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CHANGE OF ACCOUNTING PERIOD

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)

Open to Public

Department of the Treasury Internal Revenue Service

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

Inspection

OMB No 1545-0047

<u> </u>	or the	2011 calendar year, or tax year beginning JUL 1, 2011 an	d ending I	<u> EC 31, 2011</u>						
B c	heck if	C Name of organization		D Employer identific	cation number					
а,	oplicable	FUTURES IN EDUCATION ENDOWMENT								
	Addres: change	FUND FOR BROOKLYN & QUEENS								
	Name change	Doing Business As		20-5	496382					
	!nitial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number						
	Termin- ated	310 PROSPECT PARK WEST		718-	965-7308					
	Amende return	City or town, state or country, and ZIP + 4		G Gross receipts \$ 522,980.						
	Applica	BROOKLYN, NY 11215		H(a) Is this a group return						
	pending	F Name and address of principal officer JOHN NOTARO		for affiliates?	Yes X No					
		SAME AS C ABOVE		H(b) Are all affiliates inc	luded? Yes No					
<u>I</u> T	ax-exe	mpt status. X 501(c)(3) 501(c)()	l) or 527		list (see instructions)					
Jγ	Vebsite	e: ► WWW.FUTURESINEDUCATION.ORG		H(c) Group exemption						
		organization: X Corporation Trust Association Other	L Year		State of legal domicile: NY					
		Summary								
	1 8	Briefly describe the organization's mission or most significant activities. THE	MISSIC	ON OF THE EN	DOWMENT					
Ž.		FUND IS TO ENSURE THAT THE GIFT OF AN EX								
rna		Check this box 🕨 🔲 if the organization discontinued its operations or disp								
ove.		Number of voting members of the governing body (Part VI, line 1a)		3	21					
Š		Number of independent voting members of the governing body (Part VI, line 1b)	4	21					
SS		otal number of individuals employed in calendar year 2011 (Part V, line 2a)	,	5	2					
Activities & Governance		Total number of volunteers (estimate if necessary)		6	22					
ctiv		Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.					
A	1	Net unrelated business taxable income from Form 990-T, line 34		7b	0.					
			77	Prior Year	Current Year					
6 \	8 (Contributions and grants (Part VIII, line 1h) RECEIVED		1,049,549.	513,969.					
n		Program service revenue (Part VIII, line 2g)	ଅଧା 🗀	0.	0.					
Revenue		nvestment income (Part VIII, column (A), lines 3, 4, and 7d) \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		20,586.	9,011.					
æ		Other revenue (Part VIII, column (A), lines 5, 6d, 8¢,18¢, 10c, and 11e)	ioi 🗀	0.	0.					
		Total revenue - add lines 8 through 11 (must equal Part XIII, column (A), line 12)	卢빌	1,070,135.	522,980.					
		Grants and similar amounts paid (Part IX, column A), Irres じょしこい, して		411,500.	400,000.					
		Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.					
S	l	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10	<i>"</i>	239,987.	38,745.					
Expenses	l	Professional fundraising fees (Part IX, column (A), line 11e)	"	0.	0.					
per	l		923.							
Ж	l	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		110,764.	538,137.					
	l	Fotal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	-	762,251.	976,882.					
	l	Revenue less expenses. Subtract line 18 from line 12		307,884.	-453,902.					
or es		tovernee rece expenses, east ast line to hell line the	R	eginning of Current Year	End of Year					
Wet Assets or Fund Balances	20 -	Fotal assets (Part X, line 16)	<u> </u>	5,831,004.	5,379,772.					
Ass	21	Fotal liabilities (Part X, line 26)	-	33,404.	36,074.					
E E	22 1	Net assets or fund balances Subtract line 21 from line 20		5,797,600.	5,343,698.					
Pa	ırt II	Signature Block		3,737,000.	3,343,030.					
-		ties of perjury, I declare that I have examined this return, including accompanying schedu	ules and staten	nents, and to the best of m	v knowledge and helief it is					
		i, and complete, Declaration of preparer (other than officer) is based on all information of			y Kilowicago ana bolici, it is					
щио,	0011001	Lan Notaro	Willow propare	11/3	//2					
ر. Sjigi	,	Signature of officer	-	Date						
Her		▶ JOHN NOTARO, ACTING EXECUTIVE DIRECT	OP.							
		Type or print name and title	<u>OK</u>							
				Date Check	PTIN					
	, !	Print/Type preparer's name Preparer's signature		11/06/12 self-employ	-					
0اۋچے مرکک	arer	GARRETT HIGGINS GARRETT HIGGIN			P00543209 13-3385019					
		Firm's name O'CONNOR DAVIES MUNNS & DOBBIN	S, LLP	Firm's EIN	13-3303013					
U ge	Unity	Firm's address 500 MAMARONECK AVENUE		Dhora sa /	01/1\ 201.0000					
	<u>_</u>	HARRISON, NY 10528-1633		Phone no. (914) 381-8900					
Ma\	/ tne IF	S discuss this return with the preparer shown above? (see instructions)			X Yes No					

	rt III Statement of Program Service Accomplishments	304 F	age Z
· ui			
	Check if Schedule O contains a response to any question in this Part III		X
1	Briefly describe the organization's mission		
	THE MISSION OF THE FUTURES IN EDUCATION ENDOWMENT FUND IS TO EN		
	THAT THE GIFT OF AN EXCELLENT EDUCATION CONTINUES TO BE A VIABLE		
	OPTION FOR FUTURE GENERATIONS OF STUDENTS IN BROOKLYN AND QUEEN		
	PROVIDING SUPPLEMENTAL FUNDING FOR TUITION ASSISTANCE, PROGRAM	SUPPO	RT
2	Did the organization undertake any significant program services during the year which were not listed on		_
	the prior Form 990 or 990-EZ?	Yes 🖸	X No
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes 🖸	X No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by	xpenses.	
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allo	cations to	
	others, the total expenses, and revenue, if any, for each program service reported		
4a	(Code) (Expenses \$ 882,775. including grants of \$ 400,000.) (Revenue \$		
	THE ENDOWMENT FUND HAS DISTRIBUTED \$1.6 MILLION FOR SCHOLARSHIE	S FOR	
	STUDENTS ATTENDING PAROCHIAL SCHOOLS IN BROOKLYN AND QUEENS. TH		
	ITS PARTNERSHIP WITH OTHER FOUNDATIONS, THESE SCHOLARSHIP FUNDS		
	MATCH AT 50% FOR A TOTAL IMPACT OF \$2.4 MILLION. FOR THE CURREN		OOL
	YEAR, \$600,000 IN SCHOLARSHIPS WAS PROVIDED TO MORE THAN 300 ST	_	
		<u>ODLITT</u>	
4b	(Code) (Expenses \$		
75	(Code / (Expenses \$ including grants of \$ / (Revenue \$		
			
			
			
4c	(C-t		
40	(Code) (Expenses \$)
			
	· · · · · · · · · · · · · · · · · · ·		
			
	Other and the Control of Control		
4d	Other program services (Describe in Schedule O)	,	
	(Expenses \$ including grants of \$) (Revenue \$)	
<u>4e</u>	Total program service expenses ► 882,775.	Form 990	(0044)
		LOIL SOF	(2011)

Form 990 (2011) FUND FOR BROOKLYN & QUEENS
Part IV Checklist of Required Schedules

			V	
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		Yes	No_
•	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for		-11	
•	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		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
•	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	<u> </u>		
•	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,		-	
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		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 temporarily restricted endowments, permanent			
	endowments, 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
C	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
	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		v	
10-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	<u> </u>
ıza	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	Х	
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	IZa	-21	 -
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		<u>X</u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		<u>X</u>
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	<u> </u>	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	<u> </u>	X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	gan /	L (2011)
		LOUIN	23U ((2011)

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Form 990 (2011) FUND FOR BROOKLYN & QUEENS
Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	L
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part 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			
	Schedule J	23	_	X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25	24a		<u>X</u>
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u> </u>
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			٠,,
	Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			. v
07	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	'		
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member	07		v
28	of any of these persons? If "Yes," complete Schedule L, Part III Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	27		X
20	instructions for applicable filing thresholds, conditions, and exceptions):	1		
_	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		x
a b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	200		
Ŭ	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	x	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
-	contributions? If "Yes," complete Schedule M	30	ļ	Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		<u>X</u>
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			1
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?			}
	Note. All Form 990 filers are required to complete Schedule O	38	X	<u> </u>
		Form	990	(2011)

Par	t V Statements Regarding Other IRS Filings and Tax Compliance	<u> </u>		aye o						
	Check if Schedule O contains a response to any question in this Part V									
			Yes	No						
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable		100	1.10						
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0									
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming									
	(gambling) winnings to prize winners?	1c	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 2									
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X							
	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		X						
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						
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5с								
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit		1							
	any contributions that were not tax deductible?	6a		X						
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts									
	were not tax deductible?	6b								
7	Organizations that may receive deductible contributions under section 170(c).									
а										
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b								
С	5									
	to file Form 8282?									
d	If "Yes," indicate the number of Forms 8282 filed during the year		ļ							
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	ļ	X						
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X						
9	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 <u>g</u>								
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h								
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.	_		1						
a	Did the organization make any taxable distributions under section 4966?	9a		İ						
10	Did the organization make a distribution to a donor, donor advisor, or related person?	9b								
10 a	Section 501(c)(7) organizations. Enter. 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 10b			ł						
11	Section 501(c)(12) organizations. Enter									
	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		1						
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b									
13	Section 501(c)(29) qualified nonprofit health insurance issuers.									
	Is the organization licensed to issue qualified health plans in more than one state?	13a								
-	Note. See the instructions for additional information the organization must report on Schedule O			ļ						
b	Enter the amount of reserves the organization is required to maintain by the states in which the									
-	organization is licensed to issue qualified health plans									
Ç	Enter the amount of reserves on hand									
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X						
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b								

FUTURES IN EDUCATION ENDOWMENT Form 990 (2011) FUND FOR BROOKLYN & QUEENS 20-5496382 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 Section A. Governing Body and Management No Yes 21 1a Enter the number of voting members of the governing body at the end of the tax year 1a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. 21 Enter the number of voting members included in line 1a, above, who are independent 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? X 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7a X b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? X 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 8a X Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes." provide the names and addresses in Schedule O X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Did the organization have local chapters, branches, or affiliates? 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? X 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? X 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe Х in Schedule O how this was done 12c X Did the organization have a written whistleblower policy? 13 13 X 14 Did the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official 15a Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a X taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ►NY Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply X Another's website X Upon request ∪ Own website

Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ► _ JOHN NOTARO − 718−965−7308

310 PROSPECT PARK WEST, BROOKLYN, NY 11215

Form 990 (2011)

FUND FOR BROOKLYN & OUEENS

<u>20-5496382</u>

Page 7

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.

X Check this box if neither the organization ne	(B)		(C)					(D)	(E)	(F)
Name and Title	Average	(40	not c	Posi	ition			Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	rson	ıs bot	h an	compensation	compensation	amount of
	week	\vdash	ceran	nd a director/trustee)			tee)	from	from related	other
	(describe hours for	trustee or director				_		the organization	organizations (W-2/1099-MISC)	compensation from the
	related	e e	stee			nsate		(W-2/1099-MISC)	(***271033-141100)	organization
	organizations	trust	al tru		oyee	ad Elic		(** 2* ******************************		and related
	ın Schedule	Individual	Institutional trustee	cer	Key employee	Highest compensated employee	Former			organizations
	O)	를	Ē	Officer	Key	돌	ᅙ			
(1) MOST REV. NICHOLAS DIMARZIO									_	
DIRECTOR	2.00	X	-					0.	0.	0.
(2) ROBERT CATELL									_	_
CHAIRMAN	2.00	X	<u> </u>	X		<u>. </u>		0.	0.	0.
(3) BRENDAN DUGAN										
TREASURER	2.00	X	<u> </u>	X				0.	0.	0.
(4) ROBERT GARTLAND		l								
DIRECTOR	2.00	X	<u> </u>					0.	0.	0.
(5) DR. FRANK MACCHIAROLA	0 00									
DIRECTOR	2.00	X			<u> </u>	-		0.	0.	0.
(6) CHARLES MCQUADE			;			l				
DIRECTOR	2.00	X	-	-		├		0.	0.	0.
(7) ARTHUR J. MIRANTE II	2 00	٦,	i							•
DIRECTOR	2.00	A		-		├		0.	0.	0.
(8) REGINA PITARO	2 00	٠,	i	x					_	0
PRESIDENT	2.00	^	├	^		├		0.	0.	0.
(9) BRUCE RATNER	2.00	.						0.		0
DIRECTOR	2.00	^	┢			<u> </u>			0.	0.
(10) SUSAN F. ALTAMORE	2.00	v						0.	0.	0.
DIRECTOR (11) CLARISSA ELGARTEN	2.00	^	-		_	 		<u> </u>		
DIRECTOR	2.00	v			ŀ			0.	0.	0.
(12) THOMAS FLOOD	2.00	1	\vdash			 			<u> </u>	
DIRECTOR	2.00	x						0.	0.	0.
(13) REV. MSGR. JAMIE J. GIGANTIELLO	2.00	1	t			H			.	•
DIRECTOR	2.00	x						0.	0.	0.
(14) LOUIS GRASSI		**	⇈	┢	\vdash	╁		•	<u> </u>	<u> </u>
DIRECTOR	2.00	$ _{\mathbf{x}}$						0.	0.	0.
(15) REV. MSGR. MICHAEL HARDIMAN			<u> </u>		<u> </u>	一				
TERM ENDED SEPT. 2011	2.00	$ \mathbf{x} $			ŀ			0.	0.	0.
(16) WILLIAM J. HOGAN		<u> </u>	†			\vdash				
DIRECTOR	2.00	$ \mathbf{x} $						0.	0.	0.
(17) JOHN LOCONSOLO										
DIRECTOR	2.00	$ \mathbf{x} $	1		ŀ			0.	0.	0.

Part VII Section A. Officers, Directors, Tru	ıstees, Key Eı	nple	yee	s, a	nd l	High	est	Compensated Employ	ees (continued)			
(A)	(B)			((C)			(D)	(E)		(F)
Name and title	Average		not c		more	than		Reportable	Reportable			nated
	hours per week		, unle cer an						compensation from related			unt of
	(describe	ctor						the	organizations			her ensation
	hours for	or dire				ited		organization	(W-2/1099-MISC)	•	n the
	related organizations	ustee	truste		يو	beus		(W-2/1099-MISC)			-	ization
	in Schedule	individual trustee or director	Institutional trustee	_	age a	st corr	_					elated zations
	O)	ig iğ	Institu	Officer	Key employee	Highest compensated employee	Former				Organi	Zations
(18) JOSEPH MATTONE SR., ESQ.												
DIRECTOR	2.00	X			ļ			0.	() .		0.
(19) LESTER J. OWENS		l						_				
DIRECTOR	2.00	X		_				0.) . [0.
(20) JOSEPH SCIAME	2 00	\ -							,			•
DIRECTOR (21) MARKIN COMMINGUAL	2.00	X	├				-	0.		٠.		<u> </u>
(21) MARTIN COTTINGHAM DIRECTOR	2.00	x					÷	0.	,	۱. د		0.
(22) MSGR. KIERAN HARRINGTON	2.00	1	t			-	┢	•		' †		
DIRECTOR	2.00	X			-			0.	(o .		0.
(23) KEVIN KEARNEY										7		
SECRETARY	2.00		ļ	X				0.	(o.		0.
					1		1					
				ļ	<u> </u>	ļ		ļ		\dashv		
		├		-	├	╁╾	┼			+		
		ŀ										
1b Sub-total	<u> </u>	<u> </u>	<u> </u>		1	┢	<u> </u>	0.		5 .		0.
c Total from continuation sheets to Part V	II. Section A							0.		5.		0.
d Total (add lines 1b and 1c)	.,					•		0.		0.		0.
2 Total number of individuals (including but r	not limited to th	nose	liste	ed a	bov	e) w	ho r	eceived more than \$100	,000 of reportable			
compensation from the organization								· · · · · · · · · · · · · · · · · · ·				0
										_	Y	es No
3 Did the organization list any former officer			e, ke	y er	nplo	oyee	, or	highest compensated e	mployee on			
line 1a? If "Yes," complete Schedule J for s 4 For any individual listed on line 1a. is the si					-+			·h a . a a	Alba augustus — A	ŀ	3	_ <u> </u>
4 For any individual listed on line 1a, is the si and related organizations greater than \$15									the organization		4	x_
5 Did any person listed on line 1a receive or									idual for services	十	4	
rendered to the organization? If "Yes," con								ou organization of man			5	x
Section B. Independent Contractors												
1 Complete this table for your five highest co										ensa	tion fro	m
the organization Report compensation for	the calendar y	ear	endı	ng v	vith	or w	<u>ıthı</u>	n the organization's tax	year.			
(A) Name and business	address	B.T.	∩ NTT	-				(B) Description of s	envices	Cr	(C) ompens	ation
Traine dire pasinete		147	INC	<u> </u>				Description of C				
						-						
												
									-			
							_					
2 Total number of independent contractors (including but r	not l	mite	d to	tho	ا می	ster	d above) who received a	nore than			
\$100,000 of compensation from the organ	_			0		0	J. J.	- abovo, milo idodived ii	.5.5 11.011			
	· ·····									F	orm 9 9	90 (2011)

Page 9

	<u> </u>	T Statement of Never	ide		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
इइ	1 a	Federated campaigns	1a					T
2 2	b	Membership dues	1b					
S,E	С	Fundraising events	1c					
뚩히	d	Related organizations	1d					
E, S	е	Government grants (contribut	ions) 1e					
Fion	f	All other contributions, gifts, gran			,			
t be		similar amounts not included abor	1 1	513,969.				
P 0	g	Noncash contributions included in lines	1a-1f \$					
Contributions, Gifts, Grants and Other Similar Amounts	h	Total. Add lines 1a-1f		>	513,969.			
ŀ				Business Code			· · · · · · · · · · · · · · · · · · ·	
8	2 a							
ه څ	b							
ᇫ립	С							
e a	d							
Program Service Revenue	е							
ا ت	f	All other program service reve	nue					
\dashv	9	Total. Add lines 2a-2f		▶	···		···	
	3	Investment income (including	dividends, intere	est, and				
		other similar amounts)		▶	9,011.			9,011.
	4	Income from investment of ta	x-exempt bond p	oroceeds 🕨				
	5	Royalties						
ļ			(ı) Real	(II) Personal				
	6 a	Gross rents						
	b	Less: rental expenses						
1	С	Rental income or (loss)		1				
	d	Net rental income or (loss)		, b				
	7 a	Gross amount from sales of	(i) Securities	(II) Other				
		assets other than inventory		<u> </u>				
	b	Less. cost or other basis						
		and sales expenses		<u> </u>				
		Gain or (loss)						
		Net gain or (loss)						
une	8 a	Gross income from fundraisin including \$						
eve		contributions reported on line		İ				
Other Revenu		Part IV, line 18	. а			1		
흎	b	Less direct expenses	b					
٥	С	Net income or (loss) from fund	draising events					
	9 a	Gross income from gaming ac	ctivities. See					
- 1		Part IV, line 19	а					
	b	Less: direct expenses	b					
	С	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]
	c	Net income or (loss) from sale	s of inventory					
		Miscellaneous Revenu	ie	Business Code				
	11 a				·			
	b	·						
	С	:						
	d	All other revenue						ļ
	е	Total. Add lines 11a-11d		>				
13200	12	Total revenue. See instructions.		<u> </u>	522,980.	0.	0	9,011.

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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 complete column (A) but are not required to complete columns (B), (C), and (D)

	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
7b,	8b, 9b, and 10b of Part VIII.	TOTAL OXPONEDO	expenses	general expenses	expenses
1	Grants and other assistance to governments and	400 000			
	organizations in the United States. See Part IV, line 21	400,000.	400,000.		
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	20 626		20 626	
7	Other salaries and wages	32,636.		32,636.	• • • • • • • • • • • • • • • • • • • •
8	Pension plan accruals and contributions (include			İ	
_	section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	6 100			
10	Payroll taxes	6,109.		6,109.	
11	Fees for services (non-employees)				
a	Management	16 404		16 404	
b	Legal	16,424.		16,424.	
C	Accounting	10,780.		10,780.	
d	Lobbying Car Ba A N/ has 43				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	27 022			27 022
g	Other	27,923.	- · - · - · ·		27,923
12	Advertising and promotion	205.		205	
13	Office expenses	30.		205. 30.	
14	Information technology	30.		30.	
15	Royalties				<u> </u>
16	Occupancy				·
17	Travel				
18	Payments of travel or entertainment expenses				
10	for any federal, state, or local public officials				
19 20	Conferences, conventions, and meetings Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization		-		
23	Insurance				
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	LOSS FROM CHANGE IN DON	482,775.	482,775.		
b		=02,773.	<u> </u>		
C					
d					
	All other expenses				· ·
25	Total functional expenses. Add lines 1 through 24e	976,882.	882,775.	66,184.	27,923
<u>25</u> 26	Joint costs. Complete this line only if the organization	2,0,002.	002,110.	00,101	4,,44
20	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here If following SOP 98-2 (ASC 958-720)				

Balance Sheet Part X (A) (B) Beginning of year End of year 217,621. 126,184. Cash - non-interest-bearing 1 1 3,782,704. 3,303,693. Savings and temporary cash investments 2 2 2,309,690. 1,470,884.Pledges and grants receivable, net 3 3 Accounts receivable, net 4 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 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 Notes and loans receivable, net 7 Inventories for sale or use 8 8 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D 10a b Less accumulated depreciation 10b 10c 11 investments - publicly traded securities 11 12 Investments - other securities. See Part IV, line 11 12 13 Investments - program-related See Part IV, line 11 13 14 Intangible assets 14 15 Other assets. See Part IV, line 11 15 5,831,004 5,379,772 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 33,404. 36,074. 17 Accounts payable and accrued expenses 17 18 Grants payable 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 Liabilities 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 23 Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties 24 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 36,074. 26 33,404. 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here X and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 27 Unrestricted net assets 27 2,502,728. 2,034,857. 28 28 Temporarily restricted net assets 3,294,872. 29 3,308,841. Permanently restricted net assets Organizations that do not follow SFAS 117, check here complete lines 30 through 34. Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 31 Retained earnings, endowment, accumulated income, or other funds 32 32 5,797,600. 5,343,698. 33 33 Total net assets or fund balances 5,379,772. 5,831,004. Total liabilities and net assets/fund balances 34

Form 990 (2011)

		<u> 20-5496382</u>	Pag	ge 12				
Pa	rt XI Reconciliation of Net Assets							
	Check if Schedule O contains a response to any question in this Part XI							
1	Total revenue (must equal Part VIII, column (A), line 12)	1 52	2,9	80.				
2	Total expenses (must equal Part IX, column (A), line 25)	2 97	6,8	82.				
3	Revenue less expenses Subtract line 2 from line 1	3 -453,						
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4 5,79	7,6	00.				
5	Other changes in net assets or fund balances (explain in Schedule O)	5		0.				
6		6 5,34	3,6	98.				
Pa	rt XII Financial Statements and Reporting							
	Check if Schedule O contains a response to any question in this Part XII			\mathbf{x}				
			Yes	No				
1	Accounting method used to prepare the Form 990. Cash X Accrual Other							
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O							
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X				
b	Were the organization's financial statements audited by an independent accountant?	2b	X					
С	if "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the a	audit,	!					
	review, or compilation of its financial statements and selection of an independent accountant?	2c	X					
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedu	ule O						
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued of	on a						
	separate basis, consolidated basis, or both							
	X Separate basis Consolidated basis Both consolidated and separate basis							
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single	le Audit						
	Act and OMB Circular A-133?	3a		X				
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit						
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3ь						

Form **990** (2011)

132012 01-23-12

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

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

OMB No 1545-0047

Open to Public Inspection

Name of the organization

FUTURES IN EDUCATION ENDOWMENT

FUND FOR BROOKLYN & OUEENS

Employer identification number 2.0 – 5.4.9.6.3.8.2

Parl	11	Reason f	or Public Chari	ty Status (All organiz	ations mus	st complet	e this part	.) See inst	ructions		<u> </u>
he o	ganı			pecause it is: (For lines 1							
1 E				s, or association of churc							
2				0(b)(1)(A)(ii). (Attach Scl							
3 [tal service organization of		n section	170(b)(1)(A)(iii).			
4 [perated in conjunction					(b)(1)(A)(iii). Enter t	he hospital's name.
		city, and state			•				(-/(-/(-/(-/(-/(-/(-/(-/(-/(-/(•	
5 [An organization	on operated for the I	benefit of a college or ur	niversity ov	vned or op	erated by	a governr	nental unit	describe	ed in
			(b)(1)(A)(iv), (Comple		•	•	•	J			
6 [-		ent or governmental unit	t described	ın sectio	n 170(h)(1	ΥΑ (ν).			
_	X			eives a substantial part o					r from the	generali	oublic described in
_			b)(1)(A)(vi). (Comple				9			90	
8 [-		ection 170(b)(1)(A)(vı). ((Complete	Part II \					
9 [Ħ			eives: (1) more than 33 1			rom contri	nutions m	nemhershir	n fees ar	nd aross receints from
_		-		nctions - subject to certa				•	•		•
			•	axable income (less sect	•		•			• •	•
			509(a)(2). (Complete	· ·		,,	000000	oquou D	, and orga	· ····································	21101 04110 00, 1070
10 [\neg			perated exclusively to te	st for publi	c safety S	See sectio	n 509(a)(4	I).		
11 [司			perated exclusively for th		-			-	out the	purposes of one or
_				itions described in section							
				organization and comple				,		-,(-,-	
		a Type I	· · · · · · · · · · · · · · · · · · ·	¬ ∴		e III · Func		earated		d 🗌	Type III - Other
e [t the organization is not			-	•	r more disc	ualified	• •
				han one or more publicly			-	-			
f				ten determination from t							(// /
		supporting or	ganization, check th	nis box		·					
g		Since August	17, 2006, has the o	rganization accepted ar	ny gift or co	ontribution	from any	of the follo	owing pers	ons?	
		(i) A persor	n who directly or ind	rectly controls, either al	one or tog	ether with	persons d	escribed	ın (ıı) and (ı	ıı) below,	Yes No
		the gove	erning body of the su	upported organization?							11g(i)
		(ii) A family	member of a persor	described in (i) above?							11g(ii)
		(iii) A 35% d	controlled entity of a	person described in (i) o	or (II) above	∍?					11g(iii)
h		Provide the fo	ollowing information	about the supported or	ganızatıon((s)					
			-								
(i) N	lame	of supported	(ii) EIN	(iii) Type of	(iv) Is the o	rganization	(v) Did you	notify the	(vi) Is	the	(vii) Amount of
.,		nızatıon	(,	organization (described on lines 1-9		sted in your	organizat		organizátic (i) organiz	on in coi. ed in the	support
				above or IRC section	governing	document?	(i) of you	support	U.S.	.?	
				(see instructions))	Yes	No	Yes	_ No	Yes	No	
									_		
					ļ						
-		_							-		
						 	ļ		 		
											
]				

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

Schedule A (Form 990 or 990-EZ) 2011

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

Schedule A (Form 990 or 990-EZ) 2011 FUND FOR BROOKLYN & OUEENS

20-5496382 Page 2

Schedule A (Form 990 or 990-EZ) 2011

(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.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2007 (b) 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total 1 Gifts, grants, contributions, and membership fees received (Do not 378,596, 1049549. include any "unusual grants.") 2896787. 1699566. 513,969. 6538467. 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 2896787. 1699566. 378,596. 1049549. 513,969. 6538467. 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) 4230905. 2307562. 6 Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total 2896787. 1699566. 378,596. 1049549. 513,969. 7 Amounts from line 4 6538467. 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties 26,888. 54,418. 30,312. 20,586. 9,011. 141,215. and income from similar sources 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.) 6679682. 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 34.55 14 Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f)) 14 15 Public support percentage from 2010 Schedule A, Part II, line 14 15 30.00 % 16a 33 1/3% support test - 2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and \mathbf{x} stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2010. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10% -facts-and-circumstances test - 2010. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

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

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

Section A. Public Support	low, please com	piete Fait II)				
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and						
membership fees received (Do not						
include any "unusual grants ")						
2 Gross receipts from admissions,						
merchandise sold or services per-						
formed, or facilities furnished in						
any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that		-				
are not an unrelated trade or bus-						
iness under section 513						
				<u> </u>		
4 Tax revenues levied for the organ-			1			
ization's benefit and either paid to						
or expended on its behalf		ļ				
5 The value of services or facilities						1
furnished by a governmental unit to						
the organization without charge						
6 Total. Add lines 1 through 5			-			
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons				<u>_</u>		
b Amounts included on lines 2 and 3 received						
from other than disqualified persons that						
exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						•
c Add lines 7a and 7b						· · · · · · · · · · · · · · · · · · ·
8 Public support (Subtract line 7c from line 6)						
Section B. Total Support				.1	1	
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6	(a) 2001	(0) 2008	(6) 2009	(0) 2010	(e) 2011	(I) Total
10a Gross income from interest,			+		 	
dividends, payments received on						
securities loans, rents, royalties						
and income from similar sources				ļ		
b Unrelated business taxable income						
(less section 511 taxes) from businesses						
acquired after June 30, 1975						ļ <u> </u>
c Add lines 10a and 10b						
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		1				
or loss from the sale of capital assets (Explain in Part IV.)				İ		
13 Total support (Add lines 9, 10c, 11, and 12)						
14 First five years. If the Form 990 is for	the organization	's first, second, the	rd. fourth, or fifth t	ax vear as a sect	ion 501(c)(3) organi	zation.
check this box and stop here	J	,,	, ,	,	(-)(-) 3	
Section C. Computation of Publi	c Support Pe	ercentage				
15 Public support percentage for 2011 (li			column (f))		15	%
16 Public support percentage from 2010		•	ν,,	•	16	%
Section D. Computation of Inves			•		1	
17 Investment income percentage for 20			•		17	%
18 Investment income percentage from 2	-	•			18	%
19a 33 1/3% support tests - 2011. If the			on line 14 and lin	e 15 is more than	•	
* *	•					17 IS IIUL
more than 33 1/3%, check this box as						₽ L
b 33 1/3% support tests - 2010. If the	•					
line 18 is not more than 33 1/3%, che		-				╵ 【┦
20 Private foundation. If the organizatio	<u>n ala not check a</u>	<u>a box on line 14, 19</u>	a, or 190, check t	ms box and see i	nstructions	

hedule A	Form 990	or 990-EZ)	2011	<u>FUND</u>	FOR	BRO	<u>OOKLY</u>	N & (OUEEN.	<u>s </u>			2(<u>) - 549</u>	96382 Pa
art IV	Supple	mental l	nforn	nation.	Comple	ete this	part to p	provide th	e explana	tions req	uired b	y Part II,	lıne 10; l	Part II, III	ne 17a or 17b
	and Part	III, line 12.	Also co	omplete t	this part	for any	y addition	nal inform	ation (See	nstruct	ions).				
ue ob	~ A NT 7	a m t ∩at	का क	CUBD	то	~117.3.1		מדמווו	WEST.	ENT	TAT	2011	7 NT	mirra	MOIDIN
IE OK	ZAINI Z.	ATION	CLE	CTED	10	CHAI	NGE 1	HEIK	YEAR	-END	TN	2011	AND	THE	AMOUNT
מעי נ	2011	COLUM	AULT IS	य. ग्रम	ርሞ ጥ	ur (CHUD4	י עראו	D NITTM	סממם					
<u>, 111111</u>	2011	COHOL	,111 IV	THE LIE	CI I	1117 7	3110 <u>K</u> 1	. 1EA	K NOM.	DEKS.					
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SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

➤ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ➤ Attach to Form 990. ➤ See separate instructions.

2011 Open to Public Inspection

OMB No 1545-0047

Name of the organization

FUTURES IN EDUCATION ENDOWMENT

Employer identification number 20 – 5496382

Par	t I Organizations Maintaining Donor Advise		or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line		
	<u> </u>	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advise	d funds
•	are the organization's property, subject to the organization's		Yes No
6	Did the organization inform all grantees, donors, and donor a		
·	for charitable purposes and not for the benefit of the donor of		•
	impermissible private benefit?	or defined advisor, or for any extrem purpose ex	Yes No
Pai		ganization answered "Yes" to Form 990. Pa	
1	Purpose(s) of conservation easements held by the organization		·
	Preservation of land for public use (e.g., recreation or e		orically important land area
	Protection of natural habitat	Preservation of a certifi	
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	fied conservation contribution in the form of	f a conservation easement on the last
	day of the tax year.		
	•		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic str	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic structur	re Table 1
	listed in the National Register	,	2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the	organization during the tax
	year ▶		
4	Number of states where property subject to conservation ea	sement is located >	
5	Does the organization have a written policy regarding the per	riodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements i	t holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	and enforcing conservation easements du	ring the year 🕨
7	Amount of expenses incurred in monitoring, inspecting, and	enforcing conservation easements during t	he year > \$
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170(h	
	and section 170(h)(4)(B)(ii)?		└── Yes └── No
9	In Part XIV, describe how the organization reports conservat	ion easements in its revenue and expense s	statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organiza	tion's financial statements that describes th	ne organization's accounting for
	conservation easements	AAA III AAA TAA	h Cincile A
Pa	rt III Organizations Maintaining Collections o		ner Similar Assets.
	Complete if the organization answered "Yes" to Form		
та	If the organization elected, as permitted under SFAS 116 (AS		
	historical treasures, or other similar assets held for public ex	·	ce of public service, provide, in Part XIV,
	the text of the footnote to its financial statements that describes a second or permitted under SEAS 116 (A)		and belongs shoot works of out brotowed
D	If the organization elected, as permitted under SFAS 116 (AS	•	
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of publi	lic service, provide the following amounts
	relating to these items		▶ ♠
	(i) Revenues included in Form 990, Part VIII, line 1		► \$ ► \$
_	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, historical tre		gain, provide
_	the following amounts required to be reported under SFAS 1	TO (MOC 300) relating to these items	▶ \$
a	Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X		\$
D	rosets included in Form 330, Fall A		₽ Ψ

		R BROOKLYN						2 Page 2
Par	t III Organizations Maintaining C	ollections of Ar	t, Historical Tr	easures, or Oth	er Simil	ar Asse	ts (conti	nued)
3	Using the organization's acquisition, accession	n, and other record	s, check any of the	following that are a	significant	use of its	collection	ı ıtems
	(check all that apply)							
а	Public exhibition	d	Loan or exc	hange programs				
b	Scholarly research	е	Other					
С	Preservation for future generations							
4	Provide a description of the organization's co	llections and explair	n how they further th	he organization's ex	empt purp	ose in Par	t XIV.	
5	During the year, did the organization solicit or							
	to be sold to raise funds rather than to be ma						Yes	☐ No
Par	t IV Escrow and Custodial Arrang				5 Form 990). Part IV.		
	reported an amount on Form 990, Part	t X, line 21	.				,	
1a	Is the organization an agent, trustee, custodia		ary for contribution	s or other assets no	t included			
	on Form 990, Part X?		,,				Yes	☐ No
b	If "Yes," explain the arrangement in Part XIV a	and complete the fo	llowing table			L	_ 163	
_	The state of the s	and complete the to	nowing table.		[Amount	
С	Beginning balance				1c		Allogit	
	Additions during the year				1d			
	Distributions during the year							
f	Ending balance				1e			
	Did the organization include an amount on Fo	rm 990 Part V line	212		1f		Yes	□ No
	If "Yes," explain the arrangement in Part XIV.	min 550, Fait A, line	211			<u> </u>	_ res	L NO
Par		the organization an	swered "Ves" to Eo	rm 990 Part IV line	10			
L	= Telestrinett and complete th	_				waara baak	(a) Cour	years back
4	Reginning of year balance	(a) Current year	(b) Prior year	(c) Two years back		years back	(e) roui	years back
	Beginning of year balance	1,917,531.	1,402,280.	937,465,	1	<u>349,219.</u>		
b	Contributions	220,000.	504.958.	452,517,		576,500 .		
	Net investment earnings, gains, and losses	4,714.	10,293.	12,298,		11,746.		
	Grants or scholarships		•	 				
е	Other expenditures for facilities							
	and programs	-						
	Administrative expenses							
g	End of year balance	2,142,245,	1,917,531,	1,402,280,	<u></u> :	937,465,		
2	Provide the estimated percentage of the curre	ent year end balanc	e (line 1g, column (a	a)) held as				
а	Board designated or quasi-endowment		_%					
	Permanent endowment ► 97.47	%						
С	• •	<u>2.53</u> %						
	The percentages in lines 2a, 2b, and 2c shou	•						
За	Are there endowment funds not in the posses	ssion of the organiza	ation that are held a	ind administered for	the organi	zation	_	
	by.							Yes No
	(i) unrelated organizations						3a(i)	X
	(ii) related organizations						3a(ii)	X_
þ	If "Yes" to 3a(II), are the related organizations	listed as required o	n Schedule R?				3b	
4	Describe in Part XIV the intended uses of the							
Par	t VI Land, Buildings, and Equipm	ent. See Form 990	, Part X, line 10	··- · · · · · · · · · · · · · · · · · ·				
	Description of property	(a) Cost or o		1 , ,	Accumulat	ed	(d) Bool	< value
		basis (investr	nent) basis	(other) d	epreciation	1		
1a	Land							
b	Buildings							
С	Leasehold improvements							
d	Equipment							
e	Other							
T	Add lines 1a through 1a (Column (d) must ex	000 Bad	V (D) /	10(-1)				

Schedule D (Form 990) 2011

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

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

(10)(11)

Sche Par	dule D (Form 990) 2011 FUND FOR BROOKLYN & QUEENS t XI Reconciliation of Change in Net Assets from Form 990 to	Audited Fins	ncial State	20-549	6382 Page 4
1	Total revenue (Form 990, Part VIII, column (A), line 12)	-tuartou i int			F22 000
2	Total expenses (Form 990, Part IX, column (A), line 25)		1	 ,-	522,980.
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3		976,882. -453,902.
4	Net unrealized gains (losses) on investments		4		-455,902.
-	Donated services and use of facilities			· ·	
5			5		
6	Investment expenses		6		
7	Prior period adjustments		7		
8	Other (Describe in Part XIV)	•	8		
9	Total adjustments (net). Add lines 4 through 8	•	9		452 002
10 Par	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and times XII Reconciliation of Revenue per Audited Financial Statements.		enue per R	eturn	<u>-453,902.</u>
1	Total revenue, gains, and other support per audited financial statements			1	40,205.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
а	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b	-		
¢	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV.)	2d			
е	Add lines 2a through 2d	C		2e	0.
3	Subtract line 2e from line 1			3	40,205.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1.				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
ь	Other (Describe in Part XIV)		182,775.		
С	Add lines 4a and 4b			4c	482,775.
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			5	522,980.
Pai	t XIII Reconciliation of Expenses per Audited Financial Stateme	nts With Ex	penses per	Return	
1	Total expenses and losses per audited financial statements		· · · · · · · · · · · · · · · · · · ·	1	494,107.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
С	Other losses	2c			
d	Other (Describe in Part XIV)	2d		1	
	Add lines 2a through 2d	,		2e	0.
3	Subtract line 2e from line 1			3	494,107.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
	Other (Describe in Part XIV.)		182,775.	1	
	Add lines 4a and 4b	,		4c	482,775.
	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	976,882.
	t XIV Supplemental Information				
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III,	lines 1a and 4,	Part IV, lines 1	b and 2b, F	art V, line 4; Part
X, lın	e 2; Part XI, line 8; Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also compl	ete this part to j	orovide any add	ditional info	rmation
PAI	RT V, LINE 4: TO PROVIDE INCOME FOR EDUCATI	ONAL SCI	<u>IOLARSHI</u>	PS FOR	₹
mit	OGE THE MEET				
THO	DSE IN NEED.				
					
PAI	RT X, LINE 2: THE ENDOWMENT FUND RECOGNIZES	THE EF	ECT OF	TAX	
PO	SITIONS ONLY WHEN THEY ARE MORE LIKELY THAN	NOT TO	BE SUST	AINED	
MAI	NAGEMENT HAS DETERMINED THAT THE ENDOWMENT	FUND HAI	O NO UNC	ERTAII	N TAX
PO	SITIONS THAT THAT WOULD REQUIRE FINANCIAL S	STATEMEN'	recogn	ITION	OR
DI	SCLOSURE. THE ENDOWMENT FUND IS NO LONGER S	UBJECT T	O EXAMI	NATIO	NS BY THE

Schedule D (Form 990) 2011

LOSS FROM CHANGE IN DONOR PLEDGE REPORTED ON PART IX, LINE 24A 482,77 PART XIII, LINE 4B - OTHER ADJUSTMENTS:
PART XIII, LINE 4B - OTHER ADJUSTMENTS: LOSS FROM CHANGE IN DONOR PLEDGE REPORTED ON PART IX, LINE
24A PART XIII, LINE 4B - OTHER ADJUSTMENTS: LOSS FROM CHANGE IN DONOR PLEDGE REPORTED ON PART IX, LINE
PART XIII, LINE 4B - OTHER ADJUSTMENTS: LOSS FROM CHANGE IN DONOR PLEDGE REPORTED ON PART IX, LINE
LOSS FROM CHANGE IN DONOR PLEDGE REPORTED ON PART IX, LINE
24A 482,77

Employer identification number 20-5496382 EDUCATIONAL SCHOLARSHIPS Open to Public OMB No 1545-0047 Inspection (h) Purpose of grant or assistance X Yes 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 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 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 non-cash assistance (g) Description of (f) Method of valuation (book, FMV, appraisal, other) Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, (e) Amount of assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States ▶ Attach to Form 990. (d) Amount of 400,000 cash grant FUTURES IN EDUCATION ENDOWMENT (c) IRC section ıf applicable FUND FOR BROOKLYN & QUEENS 501(C)3 13-4002189 General Information on Grants and Assistance (p) EIN criteria used to award the grants or assistance? 1 (a) Name and address of organization CHILDREN'S SCHOLARSHIP FUND or government Name of the organization NEW YORK NY 10018 8 WEST 38TH STREET Department of the Treasury Internal Revenue Service SCHEDULE (Form 990) Part Part II

Schedule I (Form 990) (2011)

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

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

Enter total number of other organizations listed in the line 1 table

20-5496382

Schedule I (Form 990) (2011)

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.	de the information	required in Part I, I	ine 2, and any other	additional information.	
SCHEDULE I, PART I, LINE 2: FUNDS	GIVEN TO	THE CHILDREN'S		SCHOLARSHIP FUND	
ARE MATCHED 50% BY THE CHILDREN'S	SCHOLARSHIP	HIP FUND.	SCHOLARSHIPS	IPS ARE GIVEN	
TO CHILDREN BASED ON THEIR FINANCIA	FINANCIAL NEEDS.	FUTURES	IN EDUCATION	IN EDUCATION ENDOWMENT	
FUND REVIEWS THE ANNUAL REPORT OF	THE CHILI	CHILDREN'S SCH	SCHOLARSHIP F	FUND AND	
MONITORS THE GOALS AND ACCOMPLISHMENTS	ENTS THAT	I ARE REACHED	нер ву тне	CHILDREN'S	
SCHOLARSHIP FUND.					

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.

2011

Open To Public Inspection

Name of the organization FUTURES IN EDUCATION ENDOWMENT Employer identification number FUND FOR BROOKLYN & QUEENS 20-5496382 Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only). Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b 1 (c) Corrected? (a) Name of disqualified person (b) Description of transaction Yes No 2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization Loans to and/or From Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a. (f) Approved (g) Written (a) Name of interested (b) Loan to or from (c) Original principal (e) In (d) Balance due by board or amount person and purpose the organization? default? agreement? committee? Tο From Y<u>es</u> Yes No Νo Yes No Total ▶ \$ Grants or Assistance Benefiting Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27 (a) Name of interested person (b) Relationship between interested person and (c) Amount and type of the organization assistance

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

Schedule L (Form 990 or 990-EZ) 2011

Schedule L (Form 990 or 990-EZ) 2011 FUND FOR BROOKLYN & OUEENS

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? No__ Yes WINGATE, KEARNEY & CULLEN KEVIN KEARNEY IS TH 35,643.KEVIN IS A X Part V 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: WINGATE, KEARNEY & CULLEN LLP (B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION: KEVIN KEARNEY IS THE SECRETARY OF THE FUND AND A PARTNER IN THE LAW FIRM (D) DESCRIPTION OF TRANSACTION: KEVIN IS A PARTNER AT THE LAW FIRM EMPLOYED BY THE FUND. THE FUND PAID THE FIRM \$35,643 IN 2011 FOR LEGAL SERVICES.

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SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2011
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

FUTURES IN EDUCATION ENDOWMENT FUND FOR BROOKLYN & OUEENS Employer identification number 20-5496382

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
TO BE A VIABLE OPTION FOR FUTURE GENERATIONS OF STUDENTS IN BROOKLYN
AND QUEENS BY PROVIDING SUPPLEMENTAL FUNDING FOR TUITION ASSISTANCE,
PROGRAM SUPPORT AND CAPITAL PROJECTS TO THE NEEDIEST CATHOLIC
ELEMENTARY AND SECONDARY STUDENTS AND SCHOOLS IN THESE TWO BOROUGHS.
THE VISION OF THE FUTURES IN EDUCATION ENDOWMENT FUND IS TO ENSURE THAT
ANY STUDENT IN BROOKLYN OR QUEENS WHO WANTS TO OBTAIN A QUALITY,
FAITH-BASED EDUCATION IN THE CATHOLIC TRADITION, WILL BE ABLE TO DO SO,
REGARDLESS OF HIS OR HER FAMILY'S INCOME, RACE, RELIGION, OR
BACKGROUND, BY KEEPING THE SCHOOLS AVAILABLE AND AFFORDABLE TO FAMILIES
IN THE DIOCESE.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
AND CAPITAL PROJECTS TO THE NEEDIEST CATHOLIC ELEMENTARY AND SECONDARY
STUDENTS AND SCHOOLS IN THESE TWO BOROUGHS.
THE VISION OF THE FUTURES IN EDUCATION ENDOWMENT FUND IS TO ENSURE THAT
ANY STUDENT IN BROOKLYN OR QUEENS WHO WANTS TO OBTAIN A QUALITY,
FAITH-BASED EDUCATION IN THE CATHOLIC TRADITION, WILL BE ABLE TO DO SO,
REGARDLESS OF HIS OR HER FAMILY'S INCOME, RACE, RELIGION, OR
BACKGROUND, BY KEEPING THE SCHOOLS AVAILABLE AND AFFORDABLE TO FAMILIES
IN THE DIOCESE.

FORM 990, PART VI, SECTION B, LINE 11: FUTURES IN EDUCATION ENDOWMENT FUND

FOR BROOKLYN AND QUEENS HAS ITS FORM 990 PREPARED BY AN OUTSIDE ACCOUNTING

FIRM AND HAS ESTABLISHED THE FOLLOWING REVIEW PROCESS TO ENSURE THAT THE

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

Schedule O (Form 990 or 990-EZ) (2011)

INFORMATION REPORTED IS COMPLETE AND ACCURATE. WHEN THE FORM 990 HAS BEEN PREPARED, REVIEWED BY MANAGEMENT AND IS READY TO BE FILED WITH THE INTERNAL REVENUE SERVICE, IT IS ELECTRONICALLY SENT TO THE BOARD MEMBERS OF THE ORGANIZATION FOR ANY COMMENTS. ANY COMMENTS ARE THEN GROUPED, SUMMARIZED AND PROVIDED TO THE OUTSIDE ACCOUNTANTS. EACH ISSUE IS DOCUMENTED AND ADDRESSED UNTIL THE RETURN IS FINALIZED AND APPROVED FOR FILING.

FORM 990, PART VI, SECTION B, LINE 12C: ANNUALLY ALL DIRECTORS, PRINCIPAL OFFICERS AND MEMBERS OF COMMITTEES WITH GOVERNING BOARD DELEGATED POWERS

MUST SIGN A STATEMENT WHICH AFFIRMS HIS/HER UNDERSTANDING AND COMPLIANCE

WITH THE CONFLICT OF INTEREST POLICY AND MUST DISCLOSE THE EXISTENCE OF ANY POTENTIAL CONFLICT OF INTEREST. THE REMAINDER OF THE BOARD OR COMMITTEE SHALL DECIDE IF A CONFLICT OF INTEREST EXISTS. IF A CONFLICT OF INTEREST EXISTS, THE CHAIRPERSON OF THE GOVERNING BOARD OR COMMITTEE SHALL APPOINT A DISINTERESTED PERSON TO INVESTIGATE ALTERNATIVES TO THE PROPOSED

TRANSACTION OR ARRANGEMENT. IF A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT IS NOT REASONABLY POSSIBLE UNDER CIRCUMSTANCES NOT PRODUCING A CONFLICT OF INTEREST, THE GOVERNING BOARD OR COMMITTEE SHALL DECIDE BY MAJORITY VOTE OF DISINTERESTED DIRECTORS WHETHER OR NOT TO ENTER INTO THE TRANSACTION OR ARRANGEMENT. THE MINUTES OF THE BOARD SHALL CONTAIN INFORMATION RELATED TO SUCH CONFLICTS OF INTEREST AND THE RESOLUTION THEREOF.

FORM 990, PART VI, SECTION B, LINE 15: THE BOARD OF DIRECTORS, AT TIMES

USED THE SERVICES OF AN OUTSIDE CONSULTANT TO SEARCH FOR KEY PERSONNEL.

CERTAIN MEMBERS OF THE BOARD INTERVIEW POTENTIAL CANDIDATES AND SELECT A

FINAL CANDIDATE.. A WRITTEN EMPLOYMENTS CONTRACT IS THEN PREPARED WHICH

INCLUDES, SALARY, BONUS POTENTIAL, AND FRINGE BENEFITS. THIS CONTRACT IS

Schedule O (Form 990 or 990-EZ) (2011)