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Department of the Treasury Internal Revenue Service

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

OMB No 1545-0047

Open to Public Inspection

AF	or the	e 2010 calendar year, or tax year beginning OCT 1, 2010 and e	ending (SEP 30, 20)11	
Вс	 heck if oplicabl	C Name of organization		D Employer ide	entification numbe	r
a	Addre	NORTH AMERICAN CATHOLIC EDUCATIONAL		1		
	_chang	PROGRAMMING FOUNDATION, INC.				
	Name chang	Doing Business As		22	<u>2-3032456</u>	
L]Initial]return	, , ,	Room/suite			
	Termii ated	Z415 HARIFORD AVENUE		(4	401)934-11	00
	Amen return	City or town, state or country, and ZIP + 4		G Gross receipts \$	7,24	1,916.
	Application	JOHNSTON, RI 02919		H(a) Is this a gro	oup return	
	pend	F Name and address of principal officer JOHN PRIMEAU		for affiliates	۶۶ 🔲 Ye	s X No
		47 MEADOWVIEW BLVD, NORTH PROVIDENCE, F	RI 0:	2 H(b) Are all affiliat	tes included? 🔲 Ye :	s No
1.7	ax-ex	empt status X 501(c)(3)	r 52	7 If "No," atta	ach a list (see instru	uctions)
JV	Vebsi	te: WWW.NACEPF.NET		H(c) Group exer	mption number	
K F	orm of	organization: X Corporation Trust Association Other	∟ Year	of formation: 198	39 M State of legal of	iomicile: $\mathbf{R}\mathbf{I}$
	rt I	Summary	_			
a)	1	Briefly describe the organization's mission or most significant activities ITFS	INST	RUCTIONAL		
Activities & Governance		PROGRAMMING/EBS EDUCATIONAL BROADBAND TO	SCHO	OLS AND NO	N-PROFITS	47
rna	2	Check this box If the organization discontinued its operations or dispos	ed of mor	e than 25% of its r	net assets	
) Ve	3	Number of voting members of the governing body (Part VI, line 1a)			3	_ 3
ŏ	4	Number of independent voting members of the governing body (Part VI, line 1b)			4	_ 2
S S	5	Total number of individuals employed in calendar year 2010 (Part V, line 2a)			5	6
ıtie		Total number of volunteers (estimate if necessary)			6	0
ŧ		Total unrelated business revenue from Part VIII, column (C), line 12			7a	0.
ď		Net unrelated business taxable income from Form 990-T, line 34			7b	0.
				Prior Year	Current	
4	8	Contributions and grants (Part VIII, line 1h)		11.01.1041	0.	0.
Revenue	9	Program service revenue (Part VIII, line 2g)	<u> </u>	5,732,13		1,000.
Š	l	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		865,3		0,916.
æ	ı	Other revenue (Part VIII, column (A), lines 5, 6d, 8 <u>c, 9c,</u> 10c, and 11e)		005,5	0.	0.
	ı	Total revenue - add lines 8-through if (mystequal Part VIII, column (A), line 12)		6,597,51		1,916.
	13	Grants and similar amounts paid (Part IX, column-(A)); tipes 1-3)	-	445,31		$\frac{1}{6},231.$
	14	Benefits paid to or for members (Part IX, column (A), 149 4)			0.	0,231.
	15	Salaries, other compensation, phiblogeoble beits (Pathy, column (A), lines 5-10)	-	464,40		2,463.
Expenses	15	Professional fundraising fees (Part IX, column (A), lines (Fau), column (A), lines (Fau)	<u> </u>		0.	0.
en	ı					
X		Total fundraising expenses (Part IX column (D) Tine 25)	<u>0.</u>	042 4	26 74	E 117
		Other expenses (Part IX, column (A), lines 11a-11d, T17-24f)	-	843,43		<u>5,117.</u>
		Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	_	1,753,15		3,811.
	19	Revenue less expenses Subtract line 18 from line 12		4,844,35		8,105.
Assets or Balances			<u> B</u>	eginning of Current		
Sse	20	Total assets (Part X, line 16)	<u> </u> -	49,686,09		5,568.
말	21	Total liabilities (Part X, line 26)	<u> </u>	26,812,9		<u>4,301.</u>
ᅸ	22	Net assets or fund balances Subtract line 21 from line 20		22,873,10	<u>52. 27,22</u>	1,267.
	<u>ırt II</u>	Signature Block				
		alties of perjury, I declare that I have examined this return, including accompanying schedules				d belief, it is
true,	corre	ct, and complete. Declaration of preparer (other than officer) is based on all information of wh	nch prepar	er has any knowledge	<u>). </u>	
		5				
Sign Her Paid	n	Signature of officer		Date 3	-14-2012	4
Her	e/	JOHN PRIMEAU, PRESIDENT				
		Tupe or print name and title				
		Print/Type treparer's name		Date Che	۰۰۰۰۰ الما	
Paid	l	CHRESTOPHER BARTLETT, CPCHRISTOPHER BART	rlet	08/14/12 self	f-employed	
Pre	arer	Firm's name ANDSAGER, BARTLETT & PIERONI, LI	LP	Fırm's El	N 🏲	
Use	Only	Firm's address ONE CATAMORE BLVD.				
		EAST PROVIDENCE, RI 02914		Phone no	o. 401-272-	9100
May	the l	RS discuss this return with the preparer shown above? (see instructions)			X Yes	□ No
	01 02-		ons.	· · · · · · · · · · · · · · · · · · ·	Form	990 (2010)

			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	X	
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		X
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		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_		7.7
6	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to	5_		<u> </u>
o	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I			х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	6		
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
_	Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X; or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		х
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		х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 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			
a	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
u	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	116		
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a	<u></u>	х
b	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		_X_
	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	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,			
4 <i>E</i>	and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b	Х	<u> </u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization		v	
16	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	15	X	\vdash
10	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,	16	^	
••	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		х
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
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		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		<u> </u>
		Form	990 (2010)

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Form 990 (2010) PROGRAMMING FOUNDATION, INC.

Part IV Checklist of Required Schedules (continued)

		Form	990 (2010)
5 0	Note. All Form 990 filers are required to complete Schedule O	38	Х	
38	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		X
37		27		v
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	_36_		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	26		y
26	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Yes X No			
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of			
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		X
	If "Yes," complete Schedule R, Parts II, III, IV, and V, Ine 1	34		X
34	Was the organization related to any tax-exempt or taxable entity?			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	_33_	X	
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	Schedule N, Part II	32		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	l		
	If "Yes," complete Schedule N, Part I	31		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	contributions? If "Yes," complete Schedule M	30	L	X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	X	
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		_X_
	instructions for applicable filing thresholds, conditions, and exceptions)			
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	Schedule L, Part III	27		х
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			_
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	Schedule L, Part I	25b		х
-	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
-	any tax-exempt bonds?	24c		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	_ 10		
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Schedule K If "No", go to line 25	24a		х
~	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	20		
	Schedule J	23	х	
23	Did the organization answer "Yes" to Part VII, 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			
22	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		<u>X</u>
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			3.5
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	_X_	
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the			
			Yes	No

Form 990 (2010) PROGRAMMING FOUNDATION, INC.

Part V Statements Regarding Other IRS Filings and Tax Compliance

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	Check if Schedule O contains a response to any question in this Part V			
		- T	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		163	140
	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 reportable gaming		1	
	(gambling) winnings to prize winners?	1c	х	
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 6	ļ		
b	if at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		Х
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
b	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 Accounts.	.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a_		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible?	6a		X
D	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	OD		<u> </u>
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year			-
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		<u> </u>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		<u> </u>
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting			
_	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966?	0-		
a	Did the organization make a distribution to a donor, donor advisor, or related person?	9a 9b		\vdash
10	Section 501(c)(7) organizations. Enter	35		
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		ı	į
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		<u> </u>
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			Ì
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			<u> </u>
а	- · · · · · · · · · · · · · · · · · · ·	13a		
_	Note. See the instructions for additional information the organization must report on Schedule O			
b			1	
_	organization is licensed to issue qualified health plans Enter the amount of reserves on hand 13b 13c	{		
с 14а		14a	<u> </u>	x
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		<u> </u>
			990	(2010)

Form 990 (2010)

PROGRAMMING FOUNDATION, INC.

22-3032456

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 3			
b	Enter the number of voting members included in line 1a, above, who are independent 2			
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	X	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision	ļ		
	of officers, directors or trustees, or key employees to a management company or other person?	3		<u> X</u>
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
	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Λ
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			
_	by the following The governing hadron	0-	х	
a	The governing body? Each committee with authority to act on behalf of the governing body?	8a	X	_
b	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	8b	Λ	
9	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)			Λ
	tor. 211 Groto (This occus in Direguesia information about policies het required by the internal revenue code)		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		X
	and the first term of the second seco			
_	and branches to ensure their operations are consistent with those of the organization?	10b		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		Х
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise			
	to conflicts?	12b		
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	ın Schedule O how this is done	12c		
13	Does the organization have a written whistleblower policy?	13		Х
14	Does the organization have a written document retention and destruction policy?	14	X	ļ
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
b	Other officers or key employees of the organization	15b		X
40	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions)			
iba	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	46-		x
h	taxable entity during the year? If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation	16a	<u> </u>	^
D	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's		l 	
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure	100	1	
17	List the states with which a copy of this Form 990 is required to be filed ▶ NONE			
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.			
	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	ncial	
	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	tion 🕨	-	
	JOHN R.PRIMEAU NACEPF INC (401)934-1100			
_	2419 HARTFORD AVENUE, JOHNSTON, RI 02919			
		Corm	aan	/2010\

Part VII 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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- 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.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if neither the organization r (A)	(B)			(0	C)			(D)	(E)	(F)
Name and Title	Average	,,	Positio			ition that apply)		Reportable	Reportable	Estimated
	hours per week (describe hours for related organizations in Schedule O)	ustee or director	Institutional frustee	Officer	Key employee	Highest compensated Compensated Complexed Comp		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
JOHN PRIMEAU								,		
PRESIDENT, TREASURER & DIRECTOR	60.00	X	<u> </u>	X	Х	Х		178,005.	0.	25,000
BARBARA PRIMEAU										
V. PRESIDENT, SECRETARY & DIRECTOR	10.00	Х		X				0.	0.	0
IRENE PRIMEAU										
DIRECTOR		X	<u></u>	X			L	0.	0.	0
ARCHBISHOP G. PEARCE										
PROGRAM GOVENOR		X	<u>L.</u>					0.	0.	0
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		\perp		L	L.	L				
		L	L		L					
	l	1	1	1	I	1	l	1	l	1

, a.	T VII Section A. Officers, Directors, Tru (A)	ustees, Key Er (B)	npic	oyee	s, aı (C		ligh	est	Compensated Employ (D)	ees (continued) (E)	1				
	Name and title	Average			Posi	tion			Reportable	Reportable		Estimated			
		hours per week (describe hours for related organizations in Schedule O)	istee or director	lnstitutional trustee	all t	Key employee	Highest compensated do employee	<u></u>	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MIS	.	com fr org and	nount other pensa om th anizat d relat	ation ie tion ted	
_ 							-								
												<u></u>			
									170 005				F 0	0.0	
С	Sub-total Total from continuation sheets to Part V Total (add lines 1b and 1c)	II, Section A					> > >		178,005. 0. 178,005.		0. 0.	0.			
2	Total number of individuals (including but compensation from the organization	not limited to th	nose	liste	ed at	oove	e) wł	no re),000 in reportable				1	
3	Did the organization list any former officer line 1a? If "Yes," complete Schedule J for			e, ke	y em	plo	yee,	or h	nighest compensated er	nployee on		3	Yes	No X	
4	For any individual listed on line 1a, is the s and related organizations greater than \$15	um of reportab 60,000? If "Yes,	le co	mple	ete S	Sche	edule	J f	for such individual	_		4_	х		
5 Sec	Did any person listed on line 1a receive or rendered to the organization? If "Yes," constition B. Independent Contractors					-		elat	ed organization or indiv	idual for services	_	5		х	
1	Complete this table for your five highest countries the organization NONE	ompensated in	dep	ende	nt c	onti	racto	ors t	hat received more than	\$100,000 of com	pens	ation f	rom		
	(A) Name and business	s address							(B) Description of s	services	С	(C ompe		วก	
						· <u>-</u>								_	
		<u>-</u>	_												
									~-						
2 ——	Total number of independent contractors \$100,000 in compensation from the organ	_	ot li	mite	d to		se li: 0	sted	l above) who received n	nore than		Form	gan .	(2010)	

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Pa	t VII	Statement of Rever	nue				-	
	_				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
非	1 a	Federated campaigns	1a					
Contributions, gifts, grants and other similar amounts	b	Membership dues	1b					
am, c	С	Fundraising events	1c					
<u>a</u> gi	d	Related organizations	1 <u>d</u>					
S.E	е	Government grants (contribut	ions) 1e					
호기	f	All other contributions, gifts, gran	its, and					
호쵧		sımılar amounts not ıncluded abo	ve 1f					
들	g	Noncash contributions included in lines	1a-1f \$					
<u>3</u> <u>9</u>	<u>h</u>	Total. Add lines 1a-1f		•				
				Business Code				
8	2 a			611710	6638700.	6638700.		
او چ	b	TOWER RENT INCO)ME	900099	22,300.			22,300.
양리	С							
e a	d							
Program Service Revenue	е							
۱ ۳	f	All other program service reve	enue					
\rightarrow	<u>g</u>			<u> </u>	6661000.			
	3	Investment income (including	dividends, inter	est, and	044 000			
		other similar amounts)			211,220.			211,220.
	4	Income from investment of ta	x-exempt bond p	proceeds				
	5	Royalties		•				
	_	0 5. 1	(i) Real	(II) Personal				
	6 a			-				
	b	•	-	ļ				1
	C	` '						
		Net rental income or (loss) Gross amount from sales of	(A) Convention	(v) Other				
	/ a		(i) Securities 369696.	(II) Other				
	L	assets other than inventory Less, cost or other basis	303030.	-				
ŀ	D	and sales expenses						
	_	Gain or (loss)	369696.					
ļ		Net gain or (loss)	303030	>	369,696.			369,696.
		Gross income from fundraisin	na events (not		303,030.		<u></u>	303,030.
₹	•	including \$	of					
e e		contributions reported on line						
Other Revenue		Part IV, line 18	а					
۽	b	Less: direct expenses	b					
٥	С	Net income or (loss) from fund	draising events	•				İ
		Gross income from gaming ad						
		Part IV, line 19	а	,				
	b	Less. direct expenses	b					
	c	Net income or (loss) from gan	ning activities					
	10 a	Gross sales of inventory, less	returns					
		and allowances	а					
	b	Less cost of goods sold	b	. [
ļ	С	Net income or (loss) from sale	es of inventory					
		Miscellaneous Revent	16	Business Code				
	11 a							
	b							
	С							
	d	All other revenue					·	
		Total. Add lines 11a 11d		>	701 655		·-·	
03300	12	Total revenue. See instructions.		<u> </u>	7241916.	6638700.	0.	603,216.
03200 12-21	10							Form 990 (2010)

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Part IX Statement of Functional Expenses

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

	All other organizations must comp	olete column (A) but are i	not required to complete	columns (B), (C), and (D)	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	1,616,231.	1,616,231.		
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				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	178,005.	78,005.	100,000.	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				_
7	Other salaries and wages	139,808.	101,308.	38,500.	
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	44,500.	34,500.	10,000.	
9	Other employee benefits	44,064.	29,064.	15,000.	
10	Payroll taxes	126,086.	116,086.	10,000.	
11	Fees for services (non-employees)				
а	Management				
b	Legal	85,205.	85,205.		
c	Accounting	19,259.	16,259.	3,000.	 -
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17		-	-	
f	Investment management fees				
g	Other				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel	44,224.	44,224.		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	78,391.	56,308.	22,083.	
23	Insurance	25,005.	10,005.	15,000.	
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 O.)			,	
а	MARKETING	234,337.	234,337.		
b	CONSULTING EXPENSE	82,100.	82,100.		
c	RADIO TV MINISTRY	38,500.	38,500.		
d	OFFICE SUPPLIES	20,390.	20,390.		
e	POSTAGE & SHIPPING	6,488.	6,488.		
f	All other expenses	111,218.	91,218.	20,000.	
25	Total functional expenses. Add lines 1 through 24f	2,893,811.	2,660,228.	233,583.	0.
26	Joint costs. Check here ▶ ☐ If 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				

Pai	rt X	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	41,847.	1	64,492.
	2	Savings and temporary cash investments	43,067,004.	2	46,930,028.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	401,152.	4	401,152.
	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees Complete Part II			
	1	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)		6	
Assets	7	Notes and loans receivable, net		7	15,873.
Ass	8	Inventories for sale or use		8	91,213.
-	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment cost or other			
		basis Complete Part VI of Schedule D 10a 1,683,702.			
	b	Less accumulated depreciation 10b 930,215.	805,388.	10c	753,487.
	11	Investments · publicly traded securities	5,117,198.	11	753,487. 5,117,198.
	12	Investments - other securities See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets	287.	14	287.
	15	Other assets See Part IV, line 11	253,223.	15	271,838.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	49,686,099.	16	53,645,568.
	17	Accounts payable and accrued expenses	44,500.	17	35,336.
	18	Grants payable		18	
	19	Deferred revenue	26,768,437.	19	26,381,795.
	20	Tax-exempt bond liabilities		20	
S	21	Escrow or custodial account liability Complete Part IV of Schedule D		_21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees,	-		
jab		highest compensated employees, and disqualified persons Complete Part II			
_		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	0.	_25_	7,170.
	26	Total liabilities. Add lines 17 through 25	26,812,937.	26	26,424,301.
		Organizations that follow SFAS 117, check here and complete			
es		lines 27 through 29, and lines 33 and 34.			
auc	27	Unrestricted net assets		27	
3al	28	Temporarily restricted net assets		28	
둳	29	Permanently restricted net assets		29	
Ξ		Organizations that do not follow SFAS 117, check here X and			
ō		complete lines 30 through 34.			
ets	30	Capital stock or trust principal, or current funds	0.	30	0.
Ass	31	Paid-in or capital surplus, or land, building, or equipment fund	0.	31	0.
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds	22,873,162.	32	27,221,267.
Z	33	Total net assets or fund balances	22,873 <u>,</u> 162.	33	27,221,267.
	34	Total liabilities and net assets/fund balances	49,686,099.	34	53,645,568.

Form **990** (2010)

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

За

X

Act and OMB Circular A-133?

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

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.

NORTH AMERICAN CATHOLIC EDUCATIONAL

2010

Open to Public Inspection

Employer identification number

		PROGRAM	MING FOUNDAT	ION,	INC.				22	-3032	<u>456</u>		
Part I	Reason	for Public Char	ity Status (All organiz	zations mu	st complet	e this par	t) See inst	tructions					
The <u>orga</u> n	ization is not a	a private foundation	because it is. (For lines	1 through	11, check	only one b	ox)						
1 🖳	A church, co	nvention of churches	s, or association of chur	ches desc	rıbed ın se	ction 170	(b)(1)(A)(i)) .					
2 🖳	A school des	cribed in section 17	0(b)(1)(A)(ii). (Attach Sc	hedule E)									
з 🗀	A hospital or	a cooperative hospi	tal service organization (described	ın section	170(b)(1)	(A)(iii).						
4	A medical res	search organization (operated in conjunction	with a hos	pital descr	ibed in se	ction 170	(b)(1)(A)(iii	i). Enter the	e hospital	's nam	e,	
	city, and stat	e											
5	An organizati	on operated for the	benefit of a college or ui	niversity o	wned or op	erated by	a governi	mental unit	described	d in			
	section 170	(b)(1)(A)(iv). (Comple	ete Part II)										
6	A federal, sta	ate, or local governm	ent or governmental uni	t describe	d in sectio	n 170(b)(1)(A)(v).						
7			eives a substantial part					r from the	general pu	ıblıc desc	rıbed ır	1	
		(b)(1)(A)(vi). (Comple											
8	A community trust described in section 170(b)(1)(A)(vi). (Complete Part II)												
9 X	An organizati	on that normally rec	eives (1) more than 33	1/3% of its	support fi	rom contri	butions, m	nembershij	o fees, and	I gross red	ceipts f	rom	
			nctions - subject to certa										
	income and i	unrelated business ta	axable income (less sec	tion 511 ta	x) from bu	sinesses a	acquired b	y the orga	nization af	ter June 3	0, 197	5	
	See section	509(a)(2). (Complete	Part III)					_					
10 🔲	An organizat	ion organized and or	perated exclusively to te	st for publ	ıc safety S	See sectio	n 509(a)(4	1).					
11 🔲	An organizat	ion organized and op	perated exclusively for the	he benefit	of, to perfo	rm the fui	nctions of,	or to carry	out the p	urposes c	of one c	or	
	more publicly	supported organiza	ations described in secti	on 509(a)(1) or section	n 509(a)(2	2) See se c	ction 509(a	a)(3). Chec	k the box	that		
	describes the	e type of supporti <u>ng</u>	organization and compl	et <u>e lines</u> 1	1e through	11h							
	a L Type	l b ∟	J Type II d	тур 🗀 з	e III - Func	tionally int	tegrated		d 🔲	Type III - C	Other		
е 📖	By checking	this box, I certify tha	it the organization is not	controlled	directly o	r indirectly	by one o	r more disc	qualified pe	ersons oth	ier thar	1	
	foundation m	nanagers and other t	han one or more publicly	y supporte	ed organiza	tions des	cribed in s	ection 509	(a)(1) or se	ection 509	(a)(2)		
f	If the organiz	ation received a writ	ten determination from t	the IRS tha	at it is a Ty	pe I, Type	II, or Type	e III					
	supporting o	rganization, check th	nis box										
g	Since Augus	t 17, 2006, has the c	organization accepted ar	ny gift or c	ontribution	from any	of the follo	owing pers	sons?				
	(i) A perso	n who directly or ind	rectly controls, either al	lone or tog	ether with	persons o	described	ın (ıı) and (ı	ıı) below,		Yes	No	
	the gov	erning body of the si	upported organization?							11g(i)			
	(ii) A famıly	member of a persor	n described in (i) above?	•						11g(ii)	L		
			person described in (i)							11g(iii)			
h	Provide the f	ollowing information	about the supported or	ganızatıon	(s)								
													
(i) Name	of supported	(ii) EIN	(iii) Type of organization		organization			(vi) Is organizatio	the	(vii) Am	nount of	ŧ	
orga	anızatıon		(described on lines 1-9		sted in your document?		ion in col. r support?	(i) organiza	ed in the	sup	port		
			above or IRC section					ļ					
			(see instructions))	Yes	No	Yes	No	Yes	No				
	···			 									
							İ						
					 		-		-				
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F													
Total			<u> </u>	<u> </u>	<u> </u>			L					
_HA For F	aperwork Re	auction Act Notice	, see the Instructions f	or				Schedule	e A (Form	990 or 99	10-EZ)	2010	

032021 12-21-10

Form 990 or 990-EZ.

	11. 4						
Part II	Support	Schedule for (Organizations	Described in Se	ctions 170(b)(1)(A)(iv) and 1	70(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
	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual grants ")						
2	Tax revenues levied for the organ-						
	ızatıon's benefit and either paid to						
	or expended on its behalf				1		
3	The value of services or facilities	_					
	furnished by a governmental unit to				1		
	the organization without charge						
4	Total. Add lines 1 through 3						
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)						
6	Public support. Subtract line 5 from line 4						_
Sec	ction B. Total Support						
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						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties					:	
	and income from similar sources						
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)		<u></u>				
11	Total support. Add lines 7 through 10			<u> </u>			
12	Gross receipts from related activities,	etc (see instruct	ions)			12	<u> </u>
13	First five years. If the Form 990 is for	r the organization	's first, second, th	ırd, fourth, or fıfth t	ax year as a section	on 501(c)(3)	
_	organization, check this box and stor			_ 			
	ction C. Computation of Publ					T T	
	Public support percentage for 2010 (, ,,	,	column (f))		14	%
	Public support percentage from 2009					15	%
16a	33 1/3% support test - 2010.If the o	_		·	14 is 33 1/3% or r	nore, check this bo	x and
	stop here. The organization qualifies as a publicly supported organization						
b	b 33 1/3% support test - 2009. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box						
	and stop here. The organization qual						▶∟
17a	10% -facts-and-circumstances tes						
	and if the organization meets the "fac					art IV how the organ	nization
	meets the "facts-and-circumstances"				=		▶∟」
b	10% -facts-and-circumstances tes	_				·	
	more, and if the organization meets the				•		9
	organization meets the "facts-and-cire						▶∐
18	Private foundation. If the organization	n did not check a	a box on line 13, 1	<u>6a, 16b, 17a, or 17</u>	b, check this box	and see instruction	ıs ▶
					Sch	edule A (Form 990) or 990-EZ) 2010

Schedule A (Form 990 or 990-EZ) 2010 PROGRAMMING FOUNDATION, INC.

Part III Support Schedule for Organizations Described in Section 509(a)(2)

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(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

	qualify under the tests listed be	elow, please comp	lete Part II)				<u>. </u>	
<u>Sec</u>	ction 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							
	ınclude any "unusual grants.")							
	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that	3,717,809.	5,154,081.	4,875,394.	5,732,132.	6,661,000.	26,140,41	6.
	are not an unrelated trade or bus- iness under section 513							
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf			<u>.</u>				
5	The value of services or facilities	I						
	furnished by a governmental unit to							
	the organization without charge			_				
	Total. Add lines 1 through 5	3,717,809.	5,154,081.	4,875,394.	5,732,132.	6,661,000.	26,140,41	6.
78	Amounts included on lines 1, 2, and							
	3 received from disqualified persons			· · · · · ·				<u>) .</u>
t) 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						() <u>.</u>
	Add lines 7a and 7b							<u>;</u>
	Public support (Subtract line 7c from line 6)			-				_
	ction B. Total Support						26,140,41	.0.
Cale	endar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total	
9	Amounts from line 6	3,717,809.	5,154,081.	4,875,394.	5,732,132.	6,661,000.	26,140,41	.6.
10	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	940,645.	946,759.	706,115.	865,378.		4,039,81	
t	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975							
	Add lines 10a and 10b	940,645.	946,759.	706,115.	865,378.	580,916.	4.039.81	.3.
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on							
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)							
13	Total support (Add lines 9, 10c, 11, and 12)	4,658,454.	6,100,840.	5,581,509.	6,597,510.	7,241,916.	30,180,22	<u>. 9</u>
14	First five years. If the Form 990 is for	r the organization's	s first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3) organız	ation,	
_	check this box and stop here							ᆚ
Se	ction C. Computation of Publ	ic Support Pe	rcentage					
15	Public support percentage for 2010 (line 8, column (f) di	ivided by line 13, c	olumn (f))		15	86.61	%
16	Public support percentage from 2009	Schedule A, Part	III, line 15			16	84.45	%
Se	ction D. Computation of Inve	stment Incom	e Percentage				<u>-</u>	
17	Investment income percentage for 20)10 (line 10c, colur	nn (f) divided by lir	ne 13, column (f))		17	13.39	%
18						18	15.55	%
	a 33 1/3% support tests - 2010. If the	•		on line 14, and line	e 15 is more than ?			_ ``
	more than 33 1/3%, check this box a	-					▶ □	X
ı	33 1/3% support tests - 2009. If the	organization did n	ot check a box on	line 14 or line 19a	a, and line 16 is mo	ore than 33 1/3%,	and	
	line 18 is not more than 33 1/3%, che		•	•		-	▶∟	_
20	O Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions							

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.

Inspection

Name of the organization NORTH AMERICAN CATHOLIC EDUCATIONAL Employer identification number PROGRAMMING FOUNDATION, INC. 22-3032456 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 2 Aggregate contributions to (during year) Aggregate grants from (during year) 3 Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year

b	Total acreage restricted by conservation easements	2b				
С	Number of conservation easements on a certified historic structure included in (a)	2c				
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure					
	listed in the National Register	2d				
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organ	ızatıor	during the tax			
	year ▶		_			
4	Number of states where property subject to conservation easement is located ▶					
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of					
	violations, and enforcement of the conservation easements it holds?		Yes	□ No		
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during to	he yea	ır 🕨			
7						
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(E	3)(ı)		_		
	and section 170(h)(4)(B)(ii)?		Yes			
9	In Part XIV, describe how the organization reports conservation easements in its revenue and expense states	ment, a	and balance sheet,	and		
	include, if applicable, the text of the footnote to the organization's financial statements that describes the organization.					

conservation easements Part III | Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

	· · · · ·
(ı)	Revenues included in Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide

	the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items.		
2	Revenues included in Form 990, Part VIII, line 1	Φ	

а	Revenues included in Form 990, Part VIII, line 1		\$ _	
b	Assets included in Form 990, Part X	>	\$	

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

Schedule D (Form 990) 2010

Total number of conservation easements

Schedule D (Form 990) 2010

16.

486.

630,957.

18,015

d Equipment

e Other

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))

701,681.

18,031.

· uii	A Curior Elabilities. See Form 550, Fait A, line 25.	
1.	(a) Description of liability	(b) Amount
(1)	Federal income taxes	
(2)	CLEARWIRE PAYABLE	7,170.
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)	·	
(11)		

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 FIN 48 (ASC 740)

NORTH AMERICAN CATHOLIC EDUCATIONAL

Dow VI Doggan High and Oleven in All Advises from E. 1992 to A. 111 E. 1992 to A.	
Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements	
1 Total revenue (Form 990, Part VIII, column (A), line 12)	
2 Total expenses (Form 990, Part IX, column (A), line 25)	
3 Excess or (deficit) for the year Subtract line 2 from line 1	
4 Net unrealized gains (losses) on investments	
5 Donated services and use of facilities 5	
6 Investment expenses 6	
7 Prior period adjustments 7	
8 Other (Describe in Part XIV)	
9 Total adjustments (net) Add lines 4 through 8	
10 Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9 Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return	
Add by a Cod by such Co.	
- A	
01 (0 1 1 0 1 1 0 1 1 1 1 1 1 1 1 1 1 1	
b Other (Describe in Part XIV) c Add lines 4a and 4b 4c	
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	
Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return	
1 Total expenses and losses per audited financial statements 1	
2 Amounts included on line 1 but not on Form 990, Part IX, line 25	
a Donated services and use of facilities 2a 2	
b Prior year adjustments 2b	
c Other losses 2c	
d Other (Describe in Part XIV)	
e Add lines 2a through 2d 2e	
3 Subtract line 2e from line 1	
4 Amounts included on Form 990, Part IX, line 25, but not on line 1	
a Investment expenses not included on Form 990, Part VIII, line 7b	
b Other (Describe in Part XIV)	
c Add lines 4a and 4b	
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	
Part XIV Supplemental Information	
Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part	
X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information.	ition
	

SCHEDULE F (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
2010
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Inspection

Department of the Treasury Internal Revenue Service

Name of the organization NORTH AMERICAN CATHOLIC EDUCATIONAL

Employer identification number

PROGRAMMING FOU				22-30324	56
		ctivities Out	tside the United States. Comple	ete if the organization answered	"Yes"
to Form 990, Par					
			ds to substantiate the amount of the gra		
grantees' eligibility for th	ne grants or assis	stance, and the	selection criteria used to award the grain	nts or assistance?	Yes X No
2 For grantmakers. Desc	ribe in Part V the	organization's	procedures for monitoring the use of gr	ant funds outside the United St	ates
3 Activities per Region (TI	he following Part	I, line 3 table ca	an be duplicated if additional space is n	eeded)	
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
SOUTH AMERICA			GRANTS		33,988.
					33,330.
CENTRAL AMERICA			GRANTS		107,500.
···					
	-				
3 a Sub-total	0	0			141,488.
b Total from continuation					
sheets to Part I	0	0		<u> </u>	0.
c Totals (add lines 3a					144 466
and 3b)	0	00_	<u> </u>		141 488.

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

Schedule F (Form 990) 2010

NORTH AMERICAN CATHOLIC EDUCATIONAL PROGRAMMING FOUNDATION, INC.

22-3032456

Page 2

22-3032456	r Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any	ore than \$5,000
INC.	United State	nt received m
FOUNDATION, INC.	Entities Outside the	nis box if no one recipient received more than \$5,000
PROGRAMMING	art II Grants and Other Assistance to Organizations or	recipient who received more than \$5,000. Check thi
Schedule F (Form 990) 2010	Grants and Other Ass	recipient who received
Schedule	Part II	

Part II can be du	Part II can be duplicated if additional space is needed.	space is needed.				-		
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)
		CENTRAL AMERICA	CONSTRUCTION OF COMMUNITY RESEARCH & DEVELOPMENT CENTER	107500.	107500, WIRE TRANSFER	0		
2 Enter total number of the IRS, or for which t	recipient organization	ns listed above that are	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	empt by		
3 Enter total number of other organizations or entities	other organizations o	r entities						

Schedule F (Form 990) 2010

21

NORTH AMERICAN CATHOLIC EDUCATIONAL PROGRAMMING FOUNDATION, INC.

Page 3

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 22-3032456 Schedule F (Form 990) 2010

	of . ', ier)	.					2010
	(h) Method of valuation (book, FMV, appraisal, other)						Schedule F (Form 990) 2010
	(g) Description of non-cash assistance						Schedul
	(f) Amount of non-cash assistance		0				
	(e) Manner of cash disbursement		33,988, WIRE TRANSFER				
	(d) Amount of cash grant		33,988				
g	(c) Number of recipients		П				
dditional space is neede	(b) Region		SOUTH AMERICA				
Part III can be duplicated if additional space is needed	(a) Type of grant or assistance						

NORTH AMERICAN CATHOLIC EDUCATIONAL

Schedule F (Form 990) 2010 PROGRAMMING FOUNDATION, INC. 22-3032456 Page 4 **Foreign Forms** Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the 1 organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Yes X No Corporation (see Instructions for Form 926) 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 Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With Yes X No a U.S Owner (see Instructions for Forms 3520 and 3520-A) Did 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 Yes X No Certain Foreign Corporations (see Instructions for Form 5471) Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Yes X No Instructions for Form 8621) Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," 5 the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Yes X No Foreign Partnerships. (see Instructions for Form 8865) Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions Yes X No for Form 5713)

Schedule F (Form 990) 2010

SCHEDULE I (Form 990) Department of the Treasury Internal Revenue Service

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

2010 2010 Open to Public

Inspection

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

ž Schedule I (Form 990) (2010) **Employer identification number** 22-3032456 DONATIONS TO RELIGIOUS DONATIONS TO RELIGIOUS DONATIONS TO RELIGIOUS ဥ DONATIONS TO RELIGIOUS (h) Purpose of grant TO PROVIDE RELIGIOUS PROVIDE RELIGIOUS TO PROVIDE RELIGIOUS TO PROVIDE RELIGIOUS TO PROVIDE PROGRAMS INJUSTICE & POVERTY or assistance IN SUPPORT OF PBS DIMINISH ECONOMIC X Yes ORGANIZATIONS, Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any DRGANIZATIONS DRGANIZATIONS RGANIZATIONS **DOCUMENTARY** recipient that received more than \$5,000 Check this box if no one recipient received more than \$5,000 Part II can be duplicated if additional space is needed in a sesistance of organization (a) EIN (b) EIN (c) IRC section in a sesistance or government assistance or government assistance or government of the control of t 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection o. 0 ં ં Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States 000 56,500 100,000 12,000 10,000 22,000 EDUCATIONAL 68 INC. LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 NORTH AMERICAN CATHOLIC Enter total number of section 501(c)(3) and government organizations PROGRAMMING FOUNDATION APPLIED FOR General Information on Grants and Assistance 23-2671613 04-2295929 84-6048381 11-2424823 criteria used to award the grants or assistance? Enter total number of other organizations BROTHERS - 3806 12TH AVENUE - LONG FATHERS - 48/49 37TH STREET - LONG 1 (a) Name and address of organization RIVER-OUR LADY OF THE CAPE - 468 CHRISTIAN BROTHERS DE LASALLE ROMAN CATHOLIC BISHOP OF FALL STONY BROOK RD - BREWSTER, MA MALAWI BENEFACTION-HOLY GHOST CAMEROON DEV FUND OF COLORADO STE 401 2101 LARIMER STREET, Name of the organization HOLY UNION SISTERS DENVER FOUNDATION 55 MADISON STREET MILTON, MA 02186 DENVER, CO 80206 ISLAND, NY 20017 ISLAND, NY 11101 DENVER, CO 80205 PO BOX 410 Part I Part II 02631

Schedule I (Form 990) PROGRAMMING FOUNDATION, INC. Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II)	NG FOUNDATION Assistance to Governmen	PROGRAMMING FOUNDATION, INC.	nizations in the Ur	nited States (Sch	edule I (Form 990), Pa		22-3032456 Page 1
	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ST PATRICK ACADEMY 244 SMITH STREET PROVIDENCE, RI 02908	05-0259044		100,000.	•0			FUNDING FOR TUITION GRANTS,
IP IVENT	59-3623000		0.	12,275.	COST	LAPTOPS	TO PROVIDE LAPTOP COMPUTERS AS A LEARNING TOOL FOR EDUCATIONAL INSTITUTIONS,
ALLIANCE HIGH SCHOOL 400 CLAMORGAN AVENUE ALLIANCE OH 44601	34-6000040		0	13,327.	LSOOZ	LAPTOPS	TO PROVIDE LAPTOP COMPUTERS AS LEARNING TOOLS TO EDUCATIONAL ORGANIZATIONS,
ANCHORAGE PUBLIC SCHOOL 5530 E NORTHERN LIGHTS BLVD ANCHORAGE AK 99504	92-500078		o	1 .	LSOO	LAPTOPS	TO PROVIDE LAPTOP COMPUTERS AS LEARNING TOOLS TO EDUCATIONAL ORGANIZATIONS.
CETTE	84-0522064		C	12 275	ESCO.	LAPTOPS	TO PROVIDE LAPTOP COMPUTERS AS LEARNING FOOLS TO EDUCATIONAL ORGANIZATIONS.
PEAC	74-2858317		C	196	TS CO	SHOLLAND	TO PROVIDE LAPTOP COMPUTERS AS LEARNING TOOLS TO EDUCATIONAL ORGANIZATIONS.
BETHANY CHRISTIAN SCHOOL 1200 PARK TERRACE AVENUE LAKE HAVASU, AZ 86404	86-0389381		0	ol ol	TSOS	LAPTOPS	TO PROVIDE LAPTOP COMPUTERS AS LEARNING TOOLS TO EDUCATIONAL ORGANIZATIONS,
CAPITAL CITY BAPTIST SCHOOL 5100 WILLOUGHBY ROAD HOLT, MI 48842	38-2024477		0	12,275.	COST	LAPTOPS	TO PROVIDE LAPTOP COMPUTERS AS LEARNING TOOLS TO EDUCATIONAL ORGANIZATIONS.
CEDARS INTERNATIONAL ACADEMY 8416 N IH 35 AUSTIN, TX 78753	74-2960628		00	12,275,COST	COST	LAPTOPS	TO PROVIDE LAPTOP COMPUTERS AS LEARNING TOOLS TO EDUCATIONAL ORGANIZATIONS.
LHA							Schedule I (Form 990)

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RAMMING FOUNDATION, INC.	ner Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)	
OGRAMMING FOUNDA	nts and Other Assistance to Go	
Schedule I (Form 990) PR	Part II Continuation of Gran	

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 99U), Part II.)	Assistance to Gov	rernments and Organ	izations in the Un	inted States (Sche	dule I (Form 990), Par	(" L	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance .
CHICOT PRIMARY SCHOOL							TO PROVIDE LAPTOP COMPUTERS AS LEARNING
11100 CHICOT ROAD MARRIVALE AZ 72103	71-6014717		0	13,524,0	COST	LAPTOPS	TOOLS TO EDUCATIONAL DRGANIZATIONS.
							TO PROVIDE LAPTOP
COLUMBIA BASIN COLLEGE							COMPUTERS AS LEARNING
2600 NTH 20TH AVENUE							TOOLS TO EDUCATIONAL
PASCO, WA 99301	91-0824589		0	5,166.	COST	LAPTOPS	ORGANIZATIONS.
							TO PROVIDE LAPTOP
COLUMBUS ALTERNATIVE HIGH SCHOOL							COMPUTERS AS LEARNING
2632 MCGUFFY ROAD	31-6400416		C	12 275		T,APTOPS	TOOLS TO EDUCATIONAL ORGANIZATIONS.
COLUMN TO THE							TO PROVIDE LAPTOP
CORNERSTONE CHRISTIAN ACADEMY				_			COMPUTERS AS LEARNING
12000 ZUNI STREET							TOOLS TO EDUCATIONAL
WESTMINSTER CO 80234	84-1463519		0	14,176,0	COST	LAPTOPS	ORGANIZATIONS.
			-				TO PROVIDE LAPTOP
ELLISTON BAPTIST ACADEMY							COMPUTERS AS LEARNING
4179 ELLISTON ROAD							TOOLS TO EDUCATIONAL
MEMPHIS, TN 38111	82-0551127		0	12,858.0	COST	LAPTOPS	ORGANIZATIONS.
							TO PROVIDE LAPTOP
EMPIRE ELEMENTARY SCHOOL				·			COMPUTERS AS LEARNING
9450 WEST CHEROKEE ROAD							TOOLS TO EDUCATIONAL
DUNCAN , OK 73833	73-0977910		0	7,952.	COST	LAPTOPS	ORGANIZATIONS.
			_				TO PROVIDE LAPTOP
FORT MYERS CHRISTIAN SCHOOL							COMPUTERS AS LEARNING
1550 COLONIAL BLVD							TOOLS TO EDUCATIONAL
FORT MYERS, FL 33901	59-1932630		0	14,557.	COST	LAPTOPS	ORGANIZATIONS,
							TO PROVIDE LAPTOP
GRACE LUTHERAN SCHOOL			_	-			COMPUTERS AS LEARNING
1207 S. 7TH AVENUE							TOOLS TO EDUCATIONAL
YAKIMA, WA 98902	91-6031826		0.	12,275.	COST	LAPTOPS	ORGANIZATIONS.
							TO PROVIDE LAPTOP
GUIDING LIGHT CHRISTIAN SCHOOL							COMPUTERS AS LEARNING
220 MESCAL LANE							TOOLS TO EDUCATIONAL
LAKE HAVASU CITY, AZ 86403	86-0683168		0	13,776,COST	COST	LAPTOPS	ORGANIZATIONS.
LHA							Schedule I (Form 990)

EDUCATIONAL	INC.
N CATHOLIC	FOUNDATION,
NORTH AMERICAN	PROGRAMMING

Coloration Col	Schedule I (Form 990) PROGRAMMING FOUNDATION, INC. Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part III)	.NG FOUNDATION Assistance to Governmen	VETION, INC.	nizations in the Ur	nited States (Sche	edule I (Form 990), P		22-3032456 Page 1
Trocas Catholic School Trocas Catholic School Trocas Catholic School Trocas Catholic School Trocas Catholic School Trocas Catholic School Trocas Catholic School Trocas Catholic School Trocas Catholic Catholic Trocas Catholic	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	
Figure 1 1562 1 1 1562 1	HOLY CROSS CATHOLIC SCHOOL							
NAMES NAME	WILBER	35-0992113		0	365.	COST	LAPTOPS	TOOLS TO EDUCATIONAL ORGANIZATIONS.
DOLESTORE NOTE	E ,	62-0845508		0	12,275,	TSOC	LAPTOPS	TO PROVIDE LAPTOP COMPUTERS AS LEARNING TOOLS TO EDUCATIONAL ORGANIZATIONS,
PROSENTY SCHOOL PROSENTY SCHOOL								TO PROVIDE LAPTOP
SOUTH 30TH STREET 10.601704 10.802 GOST LAPTOPS TOORIS TO PROVIDE T	HOLY ROSARY SCHOOL	-		•				COMPUTERS AS LEARNING
December 2017 10 PRONITY DECEMBER 10 10 PRONITY DECEMBER 10	504 SOUTH 30TH STREET			•		!	1	TOOLS TO EDUCATIONAL
DATE NOT SCIENCE ACADEMY DATE NOT SCIENCE ACADEMY DATE NOT SCIENCE ACADEMY DATE NOT SCIENCE ROAD DATE NOT SCIENCE RO	TACOMA, WA 98402	91-0607704		0		COST	LAPTOPS	ORGANIZATIONS.
DATE DATE	HORIZON SCIENCE ACADEMY							TO PROVIDE LAPTOP
12,275,COST LAPTOPE DROANIZA	1070 MORSE ROAD			-				TOOLS TO EDUCATIONAL
12.917, COST 12.9	COLUMBUS, OH 43229	31-1657839		0		COST	LAPTOPS	ORGANIZATIONS.
S								TO PROVIDE LAPTOP
5 C. EAGLE ROAD 0. 12,917, COST LAPTOPS DROANIZA 10 0.015 TO 11,090, COST LAPTOPS DROANIZA 10 0.015 TO 12,166, COST LAPTOPS 10 0.015 TO 12,166, COST LAPTOPS DROANIZA 10 0.015 TO 12,1	IDAHO VIRTUAL ACADEMY							COMPUTERS AS LEARNING
DIAN, ID 83642 01-0720150 0. 12,917, COST LAPTOPS DRGANIZA DRGA	1965 S. EAGLE ROAD							TOOLS TO EDUCATIONAL
SON & WALES UNIVERSITY DOLS TO	MERIDIAN, ID 83642	01-0720150		0	917.	COST	LAPTOPS	ORGANIZATIONS,
SON & WALES UNIVERSITY SOUR WALES UNIVERSITY SOUR WALES UNIVERSITY SOUR WALES UNIVERSITY SOUR WALES UNIVERSITY SOUR WALES UNIVERSITY SOUR WALES UNIVERSITY SOUR WALES UNIVERSITY SOUR WALES WALES LES SOUR WALES WALES WALES SOUR WALES WALES WALES SOUR WALES WAL								TO PROVIDE LAPTOP
DEBNOTT PARK PLACE	JOHNSON & WALES UNIVERSITY							COMPUTERS AS LEARNING
NEGNICE, RI 02903 05-0306206 0	8 ABBOTT PARK PLACE							TOOLS TO EDUCATIONAL
TO PROVI 1513 FAIRVIEW, SUITE 26-3814847 0, 11,090,COST LAPTOPS TOOLS TO COMPUTER TOOLS TOOLS TO COMPUTER TOOLS TO COMPUTER TOOLS TOOLS TO COMPUTER TOOLS TOOLS TO COMPUTE TOOLS TO COMPUTER TOOLS TOOLS TO COMPUTER TOOLS TOOLS TO COMPUTER TOOLS TOOLS TO COMPUTER TOOLS TOOLS TO COMPUTER TOOLS TO COMPUTER TOOLS TOOLS TO COMPUTER TOOLS TOOLS TO COMPUTER TOOLS TOOLS TO COMPUTER TOOLS TOOLS TO COMPUTER TOOLS	- 1	05-0306206		0	508	COST	LAPTOPS	ORGANIZATIONS,
- BOISE , ID 83704 - BOISE , ID 8407 - BOISE , ID 840								TO PROVIDE LAPTOP
CAMION - 11513 FAIRVIEW, SUITE 26-3814847 0. 11,090,COST LAPTOPS TOOLS TO ORGANIZA ORGANIZA ORGANIZA CAMUNITY SCHOOLS FOR ADULTS TO PROVI A COMMUNITY SCHOOLS FOR ADULTS 99-0266482 0. 13,586,COST LAPTOPS ORGANIZA ORGA	KAPLAN ACADEMY IDAHO VIRTUAL							COMPUTERS AS LEARNING
- BOISE, ID 83704 26-3814847 0, 11,090, COST LAPTOPS ORGANIZA - COMMUNITY SCHOOLS FOR ADULTS ONO PUOHULIHULI STREET COMPUTER COMPUTER COMPUTER THOUSE CHRISTIAN ACADEMY NW 21ST STREET NW 21ST STREET NW 21ST STREET NW 21ST STREET NM	- 11513 FAIRVIEW,							TOOLS TO EDUCATIONAL
A COMMUNITY SCHOOLS FOR ADULTS 000 PUOHULIHULI STREET 5000 PUOHULIHULI STREET 700LS TO 700 PUOHULIHULI STREET 700LS TO 700 PUOHULIHULI STREET	- BOISE	26-3814847		•	.090	COST	LAPTOPS	ORGANIZATIONS,
A COMMUNITY SCHOOLS FOR ADULTS 5000 PUCHULIHULI STREET								TO PROVIDE LAPTOP
5000 PUOHULIHULI STREET 99-0266482 0 13,586,COST LAPTOPS DRGANIZA UNA-KONA, HI 96740 99-0266482 0 13,586,COST LAPTOPS FOGUS TO THOUSE CHRISTIAN ACADEMY NW 21ST STREET TOOLS TO TOOLS TO NW 21ST STREET 93-0794669 0. 5,166,COST LAPTOPS DRGANIZA	KONA COMMUNITY SCHOOLS FOR ADULTS							COMPUTERS AS LEARNING
UNA-KONA, HI 96740 99-0266482 0 13,586, COST LAPTOPS DRGANIZA ITHOUSE CHRISTIAN ACADEMY TO PROVI COMPUTER TOOLS TO NW 21ST STREET 93-0794669 0. 5,166, COST LAPTOPS DRGANIZA	74-5000 PUOHULIHULI STREET							TOOLS TO EDUCATIONAL
TO PROVI NW 21ST STREET OLISTON, OR 97801 TO PROVI COMPUTER TOOLS TO TOOLS TO TOOLS TO DISTON, OR 97801 TO PROVI COMPUTER TOOLS TO DISTON, OR 97801 DISTONDER TO PROVI TO P		99-0266482		0	586.	COST	LAPTOPS	ORGANIZATIONS.
THOUSE CHRISTIAN ACADEMY INW 21ST STREET COMPUTER								TO PROVIDE LAPTOP
NW 21ST STREET TOOLS TO LETON, OR 97801 LAPTOPS DRGANIZA	LIGHTHOUSE CHRISTIAN ACADEMY	-						COMPUTERS AS LEARNING
DLETON, OR 97801 93-0794669 DRGANIZA	417 NW 21ST STREET							TOOLS TO EDUCATIONAL
	PENDLETON, OR 97801	93-0794669		0.	5,166,	TOST	LAPTOPS	ORGANIZATIONS.

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NORTH AMERICAN CATHOLIC EDUCATIONAL PROGRAMMING FOUNDATION, INC.

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II)	Assistance to Gov	ernments and Orgar	izations in the U	nited States (Sche	dule I (Form 990), Pa	ıt)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MELBOURNE CENTRAL CATHOLIC HIGH							TO PROVIDE LAPTOP COMPUTERS AS LEARNING
							TOOLS TO EDUCATIONAL
MELBOURNE , FL 32901	59-6080774		0	12,371,	COST	LAPTOPS	ORGANIZATIONS,
							TO PROVIDE LAPTOP
NORTHERN OKLAHOMA COLLEGE							COMPUTERS AS LEARNING
INU SOUTH UNIVERSITY AVENUE	73-6017987		0	5 696	COST	LAPTOPS	TOOLS TO EDUCATIONAL DRGANIZATIONS.
1							TO PROVIDE LAPTOP
NORTHESTERN OKLAHOMA STATE						•	COMPUTERS AS LEARNING
UNIVERSITY - 2929 EAST RANDOLPH -							TOOLS TO EDUCATIONAL
ENID, OK 73701	73-6017987		0	5,495.	COST	LAPTOPS	ORGANIZATIONS.
							TO PROVIDE LAPTOP
PARKVIEW CHRISTIAN ACADEMY							COMPUTERS AS LEARNING
1100 EAST LAKE SHORE DRIVE							TOOLS TO EDUCATIONAL
WACO, TX 76708	74-1941444		0	8,525,	COST	LAPTOPS	ORGANIZATIONS.
							TO PROVIDE LAPTOP
QUEEN OF ANGELS SCHOOL							COMPUTERS AS LEARNING
1500 W. STATE BLVD							TOOLS TO EDUCATIONAL
FORT WAYNE, IN 46808	35-0996118		0	10,307.	COST	LAPTOPS	ORGANIZATIONS.
							TO PROVIDE LAPTOP
QUEEN OF APOSTLES							COMPUTERS AS LEARNING
235 COURTLAND AVENUE							TOOLS TO EDUCATIONAL
TOLEDO, OH 43609	34-4428233		0	12,275.	COST	LAPTOPS	ORGANIZATIONS.
							TO PROVIDE LAPTOP
ROSARY CATHEDRAL SCHOOL	-		_				COMPUTERS AS LEARNING
2535 COLLINGWOOD BLVD							TOOLS TO EDUCATIONAL
TOLEDO, OH 43610	34-4428233		0.	12,860.	COST	LAPTOPS	ORGANIZATIONS.
							TO PROVIDE LAPTOP
SALT LAKE CITY SCHOOL DISTRICT							COMPUTERS AS LEARNING
440 EAST 100 SOUTH							TOOLS TO EDUCATIONAL
SALT LAKE CITY , UT 84111	74-2563849		0.	24,550,	COST	LAPTOPS	ORGANIZATIONS,
							TO PROVIDE LAPTOP
SAN JOAQUIN MEMORIAL HIGH SCHOOL							COMPUTERS AS LEARNING
1406 N FRESNO STREET							TOOLS TO EDUCATIONAL
FRESNO, CA 93703	94-1347028		0	13,254,COST	OST	LAPTOPS	ORGANIZATIONS,
ГНА							Schedule I (Form 990)

EDUCATIONAL	INC.
NORTH AMERICAN CATHOLIC	PROGRAMMING FOUNDATION,

Schedule I (Form 990) PROGRAMMI	PROGRAMMING FOUNDATION,	TION, INC.	TENOTIES.				22-3032456 Page 1
Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II)	Assistance to Go	vernments and Organ	nizations in the Un	ited States (Sch	edule I (Form 990), Pa	(1	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance or assistance
							TO PROVIDE LAPTOP
SCHAEFER ELEMENTARY SCHOOL							COMPUTERS AS LEARNING
1370 SAN MIQUEL AVENUE							TOOLS TO EDUCATIONAL
SANTA ROSA, CA 95403	94-3322476		0	12,275.	COST	LAPTOPS	ORGANIZATIONS.
	_						TO PROVIDE LAPTOP
SELAH ACADEMY							COMPUTERS AS LEARNING
801 NORTH 1ST STREET							TOOLS TO EDUCATIONAL
SELAH WA 98942	91-6001603		0	14,215.	COST	LAPTOPS	ORGANIZATIONS.
							TO PROVIDE LAPTOP
SIMON INTERMEDIATE SCHOOL							COMPUTERS AS LEARNING
1601 EAST SIEBENMORGAN ROAD							TOOLS TO EDUCATIONAL
CONWAY AR 72032	71-6021200		0.	14,223.	COST	LAPTOPS	ORGANIZATIONS.
							TO PROVIDE LAPTOP
SPENCER ELEMENTARY SCHOOL							COMPUTERS AS LEARNING
3160 HEATHER STREET							TOOLS TO EDUCATIONAL
MOBILE, AL 36607	69-0640434		0	14,500.	COST	LAPTOPS	ORGANIZATIONS.
						_	TO PROVIDE LAPTOP
ST. ADALBERT SCHOOL							COMPUTERS AS LEARNING
519 SOUTH OLIVE STREET							TOOLS TO EDUCATIONAL
SOUTH BEND IN 46619	35-1095958		0	7,365.	COST	LAPTOPS	ORGANIZATIONS,
							TO PROVIDE LAPTOP
ST. ANNE SCHOOL							COMPUTERS AS LEARNING
108 E. LIBERTY STREET							TOOLS TO EDUCATIONAL
LANCASTER PA 17602	23-1352653		0.	12,862.	COST	LAPTOPS	ORGANIZATIONS.
							TO PROVIDE LAPTOP
ST. ANTHONY SCHOOL							COMPUTERS AS LEARNING
336 SHATTUCK AVENUE S							TOOLS TO EDUCATIONAL
RENTON, WA 98057	91-0680085		0.	5,567.	COST	LAPTOPS	ORGANIZATIONS.
							TO PROVIDE LAPTOP
ST. CASMIR-IMMACULATE HEART OF							COMPUTERS AS LEARNING
MARY - 3830 ROSEMONT - LANSING ,							TOOLS TO EDUCATIONAL
MI 48910	38-1581301		0.	12,866.	COST	LAPTOPS	ORGANIZATIONS.
							TO PROVIDE LAPTOP
ST. JOHN'S CATHOLIC SCHOOL				٠			COMPUTERS AS LEARNING
583 WEST GRAND AVENUE							TOOLS TO EDUCATIONAL
HOT SPRINGS , AR	71-0539026		0.	13,681.	COST	LAPTOPS	ORGANIZATIONS.
ГНА							Schedule I (Form 990)

EDUCATIONAL	INC.	s and Organizations in the United State
NORTH AMERICAN CATHOLIC EDUCATIONAL	PROGRAMMING FOUNDATION, INC.	of Grants and Other Assistance to Governments and Organizations in the United State

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	NG FOUNDATION	TION, INC.		•			22-3032456 Page 1
Part II Continuation of Grants and Other Assistance to Governments	Assistance to Go	vernments and Orgar	nizations in the Ur	nited States (Sch	and Organizations in the United States (Schedule I (Form 990), Part II		
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
000000000000000000000000000000000000000							TO PROVIDE LAPTOP
ST. JOSEPHS HIGH SCHOOL							COMPUTERS AS LEARNING
1441 NORTH MICHIGAN STREET							TOOLS TO EDUCATIONAL
SOUTH BEND, IN 46617	35-0924794		0	12,275.	COST	LAPTOPS	ORGANIZATIONS.
							TO PROVIDE LAPTOP
ST. MARY'S GRADE SCHOOL							COMPUTERS AS LEARNING
304 E. CLOUD							TOOLS TO EDUCATIONAL
SALINA, KS 67401	26-0838612		0	15,040,	COST	LAPTOPS	ORGANIZATIONS.
							TO PROVIDE LAPTOP
ST. NICHOLAS CATHOLIC SCHOOL							COMPUTERS AS LEARNING
3555 EDWARDS DRIVE							TOOLS TO EDUCATIONAL
GIG HARBOR, WA 98335	91-0566267		0.	14,247.	COST	LAPTOPS	ORGANIZATIONS,
							TO PROVIDE LAPTOP
ST. PATRICK ACADEMY							COMPUTERS AS LEARNING
244 SMITH STREET							TOOLS TO EDUCATIONAL
PROVIDENCE, RI 02908	05-0259044		0	7,705.	COST	LAPTOPS	ORGANIZATIONS,
							TO PROVIDE LAPTOP
ST. PATRICK SCHOOL							COMPUTERS AS LEARNING
287 SOUTH FOURTH STREET							TOOLS TO EDUCATIONAL
MEMPHIS, TN 38126	62-0845508		0	12,275,	COST	LAPTOPS	ORGANIZATIONS.
							TO PROVIDE LAPTOP
ST. THERESA CATHOLIC SCHOOL							COMPUTERS AS LEARNING
311 SHROPSHIRE PL NW							TOOLS TO EDUCATIONAL
ALBUQUERQUE, NM 87107	85-0234098		0.	5,143,	COST	LAPTOPS	ORGANIZATIONS,
				•			TO PROVIDE LAPTOP
TEMPLE COLLEGE							COMPUTERS AS LEARNING
2600 SOUTH FIRST STREET						-	TOOLS TO EDUCATIONAL
TEMPLE, TX 76504	74-6020689		0.	14,196.	COST	LAPTOPS	ORGANIZATIONS.
							TO PROVIDE LAPTOP
VALLEY ARTS & SCIENCE ACADEMY							COMPUTERS AS LEARNING
735 NORTH GLENN	-						TOOLS TO EDUCATIONAL
FRESNO, CA 93710	05-0624718		0.	13,324.	COST	LAPTOPS	ORGANIZATIONS.
							TO PROVIDE LAPTOP
WILLIAM G. BENNETT ELEMENTARY		-					COMPUTERS AS LEARNING
1				_			TOOLS TO EDUCATIONAL
HIGHWAY - LAUGHLIN, NV 89029	88-6000030		0.	11,784.	COST	LAPTOPS	ORGANIZATIONS.
ГНА							Schedule I (Form 990)

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PROGRAMMING FOUNDATION, INC.

Schedule I (Form 990)

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Schedule I (Form 990) SECURITY SYSTEMS NETWORKS FOR EDUCATIONAL SECURITY SYSTEMS NETWORKS FOR EDUCATIONAL SECURITY SYSTEMS NETWORKS FOR EDUCATIONAL SECURITY SYSTEMS NETWORKS FOR EDUCATIONAL SECURITY SYSTEMS NETWORKS FOR EDUCATIONAL SECURITY SYSTEMS NETWORKS FOR EDUCATIONAL SECURITY SYSTEMS NETWORKS FOR EDUCATIONAL SECURITY SYSTEMS NETWORKS FOR EDUCATIONAL COMPUTERS AS LEARNING SECURITY & MONITORING (h) Purpose of grant or assistance SECURITY & MONITORING FOOLS TO EDUCATIONAL TO PROVIDE ENHANCED TO PROVIDE ENHANCED TO PROVIDE ENHANCED TO PROVIDE ENHANCED TO PROVIDE ENHANCED TO PROVIDE ENHANCED TO PROVIDE ENHANCED TO PROVIDE ENHANCED OVER EBS BROADBAND VER EBS BROADBAND VER EBS BROADBAND VER EBS BROADBAND OVER EBS BROADBAND OVER EBS BROADBAND OVER EBS BROADBAND VER EBS BROADBAND TO PROVIDE LAPTOP RGANIZATIONS, (g) Description of non-cash assistance APTOPS Part II | Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II) appraisal, other) (f) Method of valuation (book, FMV, COST COST COST COST COST 5,601,COST COST COST 601. (e) Amount of non-cash assistance 5,601, 12,275, 5,601, 5,601, 5,601. 5,601. 'n o (d) Amount of cash grant o. o o. ö o ö 0 (c) IRC section if applicable 94-6002375 59-3623000 74-2858317 48-1069538 31-6400416 86-0389381 38-2024477 (b) EIN COLUMBUS ALTERNATIVE HIGH SCHOOL PETERSBURG - 2301 22ND AVENUE S YUBA CAREER PREP CHARTER SCHOOL CORNERSTONE CHRISTIAN ACADEMY ACADEMY PREP CENTER OF SAINT CEDARS INTERNATIONAL ACADEMY (a) Name and address of organization or government CAPITAL CITY BAPTIST SCHOOL 1200 PARK TERRACE AVENUE BETHANY CHRISTIAN SCHOOL ST PETERSBURG, FL 33712 LAKE HAVASU, AZ 86404 BARTON COUNTY ACADEMY WESTMINSTER, CO 80234 CA 95901 GREAT BEND, KS 67530 5100 WILLOUGHBY ROAD AUSTIN PEACE ACADEMY 5520 W. 10TH STREET COLUMBUS, OH 43211 2632 MCGUFFY ROAD 12000 ZUNI STREET 1104 EAST STREET AUSTIN, TX 78723 AUSTIN, TX 78753 5110 MANOR ROAD HOLT, MI 48842 8416 N IH 35 MARYSVILLE ΕĦ

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Schedule I (Form 990) PROGRAMMI	PROGRAMMING FOUNDATION	, INC.				2	22-3032456 Page 1
Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II)	Assistance to Gov	vernments and Orga	nizations in the U	nited States (Sch	edule I (Form 990), Pa	art)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
							TO PROVIDE ENHANCED
DIGITAL ARTS & TECHNOLOGY ACADEMY							SECURITY & MONITORING
1011 LAMBERTON PLACE							OVER EBS BROADBAND
ALBUQUERQUE, NM 87107	47-0852226		0	5,601,	COST	SECURITY SYSTEMS	SECURITY SYSTEMS NETWORKS FOR EDUCATIONAL
חיום שיום וייים המסחר שיאם							TO PROVIDE ENHANCED
1802 COLORADO AVE, STE 200							OVER EBS BROADBAND
	84-6014414		0	5,601.	COST	SECURITY SYSTEMS NETWORKS	NETWORKS FOR EDUCATIONAL
							TO PROVIDE ENHANCED
EMPORIA CHRISTIAN SCHOOL							SECURITY & MONITORING
1325 C OF E DRIVE							OVER EBS BROADBAND
EMPORIA, KS 66801	48-1118690		0.	5,601.	COST	SECURITY SYSTEMS	NETWORKS FOR EDUCATIONAL
	-						TO PROVIDE ENHANCED
GRACE LUTHERAN SCHOOL							SECURITY & MONITORING
1207 S 7TH AVENUE							OVER EBS BROADBAND
YAKIMA , WA 98902	91-6031826		0.	5,601,	COST	SECURITY SYSTEMS	NETWORKS FOR EDUCATIONAL
							TO PROVIDE ENHANCED
HOLY ANGELS SCHOOL							SECURITY & MONITORING
82 POSSUM PARK ROAD							OVER EBS BROADBAND
NEWARK, DE 19711	51-0078733		0	5,601.	COST	SECURITY SYSTEMS	SECURITY SYSTEMS NETWORKS FOR EDUCATIONAL
							TO PROVIDE ENHANCED
HOLY GUARDIAN ANGELS REGIONAL							SECURITY & MONITORING
SCHOOL - 3125 KUTZTOWN ROAD -							OVER EBS BROADBAND
READING PA 19605	26-0042185		0	5,601.	COST	SECURITY SYSTEMS	NETWORKS FOR EDUCATIONAL
							TO PROVIDE ENHANCED
HORIZON SCIENCE ACADEMY							SECURITY & MONITORING
1070 MORSE ROAD							OVER EBS BROADBAND
COLUMBUS OH 43229	31-1657839		0.	5,601.	COST	SECURITY SYSTEMS	NETWORKS FOR EDUCATIONAL
							TO PROVIDE ENHANCED
IMMACULATE HEART OF MARY SCHOOL							SECURITY & MONITORING
101 EAST FLORIDA AVENUE							OVER EBS BROADBAND
MELBOURNE, FL 32902	59-6080775		0	5,601.	COST	SECURITY SYSTEMS	NETWORKS FOR EDUCATIONAL
	•						TO PROVIDE ENHANCED
MANZANITA ELEMENTARY SCHOOL							SECURITY & MONITORING
2601 DETROIT AVENUE							OVER EBS BROADBAND
KINGMAN, AZ 86401	86-0815844		0.	5,601.	COST	SECURITY SYSTEMS NETWORKS	NETWORKS FOR EDUCATIONAL
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Schedule I (Form 990) PROGRAMMING FOUNDATION,	MMING FOUNDA	.	INC.			2	22-3032456 Page 1
Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)	Assistance to Go	vernments and Organ	nizations in the Ur	nited States (Sch	edule I (Form 990), Pa	irt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance or assistance
MELBOURNE CENTRAL CATHOLIC HIGH SCHOOL - 100 EAST FLORIDA AVENUE -							TO PROVIDE ENHANCED . SECURITY & MONITORING OVER EBS BROADBAND
E, FL 32901	59-6080774		0.	5,601.	COST	SECURITY SYSTEMS	SECURITY SYSTEMS NETWORKS FOR EDUCATIONAL
NORTH ELEMENTARY SCHOOL							TO PROVIDE ENHANCED SECURITY & MONITORING
209 LETA DRIVE COLORADO, CO 80911	84-6001176		0.	5,601.	COST	SECURITY SYSTEMS	OVER EBS BROADBAND SECURITY SYSTEMS NETWORKS FOR EDUCATIONAL
PARKVIEW CHRISTIAN ACADEMY							TO PROVIDE ENHANCED SECURTY & MONITORING
1100 EAST LAKE SHORE DRIVE							
WACO, TX 76708	74-1941444		0	5,601.	COST	SECURITY SYSTEMS	
QUEEN OF APOSTLES							TO PROVIDE ENHANCED SECURITY & MONITORING
235 COURTLAND AVENUE							OVER EBS BROADBAND
TELEDO, OH 43609	34-4428233		0.	5,601.	COST	SECURITY SYSTEMS	NETWORKS FOR EDUCATIONAL
RIISSELI. HIGH SCHOOL	7						TO PROVIDE ENHANCED
565 STATE STREET							OVER EBS BROADBAND
RUSSELL, KS 67665	48-0724591		0	5,601.	COST	SECURITY SYSTEMS	SECURITY SYSTEMS NETWORKS FOR EDUCATIONAL
יסטיים המשפיראית האורגם							E '
SAINT ADALBERT SCHOOL 519 SOUTH OLIVE STREET							SECURITY & MONITURING OVER EBS BROADBAND
SOUTH BEND, IN 46619	35-1095958		0	5,601,COST	COST	SECURITY SYSTEMS	SECURITY SYSTEMS NETWORKS FOR EDUCATIONAL
							TO PROVIDE ENHANCED
SAINT ANTHONY 16 COLUMBIIS AVENITE							SECURITY & MONITORING
DES MOINES IA 50315	42-0808937		0	5,601,	COST	SECURITY SYSTEMS	SECURITY SYSTEMS NETWORKS FOR EDUCATIONAL
							TO PROVIDE ENHANCED
SAINT JOHN'S CATHOLIC SCHOOL 583 WEST GRAND AVENUE							SECURITY & MONITORING OVER FES BROADBAND
HOT SPRINGS, AR 100147	71-0539026		0	5,601.	COST	SECURITY SYSTEMS	
			-				TO PROVIDE ENHANCED
MA							SECURITY & MONITORING
304 E. CLOUD	00000000		c	103	E	CNEEDYD VALUTOED	OVER EBS BROADBAND
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Schedule I (Form 990) PROGRAMING	KICAN CATHOLIO NG FOUNDATION	NOKIH AMEKICAN CAIHOLIC EDUCATIONAL PROGRAMMING FOUNDATION, INC.	TIONAL			2	22-3032456 Page 1.
Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II)	Assistance to Go	vernments and Orgar	nizations in the Ur	nited States (Sche	edule I (Form 990), Pa		
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisa, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ST. PATRICK ACADEMY							TO PROVIDE ENHANCED SECURITY & MONITORING
PROVIDENCE, RI 02908	05-0259044		0	5,601	COST	SECURITY SYSTEMS	OVER EBS BROADBAND NETWORKS FOR EDUCATIONAL
ST. PATRICK SCHOOL 287 SOUTH FOURTH STREET							
MEMPHIS TN 38126	62-0845508		0	5,601.	COST	SECURITY SYSTEMS	SECURITY SYSTEMS NETWORKS FOR EDUCATIONAL
ST. PAUL'S CATHOLIC SCHOOL							TO PROVIDE ENHANCED SECHRITY & MONITORING
1515 8TH STREET SOUTH							
NAMPA, ID 83651	82-0200752		0	5,601.	COST	SECURITY SYSTEMS	NETWORKS FOR EDUCATIONAL
ירטיירט בדיטיישנט גטמטמיות מט							TO PROVIDE ENHANCED
311 SHROPSHIRE PL NW							SECURIII & MONIIOMING OVER EBS BROADBAND
	85-0234098		0.	5,601,	COST	SECURITY SYSTEMS	_
							TO PROVIDE ENHANCED
SAN JOAQUIN MEMORIAL HIGH SCHOOL							
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FRESNO, CA 93/03	94-134/028		0	7,001.	COST	SECURITY SYSTEMS	
SCHAEFER ELEMENTARY SCHOOL							TO PROVIDE ENHANCED SECURITY & MONITORING
1370 SAN MIQUEL AVENUE				-			OVER EBS BROADBAND
SANTA ROSA, CA 95403	94-3322476		0	5,601.	COST	SECURITY SYSTEMS	SECURITY SYSTEMS NETWORKS FOR EDUCATIONAL
							TO PROVIDE ENHANCED
SELAH ACADEMY							SECURITY & MONITORING
OUI NOKIH IST STREET	0		•	Š	!		OVER EBS BROADBAND
SELAH, WA 98942	91-6001603		0	5,601.0	COST	SECURITY SYSTEMS	SECURITY SYSTEMS NETWORKS FOR EDUCATIONAL
TOCHOO VORMINADE TO GEORGE				_			TO PROVIDE ENHANCED
3160 HEATHER STREET							SECURITY & MONITORING OVER FRS BROADBAND
MOBILE AL 36607	69-0640434		0	5,601.0	COST	SECURITY SYSTEMS	NETWORKS FOR EDUCATIONAL
							TO PROVIDE ENHANCED
VALLEY ARTS & SCIENCE ACADEMY							SECURITY & MONITORING
~							OVER EBS BROADBAND
FRESNO, CA 93710	05-0624718		0.	5,601.0	COST	SECURITY SYSTEMS	SECURITY SYSTEMS NETWORKS FOR EDUCATIONAL
LHA							Schedule I (Form 990)

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22-3032456 Page 1		on of (h) Purpose of grant stance or assistance .	TO PROVIDE ENHANCED SECURITY & MONITORING OVER EBS BROADBAND SECURITY SYSTEMS NETWORKS FOR EDUCATIONAL	TO PROVIDE ENHANCED SECURITY & MONITORING OVER EBS BROADBAND SECURITY SYSTEMS NETWORKS FOR EDUCATIONAL	TO PROVIDE ENHANCED SECURITY & MONITORING OVER EBS BROADBAND SECURITY SYSTEMS NETWORKS FOR EDUCATIONAL				Schedule I (Form 990)
	IT)	(g) Description of non-cash assistance	SECURITY SYS	SECURITY SY	SECURITY SY				
	edule I (Form 990), Pa	(f) Method of valuation (book, FMV, appraisal, other)	COST	COST	COST				
	ited States (Sch	(e) Amount of non-cash assistance	5,601.						
NORTH AMERICAN CATHOLIC EDUCATIONAL PROGRAMMING FOUNDATION, INC.	rizations in the Ur	(d) Amount of cash grant	0	0	0.0				
	ssistance to Governments and Orga	(c) IRC section if applicable							
		(p) EIN	84-6001176	71-0825982	94-6002375				
Schedule I (Form 990) PROGRAMMI	Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II)	(a) Name and address of organization or government	WILSON ADMINISTRATIVE CENTER 1820 MAIN STREET COLORADO, CO 80611		YUBA CAREER PREP CHARTER SCHOOL 1104 EAST STREET MARYSVILLE, CA 95901				LHA

Page 2

22-3032456

Schedule I (Form 990) (2010) PROGRAMMING FOUNDATION, INC.

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance,
					•
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information	le the information	n required in Part I, I	ine 2, and any other	additional information	
PT I LINE 2 DONATIONS TO VARIOUS CHARITABLE ORGANIZATIONS.	IOUS CHA	RITABLE OR	GANIZATIONS		
CONTRIBUTION ARE					
PT I LINE 2 MONITORED BY RELIGIOUS		STAFF AT FO	FOREIGN MISSIONS	IONS BY	
THEIR U.S. STAFF.		:			

032102 01-13-11

SCHEDULĘ J (Form 990)

Compensation Information

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

 Complete if the organization answered "Yes" to Form 990, Part IV, line 23. 2010

Open to Public Inspection

Name of the organization

Department of the Treasury

► Attach to Form 990. ► See separate instructions.

NORTH AMERICAN CATHOLIC EDUCATIONAL

Employer identification number 22-3032456

PROGRAMMING FOUNDATION, INC.
art I Questions Regarding Compensation

Yes No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990. Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? 2 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply Compensation committee Written employment contract Independent compensation consultant Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: a Receive a severance payment or change-of-control payment from the organization or a related organization? 4a Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b c Participate in, or receive payment from, an equity-based compensation arrangement? 4c If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of a The organization? X 5a b Any related organization? 5b If "Yes" to line 5a or 5b, describe in Part III For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: a The organization? X 6a b Any related organization? Х 6b If "Yes" to line 6a or 6b, describe in Part III 7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III X 7 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the Х initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III 8 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?

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

Schedule J (Form 990) 2010

Schedule J (Form 990) 2010

PROGRAMMING FOUNDATION, INC.

22-3032456

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

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

		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(2)	(a)	(E)	(F) .
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(I)-(D)	reported in prior Form 990 or Form 990-EZ
	Ξ	178,005.	0	0	25,000.	0	203,005.	0
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Schedule J (Form 990) 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.

Open To Public Inspection

OMB No 1545-0047

Name of the organization NORTH AMERICAN CATHOLIC EDUCATIONAL Employer identification number

	PRO	<u> </u>	NG FOU	NDATION,	IN	<u>C.</u>		2	2 - 30	3245	6	
Part I	Excess Benefit	Transacti	ons (section	on 501(c)(3) and s	section	n 501(c)(4) organizatio	ns only)					
	Complete if the orga	ınızatıon ansv	wered "Yes"	on Form 990, Pa	art IV, I	ine 25a or 25b, or Fo	m 990-E	Z, Part	V, line 40)b		
1	(a) Nama of dia	auglified ner				(h) Danamatan		_4			(c) Con	rected?
	(a) Name of dis	qualified per	5011			(b) Description	or transa	ection			Yes	No
				***							ļ	
		·				μ.						
						<u>-</u>						
	the amount of tax imp	osed on the	organization	managers or disc	qualifie	ed persons during the	year un	der				
	on 4958								▶ \$			
3 Enter	r the amount of tax, if a	ny, on line 2,	above, reim	bursed by the org	ganıza	ition			▶ \$			
Part II	Loans to and/o	r Erom Int	torostod	Doroono		· · · · · · · · · · · · · · · · · ·						
raitii	J											
(=\ \ \						line 26, or Form 990-E	ī			oroved		
	Name of interested rson and purpose		to or from nization?	(c) Original prini amount	cipai	(d) Balance due) In ault?	by bo	ard or		/ritten ment?
		То	ľ	1				F		uttee?		1
		10	From	-			Yes	No	Yes	No	Yes	No
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 Гotal				-	▶ \$				-			
Part III	Grants or Assis	stance Be	nefiting I	nterested Per	rsons	S.	•		•			
	Complete if the orga	anization ans	wered "Yes'	on Form 990, Pa	art IV, I	line 27						
	(a) Name of interested	person				en interested person	and				d type o	f
				<u>-</u>	the ore	ganization				assistar	nce	
						·						
									· · · · · · · · · · · · · · · · · · ·			
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								- 1				

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

Schedule L (Form 990 or 990-EZ) 2010

NORTH AMERICAN CATHOLIC EDUCATIONAL PROGRAMMING FOUNDATION, INC.

22-3032456

Schedule L (Form 990 or 990-EZ) 2010 Page 2 Part IV **Business Transactions Involving Interested Persons.** Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c (e) Sharing of (a) Name of interested person (b) Relationship between interested (c) Amount of (d) Description of organization's person and the organization transaction transaction revenues? Yes No JEREMY MESSIER 7,085. IT TECHNICA SON-IN-LAW OF JOHN X ADVANCED IT SYSTEMS LLC OWNED BY SON-IN-LAW 465,811.FACILITATED X Supplemental Information Complete this part to provide additional information for responses to questions on Schedule L (see instructions) SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS: (A) NAME OF PERSON: JEREMY MESSIER (B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION: SON-IN-LAW OF JOHN PRIMEAU (D) DESCRIPTION OF TRANSACTION: IT TECHNICAL CONSULTING SERVICES & COST REDUCTION CONSULTING. (A) NAME OF PERSON: ADVANCED IT SYSTEMS LLC (B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION: OWNED BY SON-IN-LAW OF JOHN PRIMEAU (D) DESCRIPTION OF TRANSACTION: FACILITATED THE ACQUISITIONS OF IT EQUIPMENT TO NACEPF BELOW THE DISCOUNTED PRICING OF IT MANUFACTURERS TO INCREASE AVAILABLE BENEFACTIONS TO SCHOOLS.

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury

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.

2010
Open to Public Inspection

Internal Revenue Service

Name of the organization

NORTH AMERICAN CATHOLIC EDUCATIONAL PROGRAMMING FOUNDATION. INC.

Employer identification number

PROGRAMMING FOUNDATION, INC. 22-3032456
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
CFR 74.901
FORM 990, PART VI, SECTION A, LINE 2: BARBARA PRIMEAU IS JOHN PRIMEAU'S
SPOUSE.
IRENE PRIMEAU IS JOHN PRIMEAU'S SISTER.
FORM 990, PART VI, SECTION B, LINE 11: 990 IS REVIEWED BY THE
ORGANIZATION'S PRESIDENT JOHN PRIMEAU
FORM 990, PART VI, SECTION C, LINE 19: DISCLOSED UPON REQUEST

Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. Related Organizations and Unrelated Partnerships ▶ See separate instructions. Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33) NORTH AMERICAN CATHOLIC EDUCATIONAL ▶ Attach to Form 990. INC. PROGRAMMING FOUNDATION, Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990)

Part i

2010 Open to Public Inspection

OMB No 1545-0047

Employer identification number

22-3032456

entity

DUCATIONAL PROGRAMMING NORTH AMERICAN CATHOLIC Direct controlling FOUNDATION, INC. 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 102,669, 11,456, Total income Legal domicile (state or foreign country) RHODE ISLAND DEVELOP/EXPAND INST/PROG/ NONPROFITS & RURAL AREAS EDUC. BROADBAND SVCS TO Primary activity EDUCATIONAL BROADBAND SERVICE AGENCY, LLC D/B/A MOBILE BEACON - 27-2858507, 2419 HARTFORD AVE, JOHNSTON, RI 02919 Name, address, and EIN of disregarded entity Part II

(g) Section 512(bX13) controlled S entity? Yes Direct controlling entity Ξ status (if section Public charity 501(c)(3)) Exempt Code section ত্ত Legal domicile (state or foreign country) Primary activity 9 Name, address, and EIN of related organization a)

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

032181 12-21-10 LHA

Schedule R (Form 990) 2010

NORTH AMERICAN CATHOLIC EDUCATIONAL

Schedule R (Form 990) 2010 PROGRAMMING FOUNDATION, INC.

Part III 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.)

Page 2

22-3032456

organizations treated as a partnership during the tax year)	arrnersnip during the tax	year)								•
(a)	(Q)	ဍ	(D)	(e)		(6)	Ē	€	9	(K)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total income	Share of end-of-year assets	Disproportionate ate allocations?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	General or managing partner?	General or Percentage managing ownership pariner? Yes No
		-					•			
		-		_						
Identification of Related Organizations Taxable as a Corporation	ganizations Taxable a	s a Corpo		or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related	ation answered "Yes	" to Form 990, Pa	rt IV, line 34	because it had or	ne or mor	e related
	irporation or trust during	y the tax y	ear)						•	
(a)			(Q)	<u> </u>	<u> </u>	(e)	9	(6)		(£)
Name, address, and EIN of related organization	N. c.		Primary activity	Ity Legal domicile (state or foreign country)	Direct controlling entity	Type of entity (C corp, S corp, or trust)	Share of total income	end ag		Percentage ownership
									-	
				· .,				·		
032162 12-21-10				77				Schedule	R (Form	Schedule R (Form 990) 2010

NORTH AMERICAN CATHOLIC EDUCATIONAL PROGRAMMING FOUNDATION, INC.

Page 3

22-3032456

Schedule R (Form 990) 2010

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			A-C-C-C-C-C-C-C-C-C-C-C-C-C-C-C-C-C-C-C	×	Yes
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?	ns with one or more re	lated organizations listed	ın Parts II·IV?		
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a	•
b Gift, grant, or capital contribution to other organization(s)				1	
				10	
d Loans or loan quarantees to or for other organization(s)				4	
				1e	
f Sale of assets to other organization(s)				14	
g Purchase of assets from other organization(s)				19	
				두	
i Lease of facilities, equipment, or other assets to other organization(s)				;	
i Lease of facilities equipment or other assets from other organization(s)				=	1
k Performance of services or membership or fundraising solicitations for other organization(s)	nzation(s)			¥	
Performance of services or membership or fundraising solicitations by	ization(s)			=	
m Sharing of facilities, equipment, mailing lists, or other assets				£	-
n Sharing of paid employees				ţ	
					-
 Reimbursement paid to other organization for expenses 				9	1
p Reimbursement paid by other organization for expenses				p	+
q Other transfer of cash or property to other organization(s)				5 +	-
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	who must complete th	is line, including covered	relationships and transaction thresholds	- -	
(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved		
(1)					
(2)					
(3)					
(4)					
(5)				:	
(6)					
332163 12-21-10	45		Schedule R (Form 990) 2010	(Form 99	90) 2010

22-3032456 Page 4

NORTH AMERICAN CATHOLIC EDUCATIONAL

Schedule R (Form 990) 2010 PROGRAMMING FOUNDATION, 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)	(q)	(2)	<u>(</u>	(e)	Œ	(b)	(E)
Name, address, and EIN of entity	Primary activity	ign ign	Are all partners section 501(c)(3) organizations?	and-of-	or- e nns?	Code V-UBI amount in box 20 of Schedule K-1	General or managing partner?
· · · · · · · · · · · · · · · · · · ·		country)	Yes No		Yes No	(Form 1065)	1
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di .							
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Schedule R (Form 990) 2010

4562

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

Depreciation and Amortization (Including Information on Listed Property)

See separate instructions.

NORTH AMERICAN CATHOLIC EDUCATIONAL

► Attach to your tax return.

Business or activity to which this form relates

990

2010

Attachment Sequence No 67

Identifying number

PROGRAMMING FOUNDATION, FORM 990 PAGE 10 22-3032456 Part | 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 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 -0-5 5 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions (a) Description of property (b) Cost (business use only) (c) Elected cost 7 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 9 Tentative deduction Enter the smaller of line 5 or line 8 9 10 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 15,<u>488.</u> the tax year 14 15 Property subject to section 168(f)(1) election 15 30,703. 16 Other depreciation (including ACRS) MACRS Depreciation (Do not include listed property) (See instructions) 31,913. 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

	(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a	3-year property						
b	5-year property						
С	7-year property						
d	10-year property						
е	15-year property				<u> </u>		
f	20-year property						
g	25-year property			25 yrs		S/L	_
	S. and and an and a second	/	_	27 5 yrs	MM	S/L	
h	Residential rental property			27 5 yrs	MM	S/L	
				39 yrs	MM	S/L	
ı	Nonresidential real property	/			MM	S/L	
	Section C - Assets	Placed in Service	During 2010 Tax Year U	sing the Alterr	native Deprec	iation Sys	tem
202	Class life				T	S/I	-

Section C - Assets Placed in Service During 2010 Tax Year Using the Alternative Depreciation System

20a Class life
b 12-year
c 40-year
/ 40 yrs MM S/L

Part IV | Summary (See instructions)

21	Listed	property	Enter amount from line 28
----	--------	----------	---------------------------

22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr.

23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs

LHA For Paperwork Reduction Act Notice, see separate instructions.

Form **4562** (2010)

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Form 4562 (2010)		TH AMERI				DU NC		TIONA	L		22-3032	456	Pad	qe 2
Part V Listed Proper amusement)		utomobiles, certa						s, and prop	erty used	for en			_	
Note: For any through (c) of	vehicle for wi Section A, all	hich you are usin of Section B, an	g the standard d Section C if a	mıl app	leage rate licable.	or d	edu	cting lease	expense,	comp	lete only 24a, 2	4b, colu	ımns	; (a)
Section A	- Depreciation	on and Other In	formation (Cau	utio	n: See the	e ins	truc	tions for lii	nits for pa	ssenge	er automobiles))		
24a Do you have evidence to	support the bu	siness/investment	use claimed?		Yes [No	24b If "Y	es," is the	evider	nce written?	Yes		No
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis		(e Basis for de (business/in use of	precia vestr		(f) Recovery period	(g) Metho Conver	od/	(h) Depreciation deduction	sect	(i) ected ion 1 cost	
25 Special depreciation all	owance for q	ualified listed pro	operty placed II	n se	ervice duri	ng t	he t	ax year an	d					
used more than 50% in	a qualified b	usiness use								25		1		
26 Property used more that	an 50% in a c	ualified busines:	s use.											
		%		Ì										
		%												
		%												
27 Property used 50% or I	ess in a qual	ified business us	e:						-					
		%							S/L·					
		%							S/L -			1		

Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

%

28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1

29 Add amounts in column (i), line 26 Enter here and on line 7, page 1

30	Total business/investment miles driven during the year (do not include commuting miles)	(a Veh	-	(t Veh	-	(c Veh	•	Veh	•	(€ Veh	-	(f Veh	-
	Total commuting miles driven during the year Total other personal (noncommuting) miles driven												
33	Total miles driven during the year Add lines 30 through 32												
34	Was the vehicle available for personal use during off-duty hours?	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
35	Was the vehicle used primarily by a more than 5% owner or related person?												
36	is another vehicle available for personal use?												

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons

37	Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your	Yes	No
	employees?		
38	Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your		
	employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39	Do you treat all use of vehicles by employees as personal use?		
40	Do you provide more than five vehicles to your employees, obtain information from your employees about		
	the use of the vehicles, and retain the information received?		
41	Do you meet the requirements concerning qualified automobile demonstration use?		
	Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles		

Par	t VI Amortization					<u></u>	
(a) Description of costs		(b) Date amortization begins	Date amortization Amortizable Code			(f) Amortization for this year	
42 A	mortization of costs that begins durin	ng your 2010 tax year					
							
43 A	mortization of costs that began before	43	287.				
44 T	Total. Add amounts in column (f). See the instructions for where to report					287.	

Form **4562** (2010)

S/L-

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4 () •					Daga 0				
Form 8868 (Rev 1-2011) If you are filing for an Additional (Not Automatic) 3-Month	Extension o	complete only Part II and check this b			Page 2 ► X				
Note. Only complete Part II if you have already been granted				3868					
If you are filing for an Automatic 3-Month Extension, com		•		.000					
Part II Additional (Not Automatic) 3-Month			opies n	eeded).					
Name of exempt organization				oyer identifica	ition number				
Type or NORTH AMERICAN CATHOLIC EL	or NORTH AMERICAN CATHOLIC EDUCATIONAL								
PROGRAMMING FOUNDATION, IN	2-303245	56							
Eda hy tha	Number street and some ground as If a D.O. have accomplying								
due date for 2419 HARTFORD AVENUE	∞ 2419 HARTFORD AVENUE								
return See City, town or post office, state, and ZIP code For	a foreign add	Iress, see instructions							
JOHNSTON, RI 02919									
				_					
Enter the Return code for the return that this application is for	(file a separa	te application for each return)			0 1				
Application	Return	Application			Return				
Is For	Code	Is For		_ 	Code				
Form 990	01								
Form 990-BL	02	Form 1041-A			80				
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				
Form 990-T (trust other than above)	06	Form 8870			12				
STOP! Do not complete Part II if you were not already gran		· · · · · · · · · · · · · · · · · · ·	usly file	<u>d Form 8868.</u>					
JOHN R.PRIME		EPF INC.							
 The books are in the care of ► 2419 HARTFORI) AVENU								
Telephone No ► <u>(401)934-1100</u>	_	FAX No $\triangleright (401)934-226$	40						
 If the organization does not have an office or place of business. 		•			▶ ∟				
• If this is for a Group Return, enter the organization's four d	- 1	· · · · · · · · · · · · · · · · · · ·		_	-				
box ► If it is for part of the group, check this box ►		ach a list with the names and EINs of a	<u>l memb</u>	ers the extensi	on is for.				
4 I request an additional 3-month extension of time until		T 15, 2012							
5 For calendar year, or other tax year beginning			$\overline{}$		11				
6 If the tax year entered in line 5 is for less than 12 month	is, check reas	son Initial return	Final r	eturn					
Change in accounting period									
7 State in detail why you need the extension	mo 03 m	HED MILE THEODY MITON	HOD	3 COMP.					
ADDITIONAL TIME IS REQUIRED	TO GAT	HER THE INFORMATION	FOR	A COMP	<u> </u>				
AND ACCURATE RETURN.									
De lifethia analysistan is far Form 000 DL 000 DE 000 T 47	00.016060.4	antor the tentature toy loss only	$\overline{}$						
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any									
nonrefundable credits See instructions. b If this application is for Form 990-PF, 990-T, 4720, or 60	OSO enter any	refundable eradite and estimated	8a	\$					
b If this application is for Form 990-PF, 990-T, 4720, or 60 tax payments made Include any prior year overpayment	-		-						
previously with Form 8868.	8b	\$	0.						
	ır navment wi	th this form if required, by using	OD	_Ф					
c Balance due. Subtract line 8b from line 8a. Include you EFTPS (Electronic Federal Tax Payment System). See ii		ar ans loint, it required, by using	8c	\$	0.				
		nd Verification		Ψ					
Under penalties of perjury, I declare that I have examined this form, in	•		ne best o	f my knowledne	and belief				
it is true, correct, and complete, and that I am authorized to prepare the	ns form.	panying concession and chartements, and to the	5031 0	, morriouge					
Signature Title	► PRESI	DENT	Date	•					
Signature F	2010	· F							

Form **8868** (Rev 1-2011)