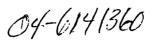


See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490





SCHEDULE O (Form 990)

Supplemental Information to Form 990

Employer identification number

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

▶ Attach to Form 990.

Quincy Education Association, Inc. Scholarship Fund	04-6141360
Form 990 Part III Line 1A scholarship committee made up of several teachers & guidan	ce
counselors in each High School meet each May of each school year to determine senior s	tudents
eligible & deserving of scholarships to further their education. Chosen students are	
reimbursed in various amounts after proof of enrollment in college.	
Form 990 Part VI Section B Line 11A A semi-annual review & discussion between officers and	
independent accountant after year-end review & approximately six months later	
Form 990 Part VII Section A Line 1a President & Treasurer of related organization spend	d on
the average 1-2 hours per week managing & reviewing assets maintained to fund scholar	ships and
the payments to scholarship recipients	
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QUINCY EDUCATION ASSOCIATION INC SCHOLARSHIP 590 HANCOCK STREET QUINCY MA 02169

DECLARATION

Under penalties of perjury, I declare that I have examined the return identified in this letter, including any accompanying schedules and statements, and to the best of my knowledge and belief. it is true, correct and complete. I understand that this declaration will become a permanent part of that return.

Signature of officer or trustee

2/0/1/ Date

Title

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