently restricted endowment funds				

Schedule D (Form 990) 2009	Page 5
Part XIV Supplemental Information (continued)	· · · · · · · · · · · · · · · · · · ·
temporarily restricted until used for the purpose intended by the donor, typically	
Part V Line 4 to support youth programs, scholarships or grants to colleges and	
universities. The Board of Directors has designated certain accumulated unrestricted	
earnings of endowment funds and amounts for which restrictions have been met as	
Board-designated endowment funds	
Part XIII Line FIN48 Accounting standards, which first became applicable for not for	
profit entities in 2009, require disclosure in the financial statements of the impact of	
uncertain tax positions on the reported tax expense. For the Foundation, management	
judgments requiring an evaluation of uncertain tax positions fall into two areas 1) If	
the Foundation continues to meet eligibility requirements for not for profit status in all	
tax jurisdictions where it conducts business	
Part XIII Line FIN48 2) If the Foundation has properly identified all unrelated business	
income elements subject to tax even given the organization's not for profit tax status	
Part XIII Line FIN48 Management has concluded that there are no tax positions in these	
financial statements which are more likelly than not to fail to be sustained upon	
examination by a taxing authority. Therefore, the full tax benefits and consequences of	
its tax positions have been recorded in these statements. There are no unrecognized tax	
benefits at December 31, 2009 Management is not aware of any postions for which it is	
reasonably possible that the unrecognized tax benefit will significantly increase or	
Part XIII Line FIN48 decrease within 12 months of the reporting date	
Part XIII Line FIN48 No recent tax year has been closed by an audit by taxing authorities	
Therefore all years still open by statute remain open to an audit. Generally at least	
three years and up to seven years are open to examination. There were no interest or	
penalties paid or accrued in the 2009 and 2008 financial statements	
	-

SCHEDULEI (Form 990) Department of the Treasury Internal Revenue Service Name of the organization

Part | General Information on Grants and Assistance

SME Education Foundation

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete If the organization answered "Yes," on Form 990, Part IV, lines 21 or 22.

OMB No 1545-0047

▶ Attach to Form 990.

Employer identification number	38-2746841

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ద	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and	[
ţ	the selection criteria used to award the grants or assistance?	× Yes
Ğ	Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States] .
art II	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to	"Yes" to
	Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use	55,000. Use
	Dart IV and Schadula I-1 (Form 000) if additional enacta is needed	_

Part IV and Schedule I-1 (Form 990) if additional space is needed	ile I-1 (Form 95	90) if additional sp	nal space is needed.				▲
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CREATIVE EXPANSIONS, INC. 30 WATERSIDE PLAZA SUITE 17	13-3773703		120,000	0			Education
OHIO DEPARTMENT OF EDUCA 25 SOUTH FRONT ST COLUMBI		Govt entity	103,000	0			Education
MCC FOUNDATION 3200 BROADWAY KANSAS CITY	51-0181875	501(c)(3)	000'98	0			Education
SOUTH CAROLINA DEPARTMEN 914-A RUTLEDGE BLDG 1429 SE		Govt entity	82,000	0			Education
SINCLAIR COMMUNITY COLLEG		Govt entity	55,000	0			Education
NISTEM EDUCATION RESOURC 2101 E COLISEUM BLVD NEFF H		Govt entity	20,000	0			Education
SAN DIEGO UNIFIED SCHOOL D 2441 CARDINAL LANE BUILDING	95-6002781	Govt entity	47,000	0			Education
CHARLOTTE-MECKLENBURGS 700 EAST STONEWALL STREET	56-6001074	Govt entity	40,000	0			Education
METROPOLITAN COMMUNITY O 3200 BROADWAY KANSAS CITY		Govt entity	40,000	0			Education
SDSM&T FOUNDATION 501 EAST SAINT JOSEPH ST RA	46-6011771	501(c)(3)	40,000	0			Education
MINNEAPOLIS PUBLIC SCHOOL 807 NE BROADWAY STREET MI		Govt entity	30,000	0			Education
본	37-0661494	501(c)(3)	25,000	0			Education
	1004(2)(2)	***************************************	* I I			4	

Enter total number of section 501(c)(3) and government organizations Enter total number of other organizations For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) 2009

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Part IV and Schedule I-1 (Form 990) if additional space is needed Part III

					İ
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
Scholarships	231	584,446	0		
Awards	271	16,868	755,910	/WH	3M Projectors
Grants	88	1,247,638	0		•
	0	0	0		
	0	0	0		
	0	0	0		
	0	0	0		
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line	ete this part to prov	ide the information re	equired in Part I, line	2, and any other additional information	onal information
6.2	n acceptance of the	Memorandum of Unde	erstanding at which po	oint a start	
late is determined(a beginning of a quarter), a Protect Dir	ot Director is assign	ector is assigned, a timeline is drawn up as well as a final	up as well as a final		
udget, a self evaluation is implemented (pre grant and post grant survey, test, external evaluation, etc.). Project Directors	nd post grant survey	', test, external evaluat	ion, etc.) Project Dire	ctors	
ire to submit periodic progress reports based on a timelin	neline_SMEEF gra	e_SMEEF grant funds are to be matched to line items from	shed to line items fron		
he grant recipient's budget					
scholarships are awarded to graduating high school seniors, current under graduates and masters or doctoral	šeniors, current und	er graduates and mast	ers or doctoral		
art I Line 2 degree students pursuing degrees in manufa		cturing and related fields at 2-year and 4-year colleges. Applications	d 4-year colleges . Ap	plications	
ire due Feb 1st each year. All applications are reviewed		in April by a 6 member committee	1		
Part I Line 2 Awards given to schools, both cash and non-cash based on a review process of applicants	non-cash based on	a review process of ap	plicants		

SCHEDULE 1-1 (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Attach to Form 990 to list additional information for

Continuation Sheet for Schedule I (Form 990)

Schedule i (Form 990), Part II or Part III.

2009

OMB No 1545-0047

Open to Public Inspection

Employer identification number

(h) Purpose of grant or assistance Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II) Education Education Education Education Education Education Education Education Education Education Education Education Education Education (g) Description of non-cash assistance 38-2746841 (f) Method of valuation (book, FMV, appraisal, 0 ᅙ (e) Amount of non-cash assistance 25,000 19,949 17,000 17,000 13,000 15,000 10,000 20,000 20,000 10,000 (d) Amount of cash grant 15,000 15,000 15,000 10,000 (c) IRC section if Govt entity Govt entity Govt entity Govt entity Govt entity Govt entity 501(c)(6) Govt entity Govt entity Govt entity Govt entity 501(c)(3) 501(c)(3) applicable 73-6021242 52-6000886 01-0729873 26-1773196 59-3455773 20-4300566 43-0662471 (p) EIN 3027 S NEW HAVEN AVENUE RO 1946-0 GREENSPRING DRIVE T BALTIMORE COUNTY PUBLIC S 50 THORNS RUN ROAD BRIDGE 2168 FRANKFORT ROAD GEOR 26F CONGRESS ST, #338 SARA 2300 BALL DRIVE ST LOUIS, MC 5555 CONCORD PARKWAY SUIT N14911 HANNAHVILLE B-1 RD V PURDUE UNIVERSITY 2200 - 169TH ST LAWSHE HALL SCOTT COUNTY SCHOOL SYST TWIN RIVERS UNIFIED SCHOOL 3200 HOWARD STREET, BLDG GIRL SCOUTS OF EASTERN MIS NORTH CAROLINA MOTORSPO SOUTH PARK SCHOOL DISTRIC GULF COAST WORKFORCE DEV 5230 W US HIGHWAY 98 PANAN ACADEMY OF ENGINEERING A 3700 ROSS AVENUE PO BOX 82 3189 BELL ENGINEERING FAYE 2005 EAGLE RIDGE ROAD SOU 8501 HOWARD DRIVE HOUSTO CESAR CHAVEZ HIGH SCHOOL CHARTIERS VALLEY SCHOOL (a) Name and address of organization ARKANSAS, UNIVERSITY OF 1080 EDUCATION, INC. TULSA PUBLIC SCHOOLS SME Education Foundation NAH TAH WAHSH PSA or government Part I

Schedule I-1 (Form 990) 2009

Education

10,000

Govt entity

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

25-6008790

SCHEDULE 1-1 (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Continuation Sheet for Schedule I (Form 990)

► Attach to Form 990 to list additional information for Schedule I (Form 990), Part II or Part III.

Open to Public Inspection

38-2746841

SME Education Foundation Part 1 Continuation of Grants and Other Assista	rants and Oth		nce to Governments and Organizations in the United States	Organizations in t	38-2746841 (Schedule I (Form 990)	() Part)
me an	(b) EIN		(d) Amount of cash grant	(e) Amount of non-cash assistance		
MITCHELL HIGH SCHOOL 1205 POTTER DRIVE COLORAD		Govt entity	10,000	0		Education
COLUMBIA HIGH SCHOOL	57-6000243	Govt entity	10,000	0		Education
EAST BATON ROUGE PARISH S PO BOX 2950 BATON ROUGE, L	72-6000353	Govt entity	10,000	0		Education
EVERGREEN TECHNOLOGY, EN 830 SE 116TH STREET SEATTLE		Govt entity	10,000	0		Education
FREDERICK DOUGLASS HIGH S 225 HAMILTON HOLMES DR NW	<i>0</i> . >	Govt entity	10,000	0		Education
HAZELWOOD SCHOOL DISTRIC 15955 NEW HALLS FERRY ROAL		Govt entity	10,000	0		Education
HELEN BERNSTEIN HIGH SCHO	80-0218710	Govt entity	10,000	0		Education
HIGH SCHOOL FOR CONSTRUC 94 - 06 104TH STREET OZONE F	69-0210637	Govt entity	10,000	0		Education
MAHTOMEDI SCHOOL DISTRIC	-7 . <u></u>	Govt entity	10,000	0		Education
MANHATTAN BRIDGES HIGH SO 525 WEST 50TH STREET ROOM		Govt entity	10,000	0		Education
MILWAUKEE PUBLIC SCHOOLS 5225 W VLIET ST MILWAUKEE,			10,000	0		Education
NEW LONDON PUBLIC SCHOOL 134 WILLIAMS STREET NEW LO	06-0935363	Govt entity	10,000	0		Education
PORTERVILLE UNIFIED SCHOOL 600 W GRAND AVENUE PORTER	77-9562920	Govt entity	10,000	0		Education
POWAY UNIFIED SCHOOL DIST 13230 EVENING CREEK DRIVE	95-6002452	Govt entity	10,000	0		Education
RADNOR TOWNSHIP SCHOOL I		Govt entity	10,000	0		Education
For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	luction Act Notice	, see the Instructio	ns for Form 990.		Scl	Schedule I-1 (Form 990) 2009

SCHEDULE 1-1 (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Continuation Sheet for Schedule I (Form 990)

► Attach to Form 990 to list additional information for Schedule I (Form 990), Part II or Part III.

OMB No 1545-0047 2009

Open to Public Inspection

Employer identification number

| 38-2746841 | Schedule | (Form 990) | Part ||) SME Education Foundation

Some Education Foundation of Grants and Other Assistance to Governments and Organizations in the United States

Part Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II)	rants and Oth	er Assistance to	Governments and	Organizations in tl	he United States (S	schedule I (Form 99)	0), Part II)
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SHOP RAT FOUNDATION 11855 BUNKERHILL ROAD PLEA	38-3700259	501(c)(3)	10,000	0			- Education
SOMERVILLE BOARD OF EDUC 51 WEST CLIFF ST SOMERVILLE	22-6002298	Govt entity	10,000	0			Education
TREASURER - CITY SCHOOL DI ACADEMY PARK (ELK ST) ALBA		Govt entity	10,000	0			Education
TRI COUNTY TECHNOLOGY CE 6101 SE NOWATA ROAD BARTI	73-1188682	Govt entity	10,000	0			Education
HARTFORD PUBLIC SCHOOLS 960 MAIN ST 9TH FLOOR HARTF		Govt entity	9,490	0			Education
ACADEMY SCHOOL DISTRICT 2 1110 CHAPEL HILLS DRIVE COL		Govt entity	000'9	0			Education
NOTRE DAME ACADEMY 3535 WEST SYLVANIA AVENUE	20-1332826	501(c)(3)	000'9	0			Education
			0	0			
			0	0			
			0	0			
			0	0			
			0	0			
			0	0			
			0	0			
			0	C			

Schedule I-1 (Form 990) 2009

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

SCHEDULE J (Form 990)

Department of the Treasury

Name of the organization

Compensation Information

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

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

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Employer identification number

SME	Education Foundation	38-274	6841	1	
Pai	Questions Regarding Compensation				
				Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person list				
	990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding thes				
	First-class or charter travel Housing allowance or residence for personal	al use			
	Travel for companions Payments for business use of personal resi	dence	-		
	Tax indemnification and gross-up payments Health or social club dues or initiation fees				İ
	Discretionary spending account Personal services (e.g., maid, chauffeur, ch	ef)	ĺ	,	
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding pays	ment			
	or reimbursement or provision of all of the expenses described above? If "No," complete Part III to		1		
	explain	L	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all				
	officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a		2		
3	Indicate which, if any, of the following the organization uses to establish the compensation of the		1		
3	organization's CEO/Executive Director Check all that apply		1		
	Compensation committee Written employment contract				
	Independent compensation consultant X Compensation survey or study				
		nmittaa	į		
	Form 990 of other organizations X Approval by the board or compensation cor	rimittee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the fil	ling	ł		
	organization or a related organization				İ
а	Receive a severance payment or change-of-control payment?	L	4a		Х
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?		4b		X
С	Participate in, or receive payment from, an equity-based compensation arrangement?		4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Pa	irt III			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5–9.				
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any		ł		
	compensation contingent on the revenues of		-		
а	The organization?	!	5a		Х
b	Any related organization?	[[5b		Х
	If "Yes" to line 5a or 5b, describe in Part III				
6	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		<u>,</u>		
a	The organization?	 	6a		X
b	Any related organization?	⊢'	6b		Х
7	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-fixe	ed	1		
,	payments not described in lines 5 and 6? If "Yes," describe in Part III		7		x
8	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," describ	e l	}		
	in Part III		8		x
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in		- +	-	
-	Regulations section 53 4958-6(c)?		9		

Schedule J (Form 990) 2009

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

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	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation				
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(I)—(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
	ε	0	0	0	0	0		
Bart Aslin	€	143,570	14,123	8,925	7,132	13,041	186,791	0
	(1)	Ō	0	0	0	0		
	€		0	0	0	0		0
	ε	0	0	0	0	0	0	0
	(<u>i</u>		0	0	0	0	0	0
	ε	0	0	0	0	O	Ō	0
	(ii)		0	0	0	0	0	0
	ε	0	0	O	0	0]0	0
	€		0	0	0	0		0
	ε	0	0	0	0	0	0	0
	(E)	0	0	0	0	0	0	0
	(:)	Ō	0	0	0	0	0	0
	Ξ	0	0	0	0	0	0	0
	ε	0	0	0	0	0	0	0
	Ξ	0	0	0	0	0	0	0
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	Ξ	0	О	0	0	0	0	0
	(E)	0	0	0	0	0	0	0
	€	0	o	0	0	O	0	0
	(ii)	0	0	0	0	0	0	0

SME Education Foundation Schedule J (Form 990) 2009	38-2746841 Parts 3
rental Information provide the information, explanation, or descriptions required for Part I, lines 1a, ormation	1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part
	,

SCHEDULE J-1 (Form 990) Department of the Treasury Internal Revenue Service

Continuation Sheet for Schedule J (Form 990)

Attach to Form 990 to list additional information for Schedule J (Form 990), Part II.

See Instructions for Schedule J (Form 990).

Open to Public Inspection OMB No 1545-0047

Internal Revenue Service			A	See Instructions fo	See Instructions for Schedule J (Form 990)	. 990).			Inspection
Name of the organization								Employer identification numbe	on number
lucat							:	38-2746841	
Part I Continuation of Officers, Directors, Trustees	Direc	ctors, Trustees,	- 1	y Employees, a	and Highest Co	Key Employees, and Highest Compensated Employees	loyees (Schedule	e J, Part II)	
		ž	of W	of W-2 and/or 1099-MIS	S O	(C) Retirement and			(F) Compensation
(A) Name		(i) Base compensation	-	(II) Bonus & incentive compensation	(III) Other reportable compensation	other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(ı)–(D)	reported in pnor Form 990 or Form 990-EZ
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	Ξ		0	0	0	0	0	0	0
	Ξ	1	0	0	0	0	0		0
	€		0	0	0	0	0	0	0
	€		-	0	O	0	0		0
	€		0	0	0	0	0	0	0
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	€		 	0	O	0	0	0	0
	<u>(E)</u>		긞	0	0	0	0	0	0
For Privacy Act and Panerwork Reduction Act Notice see the los	Not:	ce see the Instruct	io	for Form 990				In product	0000 1000 0000

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

SCHEDULE M (Form 990)

Noncash Contributions

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

2009

Open To Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

SME Education Foundation

Employer identification number 38-2746841

Part	Types of Property							
		(a) Check if applicable	(b) Number of contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	Meth	(d) od of det revenu		
1	Art—Works of art						*	
2	Art—Historical treasures							
3	Art—Fractional interests					ж.		
4	Books and publications							
5	Clothing and household							
	goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded					•		
10	Securities—Closely held stock							
11	Securities—Partnership, LLC,							
	or trust interests							
12	Secunties—Miscellaneous							
13	Qualified conservation				_			
	contribution—Historic							
	structures							
14	Qualified conservation							
	contribution—Other							
15	Real estate—Residential							
16	Real estate—Commercial							
17	Real estate—Other					_		
18	Collectibles							_
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts			755.010				
25	Other ► (AV Equipment)	X	260		Fair Mark	et Val	ue	
26	Other ► ()	-	0					
27	Other ► () Other ► ()		0					
_28 	Other > ()		0	0				
29	Number of Forms 8283 received	l by the or	ganization during the tax yea	ar for contributions for				
	which the organization complete	d Form 8	283, Part IV, Donee Acknow	ledgement	29			
							Yes	No
30 a	During the year, did the organiza	ation rece	ive by contribution any prope	erty reported in Part I, lines 1	-28			
	that it must hold for at least three	e years fro	om the date of the initial cont	ribution, and which is not) i		
	required to be used for exempt p			•		30a		X
	If "Yes," describe the arrangement							
31	Does the organization have a gi	ft accepta	nce policy that requires the r	eview of any non-standard				
	contributions?					31		X
32 a	Does the organization hire or us	e third pa	rties or related organizations	to solicit, process, or sell				
	noncash contributions?					32a		X
	If "Yes," describe in Part II							
33	If the organization did not report	revenues	s in column (c) for a type of p	roperty for which column (a)	IS			
	checked, describe in Part II							l

Part II	Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.
Part I Line	25 The amount of 260 is the number of items contributed
 -	

SCHEDULE O (Form 990)

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

OMB No 1545-0047

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization
SME Education Foundation

Employer identification number

38-2746841

Form 990 Part VI Section B Line 15b All SME Education Foundation staff are employed by the Society of Manufacturing Engineers which also provides access to employee benefit plans. The Foundation reimburses SME for employee costs. Target salary levels for the Director of the SME Education Foundation and other top management positions are set based upon benchmark studies by compensation consultants. The SME Executive Director conducts an annual performance review of the Director of the SME Education Foundation against pre-established objectives and recommends salary merit increases for the coming year. The objectives for the coming year and the merit increases are approved by the SME Executive Compensation Committee and the President of the SME Education Foundation. The performance for the past year is reviewed with those same two oversight bodies at year end. Executive incentives are awarded based upon the Executive Form 990 Part VI Section B Line 15b Incentive Plan Form 990 Part VI Section B Line 12c Board and Committee members are required annually to disclose interests that could give rise to conflicts. Employees sign a disclosure form when they are hired. The Code of Ethics requires immediate disclosure to senior management of any potential conflict that develops during employment. The Code of Ethics is available upon request Form 990 Part VI Section B Line 11 The SME and SME Education Foundation combined audit committee reviews the form 990's before filing as delegated by the governing bodies Form 990 Part VI Section C Line 19 The SME Education Foundation provides their conflicts of interest policy, governing documents and audited financial statements upon request only Form 990 Part VI Section A Line 6 Society of Manufacturing Engineers is the sole shareholder Form 990 Part VI Section A Line 7a Society of Manufacturing Engineers' Executive Compensation Committee elects the SME Education Foundation Board of Directors

Form 990 Part VI Section A Line 7b The SME Education Foundation bylaws shall be reviewed and

approved by the Society of Manufacturing Engineers Executive Compensation Committee

Schedule O (Form 990) 2009	Page 2
Name of the organization SME Education Foundation	Employer identification number 38-2746841
not change for the 2009 tax year	
Form 990 Part VI Section B The Director of the SME Education Foundation, Bart Aslin, is	
required to annually sign the Conflict of Interest Form just as managers at SME do	
Schedule R Part V Line 2 SME Education Foundation pays its grants, scholarships and awards	·
while SME pays the operational expenses on behalf of the SME Education Foundation SME	
Education Foundation then reimburses SME throughout the year for the operational expenses	
Furthermore, SME makes an annual donation to the SME Education Foundation of \$380,000_I	f SME
employee donations to the SME Education Foundation equal or exceed \$5,000 by year end SM	1E will
make an additional donation of \$5,000 to the SME Education Foundation	
•	
•••••••••••••••••••••••••••••••••••••••	
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SCHEDULE R (Form 990)

Department of the Treasury

SME Education Foundation Name of the organization

Part I

Related Organizations and Unrelated Partnerships

Identification of Disregarded Entities (Complete of the organization answered "Yes" on Form 990, Part IV, line 33.)

Open to Public 2009

OMB No 1545-0047

Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. ► See separate instructions. ► Attach to Form 990.

Employer identification number

38-2746841

(f)
Direct controlling
entity (f) Direct controlling entity Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it (e)
Public charity status
(if section 501(c)(3)) (e) End-of-year assets Sch A Line# 9 0 (d) Exempt Code section (d) Total income 501(C)(3) Legal domicile (state or foreign country) Legal domicile (state or foreign country) ₹ (b) Primary activity Primary activity had one or more related tax-exempt organizations during the tax year) Education Society of Manufacturing Engineers 38-0298770 1 SME Drive, Dearborn, MI 48121 (a)Name, address, and EIN of related organization (a)Name, address, and EIN of disregarded entity Part II

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

Schedule R (Form 990) 2009 SME Education Foundation

38-2746841

Part III because it had one or more related organizations treated as a partnership during the tax year.)

מכספתפט עוויים		מוכח הואס	ווולמווסווא ווכמו	because it had one of frois reason organizations treated as a partitle bulling fire tax year.	ח ממנווול וווב ופא	~				
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under	(f) Share of total income		(g) Share of end-of-year assets	(h) Disproportionate allocations?	(I) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(I) General or managing partner?
				512-514)				Yes No		Yes No
						0	0		0	
						- 6	0			
						0	C			
						0	C			
						0	0			
						-				
							0			
Part IV IV, line 34 beca	of Related Orga ause it had one c	nization	s Taxable as a	Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization ans IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year	Trust (Complet corporation or t	e if the org rust during	janization an	swered ">	Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year)	art
Name, address, and E	(a) Name, address, and EIN of related organization	ç	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp. S corp. or trust)	ity Share of orp.	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
			:			i			0	%
									0	%
									0	%
							_		0	%
									0	%
									0	%
			-						0	%

tion Equipolation

SME Education Foundation

Page 3

38-2746841

Schedule R (Form 990) 2009 SME E

Transactions With Related Organizations (Complete of the organization answered "Yes" to Form 990, Part IV, line 34, 35, or 36.) Part V

26,500 73,500 567,448 551,869 385,000 ŝ Amount involved 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 Yes Ē 믁 ٥ 19 79 Je 5 49 두 * (b) Transaction During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? type (a-f.) O Ε 0 Performance of services or membership or fundraising solicitations for other organization(s) Performance of services or membership or fundraising solicitations by other organization(s) Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule Lease of facilities, equipment, or other assets from other organization(s) Name of other organization Lease of facilities, equipment, or other assets to other organization(s) Sharing of facilities, equipment, mailing lists, or other assets Other transfer of cash or property from other organization(s) Gift, grant, or capital contribution from other organization(s) Other transfer of cash or property to other organization(s) Gift, grant, or capital contribution to other organization(s) Reimbursement paid by other organization for expenses Reimbursement paid to other organization for expenses Loans or loan guarantees to or for other organization(s) Loans or loan guarantees by other organization(s) Purchase of assets from other organization(s) Sale of assets to other organization(s) Society of Manufacturing Engineers Society of Manufacturing Engineers Society of Manufacturing Engineers Society of Manufacturing Engineers Society of Manufacturing Engineers Sharing of paid employees Exchange of assets Ε 0 (2) (3) (1) 3 9 ම ~

Part VI U

Unrelated Organizations Taxable as a Partnership (Complete of the organization answered "Yes" to Form 990, Part IV, line 37.)

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

(a)	(q)		9	-	(e)	€		(a)	Ξ	2
Name, address, and EIN of entity	Primary activity	Legal domicile	Are all partners	artners	Share of	Disproportionate allocations?		Code V—UBI	Gene	General or
			501(c)(3) organizations?	(3) tions?	assets			of Schedule K-1 (Form 1065)	, partr	partner?
			Yes	ş		Yes	No		Yes	Š
					0			0		
					0			0		
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Form 4562

Depreciation and Amortization

(Including Information on Listed Property)

OMB No 1545-0172
2009
Attachment

Department of the Treasury Internal Revenue Service

(99)

► See separate instructions.

► Attach to your tax return.

Sequence No 67

Name(s) shown on return	Business or activ	vity to which this for	orm relates			ntifying num	ber	
SME Education Foundation	990				38-2	2746841		
Part I Election To Expense Certain	Property Und	ler Section 17	'9					
Note: If you have any listed property, co.	mplete Part V be	efore you compl	ete Part I					
1 Maximum amount See the instructions for a			ses				1	250,000
2 Total cost of section 179 property placed in							2	
3 Threshold cost of section 179 property befo	re reduction in li	mitation (see in:	structions)				. 3	800,000
4 Reduction in limitation Subtract line 3 from	line 2 If zero o	r less, enter -0-					4	0
5 Dollar limitation for tax year Subtract line 4	from line 1 If z	ero or less, ente	er -0- If marr	ned filing				
separately, see instructions							5	250,000
6 (a) Description of property		(b) Cos	t (business use	e only)	(c) Elected co	ost	- '
								• •
7 Listed property Enter the amount from line	29				7			
8 Total elected cost of section 179 property	Add amounts in	column (c), line:	s 6 and 7	_			8	0
9 Tentative deduction Enter the smaller of la	ne 5 or line 8						9	0
10 Carryover of disallowed deduction from line	13 of your 2008	Form 4562					10	
11 Business income limitation. Enter the smaller	er of business in	come (not less t	han zero) or	line 5 (see	instruct	tions)	11	
12 Section 179 expense deduction Add lines	9 and 10, but do	not enter more	than line 11	_			12	0
13 Carryover of disallowed deduction to 2010	Add lines 9 and	10, less line 12		▶	13		0	
Note: Do not use Part II or Part III below for list	ed property Insi	tead, use Part V	<u> </u>					
Part II Special Depreciation Alloway	nce and Other	Depreciation	(Do not inc	lude liste	d prope	erty.) (See	ınstru	ictions)
14 Special depreciation allowance for qualified	property (other	than listed prop	erty) placed ir	service			\Box	
during the tax year (see instructions).							14	
15 Property subject to section 168(f)(1) election	n						15	
16 Other depreciation (including ACRS)							16	21,666
Part III MACRS Depreciation (Do not	t include listed	property) (Se	e instruction	s)				
		Section A						
17 MACRS deductions for assets placed in ser	vice in tax years	beginning befo	re 2009				17	
18 If you are electing to group any assets place	ed in service dur	ing the tax year	into one or m	nore				
general asset accounts, check here						▶ □	1	
Section B - Assets Placed in	n Service Durin	g 2009 Tax Yea	ar Using the	General D	eprecia	ation Syste	<u> </u>	
	(b) Month and	(c) Basis for	(d) Recovery		1	(f)	T	(g)
(a) Classification of property	year placed	depreciation	period	Conventi	on	Method	Depre	eciation deduction
(,	in service	(business/investment)						
19 a 3-year property		,					 	
b 5-year property	1							
c 7-year property	1						†	
d 10-year property	1						+	
e 15-year property							+	
f_20-year property	1							
g 25-year property	1		25 yrs			S/L	+	
h Residential rental			27 5 yrs	ММ		S/L	\vdash	
property			27 5 yrs	ММ		S/L	+	
i Nonresidential real			39 yrs	MM		S/L	+-	
property			33 yıs	MM		S/L	+	
Section C - Assets Placed in S	Service During	2009 Tay Voar	licing the Al		Jonroci		<u></u>	
20 a Class life	l let vice During	2003 Tax Teat	Sing the At	lemauve	Jepreci	S/L		
b 12-year	-		12 250		-		┼──	
			12 yrs	DANA	-		┼	
c 40-year Part IV Summary (See instructions)	L	<u> </u>	40_yrs	MM	L	S/L		
							T.	
21 Listed property Enter amount from line 28	rough 17 lines	10 and 20		line 04			21	
22 Total. Add amounts from line 12, lines 14 th					-4 :			04 000
Enter here and on the appropriate lines of y				see instru	Ctions		22	21,666
23 For assets shown above and placed in serv		urrent year, ente	er the portion	}				
of the basis attributable to section 263A cos	SIS				23			