

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



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

Open to Public Inspection

OMB No 1545-0047

<u>A</u>	For the	e 2011 calendar year, or tax year beginning and	ending		
В	Check if applicable	C Name of organization		D Employer identific	cation number
Г	Addre	I-CAR EDUCATION FOUNDATION			
F	Name	- COLLIGION DEDITE EDUCATION	FOU	36-3	768028
Ē	Initial	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone numbe	
	Termi	,		847-	590-1198
	Amen	City or town, state or country, and ZIP + 4		G Gross receipts \$	4,412,191.
	Application	HOFFMAN ESTATES, IL 00192		H(a) Is this a group re	eturn
	pendi	F Name and address of principal officer CLARK PLUCINSKI		for affiliates?	Yes X No
_		SAME AS C ABOVE		H(b) Are all affiliates inc	luded? Yes No
_		empt status $\mathbf{X}$ 501(c)(3) $\mathbf{D}$ 501(c) ( ) $\mathbf{d}$ (insert no.) $\mathbf{D}$ 4947(a)(1)	or 527		list (see instructions)
		te: WWW.ED-FOUNDATION.ORG		H(c) Group exemptio	
		organization: X Corporation	L Year	of formation: 1990  N	A State of legal domicile: IL
<u> </u>	art I	Summary	IID DADE	GEGOVERADY	3370
e e	:   1	Briefly describe the organization's mission or most significant activities. TO S POST-SECONDARY AUTOMOTIVE COLLISION TRAI			
(65) LE	2	Check this box   if the organization discontinued its operations or dispo			
Q (Q	3	Number of voting members of the governing body (Part VI, line 1a)	sed of filore	3	20
爱品	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	20
25 d	5	Total number of individuals employed in calendar year 2011 (Part V, line 2a)		5	3
	6	Total number of volunteers (estimate if necessary)		6	50
	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.
DEC	ь	Net unrelated business taxable income from Form 990-T, line-34		7b	0.
		I RECEIVED		Prior Year	Current Year
2	8	Contributions and grants (Part VIII, line 1h)		1,336,268.	4,118,651.
	9	Program service revenue (Part VIII, line 2g)	S    _	0.	0.
ZLOZ L Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	RS-0S(	52,317.	47,957.
	144	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 40c, and 11e)	기호	<79,759.	
_	12	Total revenue - add lines 8 through 11 (must equal Part VII) County (Part IX)		1,308,826.	4,138,434.
	13	Grants and similar amounts paid (Part IX, Column (A), lines To)		692,904.	3,585,597.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
Expenses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		257,581. 0.	269,429.
Gen	loa	Professional fundraising fees (Part IX, column (A), line 11e)  Total fundraising expenses (Part IX, column (D), line 25)  192, 5	15.		0.
Ä	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	<del></del>	201,153.	217,598.
		Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		1,151,638.	4,072,624.
	19	Revenue less expenses Subtract line 18 from line 12		157,188.	65,810.
Assets or	g		Be	ginning of Current Year	End of Year
sets	20	Total assets (Part X, line 16)		1,781,238.	1,870,274.
t As	21	Total liabilities (Part X, line 26)		28,195.	49,201.
2	<b>22</b>	Net assets or fund balances Subtract line 21 from line 20		1,753,043.	1,821,073.
	art II	Signature Block			
		lties of perjury, Ideclare that I have examined this return, including accompanying schedule			y knowledge and belief, it is
tru	e, correc	t, and complete Declaration of preparer (other than officer) is based on all information of w	hich preparer	has any knowledge.	<del>/</del>
٥.		Signature of officer		Date	12
Sig		CLARK PLUCINSKI, EXECUTIVE DIRECTOR		Duto	
не	ere	Type or print name and title		· · ·	
		Print/Type preparer's name Preparer's signature		Date Check	PTIN
Pa	id	MARK MANN		9. 30. 1 If self-employed	P00444686
	eparer	Firm's name MANN. WEITZ & ASSOCIATES L.L.C.	<u> </u>	Firm's EIN	36-3963131
	e Only	Firm's address 111 DEER LAKE ROAD, SUITE 125	•		
_		DEERFIELD, IL 60015		Phone no. (	847)267-3400
Ma	ay the II	RS discuss this return with the preparer shown above? (see instructions)			X Yes No
132	2001 01-2	3-12 LHA For Paperwork Reduction Act Notice, see the separate instructi	ons.		Form <b>990</b> (2011)

Form 990 (2011) I - CAR EDUCATION FOUNDATION

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1_	<u>X</u>	
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			l
	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	_		3,5
_	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5_		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	_		
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
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
	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			Α
8	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, VII, VIII, IX, or X			
	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		_X_
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			77
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	v	X
e	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 the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
100	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
ıza	Schedule D, Parts XI, XII, and XIII	12a	x	
h	Was the organization included in consolidated, independent audited financial statements for the tax year?			
_	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a		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		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	47		v
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	10	х	
10	1c and 8a? If "Yes," complete Schedule G, Part II  Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	18	47	
19	complete Schedule G, Part III	19		Х
202	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
			990 (	2011)

	rt IV Checklist of Required Schedules (continued)	7020		age .
			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	
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	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			
	Schedule J	23		Х
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	İ	x
ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
•	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	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
ь	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			
	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			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	,		
	instructions for applicable filing thresholds, conditions, and exceptions).			,
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
•	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	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		x
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
-	If "Yes," complete Schedule N, Part I	31		x
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		Х
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		х
34	Was the organization related to any tax-exempt or taxable entity?			
•	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
ь	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		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х

Form **990** (2011)

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

I-CAR EDUCATION FOUNDATION Form 990 (2011) Statements Regarding Other IRS Filings and Tax Compliance 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 0 1a 0 Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? X 1c 2a Enter the number of employees reported on Form W.3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? X 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? X За 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)? X 4a **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? Х 5a Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b Х If "Yes," to line 5a or 5b, did the organization file Form 8886-T? 5c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit X any contributions that were not tax deductible? 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b Organizations that may receive deductible contributions under section 170(c). 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? X 7a If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? X 7c d If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? е 7e Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? X 7f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? **7**g h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations Did the supporting 8 organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 8 Sponsoring organizations maintaining donor advised funds. 9 Did the organization make any taxable distributions under section 4966? а 9a b Did the organization make a distribution to a donor, donor advisor, or related person? 9b 10 Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12 10a Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b b 11 Section 501(c)(12) organizations. Enter: Gross income from members or shareholders 11a Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a 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 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 13b c Enter the amount of reserves on hand 13c Х 14a Did the organization receive any payments for indoor tanning services during the tax year?

Form 990 (2011)

14a

If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

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					——	
Sec	tion A. Governing Body and Management						
		1 .		٦٥٢		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		20		į	l
	If there are material differences in voting rights among members of the governing body, or if the governing						l
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	41.		20			-
b	Enter the number of voting members included in line 1a, above, who are independent	1b		20		, ,	l
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationsh	p with	any otner	-			v
_	officer, director, trustee, or key employee?		t 0.1505,000	-	2		X
3	Did the organization delegate control over management duties customarily performed by or under the	ie aire	a supervision		_		x
	of officers, directors, or trustees, or key employees to a management company or other person?	000	o filod?	-	3	X	
4	Did the organization make any significant changes to its governing documents since the prior Form		s nieu /	F	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's as	seis		-	5		X
6	Did the organization have members or stockholders?	opoint	one or	-	6		
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a	ppoint	one or		<b>7</b> 0		X
L	more members of the governing body?  Are any government devices of the organization recorded to (or subject to approval by) members.	stockh	oldere er	-	<u>7a</u>		
Ь	Are any governance decisions of the organization reserved to (or subject to approval by) members,	SLOCKIN	olders, Oi		76		х
_	persons other than the governing body?	ar hu th	o following:	⊦	7b		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year.	ar by th	c ronowing.		8a	x	
a b	The governing body?  Each committee with authority to act on behalf of the governing body?				8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re-	ched ·	at the	-	OD	-11	
9	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	acrica a	it tile		9	.	Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal F	Revenu	Code )				
<u> </u>	tion D. Follow (Find decition B requests information about pointies not required by the internal	0,000	0000.7			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			Γ	10a		X
	If "Yes," did the organization have written policies and procedures governing the activities of such of	hapter	s. 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 boo	lv befo	re filing the form		11a	Х	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990	•	Ü				
12a					12a	X	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris	e to con	flicts?		12b	Х	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "						
_	in Schedule O how this was done	•		,	12c	x	
13	Did the organization have a written whistleblower policy?				13	Х	
14	Did the organization have a written document retention and destruction policy?				14	Х	
15	Did the process for determining compensation of the following persons include a review and approve	al by ır	dependent				
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?						
а	The organization's CEO, Executive Director, or top management official				15a	X	L
ь	Other officers or key employees of the organization				15b		Х
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)						_ <del>_</del>
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment v	vith a	_			L .
	taxable entity during the year?			Ŀ	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	ite its p	articipation				l
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization	nızatıo	n's	_			
	exempt status with respect to such arrangements?				16b		
Sec	tion C. Disclosure						
17	List the states with which a copy of this Form 990 is required to be filed ▶IL						
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	T (Sect	ion 501(c)(3)s or	ıly) av	allab	le	
	for public inspection. Indicate how you made 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 made its governing documents, c	onflict (	of interest policy	, and	fınan	cial	
	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 a	nd rec	ords of the orga	nızatıc	on 🕨	·	
	MICHAEL BREY - 847-590-1198						
13200	5125 TRILLIUM BLVD., HOFFMAN ESTATES, IL 60192						
01-23				1	Form	<b>990</b> (	2011)

#### 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

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

- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

(A) Name and Title	(B) Average hours per week	box	not ci unles	ss pe	ntion more rson	than is bot	han	( <b>D)</b> Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(describe hours for related organizations in Schedule O)	individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	<b>Former</b>	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) CHRIS NORTHUP								_		_
VICE CHAIR	1.20	X		X		<u> </u>		0.	0.	0.
(2) TIMOTHY O'DAY								_		
SECRETARY	1.10	X		X		<u> </u>		0.	0.	0.
(3) JOHN SAIA								_	_	
TRUSTEE	1.00	X				<u> </u>		0.	0.	0.
(4) DOUG WEBB								_		
CHAIR	3.30	X		X		<u> </u>		0.	0.	0.
(5) JOHN WARD								_		
TRUSTEE	0.90	X				<u> </u>	<u> </u>	0.	0.	0.
(6) TIM ADELMANN								_	_	
TRUSTEE	0.70	Х					_	0.	0.	0.
(7) JOSEPH ALLEN								_	_	
MEMBER-AT-LARGE	1.20	X		X		-	<u> </u>	0.	0.	0.
(8) TERRY ANGELL										
TRUSTEE	0.90	X						0.	0.	0.
(9) O. GUY BARGNES										
TRUSTEE	0.90	X						0.	0.	0.
(10) CHRIS EVANS									_	_
IMMEDIATE PAST CHAIR	1.10	X		X	L	<b> </b>		0.	0.	
(11) TERRY FORTNER									_	
TREASURER	1.10	X		X		<b> </b> -		0.	0.	0.
(12) MARY C. KNAPP										_
TRUSTEE	1.00	X				-	_	0.	0.	0.
(13) GERALYNN KOTTSCHADE	1 2 2 2								•	
MEMBER-AT-LARGE	1.20	X		X		├		0.	0.	0.
(14) BILL DALY										
MEMBER-AT-LARGE	1.00	X		X		├	_	0.	0.	0.
(15) STACY BARTNIK								_		_
TRUSTEE	0.90	X	-		<u> </u>	+-		0.	0.	_ 0.
(16) DOMENIC BRUSCO	1 00							_		_
TRUSTEE	1.00	X	<u> </u>	ļ	<u> </u>	<b>├</b>	<u> </u>	0.	0.	_0.
(17) NICK NOTTE	1 22		;					_		_
TRUSTEE	1.00	X				<u> </u>		0.	0.	0 <b>.</b> Form <b>990</b> (2011)

132007 01-23-12

Form **990** (2011)

Part VII Section A. Officers, Directors,		mple	oyee			Higr	est	· · · · · · · · · · · · · · · · · · ·		—r	
` (A)	(B)				C)	,		(D)	(E)		(F)
Name and title	Average	Position (do not check more than of box, unless person is both				than		Reportable	Reportable compensation		Estimated
	hours per week			ss pe				compensation from	from related		amount of other
	(describe	Ιο		Γ		T	T	the	organizations		compensation
	hours for	trustee or director						organization	(W-2/1099-MISC	וו	from the
	related	10 aa	stee			nsate		(W-2/1099-MISC)	, , , , , , , , , , , , , , , , , , , ,	´	organization
	organizations	fast	a tr		a ke	E		,			and related
	in Schedule	Individua	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former				organizations
	0)	1	三	£	Ē.	운동	훈			_	
(18) RICK TUURI										_	•
TRUSTEE	1.10	X.	-	<u> </u>	_	┼		0.		0.	0.
(19) SCOTT KOHL	0.70	7.						0.		0.	0
TRUSTEE	0.70	<u> </u> ▲	╫─	1		+	$\vdash$	0.	'	٠.	0.
(20) RANDALL L. STARNES	0.70							0.		0.	0.
TRUSTEE	0.70	1	╁		-	$\vdash$				•	<u> </u>
(21) CHARLES S. SULKALA	0.00	v						0.		ο.	0.
TRUSTEE EMERITUS	0.00	<b>↑</b>			┢╌	+			-	•	<b>.</b>
(22) SCOTT KRUGER	40.00			x			1	107,569.		0.	16,253.
EXECUTIVE DIRECTOR (23) MIKE BREY	40.00					+	<u> </u>	107,303.		*	10,2301
CONTROLLER	1.00			x		1		0.		0.	0.
CONTROLLER											
1b Sub-total		ــــــــــــــــــــــــــــــــــــ	<u> </u>	1			<u> </u>	107,569.		0.	16,253.
c Total from continuation sheets to Par	t VII Section A							0.		0.	0.
d Total (add lines 1b and 1c)	t vii, ocotion A							107,569.	<del></del>	0.	16,253.
Total number of individuals (including bit)	ut not limited to t	hose	liste	ed a	bov	e) w	ho r				•
compensation from the organization											1
	•										Yes No
3 Did the organization list any former office	cer, director, or tr	uste	e, ke	ey er	mplo	oyee	, or	highest compensated e	mployee on		
line 1a? If "Yes," complete Schedule J f										ļ	3 X
4 For any individual listed on line 1a, is the									the organization	ļ	全國多類學生
and related organizations greater than \$										-	4 X
5 Did any person listed on line 1a receive							rela	ted organization or indiv	idual for services		
rendered to the organization? If "Yes," o	omplete Schedu	le J	for s	uch	per	son					5 X
Section B. Independent Contractors			d			root		that received more than	\$100,000 of comp		ation from
<ol> <li>Complete this table for your five highest the organization. Report compensation</li> </ol>										61156	ation non
the organization. Report compensation (A)	for the calendar	yeai	enu	iiig v	WILIT	OI V	AICH	(B)	yeai		(C)
Name and busin	ess address	N	ON	F:				Description of s	services	C	ompensation
		_ <del>-</del>									
											<del></del>
2 Total number of independent contracto	rs (including but	not I	ımıte	ed to	the	ose I	ste	d above) who received r	nore than	· ·	St. A. A. Carrier

132008 01-23-12

Form **990** (2011)

\$100,000 of compensation from the organization

Pa	,	Statement of Reve	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
ts si	1 a	Federated campaigns	1a					
lg ä	b	Membership dues	1b					
A, C	c	Fundraising events	1c	120,457.				
불교	d	Related organizations	1d					
ğ.Ē	е	Government grants (contribu	tions) 1e					
ti S	f	All other contributions, gifts, gran	nts, and				ł	
혈		similar amounts not included abo		998,194.				
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contributions included in lines	s 1a-1f \$3,	<u>437,352</u> .				
<u>8 0</u>	h	Total. Add lines 1a-1f			4,118,651.			
				Business Code				
<u>i</u>	2 a							
e S	b							
m S	С					···		
Ra	d						<u> </u>	
Program Service Revenue	e							· · · · · · · · · · · · · · · · · · ·
_	T -	All other program service reve	enue	<b></b>				<u> </u>
$\rightarrow$	<u>_</u> 9	Total. Add lines 2a-2f Investment income (including	dividends intere					
İ	3	other similar amounts)	y aividends, intere	>	47,957.			47,957.
	4	Income from investment of ta	x-exempt bond o		1,,55,,			11,5576
	5	Royalties	oxompt bond p			·		
1	Ŭ	· ioyaliloo	(i) Real	(ii) Personal				
i	6 a	Gross rents	V	,				
1	b	Less rental expenses						
- 1	c	Rental income or (loss)						
	d	Net rental income or (loss)		<b>•</b>				
	7 a	Gross amount from sales of	(i) Securities	(ıi) Other			-	
		assets other than inventory	212,371.					}
	b	Less cost or other basis						
ļ		and sales expenses	212,371.					
İ	С	Gain or (loss)	0.	<u> </u>				
	d	Net gain or (loss)		<u> </u>	0.			
<u>و</u> ا	8 a	Gross income from fundraisin						
Other Revenue		including \$ 120,4						,
é		contributions reported on line	e 1c) See	00 545				,
ğ		Part IV, line 18	a .	22,515.				
ㅎ		Less direct expenses	. <b>b</b>	61,386.		_		
		Net income or (loss) from fun	-	<u> </u>	<38,871.	>		<38,871.
	9 a	Gross income from gaming a			}			1
		Part IV, line 19	а					
		Less direct expenses  Net income or (loss) from gan	b acutuutus aana			-		'
		Gross sales of inventory, less	•					
	ю а	and allowances	a a					
	h	Less cost of goods sold	b					
		Net income or (loss) from sale	_	•	i~ .		L	
Ī		Miscellaneous Revenu		Business Code				_
t	11 a	OTHER		900099	10,697.	10,697.		
	b	-					,	
	c							
	d	All other revenue						
	е	Total. Add lines 11a-11d		<b>&gt;</b>	10,697.			
لي	12	Total revenue See instructions.			4,138,434.	10,697.	0.	9,086.
13200	9							Form <b>990</b> (2011)

### 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)

comp	olete columns (B), (C), and (D)				
	Check if Schedule O contains a respon	ise to any question in thi	s Part IX		
	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	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to governments and		İ		
	organizations in the United States. See Part IV, line 21	3,471,678.	3,471,678.		
2	Grants and other assistance to individuals in				
	the United States See Part IV, line 22	113,919.	113,919.		
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	123,822.	30,955.	30,955.	61,91 <u>2.</u>
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	119,170.	39,204.	32,939.	47,027.
8	Pension plan accruals and contributions (include				
	section 401(k) and section 403(b) employer contributions)	2,065.	557.	562.	946.
9	Other employee benefits	4,142.	1,438.	1,484.	1,220.
10	Payroll taxes	20,230.	6,279.	5,196.	8,755.
11	Fees for services (non-employees)				
а	Management				
b	Legal	1,665.	449.	453.	763.
С	Accounting	11,735.	3,165.	3,192.	5,378.
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	,			
g	Other				·····
12	Advertising and promotion	61,076.	54,205.	2,559.	4,312.
13	Office expenses	53,175.	29,422.	8,847.	14,906.
14	Information technology	5,895.	1,590.	1,603.	2,702.
15	Royalties				
16	Occupancy	23,664.	6,383.	6,436.	10,845.
17	Travel	62,098.	30,238.	11,866.	19,994.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	39,018.	32,183.	2,546.	4,289.
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	5,683.	1,533.	1,546.	2,604.
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	ICAR ALLOCATION OF EXPE	14,975.	4,041.	4,072.	6,862.
b	FUNDRAISING EVENT DIREC	<61,386.			
С					
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	4,072,624.	3,765,853.	114,256.	192,515.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)		-		
12201	0 01-23-12				Form <b>990</b> (2011)

Form 990 (2011)

Pa	rt X	Balance Sheet			
	•		(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	143,076.	1	131,932.
	2	Savings and temporary cash investments	571,115.	2	520,825.
	3	Pledges and grants receivable, net	171,667.	3	207,325.
	4	Accounts receivable, net	6,131.	4	4,600.
	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees. Complete Part II			
		of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section			
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
		employees' beneficiary organizations (see instructions)		6	
Assets	7	Notes and loans receivable, net		7	
4ss	8	Inventories for sale or use	2,075.	8	
	9	Prepaid expenses and deferred charges	823.	9	4,306.
	10a	Land, buildings, and equipment cost or other			
		basis Complete Part VI of Schedule D 10a 104, 351.			
	b	Less accumulated depreciation 10b 91,434.	0.	10c	12,917.
	11	Investments - publicly traded securities	886,351.	11	988,369.
	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	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	1,781,238.	16	1,870,274.
	17	Accounts payable and accrued expenses	14,425.	17_	3,925.
	18	Grants payable		18	
	19	Deferred revenue		19	19,620.
	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,			
abi		highest compensated employees, and disqualified persons. Complete Part II			
J		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 (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24) Complete Part X of			
		Schedule D	13,770.	25	25,656.
	26	Total liabilities. Add lines 17 through 25	28,195.	26	49,201.
		Organizations that follow SFAS 117, check here   X  and complete			,
es		lines 27 through 29, and lines 33 and 34.			
JL.	27	Unrestricted net assets	1,472,295.	27	1,508,035.
3ali	28	Temporarily restricted net assets	280,748.	28	313,038.
둳	29	Permanently restricted net assets		29	<del></del>
Ē		Organizations that do not follow SFAS 117, check here   and			
ō		complete lines 30 through 34.			
ets	30	Capital stock or trust principal, or current funds		30	
Ass	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds		32	
Z	33	Total net assets or fund balances	1,753,043.	33	1,821,073.
	34	Total liabilities and net assets/fund balances	1,781,238.	34	<u>1,870,274.</u>

Form **990** (2011)

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

X

За

Form 990 (2011)

Act and OMB Circular A-133?

#### **SCHEDULE A** (Form 990 or 990-EZ)

**Public Charity Status and Public Support** 

Complete if the organization is a section 501(c)(3) organization or a section

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

4947(a)(1) nonexempt charitable trust. ▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Inspection

Name of the organization

Employer identification number

		I-CAR E	DUCATION FOU	NDATI	ON			-	3.6	<u> -3768</u>	028	
Part I	Reason	for Public Char	rity Status (All organiz	zations mu	st complet	e this par	t ) See inst	tructions				
he organ	ization is not a	private foundation	because it is (For lines	1 through <sup>1</sup>	11, check (	only one b	oox)					
1 🔲	A church, cor	nvention of churche	s, or association of chur	ches desc	ribed in <b>se</b>	ction 170	(b)(1)(A)(i)	).				
2	A school des	cribed in section 17	<b>70(b)(1)(A)(ii).</b> (Attach Sc	hedule E)								
з 🗀	A hospital or	a cooperative hospi	ital service organization (	described	ın section	170(b)(1)	(A)(iiı).					
4	A medical res	search organization	operated in conjunction	with a hos	pıtal descr	ıbed ın <b>se</b>	ection 170	(b)(1)(A)(i	ii). Enter th	e hospital	's nam	ne,
	city, and state	e		_								
5 🔲	An organizati	on operated for the	benefit of a college or ui	niversity ov	wned or op	erated by	a governi	mental un	it describe	d in		
	section 170	(b)(1)(A)(iv). (Compl	ete Part II )									
6	A federal, sta	ite, or local governm	ent or governmental uni	t described	d in sectio	n 170(b)(	1)(A)(v).					
7 X	An organizati	on that normally red	eives a substantial part	of its supp	ort from a	governme	ental unit c	r from the	general p	ublic desc	ribed i	ın
	section 170(	b)(1)(A)(vi). (Comple	ete Part II)									
в 📖	A community	trust described in s	section 170(b)(1)(A)(vi).	(Complete	Part II)							
9	An organizati	on that normally red	eives (1) more than 33	1/3% of its	support fi	rom contr	ibutions, m	nembersh	ip fees, and	d gross re	ceipts	from
	activities rela	ted to its exempt fu	nctions - subject to certa	ain excepti	ons, and (2	2) no more	e than 33 1	/3% of its	s support f	rom gross	ınvest	ment
			axable income (less sect	tion 511 ta	x) from bu	sinesses a	acquired b	y the orga	anization af	ter June 3	ا0, 197	75
		<b>509(a)(2).</b> (Complete										
10	-	_	perated exclusively to te									
11 🔲	_	-	perated exclusively for the									or
		• • • •	ations described in secti		•		2) See <b>se</b> o	ction 509(	(a)(3). Chec	k the box	that	
			organization and compl						.—		a	
	a ∐ Type I		• •	с Тур		-	-			Type III - (		
e		-	at the organization is not									ın
_		-	than one or more publicly						9(a)(1) or se	ection 508	/(a)(2)	
f	J		tten determination from t	tne IRS tha	atitisa iy	pe i, Type	ii, or Type	9 111				
		rganization, check t		<del></del>		f	of the fell					
g	•		organization accepted ar			-					Van	l NI =
	• •	•	directly controls, either al	ione or tog	etilei witil	persons	Jeschbed I	iii (ii) ariu (	iii) below,	44-(1)	Yes	No
	-		upported organization? n described in (i) above?	)						11g(i) 11g(ii)		
		•	a person described in (i) a		<b>-</b> 2					11g(iii)		
<b>b</b>	. ,	_	about the supported or							rigun	<u> </u>	<u> </u>
h	Flovide the i	Ollowing intornation	about the supported of	gariizationi	(3)							
		an rin	(iii) Type of	(m) is the c	rganization	(v) Did vo	u notify the	(vi) ls	s the	6.23 A=		
` '	of supported anization	(ii) EIN	organization		sted in your		tion in col.	organizati (i) organiz	on in col.	(vii) An	nount o port	)1
orga	inzation		(described on lines 1-9 above or IRC section	governing	document?	(i) of you	r support?	U.S	5.7	Sup	port	
		1	(see instructions))	Yes	No	Yes	No	Yes	No			
								ŀ				
	-											
								-				
								•				
	<u>-</u>	_							į			
				ļ								
								1				
_				ļ. <u> </u>	ļ		<b> </b>		<del>                                     </del>			
otal		L	<u> </u>	<u> </u>	l		1					

Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2011

LHA For Paperwork Reduction Act Notice, see the Instructions for

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

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

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual grants")	580,194.	275,628.	606,022.	1336268.	4118651.	6916763.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities		-				
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	580,194.	275,628.	606,022.	1336268.	4118651.	6916763.
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)						3051082.
6	Public support. Subtract line 5 from line 4						3865681.
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
	Amounts from line 4	580,194.	275,628.	606,022.	1336268.	4118651.	6916763.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	58,945.	32,293.	54,440.	52,317.	47,957.	245,952.
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)				1,365.	10,697.	12,062.
11	Total support. Add lines 7 through 10						7174777.
	Gross receipts from related activities,	etc (see instruction	ons)			12	39,090.
13	First five years. If the Form 990 is for	r the organization's	first, second, thir	d, fourth, or fifth ta	x year as a section	n 501(c)(3)	
	organization, check this box and stor	here					
Sec	ction C. Computation of Publ	ic Support Pe	rcentage				
14	Public support percentage for 2011 (	line 6, column (f) di	ivided by line 11, c	olumn (f))		14	53.88 %
15	Public support percentage from 2010	) Schedule A, Part	II, line 14			15	76.10 %
16a	33 1/3% support test - 2011. If the	organization did no	t check the box o	n line 13, and line	14 is 33 1/3% or m	nore, check this bo	x and
	stop here. The organization qualifies	as a publicly supp	orted organization				$\triangleright x$
b	33 1/3% support test - 2010. If the	organization did no	t check a box on I	ine 13 or 16a, and	line 15 is 33 1/3%	or more, check th	nis box
	and stop here. The organization qual	lifies as a publicly s	supported organiza	ation			ightharpoons
17a	10% -facts-and-circumstances tes	t - 2011. If the org	anization did not o	check a box on line	e 13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the "fac	ts-and-circumstan	ces" test, check th	nis box and stop h	ere. Explain in Par	t IV how the organ	ization
	meets the "facts-and-circumstances"	test The organiza	tion qualifies as a	publicly supported	dorganization		ightharpoons
b	10% -facts-and-circumstances tes	t - 2010. If the org	anization did not o	check a box on line	e 13, 16a, 16b, or 1	17a, and line 15 is	10% or
	more, and if the organization meets to	he "facts-and-circu	mstances" test, ch	neck this box and	stop here. Explain	in Part IV how the	·
	organization meets the "facts-and-circ	cumstances" test	The organization of	qualifies as a public	cly supported orga	ınızatıon	ightharpoons
18	Private foundation. If the organization						s <b>▶</b> □
					Sche	dule A (Form 990	or 990-EZ) 2011

## 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 be	low, please com	plete Part II)				
Section A. Public Support		T	<del></del>		<del></del>	<del></del>
Calendar year (or fiscal year beginning in) 🕨 🗀	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
Gifts, grants, contributions, and						
membership fees received (Do not						
ınclude any "unusual grants ")						
2 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						
3 Gross receipts from activities that						
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						
5 The value of services or facilities						
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		_				
Calendar year (or fiscal year beginning in) ► 📗	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>b</b> Unrelated business taxable income						
(less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is 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)			<u> </u>	<u> </u>	<u> </u>	
14 First five years. If the Form 990 is for	the organization's	s first, second, thir	d, fourth, or fifth to	ax year as a section	on 501(c)(3) organiz	ation,
check this box and stop here	·					<u> </u>
Section C. Computation of Public	c Support Pe	rcentage				
15 Public support percentage for 2011 (lir	ne 8, column (f) d	ivided by line 13, o	column (f))		15	94
16 Public support percentage from 2010	Schedule A, Part	III, line 15			16	9/
Section D. Computation of Inves						
17 Investment income percentage for 201			ne 13, column (fl)		17	9
18 Investment income percentage from 2					18	9
19a 33 1/3% support tests - 2011. If the	-		on line 14, and line	e 15 is more than :		
more than 33 1/3%, check this box an	-					<b>▶</b> □
b 33 1/3% support tests - 2010. If the c						
line 18 is not more than 33 1/3%, chec						▶ □
20 Private foundation. If the organization		•	•		•	
-5 THE TO THE PROPERTY OF THE						

#### **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.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number

	I-CAR EDUCATION FO	UNDATION	36-3768028
Pai	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds or	Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	e 6	
		(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 v	writing that the assets held in donor advised fu	ınds
	are the organization's property, subject to the organization's		Yes No
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can be used	l only
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose confe	erring
	impermissible private benefit?		Yes No_
Pai	t II Conservation Easements. Complete if the org	ganization answered "Yes" to Form 990, Part IV	/, line 7
1	Purpose(s) of conservation easements held by the organizati	on (check all that apply)	
	Preservation of land for public use (e.g., recreation or e	education) Preservation of an historic	ally important land area
	Protection of natural habitat	Preservation of a certified	historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	fied 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
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
C	Number of conservation easements on a certified historic stru	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired a	after 8/17/06, and not on a historic structure	
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rel	leased, extinguished, or terminated by the orga	anization during the tax
	year ▶		
4	Number of states where property subject to conservation eas	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 if		└ Yes
6	Staff and volunteer hours devoted to monitoring, inspecting,	and enforcing conservation easements during	the year
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170(h)(4)	· · · · · · · · · · · · · · · · · · ·
	and section 170(h)(4)(B)(ii)?		L_ Yes L_ No
9	In Part XIV, describe how the organization reports conservati	•	
	include, if applicable, the text of the footnote to the organization	tion's financial statements that describes the o	rganization's accounting for
<b>D</b> -	conservation easements	6 Art Historical Transcriptor on Other	Cimilar Assats
Pal	t III Organizations Maintaining Collections of		Similar Assets.
	Complete if the organization answered "Yes" to Form		<del></del>
1a	If the organization elected, as permitted under SFAS 116 (AS	•	•
	historical treasures, or other similar assets held for public exh		of public service, provide, in Part XIV,
	the text of the footnote to its financial statements that descri		
b	If the organization elected, as permitted under SFAS 116 (AS	·	
	treasures, or other similar assets held for public exhibition, ed	ducation, or research in furtherance of public s	ervice, provide the following amounts
	relating to these items		<b>.</b> .
	(i) Revenues included in Form 990, Part VIII, line 1		\$
	(ii) Assets included in Form 990, Part X		<b>&gt;</b> \$
2	If the organization received or held works of art, historical tre	-	n, provide
	the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items:	<b>.</b>
	Revenues included in Form 990, Part VIII, line 1		<b>\$</b>
b	Assets included in Form 990, Part X		<b>▶</b> \$

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

Sche	dule D (Form	n 990) 2011 I -	CAR E	DUCATION	FOUND	ATION				36-37	68028	Page 2
Par	t III Org	anizations Main	taining C	ollections of	Art, His	torical Tr	easures, e	or Other	Simila	ar Asse	ts (contir	nued)
3	Using the o	organization's acquisiti	on, accessi	on, and other red	cords, checl	k any of the	following tha	at are a sign	iificant u	use of its	collection	ıtems
	(check all th	nat apply)										
а	Publi	c exhibition			d 🔲	Loan or exc	hange progra	ams				
b	Scho	larly research			е 🗀	Other			_			
С	Prese	ervation for future gene	erations									
4	Provide a d	lescription of the orgar	nization's co	ollections and ex	plain how th	ney further t	he organizati	on's exemp	ot purpo	se in Par	t XIV.	
5	During the	year, did the organizat	ion solicit o	r receive donation	ons of art, hi	storical trea	sures, or oth	er sımılar a	ssets		_	
	to be sold t	o raise funds rather th	an to be ma	aintained as part	of the orga	nization's co	ollection?				Yes	No_
Par		crow and Custod		_	mplete if the	organizatio	on answered	"Yes" to Fo	rm 990	, Part IV,	line 9, or	
	<u> </u>	orted an amount on Fo										
1a	Is the organ	nization an agent, trust	tee, custod	an or other inter	mediary for	contribution	ns or other as	sets not in	cluded			
	on Form 99	•									_ Yes	∟ No
b	If "Yes," ex	plain the arrangement	in Part XIV	and complete th	e following	table						
											Amount	
	Beginning t								1c			
d		luring the year							1d			
е		ns during the year							1e	-		
f	Ending bala								1f		7	<del></del>
	_	anization include an ai		orm 990, Part X,	line 217						_ Yes	L No
		plain the arrangement		f Al		WY	000 Dt	N/ 1 40				
Par	t V EIIC	dowment Funds.	Complete				T		Theorem			baal.
_		- <b>f</b>		(a) Current yea	ar (b) F	rior year	(c) Two yea	rs dack (d	) Tiree y	ears back	(e) Four	years back
1a	-	of year balance					<u> </u>				<del> </del>	
b	Contributio						· · · · · · · · · · · · · · · · · · ·					
C		nent earnings, gains, a	ina iosses								<i>-</i>	
d	Grants or s	•						<del></del>				٠
е		nditures for facilities										
	and progra				<del>-  </del>			<del></del>				<del></del>
T		tive expenses									<del> </del>	- t
g	End of year	e estimated percentage	o of the our	ront year and ha	longo (ling 1	a column (	all bold an				L	
2		gnated or quasi-endov		rent year end ba	%	y, coluitiii (a	a)) Helu as.					
a		endowment	virierit 📂	%								
b		y restricted endowmer	,,		%							
C		ntages in lines 2a, 2b, a		·	, 0							
32	-	ndowment funds not i			anization the	at are held a	and administe	ered for the	organiz	ation		
Ja	by	naownene ranas noch	ii iilo posse	ossion or the orga	211124(1011 (116	at are field t	and damminote	3100 101 1110	organiz	ation	Ţ,	Yes No
	-	ed organizations									3a(i)	105 110
	• •	organizations									3a(ii)	
ь	• •	3a(ii), are the related o	rganizations	s listed as require	ed on Sche	dule B?					3b	
4		Part XIV the intended	-									<del></del>
Pai		nd, Buildings, and										
		escription of property		(a) Cost			t or other	(c) Acc	umulate	d	(d) Book	value
				basis (inv			(other)	1	eciation		` '	
1a	Land											
b	Buildings											
С	Leasehold	improvements										
d	Equipment					10	4,351.	9	1,4	34.	12	,917.
<u>е</u>	Other											
Tota	I. Add lines	1a through 1e. (Colum	n (d) must e	qual Form 990, I	Part X, colui	nn (B), line	10(c))				12	917.

(10)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)

(9)

	dule D (Form 990) 2011 I-CAR EDUCATION FOUNDATION			<u> 36-3</u>	3768028	Page 4
Par	t XI Reconciliation of Change in Net Assets from Form 990 to	Audited Fina	incial Stat	ement		
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1	<u>.</u>	4,138,	
2	Total expenses (Form 990, Part IX, column (A), line 25)		2		4,072,	
3	Excess or (deficit) for the year Subtract line 2 from line 1		3		65,	<u>810.</u>
4	Net unrealized gains (losses) on investments		4		2,	220.
5	Donated services and use of facilities		5			
6	Investment expenses		6			
7	Prior period adjustments		7			<del> </del>
8	Other (Describe in Part XIV)		8		<del></del>	
9	Total adjustments (net). Add lines 4 through 8		9			<u>220.</u>
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and		10			030.
Par	t XII Reconciliation of Revenue per Audited Financial Stateme	nts With Rev	enue per l	Return		
1	Total revenue, gains, and other support per audited financial statements			1 1	4,140,	654.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	1 1				
а	Net unrealized gains on investments	2a	2,220	-		
b	Donated services and use of facilities	2b		-		
С	Recoveries of prior year grants	2c		-		
d	Other (Describe in Part XIV)	2d	<del> </del>	-	•	000
е	Add lines 2a through 2d			2e	2, 4,138,	424
3	Subtract line 2e from line 1			3	4,138,	434.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	1.1				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		-		
b	Other (Describe in Part XIV)	4b		<b>-</b>		0
C	Add lines 4a and 4b			4c 5	4,138,	0.
5 Dar	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)  † XIII Reconciliation of Expenses per Audited Financial Stateme	ents With Fx	nenses ne			474.
	Total expenses and losses per audited financial statements	JITO TITEL EX	ponico po	1	4,072,	624.
1	Amounts included on line 1 but not on Form 990, Part IX, line 25				_ 1,0,2,	024
	Donated services and use of facilities	2a		1 1		
a	Prior year adjustments	2b		1 1		
b	Other losses	2c		1		
d	Other (Describe in Part XIV)	2d		7		
_	Add lines 2a through 2d			2e		0.
3	Subtract line 2e from line 1			3	4,072,	624.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1					
-	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
	Other (Describe in Part XIV)	4b		7		
	Add lines 4a and 4b			4c		0.
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5	4,072,	624.
Pai	t XIV Supplemental Information					
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part II	l, lines 1a and 4;	Part IV, lines	1b and 2	b, Part V, line	1, Part
X, lını	e 2; Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also comp	lete this part to p	provide any ac	dditional	information	
			<del></del>			
		<u> –</u>			٨.	
				•	<del>_</del>	
					•	
				Sahadi	ule D /Form 00	20) 2011

#### SCHEDULE G (Form 990 or 990-EZ)

## **Supplemental Information Regarding Fundraising or Gaming Activities**

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Attach to Form 990 or Form 990-EZ. ► See separate instructions **Employer identification number** Name of the organization I-CAR EDUCATION FOUNDATION 36-3768028 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17 Form 990-EZ filers are not Part I required to complete this part 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply Solicitation of non-government grants Mail solicitations Solicitation of government grants Internet and email solicitations h Special fundraising events Phone solicitations In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? \_\_\_\_ Yes ☐ No b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (v) Amount paid (iii) Dıa (vi) Amount paid (i) Name and address of individual (iv) Gross receipts to (or retained by) fundraiser have custody (ii) Activity to (or retained by) fundraiser or entity (fundraiser) from activity organization listed in col (i) contributions' Yes 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

132081 01-23-12

Schedule G (Form 990 or 990-EZ) 2011

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

132082 01-23-12

Schedule G (Form 990 or 990-EZ) 2011

	36-3768028
1 Does the organization operate gaming activities with nonmembers?	└ Yes └
2 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity forme	
to administer charitable gaming?	,
3 Indicate the percentage of gaming activity operated in	
a The organization's facility	13a
<b>b</b> An outside facility	13b
4 Enter the name and address of the person who prepares the organization's gaming/special events books and re-	ecords
Name	
Address	
5a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes
b If "Yes," enter the amount of gaming revenue received by the organization ▶\$ and the	amount
of gaming revenue retained by the third party > \$	amount
c If "Yes," enter name and address of the third party	
Name >	
Address ►	
6 Gaming manager information	
Name	
Gaming manager compensation > \$	
Description of services provided	
Description of services provided P	
Director/officer Employee Independent contractor	
Director/onice: Employee maependent contractor	
17 Mandatory distributions	
a Is the organization required under state law to make charitable distributions from the gaming proceeds to	
retain the state gaming license?	Yes
•	
retain the state gaming license?	
retain the state gaming license?  b Enter the amount of distributions required under state law to be distributed to other exempt organizations or sponganization's own exempt activities during the tax year > \$	pent in the
retain the state gaming license?  b Enter the amount of distributions required under state law to be distributed to other exempt organizations or sponganization's own exempt activities during the tax year ► \$  Part IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b,	columns (iii) and (v), and Pa
retain the state gaming license?  b Enter the amount of distributions required under state law to be distributed to other exempt organizations or sponganization's own exempt activities during the tax year > \$	columns (iii) and (v), and Pa
retain the state gaming license?  b Enter the amount of distributions required under state law to be distributed to other exempt organizations or sponganization's own exempt activities during the tax year ► \$  Part IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b,	columns (iii) and (v), and Pa
retain the state gaming license?  b Enter the amount of distributions required under state law to be distributed to other exempt organizations or sponganization's own exempt activities during the tax year ► \$  Part IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b,	columns (iii) and (v), and Pa
retain the state gaming license?  b Enter the amount of distributions required under state law to be distributed to other exempt organizations or sponganization's own exempt activities during the tax year ► \$  Part IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b,	columns (iii) and (v), and Pa
retain the state gaming license?  b Enter the amount of distributions required under state law to be distributed to other exempt organizations or sponganization's own exempt activities during the tax year ► \$  Part IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b,	columns (iii) and (v), and Pa
retain the state gaming license?  b Enter the amount of distributions required under state law to be distributed to other exempt organizations or sponganization's own exempt activities during the tax year ► \$  Part IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b,	columns (iii) and (v), and Pa
retain the state gaming license?  b Enter the amount of distributions required under state law to be distributed to other exempt organizations or sponganization's own exempt activities during the tax year ► \$  Part IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b,	columns (iii) and (v), and Pa
retain the state gaming license?  b Enter the amount of distributions required under state law to be distributed to other exempt organizations or sponganization's own exempt activities during the tax year ► \$  Part IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b,	columns (iii) and (v), and Pa
retain the state gaming license?  b Enter the amount of distributions required under state law to be distributed to other exempt organizations or sponganization's own exempt activities during the tax year ► \$  Part IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b,	columns (iii) and (v), and Pa
retain the state gaming license?  b Enter the amount of distributions required under state law to be distributed to other exempt organizations or sponganization's own exempt activities during the tax year ► \$  Part IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b,	columns (iii) and (v), and Pa
retain the state gaming license?  b Enter the amount of distributions required under state law to be distributed to other exempt organizations or sponganization's own exempt activities during the tax year ► \$  Part IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b,	columns (iii) and (v), and Pa
retain the state gaming license?  b Enter the amount of distributions required under state law to be distributed to other exempt organizations or sponganization's own exempt activities during the tax year ► \$  Part IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b,	columns (iii) and (v), and Pa
retain the state gaming license?  b Enter the amount of distributions required under state law to be distributed to other exempt organizations or sponganization's own exempt activities during the tax year ► \$  Part IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b,	columns (iii) and (v), and Pa
retain the state gaming license?  b Enter the amount of distributions required under state law to be distributed to other exempt organizations or sponganization's own exempt activities during the tax year ► \$  Part IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b,	columns (iii) and (v), and Pa
retain the state gaming license?  b Enter the amount of distributions required under state law to be distributed to other exempt organizations or sponganization's own exempt activities during the tax year ► \$  Part IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b,	columns (iii) and (v), and Pa
retain the state gaming license?  b Enter the amount of distributions required under state law to be distributed to other exempt organizations or sponganization's own exempt activities during the tax year ► \$  Part IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b,	columns (iii) and (v), and Pa
retain the state gaming license?  b Enter the amount of distributions required under state law to be distributed to other exempt organizations or sponganization's own exempt activities during the tax year ► \$  Part IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b,	columns (iii) and (v), and Pa
retain the state gaming license?  b Enter the amount of distributions required under state law to be distributed to other exempt organizations or sponganization's own exempt activities during the tax year ► \$  Part IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b,	columns (iii) and (v), and Pa
retain the state gaming license?  b Enter the amount of distributions required under state law to be distributed to other exempt organizations or sponganization's own exempt activities during the tax year ► \$  Part IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b,	columns (iii) and (v), and Pa
retain the state gaming license?  b Enter the amount of distributions required under state law to be distributed to other exempt organizations or sporganization's own exempt activities during the tax year   Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional distributions.	columns (iii) and (v), and Paal information (see instruction
retain the state gaming license?  b Enter the amount of distributions required under state law to be distributed to other exempt organizations or sporganization's own exempt activities during the tax year   Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional distributions.	columns (iii) and (v), and Pa

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

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

OMB No 1545-0047 Open to Public

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

Employer identification number Inspection

36-3768028 X Yes d "Vee" to Form 000 Dart IV line 21 for any 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 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States I-CAR EDUCATION FOUNDATION Ratio General Information on Grants and Assistance criteria used to award the grants or assistance?

**2** 

原理派職隊   Grants and Other Assistance to Governments and Organizations in the United States. Complete if the Organization answered the Covernments and Orbert this box if no one recipient received more than \$5,000. Part ill can be dublicated if additional space is needed	sovernments and	i Organizations in the box if no one recipien	t received more th	omplete II the organian \$5.000 Part II	can be duplicated if a	ons in the United States, Complete in the Organization at swelfed these to Form 350, Farmy, in a recipient received more than \$5,000. Part ill can be duplicated if additional space is needed	ded • • • • • • • • • • • • • • • • • •
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
						SOFTWARE	
BRIDGERLAND APPLIED TECHNOLOGY						SUBSCRIPTIONS	TO SUPPORT SECONDARY AND
COLLEGE - 1301 N. 600 WEST -						AND COLLISION	POST SECONDARY COLLISION
LOGAN, UT 84321	87-0294483		0.	80,247.	FMV	REPAIR SUPPLIES	REPAIR TRAINING PROGRAMS.
ADDITED TECHNOLOGY CENTER							TO SUPPORT SECONDARY AND
1301 N. 600 WEST						COLLISION REPAIR	COLLISION REPAIR POST SECONDARY COLLISION
ROCK HILL SC 29732	57-6000842		0.	25,118.	FMV	SUPPLIES	REPAIR TRAINING PROGRAMS.
						SOFTWARE	
JOHN JAY HIGH SCHOOL						SUBSCRIPTIONS	TO SUPPORT SECONDARY AND
7611 MARBACH ROAD						AND COLLISION	POST SECONDARY COLLISION
SAN ANTONIO, TX 78227	01-5915002		0	22,749,FMV	FMV	REPAIR SUPPLIES	REPAIR TRAINING PROGRAMS.
			i			REPAIR MANUALS,	
KENNEDY KING COLLEGE						SOFTWARE	TO SUPPORT SECONDARY AND
6301 S. HALSTED STREET						SUBSCRIPTIONS	POST SECONDARY COLLISION
CHICAGO, IL 60621	01-5915002		0	23,648.	FMV	AND REPAIR	REPAIR TRAINING PROGRAMS.
						SOFTWARE	
MARICOPA SKILL CENTER						SUBSCRIPTIONS	TO SUPPORT SECONDARY AND
1245 E BUCKEYE ROAD						AND COLLISION	POST SECONDARY COLLISION
PHOENIX, AZ 85034	40-4720003		0	19,729.	FMV	REPAIR SUPPLIES	REPAIR TRAINING PROGRAMS.
WAXWELL HS OF TECHNOLOGY							TO SUPPORT SECONDARY AND
990 WOELVANEV LANE						COLLISION REPAIR	COLLISION REPAIR POST SECONDARY COLLISION
I AMBENCENTITE CA 30044	58-600054		C	2 104 PMV	PMV	SIIPPI,TES	REPAIR TRAINING PROGRAMS
DAMMENCEVILLE, GD JOURS	±040000-00		,	* - > + ' =	A 137 1	2011 1770	

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

SEE PART IV FOR COLUMN (G) DESCRIPTIONS 3 Enter total number of other organizations listed in the line 1 table
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (2011)

FOUNDATION	
EDUCATION E	
I-CAR	
I (Form 990)	

Schedule I (Form 990) I – CAR EDUCATION FOUNDATION  Part II   Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)	I - CAR EDUCATION FOUNDATION	UNDATION vernments and Orga	nizations in the Ur	nited States (Sche	dule 1 (Form 990), Pa		36-3768028 Page 1
(a) Name and address of organization or government	( <b>b</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
R.L. TURNER HIGH SCHOOL 1600 S JOSEY LANE						SOFTWARE SUBSCRIPTIONS AND COLLISION	TO SUPPORT SECONDARY AND POST SECONDARY COLLISION
CARROLLTON, TX 75006 SARASOTA COUNTY TECH INST 4460 BENEVA ROAD, BLDG 27 SARASOTA PL 34233	05-7903001		0	35,409,8	VM VM	REPAIR SUPPLIES SOFTWARE SUBSCRIPTIONS AND COLLISION REPAIR SUPPLIES	REPAIR TRAINING PROGRAMS.  TO SUPPORT SECONDARY AND POST SECONDARY COLLISION REPAIR TRAINING PROGRAMS.
MMMUN ON S	38-2310748		0	771.	PMV	SOFTWARE	TO SUPPORT SECONDARY AND POST SECONDARY COLLISION REPAIR TRAINING PROGRAMS.
ALTA HIGH SCHOOL 11055 S 1000 E SANDY, UT 84094	26-3770988		o	7 670	N M M	REPAIR MANUALS, CDS, GUIDES AND REPAIR SUPPLIES	TO SUPPORT SECONDARY AND POST SECONDARY COLLISION REPAIR TRAINING PROGRAMS.
	74-6000030		O		D. W.	SOFTWARE SUBSCRIPTIONS AND COLLISION REPAIR SUPPLIES	TO SUPPORT SECONDARY AND POST SECONDARY COLLISION REPAIR TRAINING PROGRAMS
1 8	57-6000369		Ô		FMV	SOFWARE SUBSCRIPTIONS AND COLLISION REPAIR SUPPLIES	TO SUPPORT SECONDARY AND POST SECONDARY COLLISION REPAIR TRAINING PROGRAMS.
AREA 30 CAREER CENTER 1 N. CALBERT WAY GREENCASTLE, IN 46135	18-8475533		0,	8,785,	FMV	COLLISION REPAIR SUPPLIES	TO SUPPORT SECONDARY AND POST SECONDARY COLLISION REPAIR TRAINING PROGRAMS,
ATLANTIC TECHNICAL CENTER & TECHNICAL HS - 4700 COCONUT CREEK PARKWAY - COCONUT CREEK, FL 33063	59-6000530		0	18,145,	PMV	SOFTWARE SUBSCRIPTIONS AND COLLISION REPAIR SUPPLIES	TO SUPPORT SECONDARY AND POST SECONDARY COLLISION REPAIR TRAINING PROGRAMS.
BAY PATH REG VOC TEC H.S. 57 OLD MUGGETT HILL RD. CHARLTON, MA 01507	04-2427203		0	7,118,	FMV	REPAIR MANUALS, CDS, GUIDES AND REPAIR SUPPLIES	TO SUPPORT SECONDARY AND POST SECONDARY COLLISION REPAIR TRAINING PROGRAMS. Schedule (Form 990)

28

Schedule I (Form 990) I – CAR EDUCATION FOUNDATION

Part II | Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II )

Part II Continuation of Grants and Other Assistance to Governments a	איי טיי שוושומומפא			med States (Schill		(	
(a) Name and address of organization or government	<b>(b)</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
						SOFTWARE	
BELMONT CAREER CENTER						SUBSCRIPTIONS	TO SUPPORT SECONDARY AND
110 FOX SHANNON PLACE						AND COLLISION	POST SECONDARY COLLISION
ST, CLAIRSVILLE, OH 43950	34-1021397		0.	16,389.	FMV	REPAIR SUPPLIES	REPAIR TRAINING PROGRAMS.
						SOFTWARE	
BLUE RIDGE COMMUNITY COLLEGE						SUBSCRIPTIONS	TO SUPPORT SECONDARY AND
180 W. CAMPUS DR.						AND COLLISION	POST SECONDARY COLLISION
HENDERSONVILLE, NC 28791	53-0175113		0	8,875.	FMV	REPAIR SUPPLIES	REPAIR TRAINING PROGRAMS.
						REPAIR MANUALS,	
BLUE RIVER CAREER PROGRAMS						SOFTWARE	TO SUPPORT SECONDARY AND
801 ST. JOSEPH STREET						SUBSCRIPTIONS	POST SECONDARY COLLISION
SHELBYVILLE, IN 46176	35-1263948		0.	14,347.	FMV	AND REPAIR	REPAIR TRAINING PROGRAMS.
BOSSIER PARISH TECHNICAL SCHOOL							TO SUPPORT SECONDARY AND
						SOFTWARE	POST SECONDARY COLLISION
	1331000 20		•	0 0			CARACTOCIC CONTRACTOCIC CARACTOCIC
1	¥00T667-17				A EL	SOBSCRIETIONS	NEFAIR TRAINING FROGRAMS.
RETURN OR HORT TRIONERS						REPATE MANIJALS	THE SHOULD SECONDARY AND
						, constant surround	
AKM						CDS, GUIDES AND	FOST SECONDARY COLLISION
FINCASTLE, VA 24090	54-6110055		0.	10,998.	FMV	REPAIR SUPPLIES	REPAIR TRAINING PROGRAMS.
						SOFTWARE	
BUCKS COUNTY TECHNICAL HIGH SCHOOL						SUBSCRIPTIONS	TO SUPPORT SECONDARY AND
610 WISTAR ROAD						AND COLLISION	POST SECONDARY COLLISION
FAIRLESS HILLS, PA 19030	23-6050139		0	9,012.	FMV	REPAIR SUPPLIES	REPAIR TRAINING PROGRAMS,
						SOFTWARE	
BUTLER COMMUNITY COLLEGE						SUBSCRIPTIONS	TO SUPPORT SECONDARY AND
901 S. HAVERHILL						AND COLLISION	POST SECONDARY COLLISION
EL DORADO, KS 67042	48-0690383		0	14,289,	FMV	REPAIR SUPPLIES	REPAIR TRAINING PROGRAMS.
						SOFTWARE	
CA BOCES ELLICOTTVILLE CENTER						SUBSCRIPTIONS	TO SUPPORT SECONDARY AND
5550 ROUTE 242						AND COLLISION	POST SECONDARY COLLISION
ELLICOTTVILLE, NY 14731	16-6006266		0	8,174.	FMV	REPAIR SUPPLIES	REPAIR TRAINING PROGRAMS.
						SOFTWARE	
CADDO CAREER & TECHNOLOGY CENTER						SUBSCRIPTIONS	TO SUPPORT SECONDARY AND
5950 UNION AVENUE						AND COLLISION	POST SECONDARY COLLISION
SHREVEPORT, LA 71108			0	8,874,FMV	PMV .	REPAIR SUPPLIES	REPAIR TRAINING PROGRAMS.
							Schedule I (Form 990)

	Organizations in the United States (Schedule I (Form 990), Part II.)
I-CAR EDUCATION FOUNDATION	Governments and
EDUCATION	Other Assistance to
I-CAR	of Grants and
le I (Form 990)	Continuation
Sched	Part II

Part II   Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule   (Form 990), Part II.)	Assistance to GO	vernments and Organ	nizations in the Ur	ited States (SCITE	dule I (Form 990), Pa	(:III)	
(a) Name and address of organization or government	( <b>b</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
CAPE FEAR COMMUNITY COLLEGE 411 N. FRONT STREET WILMINGTON, NC 28401	56-0792881		0	31,684,	ΔИЗ	SOFTWARE SUBSCRIPTIONS AND COLLISION REPAIR SUPPLIES	TO SUPPORT SECONDARY AND POST SECONDARY COLLISION REPAIR TRAINING PROGRAMS.
CARSON HIGH SCHOOL 1111 N. SALIMAN RD., P.O.BOX 603 CARSON CITY NV 89702	88-6000130		Ó	7 434.	<b>≥</b>	REPAIR MANUALS, CDS, GUIDES AND REPAIR SUPPLIES	TO SUPPORT SECONDARY AND POST SECONDARY COLLISION REPAIR TRAINING PROGRAMS.
CATTARAUGUS-ALLEGANY BOCES 5550 ROUTE 242 ELLICOTTVILLE, NY 14731	16-6006266		0	15,466,	FMV	SOFTWARE SUBSCRIPTIONS AND COLLISION REPAIR SUPPLIES	TO SUPPORT SECONDARY AND POST SECONDARY COLLISION REPAIR TRAINING PROGRAMS.
CENTRAL ACADEMY OF TECHNOLOGY & ARTS - 600 BREWER DR MONROE, NC 28112	26-1542614		0	8,235,	FMV	REPAIR MANUALS, CDS, GUIDES AND REPAIR SUPPLIES	TO SUPPORT SECONDARY AND POST SECONDARY COLLISION REPAIR TRAINING PROGRAMS.
CENTRAL PA INSTITUTE OF SCIENCE & TECHNOLOGY - 540 N. HARRISON ROAD - PLEASANT GAP, PA 16823			0,	19,466,	VM.	SOFTWARE	TO SUPPORT SECONDARY AND POST SECONDARY COLLISION REPAIR TRAINING PROGRAMS,
CH HIG Y STRE 5508			0.	27,571,	∧w.a	SOFTWARE	TO SUPPORT SECONDARY AND POST SECONDARY COLLISION REPAIR TRAINING PROGRAMS.
	95-6005521		0.0		FMV	SOFTWARE SUBSCRIPTIONS AND COLLISION REPAIR SUPPLIES	TO SUPPORT SECONDARY AND POST SECONDARY COLLISION REPAIR TRAINING PROGRAMS.
CHANTILLY ACADEMY 4201 STRINGFELLOW ROAD CHANTILLY, VA 20151	54-0805373		0	33,996,	FMV	REPAIR MANUALS, SOFTWARE SUBSCRIPTIONS AND REPAIR	TO SUPPORT SECONDARY AND POST SECONDARY COLLISION REPAIR TRAINING PROGRAMS.
CHATTAHOOCHEE TECHNICAL COLLEGE 100 CAMPUS DRIVE JASPER, GA 30143	58-1788754		ó	VM 74	Ď.	SOFTWARE SUBSCRIPTIONS AND COLLISION REPAIR SUPPLIES	TO SUPPORT SECONDARY AND POST SECONDARY COLLISION REPAIR TRAINING PROGRAMS.
							Schedule I (Form 990)

I-CAR EDUCATION FOUNDATION Schedule I (Form 990)

REPAIR TRAINING PROGRAMS. REPAIR TRAINING PROGRAMS. REPAIR TRAINING PROGRAMS. TO SUPPORT SECONDARY AND REPAIR TRAINING PROGRAMS. EPAIR TRAINING PROGRAMS. REPAIR TRAINING PROGRAMS, REPAIR TRAINING PROGRAMS, OST SECONDARY COLLISION OST SECONDARY COLLISION OST SECONDARY COLLISION POST SECONDARY COLLISION TO SUPPORT SECONDARY AND TO SUPPORT SECONDARY AND OST SECONDARY COLLISION TO SUPPORT SECONDARY AND OST SECONDARY COLLISION REPAIR TRAINING PROGRAMS, TO SUPPORT SECONDARY AND OST SECONDARY COLLISION REPAIR TRAINING PROGRAMS TO SUPPORT SECONDARY AND TO SUPPORT SECONDARY AND TO SUPPORT SECONDARY AND TO SUPPORT SECONDARY AND OST SECONDARY COLLISION OST SECONDARY COLLISION (h) Purpose of grant or assistance (g) Description of non-cash assistance REPAIR SUPPLIES REPAIR SUPPLIES REPAIR SUPPLIES EPAIR SUPPLIES EPAIR SUPPLIES EPAIR SUPPLIES EPAIR SUPPLIES REPAIR MANUALS UBSCRIPTIONS ND COLLISION ND COLLISION UBSCRIPTIONS UBSCRIPTIONS ND COLLISION SUBSCRIPTIONS AND COLLISION SUBSCRIPTIONS SUBSCRIPTIONS UBSCRIPTIONS ND COLLISION ND COLLISION ND COLLISION UBSCRIPTIONS ND SOFTWARE QUIPMENT OFTWARE SOPTWARE SOPTWARE SOPTWARE SOPTWARE Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II) (book, FMV, appraisal, other) (f) Method of valuation FR FMV FKV FMV 16,627, FMV 47,287, 10,771, 24,849. 21,070, 14,855, 8,874 17,829, (e) Amount of non-cash assistance 0 ાં o (d) Amount of cash grant (c) IRC section if applicable 48-0698570 72-6000235 56-0849556 71-6021200 91-1523641 31-0749724 (p) EIN CMAK PROFESSIONAL CAREER INSTITUTE CENTER - 736 E. COLLEGE ST. - LAKE SCIENCE-TECHNOLOGY - 1617 CEDAR COLLEGE STREET T I VOCATIONAL CLOVER PARK TECHNICAL COLLEGE COFFEYVILLE COMMUNITY COLLEGE (a) Name and address of organization or government CLEVELAND COMMUNITY COLLEGE ROAD - CHESAPEAKE, VA 23322 4500 STEILACOOM BLVD. S.W. CONWAY AREA CAREER CENTER WEST HEMPSTEAD, NY 11552 COLLEGE OF WESTERN IDAHO 300 HEMPSTEAD TURNPIKE 11627 STATE ROUTE 243 CHESAPEAKE CENTER FOR 1464 UNIVERSITY DRIVE COLLINS CAREER CENTER CHESAPEAKE, OH 45619 137 SOUTH POST ROAD LAKEWOOD, WA 98499 COLUMBUS, KS 66725 CHARLES, LA 70607 SHELBY, NC 28152 CONWAY, AR 72034 BOISE, ID 83706 2300 PRINCE ST. 509 W. ELM

Schedule I (Form 990) I – CAR EDUCATION FOUNDATION

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 (b) EIN (c) IRC section organization or government (a) EIN (f) EIN (f) EIN (f) IRC section (d) Amount of Amount	(a)	(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
CYPRESS COLLEGE 9200 VALLEY VIEW CYPRESS CA 90630	92-2394131		0	7,760	FMV	COLLISION REPAIR SUPPLIES	TO SUPPORT SECONDARY AND COLLISION REPAIR POST SECONDARY COLLISION SUPPLIES REPAIR TRAINING PROGRAMS.
COUNT STH S	41-1687554		0.	26,812.	FMV	SOPTWARE SUBSCRIPTIONS AND COLLISION REPAIR SUPPLIES	
. ~			0	7,200.	ЛЖД	SOFTWARE	TO SUPPORT SECONDARY AND POST SECONDARY COLLISION REPAIR TRAINING PROGRAMS.
DEKALB COUNTY TECHNOLOGY CENTER 409 MAIN STREET EAST RAINSVILLE AL 35986	63-6000850		0	38 427	^₩A	REPAIR MANUALS, SOFTWARE SUBSCRIPTIONS AND REPAIR	TO SUPPORT SECONDARY AND POST SECONDARY COLLISION REPAIR TRAINING PROGRAMS.
OUNT:	23-2820847		0		EMV	SOFTWARE	TO SUPPORT SECONDARY AND POST SECONDARY COLLISION REPAIR TRAINING PROGRAMS.
DUBISKI CAREER HIGH SCHOOL 2990 S, HIGHWAY 161 GRAND PRAIRIE, TX 75052	05-7910010		0.0	24,789,	FMV	SOFTWARE SUBSCRIPTIONS AND COLLISION REPAIR SUPPLIES	TO SUPPORT SECONDARY AND POST SECONDARY COLLISION REPAIR TRAINING PROGRAMS,
EASTSIDE TECHNICAL CENTER 2208 LIBERTY ROAD LEXINGTON, KY 40509	61-6001059		0	28,858,	FMV	SOFTWARE SUBSCRIPTIONS AND COLLISION REPAIR SUPPLIES	TO SUPPORT SECONDARY AND POST SECONDARY COLLISION REPAIR TRAINING PROGRAMS.
EDEN CAREER-TECHNICAL CENTER 45 COUNTRY ROAD 33 ASHVILLE, AL 35953	63-6001061		0.	7,454.	FMV	REPAIR MANUALS, CDS, GUIDES AND REPAIR SUPPLIES	TO SUPPORT SECONDARY AND POST SECONDARY COLLISION REPAIR TRAINING PROGRAMS.
ELLICOTTVILLE CTE 5550 ROUTE 242 ELLICOTTVILLE, NY 14731			0.	6,714,	PMV	REPAIR MANUALS, CDS, GUIDES AND REPAIR SUPPLIES	TO SUPPORT SECONDARY AND POST SECONDARY COLLISION REPAIR TRAINING PROGRAMS.  Schedule I (Form 990)

32

α	)
C	1
$\subset$	)
α	)
V	)
-	-
ď	)
- 1	
V	-
~	)

NC	ind Organizations in the United States (Schedule I (Form 990), Part II.)	
(Form 990) I-CAR EDUCATION FOUNDATION	continuation of Grants and Other Assistance to Governments and Org	
Schedule	Part II	

ratin Collingation of Graffs and Office to Governments and Organizations in the Office Science (Company), and the	Assistance to do				··· · · · · · · · · · · · · · · · · ·	,,	
(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
ממחוומי ממממגי המיצוו חמים							תוא עמארתאסטמט המסממונט סה
FORT PAILED CARLED CENTER 600 JACK GIBBS BLVD.						SOFTWARE	POST SECONDARY COLLISION
COLUMBUS, OH 43235	31-6400416		0	30,811	FMV	SUBSCRIPTIONS	REPAIR TRAINING PROGRAMS.
						SOFTWARE	
FOUR COUNTY AREA VOCATIONAL						SUBSCRIPTIONS	TO SUPPORT SECONDARY AND
COOPERATIVE - 1607 E. DOWLING						AND COLLISION	POST SECONDARY COLLISION
STREET - KENDALLVILLE, IN 46755	35-1074089		0	20,649	FMV	REPAIR SUPPLIES	REPAIR TRAINING PROGRAMS.
FOX VALLEY TECHNICAL COLLEGE						SOFTWARE	OF STIPPORT SECONDARY AND
1825 N. BLUEMOUND DRIVE						AND COLLISION	POST SECONDARY COLLISION
APPLETON, WI 54912	39-1087276		0	28,487	FMV	REPAIR SUPPLIES	REPAIR TRAINING PROGRAMS.
						REPAIR MANUALS,	
FRED W. EBERLE TECHNICAL CENTER						SOFTWARE	TO SUPPORT SECONDARY AND
RT. 5 BOX 2						SUBSCRIPTIONS	POST SECONDARY COLLISION
BUCKHANNON, WV 2601	55-6000407		0	34,667,	FMV	AND REPAIR	REPAIR TRAINING PROGRAMS.
						SOFTWARE	
GATEWAY COMMUNITY & TECHNICAL				-		SUBSCRIPTIONS	TO SUPPORT SECONDARY AND
COLLEGE - 1025 AMSTERDAM ROAD -						AND COLLISION	POST SECONDARY COLLISION
COVINGTON, KY 41011	61-1320380		0	14,829,	FMV	REPAIR SUPPLIES	REPAIR TRAINING PROGRAMS.
GEORGE STONE TECHNICAL CENTER							TO SUPPORT SECONDARY AND
2400 LONGLEAF DR.						SOFTWARE	POST SECONDARY COLLISION
PENSACOLA, FL 32526	59-6000597		0	19,171,	FMV	SUBSCRIPTIONS	REPAIR TRAINING PROGRAMS.
GLOBAL ALLIANCE FOR STUDENT							
							TO SUPPORT SECONDARY AND
CONTINOUS EDUCATI - 5050 HOLLYWOOD						SOFTWARE	POST SECONDARY COLLISION
BLVD, - LOS ANGELES, CA 90027			0	21,271,	FMV	SUBSCRIPTIONS	REPAIR TRAINING PROGRAMS.
GOLDEN ISLES CAREER ACADEMY							TO SUPPORT SECONDARY AND
4404 GLYNCO PARKWAY						COLLISION REPAIR	COLLISION REPAIR POST SECONDARY COLLISION
BRUNSWICK, GA 31525	20-3947219		0	5,211,F	FMV	SUPPLIES	REPAIR TRAINING PROGRAMS.
						SOFTWARE	
GRANGER HIGH SCHOOL						SUBSCRIPTIONS	TO SUPPORT SECONDARY AND
3600			•			AND COLLISION	POST SECONDARY COLLISION
WEST VALLEY, UT 84119	87-6000494		0.	111,193,FMV		REPAIR SUPPLIES	REPAIR TRAINING PROGRAMS.
							Schedule I (Form 990)

_
=
$\circ$
н
H
Æ
А
z
FOUNDATION
Ö
Ē
TION
Ħ
$\simeq$
Ξ
5
EDUCAT
$\mathbf{c}$
$\Xi$
Д
ы
~
볏
-CAR
Ÿ
. ! .
H
8
ഗ്
F
늦
(Form 990)

Schedule I (Form 990) I - CAR EDU	EDUCATION FOUNDATION	UNDATION					36-3768028 Page 1
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	ernments and Organ	nizations in the Ur	nited States (Sche	dule 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, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GREEN RIVER COMMUNITY						REPAIR MANUALS	TO SUPPORT SECONDARY AND
12041 SE 320TH ST.						CDS, GUIDES AND	POST SECONDARY COLLISION
AUBURN, WA 98092	91-0814013		0.	7,920,1	FMV	REPAIR SUPPLIES	REPAIR TRAINING PROGRAMS.
מאם יואר יוארווויארמה מייייוויאנום האם						REPAIR MANUALS,	רואג עמגרווגיסמט שמסממיוים סח
GREENVILLE TECHNICAL COLLEGE 620 S. PLEASANTBURG DRIVE						SUBSCRIPTIONS	TO SUFFICIT SECONDARY AND POST SECONDARY COLLISION
GREENVILLE, SC 29606	57-0420667		0	38,471,	FMV	AND REPAIR	REPAIR TRAINING PROGRAMS.
			-			SOFTWARE	
) TECHNICAL			_				PPORT SECC
601	,		,			AND COLLISION	POST SECONDARY COLLISION
JAMESTOWN, NC 27282	56-0792519		0	31,149,	FMV	REPAIR SUPPLIES	REPAIR TRAINING PROGRAMS.
עריר זיאוויםם י מופמגי גפמג ממספתמניי						ט זאוווואא מד אמממ	. מייא אמאמוניסטמט שמטממונט סש
KU AKEA CAKEEK & TEC							TO SUPPORT SECONDARY AND
_						CDS, GUIDES AND	POST SECONDARY COLLISION
RIVER JCT, VT 05001	03-6000504		0	7,856	PMV	REPAIR SUPPLIES	REPAIR TRAINING PROGRAMS.
						SOFTWARE	
HEARTLAND CAREER CENTER						SUBSCRIPTIONS	TO SUPPORT SECONDARY AND
79 S. 200 W						AND COLLISION	POST SECONDARY COLLISION
WABASH, IN 46992	35-1113677		0	20,889,	FMV	REPAIR SUPPLIES	REPAIR TRAINING PROGRAMS.
CHIMAGO, CHICAGO, MOCHAGIA						REPAIR MANUALS,	מונב אתבתונטטבט שתטמתונט טב
,						DOLLWARE	TO SUPPORT SECONDARI AND
11501 E. 350 HIGHWAY						SUBSCRIPTIONS	POST SECONDARY COLLISION
RAYTOWN, MI 64138	44-6004129		0	31,877,	FMV	AND REPAIR	REPAIR TRAINING PROGRAMS,
HOUSTON COMMUNITY COLLEGE						REPAIR MANUALS,	TO SUPPORT SECONDARY AND
4638 AIRLINE DRIVE						CDS, GUIDES AND	POST SECONDARY COLLISION
HOUSTON TX 77022			0.	7,675,	FMV	REPAIR SUPPLIES	REPAIR TRAINING PROGRAMS.
						SOFTWARE	
HUTCHINSON CAREER & TECHNICAL						SUBSCRIPTIONS	TO SUPPORT SECONDARY AND
ON ACADEMY - 8						AND COLLISION	POST SECONDARY COLLISION
CIRCLE - HUTCHINSON, KS 67501	48-6015433		0	20,125,	FMV	REPAIR SUPPLIES	REPAIR TRAINING PROGRAMS.
						SOFTWARE	4
IRMO HIGH SCHOOL						SUBSCRIPTIONS	TO SUPPORT SECONDARY AND
<u> </u>						AND COLLISION	POST SECONDARY COLLISION
COLUMBIA SC, SC 29210	57-0671609		0.	10,450.	FMV	REPAIR SUPPLIES	REPAIR TRAINING PROGRAMS.
							Schedule I (Form 990)

34

_	
FOUNDATION	
O	
$\bar{\mathbf{H}}$	
_	
نز	
$\simeq$	
Н	
z	
$\Box$	
O	
Œ	
_	
-	
ڃ	
EDUCATION	
н	
Н	
4	
7	
$\simeq$	
=	
Р	
闰	
I-CAR	
7	
7	
Ÿ	
- 1	
н	
_	
(Form 990)	
8	
ë	
Ε	
٠Ō	
ட	

Schedule   (Form 990) I - CAR EDUCATION FOUNDATION  Part II   Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II)	CATION FO Assistance to Go	UNDATION vernments and Organ	nizations in the Ur	nited States (Sche	dule I (Form 990), Pa		36-3768028 Page 1
(a) Name and address of organization or government	( <b>b</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
INDIAN HILLS COMMUNITY COLLEGE 14383 COLLEGE AVENUE						SOFTWARE SUBSCRIPTIONS AND COLLISION	TO SUPPORT SECONDARY AND POST SECONDARY COLLISION
OTTUMWA, IA 52501	42-0923689		0	9,945,	PMV	REPAIR SUPPLIES	REPAIR TRAINING PROGRAMS.
	35-1180631		0	109,217,	EMV	SOFTWARE SUBSCRIPTIONS AND COLLISION REPAIR SUPPLIES	TO SUPPORT SECONDARY AND POST SECONDARY COLLISION REPAIR TRAINING PROGRAMS,
JOHN D, ROCKEFELLER IV CAREER CENTER - 95 ROCKYSIDE ROAD - NEW						SOFTWARE	TO SUPPORT SECONDARY AND POST SECONDARY COLLISION
CUMBERLAND, WV 26047			0	18,211.	FMV	SUBSCRIPTIONS	REPAIR TRAINING PROGRAMS.
KANSAS CITY KANSAS COMMUNITY COLLEGE - 6736 STATE AVENUE -					,	SOFTWARE SUBSCRIPTIONS AND COLLISION	TO SUPPORT SECONDARY AND POST SECONDARY COLLISION
KANSAS CITY, KS 66102	48-0697720		0	23,126.	FMV	REPAIR SUPPLIES	REPAIR TRAINING PROGRAMS.
KISHWAUKEE COLLEGE 21193 MALTA ROAD MALTA IL 60150			0	8 264	₩	COLLISION REPAIR SUPPLIES	TO SUPPORT SECONDARY AND COLLISION REPAIR POST SECONDARY COLLISION REPAIR TRAINING PROGRAMS.
1 5						SOFTWARE SUBSCRIPTIONS	TO SUPPORT SECONDARY AND
2001 KURT STREET	2770400-05		c	30 578	7740	AND COLLISION	POST SECONDARY COLLISION BEDAIR TRAINING DROCRAMS
LEXINGTON TECHNOLOGY CENTER						REPAIR MANUALS, SOFTWARE	TO SUPPORT SECONDARY AND
						SUBSCRIPTIONS	POST SECONDARY COLLISION
LEXINGTON, SC 29072	57-0670770		0	22,425.	FMV	AND REPAIR	REPAIR TRAINING PROGRAMS.
LEX LA-RAY AREA TECHNICAL CENTER	-						TO SUPPORT SECONDARY AND
2323 HIGH SCHOOL DRIVE LEXINGTON, MO 64067	44-6003208		0	7,375,	FMV	CDS, GUIDES AND REPAIR SUPPLIES	POST SECONDARY COLLISION REPAIR TRAINING PROGRAMS.
LINCOLN COLLEGE OF TECHNOLOGY							TO SUPPORT SECONDARY AND
14			•	6		SOFTWARE	POST SECONDARY COLLISION
INDIANAPOLIS, IN 46268			n n	23,430,EMV	·MV	SUBSCRIPTIONS	REPAIR TRAINING PROGRAMS. Schedule I (Form 990)

N	nd Organizations in the United States (Schedule I (Form 990), Part II)
FOUNDATIC	Governments a
I-CAR EDUCATION FOUNDATION	d Other Assistance to
I-CAR	of Grants and
le I (Form 990)	Continuation
Schedu	Part II

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule   (Form 990), Part II)	Assistance to Gov	vernments and Organ	nizations in the Ur	nited States (Sche	dule I (Form 990), Pa	ц II)	
(a) Name and address of organization or government	( <b>b)</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
LINN STATE TECHNICAL COLLEGE ONE TECHNOLOGY DRIVE LINN, MO 65051	43-1731010		0.	7,856,	PMV	REPAIR MANUALS, CDS, GUIDES AND REPAIR SUPPLIES	TO SUPPORT SECONDARY AND POST SECONDARY COLLISION REPAIR TRAINING PROGRAMS.
LUNA COMMUNITY COLLEGE 366 LUNA DRIVE LAS VEGAS. NM 87701			0	7.375	<b>\\</b>	REPAIR MANUALS, CDS, GUIDES AND REPAIR SUPPLIES	TO SUPPORT SECONDARY AND POST SECONDARY COLLISION REPAIR TRAINING PROGRAMS.
OUNTY CAREE						SOFTWARE	TO SUPPORT SECONDARY AND
CENTER - 1275 JORDAN ROAD - HUNTSVILLE, AL 35811	63-6000974		0	8,978	FMV	AND COLLISION REPAIR SUPPLIES	POST SECONDARY COLLISION REPAIR TRAINING PROGRAMS.
MAINE VOCATIONAL REGIONAL TECH						COMPUTER EQUIPMENT AND	AND TO SUPPORT SECONDARY AND PEDATE DOCT. SECONDARY COLLISION
BRUNSWICK, ME 04011			0	8,085	FMV		REPAIR TRAINING PROGRAMS.
MCGAVOCK HIGH SCHOOL 3150 MCGAVOCK PIKE						SOFTWARE SUBSCRIPTIONS AND COLLISTON	TO SUPPORT SECONDARY AND POST SECONDARY COLLISTON
NASHVILLE, TN 37214			0	8,913,	FMV	REPAIR SUPPLIES	REPAIR TRAINING PROGRAMS.
MEDFORD VOCATIONAL TECHNICAL HIGH SCHOOL - 489 WINTHROP STREET -						SOFTWARE SUBSCRIPTIONS AND COLLISION	TO SUPPORT SECONDARY AND POST SECONDARY COLLISION
MEDFORD, MA 02155	46-0010004		0.	22,301.	PMV	REPAIR SUPPLIES	REPAIR TRAINING PROGRAMS.
MERIDIAN HIGH SCHOOL 1900 W. PINE AVENUE	82.6001313		c	100 61	130g	SOFTWARE SUBSCRIPTIONS AND COLLISION	TO SUPPORT SECONDARY AND POST SECONDARY COLLISION
IH HS						SOFTWARE SUBSCRIPTIONS	TO SUPPORT SECONDARY AND
1900 WEST THOMAS ROAD PHOENIX AZ 85015			0	69 587	Δ <del>N</del>	AND COLLISION REPAIR SUPPLIES	POST SECONDARY COLLISION REPAIR TRAINING PROGRAMS
LITIA				•			TO SUPPORT SECONDARY AND
P.O. BOX 3777			c	19 152	<b>7.7</b> 8	AND COLLISION	POST SECONDARY COLLISION DEDGE TO THE PROPERTY OF STATES OF THE PROPERTY OF TH
Toron and Jumpin			140		NA.	KEFAIR SUFFLIES	REPAIR TRAINING PROGRAMS,

	ations in the United States (Schedule I (Form 990), Part II)
-CAR EDUCATION FOUNDATION	e to Governments and Organiza
el (Form 990) I – CAR EDUCAT:	Continuation of Grants and Other Assistanc
Scheduli	Part II

(a) Name and address of corganization or government or government (b) EIN (c) IRC section or ganization or government (d) Amount of cash grant or government (f) Method of cash grant or government (h) Method or government (h) Method of cash grant or government (h) Method or governme	(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
				1	į	SOFTWARE SUBSCRIPTIONS AND COLLISION	TO SUPPORT SECONDARY AND POST SECONDARY COLLISION
MESTFORD, MA ULBBO NORTH CENTRAL TECHNICAL COLLEGE 312 FORREST AVE.	30_1077003		, c	17,087	^ W 4	KEFAIK SUPPLIES SOFTWARE SUBSCRIPTIONS AND COLLISION PERALE	TO SUPPORT SECONDARY AND POST SECONDARY COLLISION DEBATE MEATHING DECEMBED
NORTH DAKOTA STATE COLLEGE OF SCIENCE - 800 6TH ST. N WAHPETON, ND 58076	45-6002451		· o	949	A. M.	SOFTWARE SUBSCRIPTIONS AND COLLISION REPAIR SUPPLIES	TO SUPPORT SECONDARY AND POST SECONDARY COLLISION REPAIR TRAINING PROGRAMS.
NORTHEAST ARKANSAS CAREER & TECHNICAL CENTER - 1727 SOUTH MAIN STREET - JONESBORO AR 72401	-		o	7 200	ΔMd	SOFTWARE	TO SUPPORT SECONDARY AND POST SECONDARY COLLISION REPAIR TRAINING PROGRAMS
AST WI TECHNIC SST MASON STRI	39-1087141		0		FMV	SOFTWARE SUBSCRIPTIONS AND COLLISION REPAIR SUPPLIES	TO SUPPORT SECONDARY AND POST SECONDARY COLLISION REPAIR TRAINING PROGRAMS.
NORTHWEST IOWA COMMUNITY COLLEGE 603 W. PARK STREET SHELDON, IA 51201	42-0926341		0	9,158,	VMA	SOFTWARE SUBSCRIPTIONS AND COLLISION REPAIR SUPPLIES	TO SUPPORT SECONDARY AND POST SECONDARY COLLISION REPAIR TRAINING PROGRAMS.
NORTHWEST KANSAS TECHNICAL COLLEGE 1209 HARRISON GOODLAND, KS, 67735	48-0699968		0	15,590,	V.W.	REPAIR MANUALS, SOFTWARE SUBSCRIPTIONS AND REPAIR	TO SUPPORT SECONDARY AND POST SECONDARY COLLISION REPAIR TRAINING PROGRAMS.
E . E . 60	44-6005987		0	589,	FMV	SOFTWARE SUBSCRIPTIONS AND COLLISION REPAIR SUPPLIES	TO SUPPORT SECONDARY AND POST SECONDARY COLLISION REPAIR TRAINING PROGRAMS,
OLNEY CENTRAL COLLEGE 305 N. WEST ST. OLNEY, IL 62450	91-0207375		0	8,618,FMV	МV	SOFTWARE SUBSCRIPTIONS AND COLLISION REPAIR SUPPLIES	TO SUPPORT SECONDARY AND POST SECONDARY COLLISION REPAIR TRAINING PROGRAMS.
							Schedule I (Form 990)

1		ָלָ ל
	000	

Schedule I (Form 990) I - CAR EDU	EDUCATION FOUNDATION	UNDATION			2000 IV IV IV		36-3768028 Page 1
(a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method	Assistance to do (b) EIN	(c) IRC section	(d) Amount of	(e) Amount of	(f) Method of	(g) Description of	(h) Purpose of grant
organization or government		= applicable	casi grant	assistance	(book, FMV, appraisal, other)	TOT-CAST ASSISTANCE	of abstistation
						SOFTWARE	
ORANGE ULSTER CAREER & TECHNICAL SCHOOL - 53 CIBSON BOAD - GOSHEN						SUBSCRIPTIONS AND COLLISION	TO SUPPORT SECONDARY AND
- 33 GIBSON ROAD -	14-6011830		0	19,084,	FMV	REPAIR SUPPLIES	REPAIR TRAINING PROGRAMS.
OXFORD HILLS TECHNICAL SCHOOL							TO SUPPORT SECONDARY AND
256 MAIN STREET SOUTH PARTS WE 04281	01-0326563		C	8 265	Λ.M.d.	CDS, GUIDES AND REPAIR SUPPLIES	POST SECONDARY COLLISION REPAIR TRAINING PROGRAMS
						SOFTWARE	
PIONEER CENTER TECHNOLOGY CENTER						SUBSCRIPTIONS	TO SUPPORT SECONDARY AND
27 RYAN ROAD						AND COLLISION	POST SECONDARY COLLISION
SHELBY, OH 44875	34-0971791		0	19,005.	FMV	REPAIR SUPPLIES	REPAIR TRAINING PROGRAMS.
POTTER CAREER & TECH CENTER							TO SUPPORT SECONDARY AND
705 POTTER ROAD			-			COLLISION REPAIR	COLLISION REPAIR POST SECONDARY COLLISION
WEST SENECA, NY 14224	16-6010255		0	5,284,	FMV	SUPPLIES	REPAIR TRAINING PROGRAMS.
						SOFTWARE	
R.D. ANDERSON APPLIED TECHNOLOGY	= ÷					SUBSCRIPTIONS	TO SUPPORT SECONDARY AND
CENTER - 1151 CENTER POINT DRIVE -	-					AND COLLISION	POST SECONDARY COLLISION
MOORE, SC 29323			0	22,147.	PMV	REPAIR SUPPLIES	REPAIR TRAINING PROGRAMS.
						SOFTWARE	
RANKEN TECHNICAL COLLEGE						SUBSCRIPTIONS	TO SUPPORT SECONDARY AND
4431 FINNEY AVENUE						AND COLLISION	POST SECONDARY COLLISION
GODFREY, IL 62035	43-0471057		0	21,370.	FMV	REPAIR SUPPLIES	REPAIR TRAINING PROGRAMS.
וייים שינה אגיאפפ						מיניייניאי מד במממ	THE STREET, SHE
NEAGAN HIGH SCHOOL						VEFRIN MANOALS,	IO SUFFORI SECONDARI AND
14						CDS, GUIDES AND	POST SECONDARY COLLISION
AUSTIN, TX 78752	74-6000064		0	7,272,	FMV	REPAIR SUPPLIES	REPAIR TRAINING PROGRAMS.
						SOFTWARE	
REGIONAL CAREER TECHNOLOGY CENTER						SUBSCRIPTIONS	TO SUPPORT SECONDARY AND
2095 PACKARD ROAD						AND COLLISION	POST SECONDARY COLLISION
YPSILANTI, MI 48197	38-1805562		0	32,908,	FMV	REPAIR SUPPLIES	REPAIR TRAINING PROGRAMS.
RICHMOND TECHNOLOGY CENTER						REPAIR MANUALS,	TO SUPPORT SECONDARY AND
2020 WESTWOOD AVENUE						CDS, AND REPAIR	POST SECONDARY COLLISION
RICHMOND, VA 23230	54-6001805		0.	5,897,FMV	PMV	GUIDES	REPAIR TRAINING PROGRAMS.
							Schedule I (Form 990)

I-CAR EDUCATION FOUNDATION Schedule I (Form 990)

Part II | Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule | (Form 990), Part II)

REPAIR TRAINING PROGRAMS. REPAIR TRAINING PROGRAMS, REPAIR TRAINING PROGRAMS. REPAIR TRAINING PROGRAMS. REPAIR TRAINING PROGRAMS, REPAIR TRAINING PROGRAMS, REPAIR TRAINING PROGRAMS. REPAIR TRAINING PROGRAMS. REPAIR TRAINING PROGRAMS. TO SUPPORT SECONDARY AND OST SECONDARY COLLISION TO SUPPORT SECONDARY AND OST SECONDARY COLLISION TO SUPPORT SECONDARY AND TO SUPPORT SECONDARY AND OST SECONDARY COLLISION O SUPPORT SECONDARY AND POST SECONDARY COLLISION TO SUPPORT SECONDARY AND OST SECONDARY COLLISION TO SUPPORT SECONDARY AND OST SECONDARY COLLISION TO SUPPORT SECONDARY AND OST SECONDARY COLLISION OST SECONDARY COLLISION O SUPPORT SECONDARY AND POST SECONDARY COLLISION (h) Purpose of grant or assistance (g) Description of non-cash assistance REPAIR SUPPLIES REPAIR SUPPLIES AND COLLISION REPAIR SUPPLIES EPAIR SUPPLIES EPAIR SUPPLIES EPAIR SUPPLIES REPAIR MANUALS, REPAIR MANUALS SUBSCRIPTIONS SUBSCRIPTIONS AND COLLISION SUBSCRIPTIONS ND COLLISION SUBSCRIPTIONS AND COLLISION UBSCRIPTIONS UBSCRIPTIONS UBSCRIPTIONS ND COLLISION AND COLLISION SUBSCRIPTIONS SUBSCRIPTIONS ND SOFTWARE ND REPAIR OFTWARE SOFTWARE SOFTWARE SOFTWARE OPTWARE SOFTWARE SOFTWARE (book, FMV, appraisal, other) (f) Method of valuation FMV PM FMV PMV 24,947, FMV 8,671, FMV 29, 364, FMV 593 9 706 13,097, 8,112, 31,089, 8.678 (e) Amount of non-cash assistance 0. o (d) Amount of cash grant Ö ō o Ö o (c) IRC section if applicable 22-1987549 22-1987549 43-6003051 41-1687554 (p) EIN SALEM COUNTY CAREER AND TECHNICAL HS - 880 ROUTE 45 - WOODSTOWN, NJ SOUTH PIEDMONT COMMUNITY COLLEGE (a) Name and address of organization or government ROLLA TECHNICAL INSTITUTE SAN JACINTO COLLEGE SOUTH 1200 DOLLY PARTON PARKWAY SIDNEY LANIER HIGH SCHOOL 2020 TIPTON STATION ROAD SOUTH DOYLE HIGH SCHOOL SAN ANTONIO, TX 78207 SEVIERVILLE, TN 37862 1304 E. TENTH STREET KNOXVILLE, TN 37920 RIDGEWATER COLLEGE 2101 15TH AVE, NW WILLMAR, MN 56201 13735 BEAMER ROAD HOUSTON, TX 77089 POLKTON, NC 28135 SALEM HIGH SCHOOL SEVIER COUNTY HS 1514 W. DURANGO ROLLA, MO 65401 SALEM, VA 24153 400 SPARTAN DR. P.O. BOX 126 08098

Schedule I (Form 990) I – CAR EDUCATION FOUNDATION

Partil Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) I-CAR EDUCATION FOUNDATION

Fair III Continuation of diality and other Assistance to dover innertis and organizations in the Office States (Concount of artificial artifici	Assistance to do	Vermients and Organ	ווידמווסווט ווו נווכ סו	וופת סומוס וכייי	ממוס ו (ו סוווו סיסו) ו מ	i. II.j	
(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
SOUTH SEATTLE COMMUNITY COLLEGE						SOFTWARE SUBSCRIPTIONS AND COLLISION	TO SUPPORT SECONDARY AND POST SECONDARY COLLISION
SEATTLE, WA 98106			0	9,355,	FMV	REPAIR SUPPLIES	
SOUTHEAST CAREER TECHNICAL ACADEMY							TO SUPPORT SECONDARY AND
5710 MOUNTAIN VISTA						SOFTWARE	POST SECONDARY COLLISION
LAS VEGAS, NV 89120	88-6000030		0	34,171,	FMV	SUBSCRIPTIONS	REPAIR TRAINING PROGRAMS.
Company contra monthlymero						SOFTWARE	THE STREET, SECTION OF
SOUTHWEST AREA CAREER CENTER 2 DAVID SIPPY DRIVE						AND COLLISION	TO SUFFORT SECONDARY AND POST SECONDARY COLLISION
MONETT, MO 65708			0	33,189	FMV	REPAIR SUPPLIES	REPAIR TRAINING PROGRAMS.
						SOFTWARE	
SOUTHWESTERN COMMUNITY COLLEGE						SUBSCRIPTIONS	TO SUPPORT SECONDARY AND
1501 WEST TOWNLINE STREET						AND COLLISION	POST SECONDARY COLLISION
CRESTON, IA 50801	42-0927778		0	9,458,	FMV	REPAIR SUPPLIES	REPAIR TRAINING PROGRAMS.
						SOFTWARE	
SUMTER COUNTY CAREER CENTER						SUBSCRIPTIONS	TO SUPPORT SECONDARY AND
2612 MCCRAYS MILL ROAD						AND COLLISION	POST SECONDARY COLLISION
SUMTER, SC 29154			0.	8,633.	FMV	REPAIR SUPPLIES	REPAIR TRAINING PROGRAMS.
						SOFTWARE	
TEMPLE HIGH SCHOOL						SUBSCRIPTIONS	TO SUPPORT SECONDARY AND
415 NORTH 31ST						AND COLLISION	POST SECONDARY COLLISION
TEMPLE, TX 76504			0	9,114.	FMV	REPAIR SUPPLIES	REPAIR TRAINING PROGRAMS.
TENNESSEE TECH CENTER @ CRUMP						REPAIR MANUALS	TO SUPPORT SECONDARY AND
3070 HWY 64						CDS, GUIDES AND	POST SECONDARY COLLISION
CRUMP, IN 38327			0.	11,210,	FMV	REPAIR SUPPLIES	REPAIR TRAINING PROGRAMS.
TN TECH CENTER @ SHELBYVILLE						REPAIR MANUALS,	TO SUPPORT SECONDARY AND
1405 MADISONS STREET			,			CDS, GUIDES AND	POST SECONDARY COLLISION
SHELBYVILLE, TN 37160	27-0615592		0	13,788.	PMV	REPAIR SUPPLIES	REPAIR TRAINING PROGRAMS.
			-			SOFTWARE	
THOMAS A EDISON CAREER & TECHNICAL						SUBSCRIPTIONS	TO SUPPORT SECONDARY AND
HS - 169 SOUTH 2ND STREET -						AND COLLISION	POST SECONDARY COLLISION
BROOKLYN, NY 11211			0.	47,968,FMV	FMV	REPAIR SUPPLIES	REPAIR TRAINING PROGRAMS.
							Schedule I (Form 990)

•

Part II Continuation of Grants and Other Assistance to Governments and	Assistance to Gov	ernments and Orga	nizations in the U	nited States (School	Organizations in the United States (Schedule I (Form 990), Part II)	(   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
TROSA 1820 JAMES STREET DIIRHAM NG 27707	56-1861158		0	10 000	) A	ARRA SPRAY BOOTH	TO SUPPORT SECONDARY AND POST SECONDARY COLLISION ROOTH REPAIR TRAINING PROGRAMS
TUSCOLA TECH CENTER 1401 CLEAVER ROAD CARO, MI 48723	38-1741342		o	395,	P.W.V	IR MANT GUIDES	TO SUPPORT SECONDARY AND POST SECONDARY COLLISION REPAIR TRAINING PROGRAMS.
WACC 205 S. RIDGEVIEW DRIVE WARRENSBURG. MO 64093	44-6006148			5,942.	∧H.J.	REPAIR MANUALS, CDS, AND REPAIR GUIDES	TO SUPPORT SECONDARY AND POST SECONDARY COLLISION REPAIR TRAINING PROGRAMS,
WALKER CAREER CENTER 9651 E. 21ST STREET INDIANAPOLIS, IN 46229			0	158	∆W.d	SOFTWARE SUBSCRIPTIONS AND COLLISION REPAIR SUPPLIES	TO SUPPORT SECONDARY AND POST SECONDARY COLLISION REPAIR TRAINING PROGRAMS.
	87-6000535		0	8,401,	PMV	REPAIR MANUALS, CDS, GUIDES AND REPAIR SUPPLIES	TO SUPPORT SECONDARY AND POST SECONDARY COLLISION REPAIR TRAINING PROGRAMS,
WEST CAMPUS TECHNICAL CENTER 2350 OLD FARMINGTON ROAD FAYETTEVILLE, AR 72701	71-0697377		0	6,192,	FMV	REPAIR MANUALS, CDS, AND REPAIR GUIDES	TO SUPPORT SECONDARY AND POST SECONDARY COLLISION REPAIR TRAINING PROGRAMS.
W.F. KAYNOR TECHNICAL HIGH SCHOOL 43 TOMPKINS STREET WATERBURY, CT 06708			ô	10,771,	∧w.d	SOFTWARE	TO SUPPORT SECONDARY AND POST SECONDARY COLLISION REPAIR TRAINING PROGRAMS.
	91-6007261		*0	29,847.	PMV .	SOFTWARE SUBSCRIPTIONS AND COLLISION REPAIR SUPPLIES	TO SUPPORT SECONDARY AND POST SECONDARY COLLISION REPAIR TRAINING PROGRAMS.
WILCO AREA CAREER CENTER 500 WILCO BLVD. ROMEOVILLE, IL 60446	36-2773412		*0	21,855.	уму	COLLISION REPAIR SUPPLIES	TO SUPPORT SECONDARY AND COLLISION REPAIR POST SECONDARY COLLISION SUPPLIES REPAIR TRAINING PROGRAMS.
							Schedule I (Form 990)

	İ
ω	İ
7	
0	
ω	
9	
7	
C	
- 1	
9	
സ	

	zations in the United States (Schedule I (Form 990), Part II.)
-CAR EDUCATION FOUNDATION	stance to Governments and Organi
1990) I-CAR EDUCA!	nuation of Grants and Other Assis
Schedule I (Form	Part II Contin

Part II Continuation of Graffs and Other Assistance to Governments of	Pasisiana o					,	
(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
WIREGRASS GEORGIA TECHNICAL COLLEGE - 4089 VAL TECH ROAD - VALDOSTA, GA 31602	58-1774017		0	30,189,	FMV	SOFTWARE SUBSCRIPTIONS AND COLLISION REPAIR SUPPLIES	TO SUPPORT SECONDARY AND POST SECONDARY COLLISION REPAIR TRAINING PROGRAMS.
WYOTECH BLAIRSVILLE 500 INNOVATION DR. BLAIRSVILLE. PA 15717	83-0301912		0	175,742,FMV	Λλε	SOFTWARE	TO SUPPORT SECONDARY AND POST SECONDARY COLLISION REPAIR TRAINING PROGRAMS.
	68-0447767		0	9,355,1	РМО	SOFTWARE SUBSCRIPTIONS AND COLLISION REPAIR SUPPLIES	TO SUPPORT SECONDARY AND POST SECONDARY COLLISION REPAIR TRAINING PROGRAMS,
THADDEUS STEVENS COLLEGE OF TECHNOLOGY - 750 E. KING ST LANCASTER PA 17602	27-0060517		0		<b>Л</b> ИЗ	REPAIR MANUALS, SOFTWARE SUBSCRIPTIONS AND REPAIR	TO SUPPORT SECONDARY AND POST SECONDARY COLLISION REPAIR TRAINING PROGRAMS,
YORK COMMUNITY HIGH SCHOOL 2355 W. ST. CHARLES RD ELMHURST IL 60126	36-2799856		0	26.603.FMV	ΛRe	SOFTWARE SUBSCRIPTIONS AND COLLISION REPAIR SUPPLIES	
1							

36-3768028

(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
THE COLOR OF A COLOR		c	4	229	PHATT. HOOT. G
ABKA SCHOLARSHIF	o − ∞	25 000			
CCC SCHOLARSHIP	S.		0		
GEICO SCHOLARSHIP	ব	9 000	0		
CPAPTISMAN TOOL KITIS	71	C	12 919	∆W.d.	RAPHSMAN TOOL KITS
plemer	te the information	n required in Part I,	line 2, and any other	other additional information	
NDATION.	TRACKS ALL	GRANTS TO	HER	ANIZATIONS.	
SCHOLARSHIPS ARE PAID DIRECTLY TO THE S	THE SCHO	CHOOLS ON BEHALF OF	ALF OF THE	THE INDIVIDUALS	
THAT EARNED THE AWARD. DONATIONS	OF TOOLS		AND EQUIPMENT DO NOT REQUIRE	r require	
MONITORING. NO MONITORING OF USE	OF FUNDS	IS REQUIRED.	NOT	ALL RECORDS	
COULD BE LOCATED THIS YEAR DUE TO	THE VOLUME	O 된	TRANSACTIONS.	ADDITIONAL	
PROCEDURES HAVE BEEN ADDED TO CORRECT	ECT THIS	ISSUE IN	THE FUTURE	•	

Part III   Continuation of Grants and Other Assistance to Individuals in the United States (Schedule I (Form 990), Part III)	duals in the Unite	d States (Schedule	I (Form 990), Part III	(	
(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
I.ON RAITDOITX I.EGACY SCHOLARSHID	-	1 000	0		
EDIICATION FOINDATION SCHOLARSHIP	10.		Ó		
					Schedule I (Form 990)

### SCHEDULE M (Form 990)

## **Noncash Contributions**

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Inspection

Name of the organization

**Employer identification number** 

36-3768028 I-CAR EDUCATION FOUNDATION Types of Property (d) (a) (b) (c) Check if Number of Noncash contribution Method of determining contributions or amounts reported on applicable noncash contribution amounts tems contributed Form 990, Part VIII, line 1g Art - Works of art Art · Historical treasures 2 Art · Fractional interests 3 Books and publications 4 Clothing and household goods 5 6 Cars and other vehicles Boats and planes 7 8 Intellectual property Securities - Publicly traded Q Securities · Closely held stock 10 Securities · Partnership, LLC, or 11 trust interests Securities · Miscellaneous 12 Qualified conservation contribution -13 Historic structures 14 Qualified conservation contribution - Other 15 Real estate - Residential Real estate - Commercial 16 17 Real estate - Other Collectibles 18 19 Food inventory Drugs and medical supplies 20 21 Taxidermy Historical artifacts 22 23 Scientific specimens 24 Archeological artifacts 3,437,352. 25 ( TOOLS AND EQU) MARKET VALUE OF DONA Other 26 Other Other > 27 28 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement 29 Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1.28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? 30a Х b if "Yes," describe the arrangement in Part II Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 31 Х 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash X 32a contributions? b If "Yes," describe in Part II

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

If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,

Schedule M (Form 990) (2011)

33

describe in Part II

# Supplemental Information to Form 990 or 990-EZ

Department of the Treasury	Form 990 or 990-EZ or to provide any additional information.  Attach to Form 990 or 990-EZ.	Open to Public Inspection
Name of the organization	I-CAR EDUCATION FOUNDATION	Employer identification numb
FORM 990, PA	RT I, DOING BUSINESS AS:	
COLLISION RE	PAIR EDUCATION FOUNDATION	
	RT I, LINE 1, DESCRIPTION OF ORGANIZATION MIS	SION:
<u>FUNDRAISING</u>	AND GRANTS.	
FORM 990, PA	RT VI, SECTION A, LINE 4: THE FOUNDATION AMEN	DED ITS BY-LAWS
DURING 2011.	FURTHER CLARIFICATION WAS ADDED TO THE LENG	TH OF A TRUSTEE'S
TERM ON THE	BOARD. TRUSTEES SHALL NOW BE ELECTED TO STAG	GERED 3-YEAR
TERMS. A MA	XIMUM SIZE WAS SET FOR THE EXECUTIVE COMMITTE	E OF 1/3 OF THE
TOTAL NUMBER	OF TRUSTEES AT ANY GIVEN TIME. THE CHAIRMAN	IS ONLY ALLOWED
TO BE ELECTE	D TO A SECOND TERM IN THE EVENT OF EXTRAORDIN	ARY CIRCUMSTANCES
FACING THE F	OUNDATION.	
FORM 990, PA	RT VI, SECTION B, LINE 11: PRIOR TO BEING FIL	ED, THE FORM 990
IS REVIEWED	BY SENIOR MANAGEMENT IN CONJUNCTION WITH THE	AUDIT COMMITTEE.
THE AUDIT CO	MMITTEE THEN PRESENTS THE 990 TO THE BOARD OF	TRUSTEES FOR
REVIEW IN OR	DER TO ENSURE ACCURACY AND TIMELY FILING.	
FORM 990, PA	RT VI, SECTION B, LINE 12C: FOUNDATION BOARD	MEMBERS HAVE TO
SIGN AND AGE	EE TO THIS POLICY ANNUALLY AT THE START OF EA	CH FISCAL YEAR.
NEW FOUNDATI	ON BOARD MEMBERS SIGN THIS POLICY AS A PART C	F THE ORIENTATION
PROCESS AND	ANNUALLY THEREAFTER.	
FORM 990, PA	RT VI, SECTION B, LINE 15A: THE DIRECTOR OF H	UMAN RESOURCE
SERVICES GAT	HERS COMPENSATION DATA FROM REPUTABLE SOURCES	; A MINIMUM OF TW

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

132211 01-23-12

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