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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.

Open to Public Inspection

A F	or the	2010 calendar year, or tax year beginning JUL 1, 2010 and ending	JUN 30, 2011	<u> </u>
B c	heck if	C Name of organization	D Employer identifi	cation number
			1	
	Addres change	UBUNTU EDUCATION FUND, INC		
	Name change			705917
	Initial return Termun ated	Number and street (or P.O. box if mall is not delivered to street address) Room/s BROADWAY		r 827-1190
	Amend return	City or town, state or country, and ZIP + 4	G Gross receipts \$	3,205,782.
	Applica tion	NEW YORK, NY 10004	H(a) Is this a group re	eturn
	pendin	F Name and address of principal officer: JACOB LIEF	for affiliates?	Yes X No
			H(b) Are all affiliates inc	luded? Yes No
I Ta	ax -e xe		527 If "No," attach a	list. (see instructions)
		e: > HTTP://WWW.UBUNTUFUND.ORG	H(c) Group exemption	
			ear of formation: 1998 A	A State of legal domicile, NY
Pa		Summary		
Activitles & Governance	1	Briefly describe the organization's mission or most significant activities: SEE SCHE	DULE O	
Ĕ	2	Check this box if the organization discontinued its operations or disposed of r	nore than 25% of its net as	ssets.
Š	3	Number of voting members of the governing body (Part VI, line 1a)		16
اعدا	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	16
8	5	Total number of Individuals employed in calendar year 2010 (Part V, line 2a)		1
	6	Total number of volunteers (estimate if necessary)	6	19
ថ្ង	7a	Total unrelated business revenue from Part-VIII, column-(C), line 12		0
	b	Net unrelated business taxable income from Form 990-T, line 34	7b	0
		ω ΤΟ	Prior Year	Current Year
<u>.</u>		Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g)	1,682,815.	3,205,353
Hevenue	9	Program service revenue (Part VIII, line 2g)	0.	0
<u> </u>	10	Investment income (Partivill, column (A), lines 3, 4, and 7d).	594.	429
۱ ٔ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<33,168.	
_	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,650,241.	2,934,053
Ì	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	889,635.	1,954,534
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0
8		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	574,630.	699,264
20	16a	Professional fundralsing fees (Part IX, column (A), line 11e)	0.	0
Expenses		Total fundraising expenses (Part IX, column (D), line 25) 685,573.		
"]		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	17,844.	478,856
-		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,482,109.	
ی	19	Revenue less expenses. Subtract line 18 from line 12	168,132.	<198,601
nces			Beginning of Current Year	End of Year
Balanc		Total assets (Part X, line 16)	571,110.	663,877
밀		Total liabilities (Part X, line 26)	22,858.	42,443
띮		Net assets or fund balances. Subtract line 21 from line 20	548,252.	621,434
		Signature Block		
nde	ir pena	ities of perjury, I declare that I have examined this return, including accompanying schedules and st	itements, and to the best of m	ly knowledge and belief, it is
υθ,	correc	t, and complete. Declaration of preparer (other than officer) is based on all information of which prep	arer has any knowledge.	
		Signature of officer		
Sign	•		Date	
len ald	е	JACOB LIEF, PRESIDENT Type or print name and title		
			Data / , I Mark T] DYINI
		Print/Type preparer's name Preparer's signature4 A NAME PROPERTY AND	Date Check	PTIN 40017553
'aid		LAWRENCE J. BERLAND	setf-employ	@ 1001 33)
	arer	Firm's name CBIZ MHM, LLC	Firm's EIN	
ISB	Only	Firm's address 1065 AVENUE OF THE AMERICAS		10 700 5700
		NEW YORK, NY 10018	Phone no. 2	12-790-5700
		RS discuss this return with the preparer shown above? (see instructions)	<u> </u>	X Yes N
320°	11 02-2	2-11 LHA For Paperwork Reduction Act Notice, see the separate instructions.		Form 990 (201

	t III Statement of Program Service		31-1/03917	Page 2
rai		•		[U]
	Check if Schedule O contains a response	to any question in this Part III		X
1	Briefly describe the organization's mission: SEE SCHEDULE O			
	BEE BEHEBOHE 0			
	Did the account of the second			
2		rogram services during the year which were not listed on	<u></u>	TT.
	the prior Form 990 or 990-EZ?		L Yes	X No
	If "Yes," describe these new services on Sched			
3		significant changes in how it conducts, any program services?	Yes	X No
	If "Yes," describe these changes on Schedule C).		
4	Describe the exempt purpose achievements for	each of the organization's three largest program services by expe	nses.	
	Section 501(c)(3) and 501(c)(4) organizations an	d section 4947(a)(1) trusts are required to report the amount of gra	ants and	
	allocations to others, the total expenses, and re	venue, if any, for each program service reported.		
4a	(Code:) (Expenses \$ 1,0	47,992. including grants of \$ 1,000,000.) (Reve	enue \$)
			·	
	SEE SCHEDULE O			
				
		·		
	-			
4b	(Code:) (Expenses \$ 1,0	102,526. including grants of \$ 954,534.) (Rev	enue \$)
	SEE SCHEDULE O			
	· ·	· · · · · · · · · · · · · · · · · · ·		
				
	·			
		01 070		
4c	(Code:) (Expenses \$.21,279 • Including grants of \$) (Reve	enue \$)
	SEE SCHEDULE O			
				
			<u> </u>	
			 -	
	Other program consists /December to Cabe date	2)		
40	Other program services. (Describe in Schedule	·		
	(Expenses \$ including of	grants of \$) (Revenue \$		
<u>4e</u>	Total program service expenses	2,171,797.		
03200	2	THE COURDING O HOD COMMINGRATION (C)		0 (2010)
12-21-	10	SEE SCHEDULE O FOR CONTINUATION(S))	

Form 990 (2010) UBUNTU EDUCA Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
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, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			<u> </u>
	similar amounts as defined in Revenue Procedure 98-19? 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	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide		1	
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			
	If "Yes," complete Schedule D, Part V	10	ļ	Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	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	11b		X
С	Did the organization report an amount for investments • program related in Part X, line 13 that is 5% or more of its total			v
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	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	44.3		X
_	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
e 4	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 addresses	11e		Λ.
f	the organization's separate of consolidated infancial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		x
19a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
. 20	Schedule D, Parts XI, XII, and XIII	12a	Х	
ь	Was the organization included in consolidated, independent audited financial statements for the tax year?			
_	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	X	_
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b	Х	
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, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	Х	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines		,.	
	1c and 8a? If "Yes," complete Schedule G, Part II	18	X	<u> </u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	_19	 	X
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a	<u> </u>	X
b	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that			
	operate one or more hospitals must attach audited financial statements (see instructions)	20b	000	<u> </u>
		Form	990 ((2010

Form 990 (2010) UBUNTU EDUCATION F
Part 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 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
23	Did the organization answer "Yes" to Part Vil, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			١,,
	Schedule J .	23_	-	X
24a	♥ · · · · · · · · · · · · · · · · · · ·		į	ļ
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete		İ	v
	Schedule K. If "No", go to line 25	24a		X
Ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		-
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	04-		
	any tax-exempt bonds?	24c		-
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	<u> </u>	-
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	05-		Х
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	-	A
b	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 990-EZ? If "Yes," complete	l		
		25b		x
06	Schedule L, Part I Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified	235	-	
26	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, substantial			 -
21	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			
	Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
~	Instructions for applicable filing thresholds, conditions, and exceptions):	ĺ		
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	X	
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 conservation			
	contributions? If "Yes," complete Schedule M	30	X	
31	Did the organization liquidate, terminate, or dissolve and cease operations?			1
	If "Yes," complete Schedule N, Part I	31	ļ	X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes, " complete		1	
	Schedule N, Part II	32	ļ	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			,,
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	-	X
34	Was the organization related to any tax-exempt or taxable entity?		U	
	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)?	35	<u> </u>	-
а				
	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2.			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	20		X
^	If "Yes," complete Schedule R, Part V, line 2	36	 	<u> </u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	27		X
20	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	37	1	 ^`
38	Note. All Form 990 filers are required to complete Schedule O	38	X	
	Note: All 1 offil 330 liters die required to complete objectie o			(2010)
				(IV)

	990 (2010) UBUNTU EDUCATION FUND, INC	31-1705	<u>91/</u>	<u> </u>	age 5
Par	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V				
_	<u> </u>			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 9		100	
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and re				
•	(gambling) winnings to prize winners?		1c		1
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 11			
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns	ns?	2b	X	1
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instruction				
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		Х
ь	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		X
b	If "Yes," enter the name of the foreign country: ▶				
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial A	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	ction?	5b		Х
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		5c		ļ
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	ne organization solicit			l
	any contributions that were not tax deductible?		6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribut	ions or gifts			
	were not tax deductible?		<u>6b</u>	ļ	ļ.,
7	Organizations that may receive deductible contributions under section 170(c).		_		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	rvices provided to the payor?	7a	X	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b	Α.	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as required	.		x
	to file Form 8282?	7d	7c		
	If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of		7e		Х
e f	Did the organization, during the year, pay premiums, directly or indirectly, no a personal benefit conti		7f		X
9	If the organization received a contribution of qualified intellectual property, did the organization file Fe		7g		X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		7h	T-	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. D				-
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at		8		X
9	Sponsoring organizations maintaining donor advised funds.	, ,			
а	Did the organization make any taxable distributions under section 4966?		9a		X
b	Did the organization make a distribution to a donor, donor advisor, or related person?		9b		X
10	Section 501(c)(7) organizations. Enter:				
а	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	1		
11	Section 501(c)(12) organizations. Enter:	1 1			
а	Gross income from members or shareholders .	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against				
	amounts due or received from them.) .	116	1		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1 1	12a	ļ	ļ
_	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	-		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			 	
а	Is the organization licensed to issue qualified health plans in more than one state?		13a	 	
_	Note. See the instructions for additional information the organization must report on Schedule O				
b	Enter the amount of reserves the organization is required to maintain by the states in which the	126	}		
_	organization is licensed to issue qualified health plans	13b	1		
142	Enter the amount of reserves on hand Did the organization receive any payments for indoor tanning services during the tax year?	[130]	14a	 	X
14a	If "Ves " has it filed a Form 720 to report these payments? If "No " provide an evolanation in Schedu	 Na O	14h	1	1

Form **990** (2010)

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions

	Check if Schedule O contains a response to any question in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 15			
ь	Enter the number of voting members included in line 1a, above, who are independent 1b 16	-		
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?	2		<u>X</u>
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the			
	governing body?	7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			
	by the following:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	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	9		Х
Sec	tion 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	X	
	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	X	
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
	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	X	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this is done	12c	X	
13	Does the organization have a written whistleblower policy?	13		X
14	Does the organization have a written document retention and destruction policy?	14		X
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?			
а	The organization's CEO, Executive Director, or top management official	15a	X	
ь	Other officers or key employees of the organization	15b	X	
	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		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation	1		
	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	Ĺ	<u>L</u>
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed MD, PA, FL, ME, CT, IL, NJ, NY, CF	1,CO	,RI	, PA
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available	for		
	public inspection. Indicate how you make these available. Check all that apply.			
	X Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, a	nd fina	ıncıal	
	statements available to the public.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person of	ition:	_	
	JACOB LIFF C/O UBUNTU EDUCATION FUN - 646-827-1190			
	32 BROADWAY, NEW YORK, NY 10004			
		Form	990	(2010)

032006 12-21-10

SEE SCHEDULE O FOR FULL LIST OF STATES

Part VIII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

Check if Schedule O contains a response to any question in this Part VII

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

- 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.
- 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, if any. 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.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

- 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.

(A)	(B)			(0	C)			(D)	(E)	(F)
Name and Title	Average		Position				Reportable	Reportable	Estimated	
	hours per	(cl	heck	all	that	арр	ly)	compensation	compensation	amount of
	week (describe	혏						from the	from related	other
	hours for	trustee or director				題		organization	organizations (W-2/1099-MISC)	compensation from the
	related	stee	truste			beus		(W-2/1099-MISC)	(11 2 1000 111100)	organization
	organizations	tal T	donal		ayoldr	2 tcg		,		and related
	in Schedule	Indiwdual	Institutional trustee	Officer	Кеу етріоуве	Highest compensated employee	Former			organizations
JACOB LIEF	O)						_			
PRESIDENT & FOUNDER	40.00	х		Х		x		142,333.	0.	0.
MALIZOLE BANKS GWAXULA	1									
PRESIDENT & FOUNDER	40.00	Х		ĺ				0.	0.	0.
CIKO THOMAS										
BOARD MEMBER	5.00	X						0.	0.	0.
DIANA PETERSON										
BOARD MEMBER	5.00	X						0.	0.	0.
DAVID LAMOND										
DIRECTOR	5.00	Х						0.	0.	0.
STUART LITWIN						İ				
DIRECTOR	5.00	X				ļ	_	0.	0.	0.
STEPHEN SCHAFFER								_		
BOARD MEMBER	5.00	Х						0.	0.	0.
DR.FRANK LIPMAN									_	_
DIRECTOR	5.00	X				<u> </u>	_	0.	0.	0.
MERAFE MOLOTO		l								
SECRETARY	5.00	X						0.	0.	0.
KEVIN LAW	F 00	١.,						_		
DIRECTOR	5.00	Х			_	ļ		0.	0.	0.
DANIEL OSORIO	- 00									
CHAIRPERSON	5.00	X	ļ		<u> </u>	<u> </u>		0.	0.	0.
RUSH MCCLOY	F 00	١,,								
FINANCE CHAIRPERSON	5.00	X			_	_		0.	0.	0.
THERESA MOORE	F 00	.,								
BOARD MEMBER	5.00	X			ļ		├—	0.	0.	0.
ANDREW ROLFE	5 00	J.							_	_
BOARD MEMBER	5.00	X	 	<u> </u>	├			0.	0.	0.
PETER MICHAU	5 00	J						0.	^	_
SECRETARY	5.00	Х			-	-	1	<u> </u>	0.	0.
WEZA MOSS	5.00	x						0.	0.	_
BOARD MEMBER PHILIP VASSILIOU	3.00	^	-	\vdash	\vdash	\vdash		· ·	<u></u>	0.
BOARD MEMBER	5.00	x	1					0.	0.	0.
BOARD REFIDER		<u> </u>		1	<u> </u>			<u> </u>		·

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Form **990** (2010)

(A) Name and title	(B) Average				O) Izoq	tion			(D) Reportable	(E) Reportable			(F) mated
	hours per week (describ- hours for related organization in Schedu	e r	r director	ional trustee		•	Highest compensated employee	:	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MIS	ted compositions composition compositions composition composition composition composition composition composition composit		ount of other sensation the initiation related nizations
ATHERINE SCOTT	5.0	7	x						0.		0.		0
OARD MEMBER	3.0		Λ						0.		•	•	
								-					
1 b Sub-total							•		142,333.	ı	0.		0
c Total from continuation sheets to Part \ d Total (add lines 1b and 1c)					•		>		0. 142,333.		0.		0
Total number of individuals (including but compensation from the organization	not limited t	o the	ose	liste 	d at	OOV	e) wi	no r	eceived more than \$100),000 in reportable	e 		Yes N
 Did the organization list any former office line 1a? If "Yes," complete Schedule J for For any individual listed on line 1a, is the s 	such ındıvia	ual		·			-					3	Х
and related organizations greater than \$1Did any person listed on line 1a receive or	50,000? <i>If</i> "\ accrue con	es, " pen	coi sati	<i>mple</i> on f	ete S rom	Sche any	e <i>dul</i> e uni	e J i	for such individual			4	X
rendered to the organization? If "Yes," co. Section B. Independent Contractors	mplete Sche	dule	J fo	or su	ıch ,	pers	son					5	<u> </u>
1 Complete this table for your five highest of the organization. NONE	ompensated	d Ind	ере	nde	nt c	ont	racto	ors t	hat received more than	\$100,000 of com	pens	ation fr	om
(A) Name and busines	s address								(B) Description of s	services	С	(C compen	
							_						
Total number of independent contractors	(including b	ut no	ot lu	mite	d to		_	sted	d above) who received r	nore than			
\$100,000 in compensation from the organ	nization 🕨						0					F (990 (201

		I 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
nts .	1 a	Federated campaigns	1a 500,000.	,			
Contributions, gifts, grants and other similar amounts	b	Membership dues	1b	1			
am am	C	Fundraising events	1c 1,664,979.				
<u>g'a</u>		Related organizations	1d	4			
S.E.		Government grants (contributions)	1e	4			
1 E	f	All other contributions, gifts, grants, and	1 040 274				
들형		similar amounts not included above	1f 1,040,374. 273,056.	4			
5 2	_	Noncash contributions included in lines 1a-1f \$	273,030	3,205,353.			
-	n	Total. Add lines 1a-1f	Business Code	1			
، ا م	2 a				i i		
Š '	2 a b						
	c		1				
E al	d						T
Program Service Revenue	e						T
ž	f	All other program service revenue					
	9	Total. Add lines 2a-2f	•				
;	3	Investment income (including divide	ends, interest, and				
		other similar amounts)		429.	429.		
- -	4	Income from investment of tax-exer	npt bond proceeds				
-	5	Royalties .	<u> </u>				
	_		i) Real (ii) Personal	-			
<u>'</u>	ба	Gross Rents		-			
	b	·		-{			
	ر د	· · · · · · · · · · · · · · · · · · ·		┪	[1
	d a	` '	Securities (ii) Other				
	, ,	assets other than inventory	(ii) Other	1			
	ь	Less: cost or other basis					
		and sales expenses					
	c	Gain or (loss)					
	d	Net gain or (loss)					
Other Revenue	8 a	Gross income from fundraising eve including \$1,664,979					
ا ق		contributions reported on line 1c).					
<u>.</u>		Part IV, line 18	a 0	•			,
듄	b	Less: direct expenses	ь 271,729	•			
_		Net income or (loss) from fundraising		<271,729.	P	······································	<271,729.
	9 a	Gross income from gaming activities	s. See				,
		Part IV, line 19	a	-			
İ		Less: direct expenses	b	-	}		
.		Net income or (loss) from gaming a Gross sales of inventory, less return					
'	v a	and allowances					
İ	h	Less: cost of goods sold	а b	-			
		Net income or (loss) from sales of it	- 	₫			
		Miscellaneous Revenue	Business Cod	e			
1	1 a				<u> </u>		
	b						
	c						
	d	All other revenue					
	е	Total. Add lines 11a-11d		0.000			1
1	2	Total revenue. See instructions	<u>.</u>	2,934,053.	429.	0	.<271,729. Form 990 (2010)

Part IX Statement of Functional Expenses

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

	Section 501(c)(All other organizations must com	3) and 501(c)(4) organiza olete column (A) but are			
	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) Fundralsing expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				***************************************
_	the U.S. See Part IV, line 22	:			
3	Grants and other assistance to governments,				***************************************
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16	1,954,534.	1,954,534.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	-			
	trustees, and key employees	151,475.	20,778.	48,183.	82,514.
6	Compensation not included above, to disqualified	İ			
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	449,753.	61,695.	143,062.	244,996.
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits	00 026	15 /51	17 410	65 175
10	Payroll taxes	98,036.	15,451.	17,410.	65,175.
11	Fees for services (non-employees):				
	Management				
	Legal .				
	Accounting				
	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
	Other	137,614.	74,875.	29,464.	33,275.
12	Advertising and promotion				
13	Office expenses	16,961.	346.	1,098.	15,517.
14	Information technology				· · · · · · · · · · · · · · · · · · ·
15	Royalties				
16	Occupancy	53,602.	458.	220.	52,924.
17	Travel	76,656.	24,187.	31,257.	21,212.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates	7 246	1 031	070	4 545
22	Depreciation, depletion, and amortization	7,246. 4,812.	1,831. 376.	870. 180.	4,545.
23	Insurance .	4,012	3/0.	180.	4,256.
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule 0)				
a	DEVELOPMENT & MARKETING	125,545.	9,275.	0.	116,270.
b	COMPUTER EXPENSE	18,987.	909.	626.	17,452.
С	PAYROLL SERVICE FEE/BAN	16,466.	644.	1,487.	14,335.
d	CONFERENSES & TRAINING	8,156.	6,323.	115.	1,718.
е	COMMUNICATION	7,292.	115.	1,312.	5,865.
f	All other expenses	5,519.			5,519.
25	Total functional expenses. Add lines 1 through 24f	3,132,654.	2,171,797.	275,284.	685,573.
26	Joint costs. Check here ► rf following SOP				
	98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
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orm 9 Part					<u> </u>	705917 Page 11
				(A) Beginning of year		(B) End of year
1	1	Cash - non-interest-bearing	_		1	
	2	Savings and temporary cash investments		247,388.	2	330,669
ı	3	Pledges and grants receivable, net		266,969.	3	283,443
	4	Accounts receivable, net .			4	· · · · · · · · · · · · · · · · · · ·
	5	Receivables from current and former officers, directors, trustees, key				
		employees, and highest compensated employees. Complete Part II				
		of Schedule L			5	
	6	Receivables from other disqualified persons (as defined under section				
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing		•		
		employers and sponsoring organizations of section 501(c)(9) voluntary				
_		employees' beneficiary organizations (see instructions)	. L		6	
Assets	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use	<u></u>		8	
`	9	Prepaid expenses and deferred charges		26,155.	9	17,014
	10a	Land, buildings, and equipment: cost or other				
ĺ		basis. Complete Part VI of Schedule D 10a 72,	348.			
	ь	Less: accumulated depreciation 10b 58,	047.	16,098.	10c	14,301
	11	Investments - publicly traded securities			11	
	12	Investments - other securities. See Part IV, line 11			12	
	13	Investments · program-related. See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11		14,500.	15	18,450
	16	Total assets. Add lines 1 through 15 (must equal line 34)		571,110.	16	663,877
	17	Accounts payable and accrued expenses .		20,902.	17	39,006
- 1	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
က္က	21	Escrow or custodial account liability. Complete Part IV of Schedule D			21	
1	22	Payables to current and former officers, directors, trustees, key employe	es,			
Liabilities		highest compensated employees, and disqualified persons. Complete F	art II		1	
-		of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third parties			23	
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities. Complete Part X of Schedule D	. L	1,956.	25	3,437
	26	Total liabilities. Add lines 17 through 25	<u> </u>	22,858.	26	42,443
		Organizations that follow SFAS 117, check here X and com	plete		1 1	
S		lines 27 through 29, and lines 33 and 34.				
Ĕ	27	Unrestricted net assets	_	264,537.	27	397,509
3	28	Temporarily restricted net assets		283,715.	28	223,925
<u> </u>	29	Permanently restricted net assets			29	
2		Organizations that do not follow SFAS 117, check here	nd			•
5		complete lines 30 through 34.				
ets	30	Capital stock or trust principal, or current funds	L		30	
lss	31	Paid-in or capital surplus, or land, building, or equipment fund			31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds			32	
Ž	33	Total net assets or fund balances		548,252.	-	621,434
	34	Total liabilities and net assets/fund balances		571,110.	34	663,877

Form 990 (2010)

Form	990 (2010) UBUNTU EDUCATION FUND, INC	31-	-1705	917	Pad	ge 12
	t XI Reconciliation of Net Assets					
<u> </u>	Check if Schedule O contains a response to any question in this Part XI	_				X
	Oncok ii Concodic O Containo a respondente any question in anne a any					
1	Total revenue (must equal Part VIII, column (A), line 12)	1		,93		
2	Total expenses (must equal Part IX, column (A), line 25)	2	3	,13	2,6	54.
3	Revenue less expenses. Subtract line 2 from line 1	3		<19	8,6	01.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		54	8,2	52.
5	Other changes in net assets or fund balances (explain in Schedule O)	5		27	1,7	83.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		62	1,4	34.
Pa	t XII Financial Statements and Reporting					
	Check if Schedule O contains a response to any question in this Part XII					X
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	О.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
b	Were the organization's financial statements audited by an independent accountant?			2b	Х	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit	,			
	review, or compilation of its financial statements and selection of an independent accountant?			2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule C).			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue	d on a				
	separate basis, consolidated basis, or both:					
	X Separate basis 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 Si	ngle Au	dıt			
	Act and OMB Circular A-133?			3a		X
ь	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ııred au	dıt			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.			3ь		

Form **990** (2010)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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

Name of the organization

Employer identification number

		UBUNTU 1	EDUCATION FU	ND, I	NC				31	-17059	917
Part I	Reason	or Public Chari	ty Status (All organiza	ations mus	st complet	e this part	.) See inst	ructions.			
The organi	zation is not a	private foundation t	pecause it is: (For lines 1	through 1	1, check o	only one bo	ox.)				
1 🔲	A church, cor	vention of churches	, or association of churc	ches descr	nbed in se	ction 170(b)(1)(A)(i).				
2	A school des	cribed in section 170	0(b)(1)(A)(ii). (Attach Sch	hedule E.)							
3	A hospital or	a cooperative hospit	al service organization o	described i	n section	170(b)(1)(A)(iii).				
4	A medical res	earch organization o	perated in conjunction v	with a hos	pital descr	ibed in se d	ction 170	(b)(1)(A)(iii). Enter th	e hospital's	s name,
	city, and state										
5	_		penefit of a college or un	iversity ov	vned or op	erated by	a governn	nental unit	described	d In	
		(b)(1)(A)(iv). (Comple				4700.14					
6 L 7 X	•	•	ent or governmental unit					- 4 4h -		ساحات المادات	
7 <u>X</u>	_	-	eives a substantial part o	τs supp	ort from a	governme	ntai unit o	r from the	generai pi	udlic descri	ibea in
• [-	b)(1)(A)(vi). (Complet	•	Camalata	Dort II \						
9	•		ection 170(b)(1)(A)(vi). (om contri	nutions m	ombomber	foon one	d aronn ron	ounto from
9 📖	An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment										
		•	exable income (less sect	-							
		509(a)(2). (Complete		ion on ta	,,	311100000	oquilou b	, mo orga	iizaiioii ai	101 00110 00	,, 1070.
10			· ·	st for publi	c safety. S	ee sectio	n 509(a)(4	D.			
11	An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or										
			tions described in section								
			organization and comple								
	a Type !	b 🗀	Type II c	: 🔲 Тур	e III · Func	tionally int	egrated		d 🗔	Type III - O	ther
e 🗀	e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than										
	foundation m	anagers and other th	nan one or more publicly	supporte	d organiza	tions desc	ribed in s	ection 509	(a)(1) or se	ection 509(a)(2).
f	If the organiz	ation received a writt	ten determination from t	he IRS tha	at it is a Ty	pe I, Type	II, or Type	e [[]			_
	supporting or	rganization, check th	is box								<u> </u>
9	Since August	17, 2006, has the o	rganization accepted an	y gift or co	ontribution	from any	of the folk	owing pers	ons?		
		· ·	rectly controls, either al	one or tog	ether with	persons d	escnbed ı	n (ii) and (i	ii) below,		Yes No
			ipported organization?							11g(i)	
		•	described in (i) above?		_					11g(ii)	
	• •	•	person described in (i) o							11g(iii)	
h	Provide the to	ollowing information	about the supported org	ganization	(S).						
(I) Nome	of augmented	(ii) EIN	(iii) Type of	(iv) is the c	organization	(v) Did voi	notify the	(vi) Is	the	(vii) Am	ount of
	of supported anization	(ii) EIN	organization	in col (i) listed in your organization in col (i) or		organizatio	on in col (VIII) Altitudite of				
9-			(described on lines 1-9 above or IRC section	governing	document?	(i) of your	support?	US	2		
			(see Instructions))	Yes	No	Yes	No	Yes	No		
						ļ					
				1	1	}		1			
						<u> </u>			-		
					1	ļ					
					_	ļ			 -		
									1		
		 		-		 		-			
								 			
Total											
	Paperwork Re	duction Act Notice	, see the Instructions f	or				Schedul	e A (Form	990 or 99	0-EZ) 2010

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Form 990 or 990-EZ.

Part II | Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	2166376.	2216169.	2813868.	1682287.	3205406.	12084106.
•	Tax revenues levied for the organ-	21000,00		2010000	1002207.	02001001	
2	ization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to	•					
	the organization without charge						
4	Total. Add lines 1 through 3.	2166376.	2216169.	2813868.	1682287.	3205406.	12084106.
5	The portion of total contributions	-					
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						2839979.
6	Public support. Subtract line 5 from line 4		. ,				9244127.
Sec	ction B. Total Support			<u> </u>	·		
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7	Amounts from line 4	2166376.	2216169.	2813868.	1682287.	3205406.	12084106.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	2,605.	12,165.	838.	594.	429.	16,631.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV.)		150.			,	150.
11	Total support. Add lines 7 through 10						12100887.
12	•						,023,974.
13	First five years. If the Form 990 is fo	r the organization's	s first, second, thir	d, fourth, or fifth to	ax year as a sectio	n 501(c)(3)	,
	organization, check this box and sto						<u> </u>
	ction C. Computation of Publ					laa l	76.39 %
	Public support percentage for 2010 (-	column (t))		15	
15					14 in 22 1/20/ nr		
168	33 1/3% support test - 2010.if the c				14 IS 33 1/3% OF IT	iore, check this bo	x and ►X
	stop here. The organization qualifies		•		ino 15 to 22 1/204	or more shock ti	
τ	33 1/3% support test - 2009.If the c				IIIIE 13 IS 33 1/3 /0	of filore, check ti	IIS DOX ▶ □
47.	and stop here. The organization qua	•			13 162 or 16b a	and line 14 is 10%	or more
1/8	10% -facts-and-circumstances tes and if the organization meets the 'fac						
	meets the "facts-and-circumstances"					v now the orga	► □
	meets the fracts-and-circumstances tes					I 7a and line 15 is	10% or
	more, and if the organization meets t						
	organization meets the "facts-and-cir						▶ □
18							ns 🕨
-10	THOSE IOGINGUION. II THE Organization	on did not offect a	DOX OIL IIIO 10, 10	, 100, 170, 01 17		· · · · · · · · · · · · · · · · · · ·	0 or 990-EZ) 2010
					23		

Schedule A (Form 990 or 990 EZ) 2010 Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to

Postion A Dublic Cupport	Siott, picase com	pioto i artinj				
Section A. Public Support	(-) 0000	0.2.0007	(6) 0000	(4,0000	(=) 0010	/A T-4-1
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do not						
include any "unusual grants.")				<u> </u>		
2 Gross receipts from admissions,						
merchandise sold or services per- formed, or facilities furnished in						
any activity that is related to the			<u> </u>			
organization's tax-exempt purpose						
3 Gross receipts from activities that						
are not an unrelated trade or bus-						ŀ
iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to						
·			İ			
or expended on its behalf				 		
5 The value of services or facilities						
furnished by a governmental unit to						1
the organization without charge				 		
6 Total. Add lines 1 through 5				ļ	-	<u> </u>
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons						
b Amounts included on lines 2 and 3 received						
from other than disqualified persons that						
exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b		1				
			1			1
8 Public support (Subtract line 7c from line 6) Section B. Total Support		1		1	•	•
	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	10/ 2006	(4) 2009	(6) 20 10	37 Total
9 Amounts from line 6	-			 	 	-
10a Gross income from interest, dividends, payments received on		1		1		
securities loans, rents, royalties						
and income from similar sources			ļ			-
b Unrelated business taxable income						
(less section 511 taxes) from businesses						
acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business						
activities not included in line 10b,						
whether or not the business is			1			
regularly carried on			 	_	 -	
12 Other income. Do not include gain or loss from the sale of capital						1
assets (Explain in Part IV.)				 	- 	
13 Total support (Add lines 9, 10c, 11, and 12)	L	<u> </u>	1			1
14 First five years. If the Form 990 is for	r the organization	i's first, second, th	ırd, fourth, or fifth	tax year as a sect	ion 501(c)(3) organ	ization,
check this box and stop here						▶
Section C. Computation of Publ	ic Support P	ercentage				
15 Public support percentage for 2010 (column (f))		15	9
16 Public support percentage from 2009					16	9
Section D. Computation of Inve)			
17 Investment income percentage for 20			-		17	9
			12, 25,21,111 (1))	•	18	- <u> </u>
			con line 14 and lin	ne 15 ie more than		
19a 33 1/3% support tests - 2010. If the						, 1, 13 HOL
more than 33 1/3%, check this box a						
b 33 1/3% support tests - 2009. If the						
line 18 is not more than 33 1/3%, che						on P
20 Private foundation. If the organization	on did not check	a box on line 14, 1	<u>9a, or 19b, check</u>			▶∟_
032023 12-21-10				Se	chedule A (Form 9	990 or 990-EZ) 201

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number

Schedule D (Form 990) 2010

	UBUNTU EDUCATION F			31-1705917
Par			ar Funds or A	ccounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin			
		(a) Donor advised fund	is (b) Funds and other accounts
1	Total number at end of year			
2	Aggregate contributions to (during year)			
3	Aggregate grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in	writing that the assets held in o	donor advised fun	ds
	are the organization's property, subject to the organization's	exclusive legal control?		Yes No
6	Did the organization inform all grantees, donors, and donor a	advisors in writing that grant fur	nds can be used o	only
	for charitable purposes and not for the benefit of the donor	or donor advisor, or for any other	er purpose confer	ring
	impermissible private benefit?	<u></u>	<u></u>	Yes No
Par	t # Conservation Easements. Complete if the or	ganization answered "Yes" to F	orm 990, Part IV,	line 7.
1	Purpose(s) of conservation easements held by the organization	ion (check all that apply).		
	Preservation of land for public use (e.g., recreation or	education) 🔲 Preservation	on of an historical	ly important land area
	Protection of natural habitat	Preservation	on of a certified hi	stonc structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qual	fied conservation contribution i	n the form of a co	onservation easement on the last
	day of the tax year.			
				Held at the End of the Tax Year
а	Total number of conservation easements			2a
þ	Total acreage restricted by conservation easements			2b
C	Number of conservation easements on a certified historic st	ructure included in (a)		2c
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a his	toric structure	
	listed in the National Register		•	2d
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or termin	ated by the organ	nization during the tax
	year ▶			
4	Number of states where property subject to conservation ea		 	
5	Does the organization have a written policy regarding the pe	eriodic monitoring, inspection, h	andling of	
	violations, and enforcement of the conservation easements			└ Yes
6	Staff and volunteer hours devoted to monitoring, inspecting			
7	Amount of expenses incurred in monitoring, inspecting, and			
8	Does each conservation easement reported on line 2(d) about	ve satisfy the requirements of s	section 170(h)(4)(E	
	and section 170(h)(4)(B)(ii)?	•		∐ Yes
9	In Part XIV, describe how the organization reports conserva			
	include, if applicable, the text of the footnote to the organization	ation's financial statements that	describes the org	ganization's accounting for
T 5-	conservation easements. † ## Organizations Maintaining Collections	Aut Historical Traceu	too or Other	Similar Assets
Pal	** Organizations Maintaining Collections of Complete if the organization answered "Yes" to Form		res, or Other	Sittiliar Assets.
	If the organization elected, as permitted under SFAS 116 (A		onuo statamant a	ad balance about works of art
18	historical treasures, or other similar assets held for public ex			
			i ili tuttilerance oi	public service, provide, in Part XIV,
L	the text of the footnote to its financial statements that desc		a statement and h	palance sheet works of art, historical
ь	If the organization elected, as permitted under SFAS 116 (A treasures, or other similar assets held for public exhibition, or	•		
		education, or research in futther	arice of public se	rivice, provide the following amounts
	relating to these items:			> c
	(i) Revenues included in Form 990, Part VIII, line 1			► \$ ► \$
2	(ii) Assets included in Form 990, Part X	ageuree or other similar accets	for financial care	
2	If the organization received or held works of art, historical tr the following amounts required to be reported under SFAS		_	Pioride
•	Revenues included in Form 990, Part VIII, line 1	THE (MOD 900) relating to these	noms.	> \$
d	Assets included in Form 990, Part X			> \$
b	rasets included in Form 330; Fat A			· •

032051 12-20-10

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

Schedule D (Form 990) 2010

Total. (Column (b) must equal Form 990, Part X, col (B) line 25.)

FIN 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under 2. FIN 48 (ASC 740) Schedule D (Form 990) 2010

	dule D (Form 990) 2010 UBUNTU EDUCATION FUND, INC				1/0591/ Page 4
Pa	Reconciliation of Change in Net Assets from Form 990 t	o Audited l	Financial State	men	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1		2,934,053.
2	Total expenses (Form 990, Part IX, column (A), line 25)		2		3,132,654.
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3		<198,601.
4	Net unrealized gains (losses) on investments		. 4		<1,273.
5	Donated services and use of facilities		5		273,056.
6	Investment expenses .		6		
7	Prior period adjustments		7		
8	Other (Describe in Part XIV.)		8		
9	Total adjustments (net). Add lines 4 through 8		9		271,783.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 a		10		73,182.
Pa	t XII Reconciliation of Revenue per Audited Financial Statem	ents With	Revenue per P	leturr	
1	Total revenue, gains, and other support per audited financial statements			1	3,205,835.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 1			
а	Net unrealized gains on investments	2a	<1,274.		
þ	Donated services and use of facilities	2b			
C	Recoveries of prior year grants	2c		↓ i	
đ	Other (Describe in Part XIV.)	2d	273,056.	4	
е	Add lines 2a through 2d			2e	271,782.
3	Subtract line 2e from line 1	•		3	2,934,053.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a]	
b	Other (Describe in Part XIV.)	4b		.	
c	Add lines 4a and 4b			4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	2,934,053.
Pa	t XIII Reconciliation of Expenses per Audited Financial Staten	nents With	Expenses per	Retu	
1	Total expenses and losses per audited financial statements			1	3,129,665.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities .	2a			
ь	Prior year adjustments .	2b			
С	Other losses .	2c]]	
d	Other (Describe in Part XIV.)	2d			
е	Add lines 2a through 2d			2e	0.
3	Subtract line 2e from line 1			3	3,129,665.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
ь	Other (Describe in Part XIV.)	4b	2,989		
c	Add lines 4a and 4b	`		4c	2,989.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	•		5	3,132,654.
Pa	rt XIV Supplemental Information				
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part e 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also con				
PA	RT XII, LINE 2D - OTHER ADJUSTMENTS:				
ST	OCKS				270,067.
WO:	RK OF ART, BOOKS				2,989.
TO	TAL TO SCHEDULE D, PART XII, LINE 2D				273,056.
PA	RT XIII, LINE 4B - OTHER ADJUSTMENTS:			<u> </u>	
<u>wo</u>	RK OF ART, BOOKS				2,989.
0320	4			Sched	dule D (Form 990) 2010

(Form 990)

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

➤ Attach to Form 990. ➤ See separate instructions.

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number

UBI	UNTU EDUCATIO	N FUND.	INC		:	31-170591	.7
				tside the United States. Comp	lete if the organ		
	to Form 990, Parl	t IV, line 14b.					·
1	_	=		ds to substantiate the amount of the g			
	grantees' eligibility for th	e grants or assis	tance, and the	selection criteria used to award the gra	ants or assistar	nce?	Yes No
2	-			procedures for monitoring the use of g		side the United Stat	tes.
3	Activities per Region. (The second sec	(b) Number of offices In the region	(c) Number of employees, agents, and independent contractors	an be duplicated if additional space is (d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) if actrons a pro- describe	vity listed in (d) gram service, e specific type ce(s) in region	(f) Total expenditures for and investments in region
			in region	FUNDRAISING, PROGRAM			
	;			SERVICES INCLUDING:HIV	MEDICAL TES	TING &	
וטפט	NTU EDUCATION			PREVENTION, CLINICAL	TREATMENT B	DUCATION,	
FUN	D SOUTH AFRICA			SERVICES CARE & SUPPORT	FOOD TRAINI	NG	2,098,510.
<u>.</u>							
						····	
						 	
	Sub-total Total from continuation	0					2,098,510.
	sheets to Part I	0	0		-	······································	0.
C	Totals (add lines 3a	_					
	and 3b)	<u> </u>	0		1	Cabadala F	2,098,510.
LHA	For Paperwork Reduct	LION ACT NOTICE,	see the instru	CUONS TOT POTITI YYU.		ocnequie F	(Form 990) 2010

032071 12-20-10

31-1705917

Page 2

UBUNTU EDUCATION FUND, INC

Schedule F (Form 990) 2010
Part II Grants and Other

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any

than \$5,000	
nt received more	
if no one recipient recei	
. Check this box	ce is needed.
d more than \$5,000. Check	ed if additional spa
nt who received	an be duplicate
recipier	Part II can b

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)

	İ							
2 Enter total number of the IRS, or for which t	recipient organization	ns listed above that are related has provided a section	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	foreign country,	recognized as tax-ex	kempt by ▶		
3 Enter total number of other organizations or entities	other organizations o	or entitles				•		

Schedule F (Form 990) 2010

27

31-1705917

Page 3

UBUNTU EDUCATION FUND, INC

Schedule F (Form 990) 2010

UBUNTU EDUCATION FUND, INC

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

(h) Method of valuation (book, FMV, appraisal, other)			!			Schedule F (Form 990) 2010
(g) Description of non-cash assistance	2,989.BOOKS AND WORK OF ART FMV	FMV				Schedule F
(f) Amount of non-cash assistance	2,989.8	0				
(e) Manner of cash disbursement	DIRECT BENEFITS PAYMENTS 1954534.FOR PROGRAM SERVICES	INDIRECT BENEFITS PAYMENTS FOR PROGRAM 0. SERVICES				
(d) Amount of cash grant	1954534.	0				
(c) Number of recipients	4,000	12,000				
(b) Region	SOUTH AFRICA	SOUTH AFRICA				
(a) Type of grant or assistance (b) Region	EDUCATION/ TRAINING/ HEALTHCARE/ COUNSELING ETC FOR CHILDREN OF SOUTH AFRICA INFECTED OR AFFECTED BY	BTC ICA				

SEE PART V FOR COLUMN (A) DESCRIPTIONS

Part	IV	Foreign Forms		, .,,,,,
				-
1	Was	the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the		
	orga	anization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign		
	Con	ooration (see Instructions for Form 926)	. X Yes	☐ No
2	Did	the organization have an interest in a foreign trust during the tax year? If "Yes," the organization		
	may	be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and		
	Rec	eipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With		
	a U.	S Owner (see Instructions for Forms 3520 and 3520-A)	Yes	X No
3	Dıd	the organization have an ownership interest in a foreign corporation during the tax year? If "Yes,"		
	the	organization may be required to file Form 5471, Information Return of U.S. Persons with respect to		_
	Cer	tain Foreign Corporations. (see Instructions for Form 5471)	Yes	X No
4	Was	s the organization a direct or indirect shareholder of a passive foreign investment company or a		
	qua	Irfied electing fund during the tax year? If "Yes," the organization may be required to file Form 8621,		
	Ret	um by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see		
	Inst	ructions for Form 8621)	Yes	X No
5	Did	the organization have an ownership interest in a foreign partnership during the tax year? If "Yes,"		
	the	organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain		
	For	eign Partnerships. (see Instructions for Form 8865)	Yes	X No
6	Dıd	the organization have any operations in or related to any boycotting countries during the tax year? If		
	"Ye	s," the organization may be required to file Form 5713, International Boycott Report (see Instructions		
	for	Form 5713)	Yes Yes	X No
			Schedule F (For	m 990) 2010

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions. Department of the Treasury Internal Revenue Service

OMB No 1545-0047

Open To Public Inspection

Name of the organization UBUNTU E	DUCATION FUND, IN	NC			31-1705	entification number 5917
	Complete if the organization answ		'es" to	Form 990, Part IV,	line 17. Form 990-E	Z filers are not
 1 Indicate whether the organization raise a Mail solicitations b Internet and email solicitations c Phone solicitations d In-person solicitations 2 a Did the organization have a written or key employees listed in Form 990, Pail b If "Yes," list the ten highest paid indivicompensated at least \$5,000 by the compensated 	oral agreement with any individuals or entities (fundraisers) pure	ation of ation of al fundra al (include profess	non-g gover using ding o ional f	overnment grants nment grants events fficers, directors, true undraising services?	stees or	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundi have c or cor contrib	aiser ustody trol of	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
	· · · · · · · · · · · · · · · · · · ·	Yes	No			
<u> </u>	· · · · · · · · · · · · · · · · · · ·					
						
		 				
	·					
Total		<u> </u>	►			
List all states in which the organization or licensing.	is registered or licensed to solicit	contrib	oution	s or has been notifie	d it is exempt from	registration
				-		
LHA Paperwork Reduction Act Notice, s	and the least resting of a Farm 200	0 00) E7		Sahadula O (F-	rm 990 or 990-EZ) 2010
LIN Faperwork necoculon Act Notice, S	ee me manuchons for Form 990	ועם זט ט	/ L.L.		SUIGUUIC U (FU	1111 220 OL 220-ET] COL

Sch	edule G (Form 990 or 990-EZ) 2010 UBUNTU EDUCATION FUND, INC	31-1705917 Page 3
11		Yes No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed	
	to administer charitable gaming?	Yes No
13	Indicate the percentage of gaming activity operated in:	.
	The organization's facility	13a %
	An outside facility	136 %
	Enter the name and address of the person who prepares the organization's gaming/special events books and record	s.
	Name	
	Address >	
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes No
Ł	of "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the amou	ent
_	of gaming revenue retained by the third party > \$	
,	If "Yes," enter name and address of the third party:	
•	the rest matter and address of the time party.	
	Name	
	Traine P	
	Address ▶	
	Addices	····
16	Gaming manager information:	
	Carning manager information.	
	Name	
	Name >	
	Gaming manager compensation ▶ \$	
	Garming manager compensation > \$	
	Description of services provided	
	Description of services provided	•
	Director/officer Employee Independent contractor	
	Director/officer Employee midependent contractor	
17	Mandatory distributions:	
	•	
ć	a Is the organization required under state law to make charitable distributions from the gaming proceeds to	Yes No
	retain the state gaming license?	
	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in	i the
10-	organization's own exempt activities during the tax year \$ Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, colur	man (iii) and (ii) and Dart III
172		
	lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional info	mation (see instructions).
		
_		
0320	D83 01-13-11 Schedule C	G (Form 990 or 990-EZ) 2010

SCHEDULE L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions With Interested Persons

► Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

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

OMB No 1545-0047

Inspection

Name of the organization				
	HIDIMUTH	EDUCATION	רואוים	TI

Employer identification number

	UNTU EDU							1-1/	0591	<u>/</u>	
Part I Excess Benefi	t Transactio	ns (sectio	n 501(c)(3	3) and sectio	n 501(c)(4) organizatio	ns only).					
Complete if the org	anization answe	red "Yes"	on Form 9	990, Part IV,	line 25a or 25b, or Fo	<u>m 990-E</u>	Z, Part	V, line 40	b		
1 (a) Name of description parage			(b) Description of transaction				•	(c) Con	ected?		
(a) Name of disqualified person				(b) Description	————	CHOH			Yes	No	
2 Enter the amount of tax Imposection 49583 Enter the amount of tax, if an amount of tax is a section 4958						year un	der	▶ \$ ▶ \$			
Part # Loans to and/	or From Inte	rested F	Persons	·							
Complete if the org	anization answe	red "Yes"	on Form 9	990, Part IV,	line 26, or Form 990-E	Z, Part V	/, line 38	Ba.			
(a) Name of interested person and purpose (b) Loan to or from the organization?	or from	(c) Original princ amount		rincipal (d) Balance due	(e) in default?		(f) Approved by board or committee?		(g) Written agreement?		
	То	From	7			Yes	No	Yes	No	Yes	No
						Ĺ					
						<u> </u>		L			
			<u> </u>			 		ļ			
	<u> </u>					ļ		 -			
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	+					 		<u> </u>	 		
						<u> </u>					
	+		 	··	 	\vdash		 	 		ļ
Total		_	-	▶ \$		 	1		<u> </u>		<u> </u>
Part III Grants or Ass	stance Bene	efiting Ir	ntereste			<u></u>		· }		<u> </u>	••••••
<u></u>		_									
Complete if the organization answered "Yes" on Form 9 (a) Name of interested person (b) Relation		ionship between interested person and the organization				(c) Amount and type of assistance					
	 				3						
· · · · · · · · · · · · · · · · · · ·											
					··········		—			_	
							ļ				_
		1					1				

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule L (Form 990 or 990-EZ) 2010

SCHEDULE M (Form 990)

Department of the Treasury

Internal Revenue Service

Noncash Contributions

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

Attach to Form 990.

(b)

Number of

(c)

Noncash contribution

OMB No 1545-0047

Open to Public Inspection

Name of the organization

Types of Property

UBUNTU EDUCATION FUND, INC

(a)

Check if

Employer identification number 31–1705917

(d)

Method of determining

applicable contributions or amounts reported on noncash contribution amounts tems contributed Form 990, Part VIII, line 1g Art - Works of art 2 Art - Historical treasures 3 Art · Fractional interests 2,989. BOOKS AND WORK OF AR X 4 Books and publications 5 Clothing and household goods 6 Cars and other vehicles 7 Boats and planes 8 Intellectual property 270,067. FMV X 9 Securities - Publicly traded Securities - Closely held stock 10 Securities · Partnership, LLC, or 11 trust interests 12 Securities - Miscellaneous 13 Qualified conservation contribution -Historic structures Qualified conservation contribution - Other 14 15 Real estate - Residential 16 Real estate · Commercial Real estate · Other Collectibles 18 Food inventory 19 20 Drugs and medical supplies 21 Taxidermy 22 Historical artifacts 23 Scientific specimens 24 Archeological artifacts 25 Other -26 Other 27 Other 28 Number of Forms 8283 received by the organization during the tax year for contributions 29 29 for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for X 30a the entire holding period? b If "Yes," describe the arrangement in Part II. X Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 31 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash X 32a contributions? b If "Yes," describe in Part II. 33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II. Schedule M (Form 990) (2010) For Paperwork Reduction Act Notice, see the Instructions for Form 990. LHA

SCHEDULE 0 (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

UBUNTU EDUCATION FUND, INC	31-1705917
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MIS	SION:
MISSION	
UBUNTU PROVIDES WORLD-CLASS HEALTH AND EDUCATIONAL SUPPOR	T TO THE
ORPHANED AND VULNERABLE CHILDREN OF PORT ELIZABETH, SOUTH	AFRICA,
ENSURING THEY CAN ACCESS HIGHER EDUCATION AND EMPLOYMENT.	UBUNTU'S
MISSION IS SIMPLE, ALL-ENCOMPASSING, AND RADICAL: TO HELP	RAISE
TOWNSHIP CHILDREN BY PROVIDING WHAT ALL CHILDREN DESERVE-	EVERYTHING.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION M	ISSION:
MISSION	
UBUNTU PROVIDES WORLD-CLASS HEALTH AND EDUCATIONAL SUPPOR	T TO THE
ORPHANED AND VULNERABLE CHILDREN OF PORT ELIZABETH, SOUTH	AFRICA,
ENSURING THEY CAN ACCESS HIGHER EDUCATION AND EMPLOYMENT.	UBUNTU'S
MISSION IS SIMPLE, ALL-ENCOMPASSING, AND RADICAL: TO HELP	RAISE
TOWNSHIP CHILDREN BY PROVIDING WHAT ALL CHILDREN DESERVE	EVERYTHING.
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHME	NTS:
UBUNTU TRANSFORMS THE LIVES OF 2,000 CHILDREN AND THEIR F	AMILIES
HEALTH	
1.DEVELOP THE PROVINCE'S LEADING HIV HEALTH CLINI	C FOR
VULNERABLE CHILDREN AND THEIR CAREGIVERS.	
2.INCREASE ACCESS TO LIFE-SAVING MEDICINE FOR HIV	-POSITIVE
CHILDREN AND THEIR CAREGIVERS.	
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. School 032211 01-24-11	dule O (Form 990 or 990-EZ) (201

Schedule O (Form 990 or 990-EZ) (2010) Name of the organization	Page 2 Employer identification number
UBUNTU EDUCATION FUND, INC	31-1705917
3.ENSURE HIV-POSITIVE PREGNANT WOMEN HAVE ACCESS	TO DRUGS THAT
PREVENT TRANSMISSION OF THE VIRUS TO THEIR CHILDREN.	<u> </u>
4.PROVIDE ACCESS TO HIV TESTING FOR OUR CHILDREN	AND THEIR
FAMILIES.	
5.ENSURE EACH CHILD IN OUR PROGRAM IS REGULARLY S	SEEN BY A
DOCTOR.	
FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHM	ENTS:
EDUCATION: PRESCHOOL-GRADE 12	
1.PROVIDE INTENSIVE, HIGH-QUALITY EDUCATION FROM EAR	RLY CHILDHOOD
THROUGH GRADE 12 TO ENSURE ACCESS TO UNIVERSITY AND EMPLO	DYMENT:
2.IMPROVE SCHOOL ATTENDANCE.	
3.IMPROVE ACADEMIC PERFORMANCE.	
4.PROVIDE AFTER-SCHOOL AND WEEKEND PROGRAMMING AS W	ELL AS HOLIDAY
CAMPS TO ENSURE OUR CHILDREN ARE BOTH SAFE AND LEARNING I	DURING
NON-SCHOOL HOURS.	
5.IMPROVE STUDENTS LEVEL OF LIFE SKILLS AND SELF-CO	NFIDENCE.
6.INCREASE THE NUMBER OF VULNERABLE CHILDREN GRADUA	IING FROM
HIGH-SCHOOL AND UNIVERSITY.	
7.ENSURE OUR STUDENTS SECURE EMPLOYMENT UPON GRADUA	ring.
EDUCATION: UNIVERSITY & TRAINING PROGRAMS	
1.STRENGTHEN OUR UNIVERSITY SCHOLARSHIP PROGRAM:	
2.ENSURE OUR HIGH-SCHOOL PROGRAM PREPARES STUDENTS	TO MAKE
INFORMED DECISIONS ABOUT THEIR FUTURES.	-
3.PROVIDE MORE THAN 100 SCHOLARSHIPS PER YEAR.	
032212 01-24-11 Sche	edule O (Form 990 or 990-EZ) (2010)

Schedule O (Form 990 or 990-EZ) (2010) Name of the organization UBUNTU EDUCATION FUND, INC	Employer identification number 31–1705917
4.PROVIDE FINANCIAL, EMOTIONAL, SOCIAL, AND MEDICAL	SUPPORT FOR
OUR CHILDREN THROUGHOUT UNIVERSITY.	
5.ENSURE STUDENTS ARE PAIRED WITH PEER MENTORS FROM	THEIR
COMMUNITIES TO ASSIST WITH DIFFICULT LIFE CHOICES.	
FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHME	ENTS:
HOUSEHOLD STABILITY	
1.STRENGTHEN OUR HOUSEHOLD STABILITY INITIATIVE PROV	/IDING
COMPREHENSIVE SOCIAL, MEDICAL AND NUTRITIONAL INTERVENTION	ONS IN ALL OUR
CHILDREN'S HOMES.	
2.ENSURE THE HOMES OF OUR CHILDREN ARE HEALTHY, CLEA	AN, SAFE AND
TB-FREE.	
3.IMPROVE FOOD SECURITY FOR VULNERABLE HOUSEHOLDS.	
4.DECREASE LEVELS OF TRANSACTIONAL SEX FOR GIRLS IN	VULNERABLE
HOUSEHOLDS.	
5.ENSURE ALL CHILD-HEADED HOUSEHOLDS ARE SECURE AND	HAVE ADEQUATE
RESOURCES TO SUPPORT THE FAMILY.	
SUSTAINABILITY	
1.INVEST IN UBUNTU'S INSTITUTIONAL CAPACITY TO ENSU	RE WE DEVELOP
INTO A TRULY SUSTAINABLE ORGANIZATION.	
2.CREATE A FOUNDATION OF SYSTEMS, POLICIES AND PROTO	OCOLS TO
FURTHER STRENGTHEN OUT HR DEPARTMENT AND INCULCATE OUR U	NIQUE
MANAGEMENT CULTURE.	
3.EMPOWER OUR TEAM AND ENSURE SUCCESSION PLANNING B	Y FURTHER
DEVELOPING AND TRAINING OUR STAFF.	
4.RE-BRAND UBUNTU AND LAUNCH A DIGITAL PLATFORM TO	FURTHER
Sche 32212 39 220515 797696 6554410 2010.05090 UBUNTU EDUCATION F	edule O (Form 990 or 990-EZ) (2010) FUND,INC 65544101

Employer identification number Name of the organization UBUNTU EDUCATION FUND, INC 31-1705917 FORM 990, PART VI, SECTION B, LINE 11: DRAFT RETURN IS DELIVERED TO JACOB LIEF FOR DISTRIBUTION AND REVIEW BY MEMBERS OF THE BOARD OF DIRECTORS FORM 990, PART VI, SECTION B, LINE 12C: CONFLICT OF INTEREST POLICY REVIEWED PERIODICALLY BY BOARD MEMBERS, ALL PARTIES ARE EDUCATED ON SUCH POLICY FOR DISCLOSURE IS MANDATORY. FORM 990, PART VI, SECTION B, LINE 15: PRESIDENT AND CEO OF THE ORGANIZATION IN CONSULTATION WITH THE BOARD OF DIRECTORS FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990: MD, PA, FL, ME, CT, IL, NJ, NY, CA, CO, RI, PA, OH, MA, GA FORM 990, PART VI, SECTION C, LINE 19: FINANCIAL STATEMENTS AVAILABLE UPON REQUEST AND ON WEBSITE FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS: -1,273.NET UNREALIZED LOSSES ON INVESTMENTS: 273,056. DONATED SERVICES AND USE OF FACILITIES: TOTAL TO FORM 990, PART XI, LINE 5 271,783. FORM 990 PART XII, LINE 2C DRAFT FINANCIAL STATEMENTS ARE PRESENTED TO THE BOARD OF DIRECTORS FOR REVIEW AND COMMENTS.

UBUNTU EDUCATION FUND, INC Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990)

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

Opert to Public Inspection

OMB No 1545-0047

Employer identification number 31-1705917

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

Part

Direct controlling Identification of Related Tax-Exempt Organizations (Complete If the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) End-of-year assets Total income Legal domicile (state or foreign country) Primary activity Vame, address, and EIN of disregarded entity Part #

(g) Section 512(b)(13) controlled N_o × × entity? Yes Direct controlling entity status (if section Public charity 501(c)(3)) Exempt Code section Ē Legal domicile (state or foreign country) UNITED KINGDOM SOUTH AFRICA ဥ EDUCATION & HEALTHCARE TO EDUCATION & HEALTHCARE AFFECTED BY HIV/AIDS AFFECTED BY HIV/AIDS CHILDREN INFECTED & CHILDREN INFECTED & Primary activity FRIENDS OF UBUNTU EDUCATION FUND UK UBUNTU EDUCATION FUND SOUTH AFRICA Name, address, and EIN LONDON, UNITED KINGDOM WIG OPE of related organization PORT ELIZABETH, SOUTH AFRICA PO BOX 14526, SIDWELL, 6001 7 CAVENDISH SQUARE

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

Schedule R (Form 990) 2010

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31-1705917

Page 2

Schedule R (Form 990) 2010 UBUNTU EDUCATION FUND, INC

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.) Part III

Percentage ownership General or Percentage managing ownership 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.) Ξ 3 Yes No Share of end-of-year assets 8 Code V-UBI amount in box 20 of Schedule 2 K-1 (Form 1065) \in Share of total income ate allocations? Disproportion-Yes Ξ Type of entity (C corp, S corp, or trust) Share of end-of-year assets **6** Direct controlling entity Share of total Income Predominant income (related, unrelated, excluded from tax under sections 512-514) Legal domicile (state or foreign country) Û **e** Primary activity Direct controlling entity ত্ত (c)
Legal
domicile
(state or
foreign
country) Primary activity Name, address, and EIN of related organization Name, address, and EIN of related organization Part IV

Schedule R (Form 990) 2010

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032162 12-21-10

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

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.				Yes No
1 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?	s with one or more re	slated organizations listed	ın Parts II-IV?	
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a X
b Gift, grant, or capital contribution to other organization(s)				Tb X
c Giff, grant, or capital contribution from other organization(s)				1c X
d Loans or loan guarantees to or for other organization(s)			•	1d X
e Loans or loan guarantees by other organization(s)				1e X
Sale of assets to other organization(s)				**
				: >
h Exchange of assets				4
i Lease of facilities, equipment, or other assets to other organization(s)			·	×
i Lease of facilities, equipment, or other assets from other organization(s)				1i X
k Performance of services or membership or fundraising solicitations for other organization(s)	nization(s)			1k X
I Performance of services or membership or fundraising solicitations by other organization(s)	ıızatıon(s)			+ X
m Sharing of facilities, equipment, mailing lists, or other assets				1m X
n Sharing of paid employees	•		:	1n X
 Reimbursement paid to other organization for expenses 				10 X
p Reimbursement paid by other organization for expenses				Tp X
				19 X
Connect ransher or cash or properly from other organization(s) If the answer to any of the above is "Yes," see the instructions for information on w	who must complete th	is line, including covered	nation on who must complete this line, including covered relationships and transaction thresholds.	
		n		
(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved	
(1) UBUNTU EDUCATION FUND SOUTH AFRICA	В	1,954,534.		
(2)				
(b)				
(5)				
(9)				
032163 12-21-10	7		Schedule	Schedule R (Form 990) 2010

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Schedule R (Form 990) 2010 UBUNTU EDUCATION FUND, INC

Part VI Unrelated Organizations Taxable as a Partnership (Complete if 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) (b)	(q)	(0)	9	(e)	6	(B)	ε
INI the souther small	Primary activity	i egal domicile	Are all partners	Share	Dispropor-	Code V-UBI	
of entity		(state or foreign	section 501(c)(3) organizations?		tionate allocations?	amount in box 20	managing partner?
		country)	Yes No		Yes No	(Form 1065)	· 1
							_
			•				
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						Schedule R (Form 990) 2010	n 990) 2010

Schedule R	(Form 990) 2010	UBUNTU	EDUCATION	FUND,	INC	31-1705917 Page 5
Part VII	(Form 990) 2010 Supplemental Inf	ormation				
		omiauon				-4
	Complete this part to p	rovide additional	information for respons	onses to qu	estions on Schedule R (see instru	ictions).
		<u> </u>	<u> </u>			
					· · · · · · · · · · · · · · · · · · ·	
						
						
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	· · · · · · · · · · · · · · · · · · ·					

Asset No	Description	Date Acquired	Method	Life	S S	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
- 2		070504SL		7.00	16	6,000.			6,000.	5,349.		651.
- 17	FURNITURES	031502200087.00	200DB	7.00	19	425.			425.	414.		0
<u> </u>	3COMPUTERS	041502200DB5.00	200DB	2.00	16	1,222.			1,222.	1,222.		0
4	40FFICE EQUIPMENT	101504SL		7.00	19	1,564.			1,564.	1,227.		223.
- 50	SCORDLESS TELEPHONES072004SL	072004		5.00	16	762.			762.	762.		0
- U	FROME STREET	081504SL		5.00	9 ===	236.	•••		236.	236.		, o
2	7COMPUTERS EQUIPMENT123105SL	123105		3.00	16	5,451.			5,451.	5,451.	_	.0
*	SCOMPUTERS EQUIPMENTO 61505SL	061505		5.00	10) rrd	3,565.			3,565,	2,971.		0.
<u>8</u>	9COMPUTERS	041504SL		5.00	16	1,058.	-	•••	1,058.	1,058.		.0
10,	LOFURNITURE	120103SL		7.00	19	3,087.			3,087.	2,903.		184.
110	11COMPUTERS EQUIPMENT041505SL	041505		5.00	16	1,397.			1,397.	1,210.		0
12	12COMPUTERS EQUIPMENTO 11505SL	011505		5.00	3.6	1,415,			1,435.	1,297.		0
13	13COMPUTERS EQUIPMENT 111504SL	111504		5.00	16	5,925.			5,925.	5,925.		0
1.4	14MISC. COMPUTER	071504SL		3.00	19 m	1,262.			1,262.	1,262.		0
15 <u>F</u>		071504SL		5.00	16	208.			208.	208.		0
16	FIXTURES	121505SL		5.00	91	406.			406.	367.		39.
170	17COMPUTER	031406SL		3.00	16	2,667.	- 11.		2,667.	2,667.		0.
180	18Cameras	041206SL	1	3.00	19 111	4,410.			4,410.	4,410.		0

(D) - Asset disposed

2010 DEPRECIATION AND AMORTIZATION REPORT FORM 990 PAGE 10

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Asset No.	Description	Date Acquired	Method	Lrfe	So So	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
19	19EQUIPMENT	012207SL		5.00	16	1,032.		,	1,032.	704.	-	206.
20	ZOEQUIPMENT	031907SL		5.00	19	329.			329.	214.	_	99
21	21EQUIPMENT	18/08090		5.00	16	4,587.			4,587.	2,827.		917.
22	22EQUIPMENT	081606SL		5.00	\$ <u>0</u>	1,752.			1,752.	1,342,		350.
23	23EQUIPMENT	032807SL		5.00	16	599.			599.	390.		120.
24	24COMPUTERS EQUIPMENTO 7200 7SI	072007		5.00	3	2,336.			2,336.	2,283.		en En
25	25COMPUTERS EQUIPMENT032808SL	032808		5.00	16	3,811.			3,811.	3,048.		762.
26	7	062509SL		7.00	9 #1	10,000.			10,000.	1,429.		1,429.
	* TOTAL 990 PAGE 10 DEPR					65,506.	• • · · · · · · · · · · · · · · · · · ·	0	.905,59	51,176.	0	5,000.
	,											
			_ - -								-	
•												
•••												
-										•••		

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

Financial Statements

and

Supplementary Information

June 30, 2011

Financial Statements

June 30, 2011

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INDEPENDENT AUDITOR'S REPORT

The Board of Directors Ubuntu Education Fund, Inc.

We have audited the accompanying statements of financial position of Ubuntu Education Fund, Inc. as of June 30, 2011 and 2010, and the related statements of activities and cash flows for the years then ended. These financial statements are the responsibility of the Organization's management. Our responsibility is to express an opinion on these financial statements based on our audits.

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audits to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audits provide a reasonable basis for our opinion.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Ubuntu Education Fund, Inc. as of June 30, 2011 and 2010, and the changes in its net assets and its cash flows for the years then ended in conformity with accounting principles generally accepted in the United States of America.

January 10, 2012

UBUNTU EDUCATION FUND, INC. Statements of Financial Position June 30, 2011 and 2010

ASSETS (Note 8)

	2011	2010
Current assets:		
Cash	\$ 330,669	\$ 247,388
Current portion of grants receivable, net (Notes 3 and 4)	122,878	238,791
Prepaid expenses and other current assets	17,014	26,155
Total current assets	470,561	512,334
Long-term portion of grants receivable, net (Notes 3 and 4)	160,565	28,178
Property and equipment, net (Note 5)	14,301	16,098
Security deposits	18,450	14,500
	\$ 663,877	\$ 571,110
LIABILITIES AND NET ASSETS		
Current liabilities:		
Accounts payable and accrued expenses	\$ 39,006	\$ 20,901
Current portion of deferred rent (Note 11)	325	1,481
Total current liabilities	39,331	22,382
Deferred rent (Note 11)	3,112	475
Commitments (Note 11)		
Net assets:		
Unrestricted	397,509	319,537
Temporarily restricted (Note 6)	223,925	228,716
Total net assets	621,434	548,253
	\$ 663,877	\$ 571,110

See accompanying notes.

UBUNTU EDUCATION FUND, INC Statements of Activities For the Years Ended June 30, 2011 and 2010

		2011			2010	
	Unrestricted	Temporarily Restricted	Total	Uniestricted	Temporarily Restricted	Total
Public support and revenue (Notes 3 and 7). Contributions Grants Capital campaign	\$ 601,642 217,318 500,000	\$ 195,747	\$ 797,389 _ 217,318 500,000	\$ 341,476 547,886 448,000	\$ 2,768 182,921	\$ 344,244 730,807 448,000
Special event revenue (not of direct expenses of \$271,729 in 2011 and \$33,168 in 2010) Donated goods and services (Note 10) Olther income Net assets refersed from restrictions (Note 6)	1,393,250 273,056 24,822 200,538	(200,538)	1,393,250 273,056 24,822	119,364 32,640 7,827 367,500	- - - (367,500)	119,364 32,640 7,827
Total public support and revenue	3,210,626	(4,791)	3,204,835	1,864,693	(1181,811)	1,682,882
Expenses (Notes 7, 9 and 11) Program services Capital campaign Health, library, empowerment, and other program services	2,171,797		2,171,797	400,000		400,000
Total program services	2,171,797		2,171,797	1,477,448		1,477,448
Supporting services. Management and general services Fundraising Total supporting services	275,284 685,573 960,857	1 1	275,284 685,573 960,857	188,839 256,113 444,952		188,839 256,113 444,952
Total expenses	3,132,654	•	3,132,654	1,922,400	1	1,922,400
Change in net assets	27,972	(4,791)	73,181	(57,707)	(181,811)	(239,518)
Net assets, beginning of year	319,537	228,716	548,253	377,244	410,527	177,771
Net assets, end of year	\$ 397,509	\$ 223,925	\$ 621.434	\$ 319,537	\$ 228,716	\$ 548,253

See accompanying notes

UBUNTU EDUCATION FUND, INC. Statements of Cash Flows For the Years Ended June 30, 2011 and 2010

	2011	2010
Cash flows from operating activities:		-
Change in net assets	\$ 73,18	1 \$ (239,518)
Adjustments to reconcile change in net assets to net cash		
provided by operating activities:		
Depreciation	7,24	7 7,855
Deferred rent	1,48	1 -
Change in assets and liabilities:		
Grants receivable	(16,47	4) 245,007
Security deposits	(3,95	0) -
Prepaid expenses and other current assets	9,14	1 (17,267)
Accounts payable and accrued expenses	18,10	5 15,350
Net cash provided by operating activities	88,73	1 11,427
Cash used in investing activities:		
Purchase of property and equipment	(5,45	0) (1,391)
Net increase in cash	83,28	1 10,036
Cash, beginning of year	247,38	8 237,352
Cash, end of year	\$ 330,66	9 \$ 247,388

See accompanying notes.

Note 1 - The Organization

Ubuntu Education Fund, Inc. (the "Organization") is a not-for-profit organization incorporated under the laws of the State of New York dedicated to creating programs to assist vulnerable children and families in South Africa. The Organization provides life saving HIV support services and essential educational resources to over 40,000 children and their families.

The Organization, as described in Note 7, has transactions and relationships with Ubuntu Education Fund ("UEF"), an organization incorporated in South Africa, and Friends of Ubuntu Education Fund UK, an organization incorporated in the United Kingdom. The Organization and its affiliates are all under common control.

The Organization is exempt from federal income taxes under provisions of Section 501(c)(3) of the Internal Revenue Code.

Note 2 - Summary of Significant Accounting Policies

Basis of Accounting

The financial statements of the Organization have been prepared on the accrual basis of accounting.

Basis of Presentation

The financial statement presentation follows Topic 958, "Not-For-Profit Entities," of Financial Accounting Standards Board Accounting Standards Codification. Under Topic 958, the Organization is required to report information regarding its financial position and activities according to three classes of net assets: unrestricted net assets, temporarily restricted net assets and permanently restricted net assets. Accordingly, the net assets of the Organization and changes therein are classified and reported as follows:

Unrestricted Net Assets

Net assets that are not subject to donor-imposed stipulations.

Temporarily Restricted Net Assets

Net assets subject to donor-imposed stipulations that may or will be met either by actions of the Organization and/or the passage of time.

Note 2 - <u>Summary of Significant Accounting Policies (Continued)</u>

Basis of Presentation (Continued)

Permanently Restricted Net Assets

Permanently restricted net assets is the class of net assets that is subject to donor-imposed stipulations that they be maintained permanently by an organization. As of June 30, 2011 and 2010, the Organization does not have any permanently restricted net assets.

Revenue and Expenses

Revenue is reported as increases in unrestricted net assets unless their use is limited by donor-imposed restrictions. Expenses are reported as decreases in unrestricted net assets. Gains and losses on investments and other assets or liabilities are reported as increases or decreases in unrestricted net assets unless their use is restricted by explicit donor stipulation or by law. The Organization reports donor-restricted contributions where restrictions are met in the same reporting period as changes in unrestricted net assets. Expirations of temporary restrictions on net assets (i.e., the donor-stipulated purpose has been fulfilled and/or the stipulated time period has elapsed) are reported as reclassifications between the applicable classes of net assets.

Contributions

Contributions, which include unconditional promises to give (pledges), are recognized as revenue in the period received. The Organization considers all contributions available for unrestricted use, unless specifically restricted by the donor or due in future periods, in which case they are recorded as temporarily restricted.

Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the reporting period. Actual results could differ from those estimates.

Note 2 - Summary of Significant Accounting Policies (Continued)

Property and Equipment

Property and equipment is stated at cost or fair market value at the date of purchase or gift. Depreciation of property and equipment is provided on a straight-line basis over estimated useful lives of three to seven years. Upon sale or retirement of property and equipment, the related cost and accumulated depreciation are removed from the accounts and any gain or loss is reflected in operations.

Note 3 - Concentration of Credit Risk and Major Grantors or Contributors

Major Grantors or Contributors

During the year ended June 30, 2011, one contributor accounted for approximately 19% of total public support and revenue. As of June 30, 2011, there are no grants receivable from this contributor. During the year ended June 30, 2010, two contributors accounted for approximately 40% of total public support and revenue. These contributors accounted for 60% of the Organization's grants receivable at June 30, 2010.

Note 4 - Grants Receivable

As of June 30, the Organization has unconditional grants receivable as follows:

	2011	2010
Due within 1 year	\$ 122,878	\$ 238,791
Due years 2 through 5	<u>170,000</u> 292,878	<u>30.000</u> 268,791
Present value discount (at rate of 3% in 2011		,
and 3.2% in 2010)	(9.435)	(1,822)
Grants receivable, net	<u>\$ 283,443</u>	<u>\$ 266,969</u>

Note 5 - Property and Equipment

At June 30, property and equipment consists of:

		2010
Equipment	\$ 60,865	\$ 55,415
Furniture and fixtures	11.483	11.483
	72,348	66,898
Less: Accumulated depreciation	58.047	50.800
	<u>\$ 14.301</u>	<u>\$ 16.098</u>

Note 6 - Temporarily Restricted Net Assets

Temporarily restricted net assets at June 30, consist of the following:

	2011	2010
Program services:		
Capital campaign	\$ -	\$ 10,000
Education	3,360	178,038
Supporting services:		
Time restriction	230.000	42,500
	233,360	230,538
Present value discount (at rate of 3%		
in 2011 and 3.2% in 2010)	(9.435)	(1,822)
	<u>\$ 223,925</u>	<u>\$ 228,716</u>

For the years ended June 30, the amounts released from restrictions consist of:

	2011	2010
Program services:		
Capital campaign	\$ 10,000	\$ 45,000
Empowerment and other program services	178,038	-
Supporting services:		
Time restriction	<u>12.500</u>	<u>322.500</u>
	<u>\$ 200,538</u>	<u>\$ 367,500</u>

Note 7 - Related Party Transactions

During the years ended June 30, 2011 and 2010, the Organization contributed approximately \$1,950,000 and \$902,000, respectively, to UEF for funding of the capital campaign, and health and education initiatives in South Africa.

During the years ended June 30, 2011 and 2010, the Organization received a contribution of \$25,000 and \$15,000, respectively, from an individual related to the director of the Organization.

Note 8 - Note Payable - Bank

The Organization has a line of credit that provides for maximum borrowings of \$50,000, which is collateralized by substantially all the assets of the Organization. Interest is charged at 4.75% at June 30, 2011. As of June 30, 2011 and 2010, the Organization was not indebted to the bank.

Note 9 - Functional Allocation of Expenses

The cost of providing the various program and supporting services has been summarized on a functional basis in the statement of activities. Accordingly, certain costs have been allocated among the program and the supporting services benefited.

Note 10 - Donated Goods and Services

For the years ended June 30, 2011 and 2010, the Organization received approximately \$273,000 and \$33,000, respectively, in donated goods and services.

Contributed goods and services in 2011 include the value of donated stock, art and books. Contributed goods and services in 2010 included the value of services provided by an attorney in general corporate matters.

Note 11 - Commitments

Operating Lease

The Organization leases an office facility under a non-cancellable operating lease expiring through September 2014. Minimum aggregate annual lease payments are as follows:

Year Ending June 30,	
2012	\$ 49,000
2013	50,000
2014	50,000
2015	13.000
	<u>\$ 162.000</u>

Rent expense, including escalation costs, charged to operations for the years ended June 30, 2011 and 2010 amounted to approximately \$48,000 and \$46,000, respectively.

The accompanying financial statements reflect rent expense on a straight-line basis over the term of the lease in accordance with accounting principles generally accepted in the United States of America. An obligation of approximately \$3,000 and \$2,000 at June 30, 2011 and 2010, respectively, representing the pro rata future rent payments, is included in the statements of financial position. Included in rent expense for the year ended June 30, 2011 is decreased rent in the amount of \$1,481, which represents the difference between the amount paid pursuant to the lease and rent expense calculated pursuant to the method referred to above.

Note 12 - Subsequent Events

The Organization has evaluated subsequent events through January 10, 2012, the date the financial statements were available to be issued, and has concluded that no such events or transactions took place which would require disclosure herein.

SUPPLEMENTARY INFORMATION

INDEPENDENT AUDITOR'S REPORT ON THE SUPPLEMENTARY INFORMATION

The Board of Directors Ubuntu Education Fund, Inc.

Our audits were conducted for the purpose of forming an opinion on the basic financial statements taken as a whole. The supplementary information is presented for purposes of additional analysis and is not a required part of the basic financial statements. Such information has not been subjected to the auditing procedures applied in the audits of the basic financial statements and, accordingly, we express no opinion on it.

January 10, 2012

UBUNITU EDUCATION FUND, INC (Supplementary Information) Schedule of Functional Expenses For the Year Ended June 39, 2011

			Supporting Services		
		Management		Total	
	Program	and General		Supporting	Total
	Services	Services	Fundraising	Services	Expenses
Salaries and related expenses	60 433	570 101			
Salaries	0.4473	c+7,191 ¢	01C,12t &	\$ 518,755	\$ 601,228
Payroll taxes and health benefits	15,451	17,410	65,175	82,585	98,036
Total salaries and related expenses	97,924	208,655	392,685	601,340	699,264
Other expenses.					
Contributions to UEF for other program services	1,954,534	•	•	•	1,954,534
Thavel	24,187	31,257	21,212	52,469	76,656
Development and marketing	9,275		116,270	116,270	125,545
Rent	1	1	47,609	47,609	47,609
Utilities and insurance	834	400	175,6	176,6	10,805
Office expense	346	1,098	15,517	16,615	196'91
Professional fees	74,875	29,464	33,275	62,739	137,614
Communication	115	1,312	5,865	7,177	7,292
Computer expense	606	626	17,452	18,078	18,987
Payroll service fees	148	669	3,806	4,505	4,653
Training and conferences	6,323 ·	115	1,718	1,833	8,156
Bank fees	496	788	10,529	11,317	11,813,
Contributed goods and services	1	ı	2,989	2,989	2,989
Depreciation	1,831	870	4,545	5,415	7,246
Induect benefit expenses	•		2,530	2,530	2,530
Total other expenses	2,073,873	66,629	292,888	359,517	2,433,390
Total expenses	\$ 2,171,797	\$ 275,284	\$ 685,573	\$ 960,857	\$ 3,132,654

See independent auditor's report on the supplementary information

UBUNTU EDUCATION FUND, INC
(Supplementary Information)
Schedule of Functional Expenses
For the Year Ended June 30, 2010

			Supporting Services		
	Program	Management and General		Total Supporting	Total
	Services	Services	Fundraising	Services	Expenses
Salaries and related expenses. Salaries	\$ 301,071	\$ 126,801	\$ 146,758	\$ 273.559	\$ 574.630
Payroll taxes and health benefits	38,547	13,347	24,486	37,833	76,380
Total salanes and related expenses	339,618	140,148	171,244	311,392	010,120
Other expenses					
Contributions to UEF for capital campaign	400,000	•	•	•	400,000
Contributions to UEF for other program services	488,000	ı	•	,	488,000
Community workshops and after school programs		ı	1,633	1,633	1,633
Travel	27,103	4,637	4,795	9,432	36,535
Development and marketing	65,938	13,027	13,121	26,148	92,086
Rent	34,241	5,784	5,784	11,568	45,809
Utilities and insurance	7,573	929	929	1,858	9,431
Office expense	10,157	1,825	2,595	4,420	14,577
Professional fees	77,887	13,486	21,724	35,210	113,097
Communication	2,667	1,133	1,430	2,563	8,230
Computer expense	8,632	1,054	2,378	3,432	12,064
Payroll service fees	2,455	1,184	477	1,661	4,116
Training and conferences	2,801	•	•	•	2,801
Bank fees	1,721	176	469	1,440	3,161
Contributed goods and services		3,400	066,81	22,390	22,390
Depreciation	5,655	1,100	1,100	2,200	7,855
Indirect benefit expenses	1	161	9,444	9,605	9,605
Total other expenses	1,137,830	48,691	84,869	133,560	1,271,390
Total expenses	\$ 1,477,448	\$ 188,839	\$ 256,113	\$ 444,952	\$ 1,922,400

See independent auditor's report on the supplementary information.

Department of the Treasury Internal Revenue Service

Depreciation and Amortization

(Including Information on Listed Property) See separate instructions.

Attach to your tax return.

990

OMB No 1545-0172

Name(s) shown on return Business or activity to which this form relates Identifying number UBUNTU EDUCATION FUND, INC FORM 990 PAGE 10 31-1705917 Part 1 Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I. 500,000. 1 Maximum amount (see instructions) 2 2 Total cost of section 179 property placed in service (see instructions) 2,000,000. 3 3 Threshold cost of section 179 property before reduction in limitation 4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0-. If marned filing separately, see instructions (a) Description of property (c) Elected cost (b) Cost (business use only) 7 Listed property. Enter the amount from line 29 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 9 Tentative deduction. Enter the smaller of line 5 or line 8 9 Carryover of disallowed deduction from line 13 of your 2009 Form 4562 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 11 12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 12 13 Carryover of disallowed deduction to 2011. Add lines 9 and 10, less line 12 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property.) 14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year 14 15 Property subject to section 168(f)(1) election 15 5,000. 16 Other depreciation (including ACRS) Part # MACRS Depreciation (Do not include listed property.) (See instructions.) 17 17 MACRS deductions for assets placed in service in tax years beginning before 2010 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B - Assets Placed in Service During 2010 Tax Year Using the General Depreciation System (c) Basis for depreciation (business/investment use (b) Month and (d) Recovery period (a) Classification of property (e) Convention (f) Method (g) Depreciation deduction year placed in service only - see instructions) 19a 3-year property 5-year property b C 7-year property 10-year property d 15-year property е 20-year property f S/L 25-year property 25 yrs. g ММ 27.5 yrs. S/L h Residential rental property MM S/L 27.5 yrs 39 yrs. ММ S/L i Nonresidential real property MM S/I Section C - Assets Placed in Service During 2010 Tax Year Using the Alternative Depreciation System 20a Class life S/L 12-year b 12 yrs. S/L 40 yrs. MM C 40-year S/L Part IV | Summary (See instructions.) 21 Listed property. Enter amount from line 28 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. 5,000. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr.

LHA For Paperwork Reduction Act Notice, see separate instructions.

23 For assets shown above and placed in service during the current year, enter the

portion of the basis attributable to section 263A costs

Form 4562 (2010)

23

For	rm 4562 (2010)	וופוו	יותם וויית	Сътт	ON FI	UMD	TNC					31_	1705	917	Daga 2
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K.	amusement.)									-				-	
								dedu	cting lease	expens	e, comp	lete only	y 24a, 24	lb, colun	nns (a)
								nstruc	tions for li	mits for p	passeng	er auton	nobiles.)		
248	a Do you have evidence to s	support the bu	siness/investme	nt use cl	aimed?	Y	es 🗀	No	24b If "Y	es," is th	e evide	nce writt	en?	Yes [No
	(a)	(b)	(c)		(d)		(e)		(f)	(g)	(h)		(i)
	Type of property (list vehicles first)	placed in	investment		Cost or		siness/inve	stment	Recovery period					sectio	n 179
25	Special depreciation allo	Anote: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns through (c) of Section A. all of Section B, and Section C if applicable. Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.) 9 you have evidence to support the business/investment use claimed? 9 yes No 24b If "Yes," is the evidence written? 9 yes lipicad in placed in placed in placed in placed in passenger automobiles. Cost or Other basis 9 yes lipicad in placed in placed in service during the tax year and ed more than 50% in a qualified business use. 9 yes lipicad in placed in service during the tax year and ed more than 50% in a qualified business use. 9 yes lipicad in placed in service during the tax year and ed more than 50% in a qualified business use. 9 yes lipicad in service during the tax year and ed more than 50% in a qualified business use. 9 yes lipicad in service during the tax year and ed more than 50% in a qualified business use. 9 yes lipicad in service during the tax year and ed more than 50% in a qualified business use. 9 yes lipicad in service during the tax year and ed more than 50% in a qualified business use. 9 yes lipicad in service during the tax year and ed more than 50% in a qualified business use. 9 yes lipicad in service during the lipicad in service during the tax year and ed more than 50% in a qualified business use. 9 yes lipicad in service during the lipicad in service during the lipicad in service during the lipicad in service during the lipicad in service during the lipicad in service during the lipicad in service during the lipicad in service during the lipicad in service during the lipicad in service during the lipicad in service during the lipicad in service during the lipicad in service during the lipicad in service during the lipicad in service during the lipicad in service during the lipicad in service during the lipicad in service during the lipicad in service dur		<u> </u>											
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26				ess use:								·		<u> </u>	
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27	Property used 50% or le	ess in a qual	fied business	use:								· · · · · ·			
		<u> </u>								S/L·					
			9	%											
			9	%											
28	Add amounts in column	(h), lines 25	through 27. E	nter her	e and on	line 21	, page 1				28				
		• •	•				., .					1	29		
	· ·		S	ection	B - Infor	mation	on Use	of Vet	nicles						
Co	mplete this section for ve	hicles used	by a sole prop	netor, p	artner, o	rother	more the	an 5%	owner," o	or related	d person	١.			
													ng this s	ection fo	r
tho	se vehicles.														
				(a)	(b)		(c)	(0	ı)	(4	e)	(f)
30	Total business/investment	estment miles driven during the Vehicle Vehicle Vehicle Velicl		ııcle	Veh	icle									
	year (do not include comm	nuting miles)													-
31	Total commuting miles of	driven during	the year												
32	Total other personal (no	ncommuting	j) miles												
	driven		-												
33	Total miles driven during	g the year.													
	Add lines 30 through 32	2			,									·······	_
34	Was the vehicle availab	le for person	al use	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	_No
	during off-duty hours?		•												
35	Was the vehicle used pi	rimarily by a	more	ļ								:			
	than 5% owner or relate	ed person?										ļ			
36	Is another vehicle availa	ble for perso	onal												
	use?	<u> </u>		<u> </u>	ll		ļ					<u> </u>			
				-	-				-						
	·	determine if	you meet an e	xceptio	n to comp	oleting	Section E	3 for v	ehicles us	ed by er	nployee	s who a	re not m	ore than	5%
_									1 11						Т
37		en policy sta	tement that pr	ohibits a	all person	al use	of vehicle	es, Inc	luding cor	nmuting,	, by you	r		Yes	No
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		f costs	Date	amortization	1	Amortiza			Code		Amortiza			nortization	
42	Amortization of costs th	at begins di	unna vour 2017		ar:		-		3000011	expense, complete only 24a, 24b, columns (a) nits for passenger automobiles.) ps.* is the evidence written? Yes No (g) (h) Elected section 179 cost 25					
<u>√£</u>		Jgii 10 dt		,	T			T							
		-			<u> </u>			\top							

Form 4562 (2010)

43

44

43 Amortization of costs that began before your 2010 tax year

44 Total. Add amounts in column (f). See the instructions for where to report

Form **8868**

(Rev. January 2011)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To Fire an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

• If you	are filing for an Automatic 3-Month Extension, complet	te only Pa	rt I and check this box			$\overline{\mathbf{x}}$
If you	are filing for an Additional (Not Automatic) 3-Month Ex	tension, c	omplete only Part II (on page 2 of this	form).		
Do not d	complete Part II unless you have already been granted a	an automa	tic 3-month extension on a previously fi	led For	m 8868	
Electror	nic filing (e-file). You can electronically file Form 8868 if y	ou need a	3-month automatic extension of time t	o file (6	months for a corpo	oration
required	to file Form 990-T), or an additional (not automatic) 3-more	nth extens	ion of time. You can electronically file F	om 88	68 to request an ex	xtension
of time t	o file any of the forms listed in Part I or Part II with the exc	ception of	Form 8870, Information Return for Trans	sfers A	ssociated With Ce	rtain
Persona	Benefit Contracts, which must be sent to the IRS in pap	er format	(see instructions). For more details on t	he elec	tronic filing of this f	orm,
visit www	v irs gov/efile and click on e-file for Charities & Nonprofits	1				
Part I	Automatic 3-Month Extension of Time	Only su	bmit original (no copies needed)			
A corpo	ration required to file Form 990-T and requesting an autor	natic 6-mo	onth extension - check this box and con	plete		
Part I on	ly				•	
All other	corporations (including 1120-C filers), partnerships, REM	IICs, and ti	rusts must use Form 7004 to request ar	extens	sion of time	
to file ind	come tax returns.	•	·			
Type or	Name of exempt organization			Empl	oyer identification	number
print				•	•	
	UBUNTU EDUCATION FUND, INC			3:	1-1705917	
File by the due date for	Number street and many available if a D.O. have a	ee instruc	tions.			·
filing your	32 BROADWAY					
return See instruction:		oreign add	ress, see instructions.			
	NEW YORK, NY 10004	g				
	11211 201111 112					
Enter th	e Return code for the return that this application is for (file	e a separa	te application for each return)			0 1
	(miles					
Applica	tion	Return	Application			Return
Is For		Code	Is For			Code
Form 99	n	01	Form 990-T (corporation)			07
Form 99		02	Form 1041-A			08
		03	Form 4720			09
Form 99		03	Form 5227			10
Form 99		05				11
	10-T (sec. 401(a) or 408(a) trust)	06	Form 6069			12
Form 95	0-T (trust other than above)		Form 8870 TU EDUCATION FUN			1 12
• The !	oooks are in the care of ► 32 BROADWAY - 1					
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		a in tha l le	·			
	organization does not have an office or place of busines					hook this
	s is for a Group Return, enter the organization's four digit	_			- -	
box >					ers trie exterision is	s ior
1 1	request an automatic 3-month (6 months for a corporation FEBRUARY 15, 2012, to file the exemp	•	•		The extension	
= =		ot organiza	tion return for the organization named a	above.	me extension	
IS	for the organization's return for.					
	calendar year or X tax year beginning JUL 1, 2010		nd ending JUN 30, 2011			
•	tax year beginning JUL 1, 2010	, ar	id ending OON 30, 2011		_	
				_14	_	
2 if	the tax year entered in line 1 is for less than 12 months, o	check reas	son: initial return Fin	al retur	n	
Į	Change in accounting period					
				Τ		
	this application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, 6	enter the tentative tax, less any			0
_	onrefundable credits. See instructions.			3a	\$	<u> </u>
	this application is for Form 990-PF, 990-T, 4720, or 6069					_
	stimated tax payments made. Include any prior year over			3b	\$	0.
	alance due. Subtract line 3b from line 3a. Include your page	-				_
	y using EFTPS (Electronic Federal Tax Payment System).			3c	\$	<u> </u>
Cautio	n. If you are going to make an electronic fund withdrawal	with this F	orm 8868, see Form 8453-EO and Form	1 8879-		
1114	For Denominary Reduction Act Notice and Instruction	_			Form 9969 (D	1 2011

Form 886	8 (Rev. 1-2011)					Page 2
	are filing for an Additional (Not Automatic) 3-Month Ex	tension, c	complete only Part II and check this b	ох	<u> </u>	X
Note. On	ly complete Part II if you have already been granted an a	automatic	3-month extension on a previously filed	d Form	3868.	
	re filing for an Automatic 3-Month Extension, complete					
Part II	Additional (Not Automatic) 3-Month E	xtensio	n of Time. Only file the original (no o			
Type or	Name of exempt organization			Emp	loyer identificatio	n number
print	UBUNTU EDUCATION FUND, INC			3	1-1705917	
File by the extended	Number, street, and room or suite no. If a P.O. box, s	ee instruc	tions.			
due date for	32 BROADWAY					<u> </u>
filing your return See instructions	City, town or post office, state, and ZIP code. For a fond NEW YORK, NY 10004	oreign add	ress, see instructions.			
_						0 1
Enter the	Return code for the return that this application is for (file	e a separa	te application for each return)			. [0]1]
Applicati	on	Return	Application			Return
ls For		Code	Is For		·	Code
Form 990		01				
Form 990	-BL	02	Form 1041-A			08
Form 990	-EZ	01	Form 4720			09
Form 990	-PF	04	Form 5227			10
Form 990	T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
	-T (trust other than above)	06	Form 8870			12
STOP! D	o not complete Part II if you were not already granted			usly file	ed Form 8868.	
			TU EDUCATION FUN			
	poks are in the care of \triangleright 32 BROADWAY - 1	NEW Y				
-	none No. ► 646-827-1190		FAX No. ►			
	organization does not have an office or place of business					· Ш
- 1	is for a Group Return, enter the organization's four digit	7				
box ►	. If it is for part of the group, check this box		ach a list with the names and EINs of a	ll memb	ers the extension	is for.
	quest an additional 3-month extension of time until		15, 2012 2010	TIIN	20 2011	
	calendar year, or other tax year beginning			7	30, 2011	·
6 If th	ne tax year entered in line 5 is for less than 12 months, o	neck reas	on: Initial return —	J Final r	eturn	
	☐ Change in accounting period					
	te in detail why you need the extension LL THE NECESSARY INFORMATION	ΨO D	REPARE A COMLETE AN	D AC	CURATE RE	TURNS
	RE NOT AVAILABLE AT THIS TIME		RELIEU II COMBILL III.	2 110	COIGIIL NI	TOTALO
ਜ਼	CE NOI AVAIDABBE AT THIS TIME					
8a If ti	nis application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069 e	enter the tentative tax less any			
	refundable credits. See instructions.	0, 0000, 0	inter the terrative tex, less any	8a	\$	0.
	nis application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and estimated			
	payments made. Include any prior year overpayment al					
	eviously with Form 8868.		a stoom and any amount part	8b	s	0.
	lance due. Subtract line 8b from line 8a. Include your pa	avment wr	th this form, if required, by using		_	
	TPS (Electronic Federal Tax Payment System). See instr			8c	\$	0.
			nd Verification	•		
Under pen	alties of perjury, I declare that I have examined this form, include correct, and complete, and that I am authorized to prepare this form	ding accom		he best o	of my knowledge and	belief,
			NTANT	Date		
<u>Signature</u>	Time .	110000	7.1 T 7.7.1 T	Dalt		(Pay 1.2011)
					rom 5555 ((Rev. 1-2011)