

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)

OMB No 1545-0047

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

Open to Public Inspection

| <u>A</u> | For the | 2011 calendar year, or tax year beginning OCT 1 , 2011 and er | nding S | EP 30, 201: | 2 |
|-------------------------|--------------------------|---|---------------|----------------------------|-------------------------------|
| В | Check if | C Name of organization | | D Employer identi | fication number |
| | applicable | NORTH AMERICAN CATHOLIC EDUCATIONAL | | | |
| | Addre | S DROGRAMING HOIDENHAM THE | | | |
| Г | Name | | | 22- | 3032456 |
| F | Initial | | oom/suite | E Telephone numb | |
| F | Termir | · · · · · · · · · · · · · · · · · · · | oom/saite | | 1)934-1100 |
| <u> </u> | lated Ameno | | | 1 | 8,065,441. |
| ⊢ | return Applic tion | | | G Gross receipts \$ | |
| _ | ⊥tiòn pendir | | | H(a) Is this a group | |
| | | F Name and address of principal officer JOHN PRIMEAU | - ^^ | for affiliates? | Yes X No |
| | | 47 MEADOWVIEW BLVD, NORTH PROVIDENCE, R | $\overline{}$ | H(b) Are all affiliates in | |
| | | mpt status X 501(c)(3) | 527 | 1 | a list (see instructions) |
| | | e: MWW.NACEPF.NET | | H(c) Group exempti | |
| | | organization: X Corporation Trust Association Other | L Year | of formation: 1989 | M State of legal domicile: RI |
| P | art I | Summary | | | |
| ą. | | | | UCTIONAL | |
| ũ | 1 . | PROGRAMMING/EBS EDUCATIONAL BROADBAND TO | SCH00 | LS AND NON- | -PROFITS 47 |
| Ĕ | 2 | Check this box 🕨 🔲 if the organization discontinued its operations or dispose | ed of more | than 25% of its net a | assets |
| o ve | 3 | Number of voting members of the governing body (Part VI, line 1a) | | 3 | 3 |
| Ğ | 4 | Number of independent voting members of the governing body (Part VI, line 1b) | | 4 | 2 |
| Š | | Total number of individuals employed in calendar year 2011 (Part V, line 2a) | | 5 | _ |
| Activities & Governance | | Total number of volunteers (estimate if necessary) | | 6 | |
| 妄 | | Total unrelated business revenue from Part VIII, column (C), line 12 | | 78 | |
| ĕ | 1 | Net unrelated business taxable income from Form 990-T, line 34 | | 71 | |
| | - | ver difference business taxable income from 1 only 550 1, line 54 | | Prior Year | Current Year |
| | 8 | Contributions and grants (Part VIII, line 1h) | | O Prior real | |
| Revenue | | | - | 6,661,000 | |
| Ve | | Program service revenue (Part VIII, line 2g) | <u> </u> | | |
| æ | | nvestment income (Part VIII, column (A), lines 3, 4, and 7d) | - | 580,916 | |
| | ſ | Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | | 0. | |
| | 1 | Total revenue - add lines 8 through 11 (must equal Part VIII, columni(A)-line 12) | | 7,241,916 | |
| | l . | Grants and similar amounts paid (Part IX, column (A), lines 1-3) | - U | 1,616,231 | |
| | 14 | Benefits paid to or for members (Part IX, column (A), line 4) |)S | 0 | |
| es | 15 | Salaries, other compensation, employee benefits (Part IX, column (A)) lines 550)20 | 13 0 | 532,463 | |
| Expenses | 16a | Professional fundraising fees (Part IX, column (A), line 11e) | <u> </u> | 0 | 0. |
| Š | b | | <u>0 </u> | <u> </u> | |
| Ш | 17 | Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) UGUEIN, C | J ! | 745,117 | 1,091,619. |
| | 18 | Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) | | 2,893,811. | 2,546,346. |
| | 19 | Revenue less expenses Subtract line 18 from line 12 | | 4,348,105 | 5,519,095. |
| Net Assets or I | 3 | | Be | ginning of Current Year | |
| sets | 20 | Total assets (Part X, line 16) | | 53,645,568 | |
| A B | 21 | Total liabilities (Part X, line 26) | _ | 26,424,301 | |
| ₹, | 22 | Net assets or fund balances Subtract line 21 from line 20 | | 27,221,267 | |
| P | art II | Signature Block | | | 02772070021 |
| | | ties of perjury, I declare that I have examined this return , including acco mpanying schedules a | and statem | ents, and to the hest of r | my knowledge and helief it is |
| | | t, and complete. Declaration of preparer (other than officer) is based on all information of whic | | | • |
| | ,, 0000 | 1 The literature | | 8- | 14-2013 |
| រ ^រ Sig | ın | Signature of officer | <u></u> | Date | ./ 20/3 |
| | | JOHN PRIMEAU, PRESIDENT | | | |
|]He | re | Type or print name and title | | | |
| - | | | Τŕ | Date Check | X PTIN |
| ø. €Ď~! | , | Print/Type prepared's name CHANGE CONTROL TO THE PROPERTY OF | | d | |
| Rai | | CHRESTOPHER BARTLETT, CPACHRISTOPHER BARTI | | | |
| 97 | parer | Firm's name ANDSAGER, BARTLETT & PIERONI, LLI | <u> </u> | Firm's EIN | <u> 05-0479760</u> |
| Use | Only | Firm's address ONE CATAMORE BLVD. | • | | |
| | | EAST PROVIDENCE, RI 02914 | | Phone no. | 101-272-9100 |
| Ма | v the IF | S discuss this return with the preparer shown above? (see instructions) | | | X Yes No |

NORTH AMERICAN CATHOLIC EDUCATIONAL PROGRAMMING FOUNDATION. INC.

| | 990 (2011) PROGRAMMING FOUNDATION, INC. | 22-3032456 Page 2 |
|-------------|--|-----------------------------|
| Pa | rt III Statement of Program Service Accomplishments | |
| | Check if Schedule O contains a response to any question in this Part III | |
| 1 | Briefly describe the organization's mission. | |
| | ITFS INSTRUCTIONAL PROGRAMMING/EBS EDUCATIONAL BROADBAN | ND TO SCHOOLS |
| | AND NON-PROFITS 47 CFR 74.901 | |
| | | |
| | | |
| 2 | Did the organization undertake any significant program services during the year which were not listed on | |
| | the prior Form 990 or 990-EZ? | Yes X No |
| _ | If "Yes," describe these new services on Schedule O | |
| 3 | Did the organization cease conducting, or make significant changes in how it conducts, any program services | ? Yes X No |
| | If "Yes," describe these changes on Schedule O | |
| 4 | Describe the organization's program service accomplishments for each of its three largest program services, a Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of | |
| | others, the total expenses, and revenue, if any, for each program service reported. | r grants and allocations to |
| 4a | 40,000 | enue \$ |
| -+ a | TRANSMISSION OF EDUCATIONAL AND RELIGIOUS PROGRAMMING | nue \$ / |
| | ITFS INSTRUCTIONAL TELEVISION FIXED SERVICES TO SCHOOLS | HOSPTTAT.S |
| | PUBLIC ORGANIZATIONS. | , HODI ITAHO, |
| | TODATO ONOIRITATITONO! | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | , | |
| 4b | (Code) (Expenses \$ 2,083,445. including grants of \$ 822,930.) (Reve | nue \$ 7,675,075.) |
| | EXPAND EBS EDUCATIONAL BROADBAND SERVICE TO SCHOOLS AND | |
| | ORGANIZATIONS. DELIVER INNOVATIVE EDUCATIONAL BROADBAN | ND BENEFITS TO |
| | ASSIST IN DIGITAL INCLUSION EFFORTS TO HELP DISABLED, A | AT-RISK OR |
| | OTHERWISE DISADVANTAGED STUDENTS AND PERSONS. MAXIMIZE | E REACH OF |
| | EXISTING PROGRAMS, PARTICULARLY IN RURAL AREAS OF THE U | MITED STATES. |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| 4c | (Code) (Expenses \$ including grants of \$) (Reve | nue \$) |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | - |
| | | |
| | | |
| | Other present and the Coherence of Coherence | |
| 4d | Other program services (Describe in Schedule O) | |
| 4 - | (Expenses \$ including grants of \$) (Revenue \$ Total program service expenses ▶ 2,125,445. |) |
| <u>4e</u> | Total program service expenses ► 2,125,445. | F 000 (0011) |
| 12200 | 2 | Form 990 (2011) |

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 | X | |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors? | 2 | | X |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for | ١. | | ,, |
| 4 | public office? If "Yes," complete Schedule C, Part I | 3 | - | X |
| 4 | Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II | ١. | | |
| 5 | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or | 4 | | X |
| 9 | similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III | _ | | x |
| 6 | Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to | 5 | | |
| • | 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, | • | | -22 |
| | the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II | 7 | | х |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete | <u> </u> | | |
| | 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 | | X |
| 11 | If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X | | | |
| | as applicable | | - | |
| а | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, | | | |
| | Part VI | 11a | X | |
| b | Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total | | | |
| | assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII | 11b | | <u> </u> |
| 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 | | | v |
| ч | 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 | 11c | | _X_ |
| u | Part X, line 16? If "Yes," complete Schedule D, Part IX | 11d | | X |
| е | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X | 11e | | X |
| f | Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses | 110 | | |
| | the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X | 11f | | X |
| 12a | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete | | | |
| | Schedule D, Parts XI, XII, and XIII | 12a | | _X_ |
| b | Was the organization included in consolidated, independent audited financial statements for the tax year? | į | | |
| | If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional | 12b | | _X_ |
| 13 | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 13 | | _X_ |
| 14a | Did the organization maintain an office, employees, or agents outside of the United States? | 14a | | <u> </u> |
| 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 | | ., | |
| 45 | or more? If "Yes," complete Schedule F, Parts I and IV | 14b | Х | |
| 15 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV | 45 | v | |
| 16 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals | 15 | Х | |
| | 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, | 10 | | |
| | column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I | 17 | ļ | X |
| 18 | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines | | | |
| | 1c and 8a? If "Yes," complete Schedule G, Part II | 18 | | X |
| 19 | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," | | | |
| | complete Schedule G, Part III | 19 | | X |
| 2 0a | Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H | 20a | | Х |
| b | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? | 20b | | |
| | | C | വവ ഗ | 20441 |

| | | 032456 | P | age 4 |
|-----|---|--------|----------|----------|
| Pa | rt IV Checklist of Required Schedules (continued) | | | |
| | | | Yes | No |
| 21 | Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the | | l | |
| | United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II | 21 | X | ļ |
| 22 | Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part I) | | | |
| | column (A), line 2? If "Yes," complete Schedule I, Parts I and III | 22 | <u> </u> | X |
| 23 | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current | | | |
| | and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete | | | |
| | Schedule J | 23 | X | <u> </u> |
| 24a | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the | e | | |
| | 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 | | X |
| b | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b | | |
| С | Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease | | | 1 |
| | 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 | | |
| 25a | Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a | | | |
| | disqualified person during the year? If "Yes," complete Schedule L, Part I | 25a | | Х |
| b | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and | | | |
| | that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete | | | |
| | Schedule L, Part I | 25b | | Х |
| 26 | Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqual | lified | | |
| | 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 | | х |
| 28 | Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV | | | |
| | instructions for applicable filing thresholds, conditions, and exceptions) | | • | |
| а | A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV | 28a | i | Х |
| | 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 office | | | |
| • | director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV | 28c | | X |
| 29 | Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M | 29 | | X |
| 30 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation | 25 | | |
| 00 | contributions? If "Yes," complete Schedule M | 30 | | X |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? | - 50_ | | |
| 31 | 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 | 31 | | |
| JZ. | Schedule N, Part II | 20 | | X |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations | 32 | | |
| 33 | , c , c | 00 | х | |
| 04 | sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I | 33 | | - |
| 34 | Was the organization related to any tax-exempt or taxable entity? | | | v |
| 05- | If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 | 34 | <u> </u> | X |
| | Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 35a | | X |
| b | Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning o | | | ,, |
| | section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 | 35b | | X |
| 36 | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization | | | |
| | If "Yes," complete Schedule R, Part V, line 2 | 36 | | X |
| 37 | Did the organization conduct more than 5% of its activities through an entity that is not a related organization | | | |
| | and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI | 37 | | X |

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

| orm 990 (2 | 2011) | PROGRAMMING | FOUNDATION, | INC. |
|------------|------------|---------------------|-------------------|----------|
| Opt V | Statamonto | Pagarding Other IDS | S Filings and Tax | Compliar |

| | 22 | -3 | 03 | 2 | 45 | 6 | Page | e 5 |
|---|----|----|----|---|----|---|------|------------|
| _ | | | | | | _ | | |

| | 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 | 1a | l 0 | | | |
| b | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable | 1b | 0 | | | |
| С | Did the organization comply with backup withholding rules for reportable payments to vendors and | reporta | ıble gamıng | | | |
| | (gambling) winnings to prize winners? | | | 1c | х | |
| 2a | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, | | | | | |
| | filed for the calendar year ending with or within the year covered by this return | 2a | 7 | | | |
| b | If at least one is reported on line 2a, did the organization file all required federal employment tax retu | rns? | | 2b | | X |
| | Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction | s) | | | | |
| За | Did the organization have unrelated business gross income of \$1,000 or more during the year? | | | За | | X |
| b | If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O | | | 3b | | |
| 4a | At any time during the calendar year, did the organization have an interest in, or a signature or other | autho | rity over, a | | | |
| | financial account in a foreign country (such as a bank account, securities account, or other financial | accou | nt)? | 4a | | X |
| b | If "Yes," enter the name of the foreign country | | | | | |
| | See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial | Accou | nts | | | |
| 5a | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | | | 5a | | _X_ |
| b | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter trans- | action? | • | 5b | | _X_ |
| С | 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 to | he org | anization solicit | | | |
| | any contributions that were not tax deductible? | | | 6a | | _X_ |
| b | If "Yes," did the organization include with every solicitation an express statement that such contribu | tions c | r gifts | | , | |
| | were not tax deductible? | | | 6b | | |
| 7 | Organizations that may receive deductible contributions under section 170(c). | | | | | |
| а | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se | rvices j | provided to the payor? | 7a | | _X_ |
| b | If "Yes," did the organization notify the donor of the value of the goods or services provided? | | | 7b | | |
| С | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was | as req | uıred | | | |
| | to file Form 8282? | 1 | ı | 7c_ | | <u>X</u> |
| d | If "Yes," indicate the number of Forms 8282 filed during the year | 7d | | | | |
| е | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit | | ct? | 7e | | |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont | | | 7f_ | | |
| g | If the organization received a contribution of qualified intellectual property, did the organization file F | | · · | 7g | | |
| h | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization | | | 7h | | |
| 8 | Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. D | | · · · · · · | | | |
| _ | organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at | any tin | ne during the year? | 8 | | |
| 9 | Sponsoring organizations maintaining donor advised funds. | | | | | |
| a | Did the organization make any taxable distributions under section 4966? | | | 9a | | |
| b | Did the organization make a distribution to a donor, donor advisor, or related person? | | | 9b | | |
| 10 | Section 501(c)(7) organizations. Enter | . د د ا | 1 | | | |
| a | Initiation fees and capital contributions included on Part VIII, line 12 | 10a | | | | |
| 11 | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities | 10b | | | | |
| | Section 501(c)(12) organizations. Enter: Gross income from members or shareholders | 445 | | | | |
| a b | Gross income from other sources (Do not net amounts due or paid to other sources against | 11a | | | | |
| U | amounts due or received from them.) | 11b | | | | |
| 129 | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form | |) | 12a | | |
| | If "Yes," enter the amount of tax-exempt interest received or accrued during the year | 12b | | IZa | | |
| 13 | Section 501(c)(29) qualified nonprofit health insurance issuers. | 120 | · · · · · · · · · · · · · · · · · · · | ł | | |
| | 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 | | | 134 | | |
| b | Enter the amount of reserves the organization is required to maintain by the states in which the | | | | | |
| ~ | organization is licensed to issue qualified health plans | 13b | | | | |
| С | | 13c | - : | | | |
| | Did the organization receive any payments for indoor tanning services during the tax year? | | | 14a | | X |
| | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedu. | le O | | 14b | | |
| | | | | | 990 (| 2011) |

PROGRAMMING FOUNDATION, INC.

22-3032456

Form 990 (2011) 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 | | | \mathbf{X} |
|-----|---|---------|------|--------------|
| Sec | tion A. Governing Body and Management | | | |
| | | | Yes | No |
| 1a | Enter the number of voting members of the governing body at the end of the tax year 1a 3 | | | |
| | If there are material differences in voting rights among members of the governing body, or if the governing | | | |
| | body delegated broad authority to an executive committee or similar committee, explain in Schedule 0. | | | |
| b | Enter the number of voting members included in line 1a, above, who are independent 2 | | | |
| 2 | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other | | | |
| | officer, director, trustee, or key employee? | 2 | X | |
| 3 | Did the organization delegate control over management duties customarily performed by or under the direct supervision | | | |
| | of officers, directors, or trustees, or key employees to a management company or other person? | 3 | | Х |
| 4 | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? | 4 | | Х |
| 5 | Did the organization become aware during the year of a significant diversion of the organization's assets? | 5 | | X |
| 6 | Did the organization have members or stockholders? | 6 | | X |
| 7a | Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or | | | |
| | more members of the governing body? | 7a | | Х |
| b | Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or | | | _ |
| | persons other than the governing body? | 7b | | Х |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: | | | |
| а | The governing body? | 8a | Х | |
| b | Each committee with authority to act on behalf of the governing body? | 8b | X | |
| 9 | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the | | | |
| | organization's mailing address? If "Yes," provide the names and addresses in Schedule O | 9 | | X |
| Sec | tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) | | | |
| | | | Yes | No |
| 10a | Did the organization have local chapters, branches, or affiliates? | 10a | | Х |
| | If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, | | | |
| | and branches to ensure their operations are consistent with the organization's exempt purposes? | 10b | | |
| 11a | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? | 11a | Х | |
| | Describe in Schedule O the process, if any, used by the organization to review this Form 990 | | | |
| | Did the organization have a written conflict of interest policy? If "No," go to line 13 | 12a | | X |
| b | | 12b | | |
| С | Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe | | | |
| | ın Schedule O how this was done | 12c | | |
| 13 | Did the organization have a written whistleblower policy? | 13 | | X |
| 14 | Did the organization have a written document retention and destruction policy? | 14 | | X |
| 15 | Did the process for determining compensation of the following persons include a review and approval by independent | | | |
| | persons, comparability data, and contemporaneous substantiation of the deliberation and decision? | 1 | | |
| а | The organization's CEO, Executive Director, or top management official | 15a | | X |
| b | Other officers or key employees of the organization | 15b | | X |
| | If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) | | | |
| 16a | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a | | | |
| | taxable entity during the year? | 16a | | X |
| b | If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation | | | |
| | in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's | | | |
| | exempt status with respect to such arrangements? | 16b | | |
| Sec | tion C. Disclosure | | | |
| 17 | List the states with which a copy of this Form 990 is required to be filed ► NONE | | | |
| 18 | Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a | vailab | 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, conflict of interest policy, and | l fınan | cıal | |
| | statements available to the public during the tax year | | | |
| 20 | State the name, physical address, and telephone number of the person who possesses the books and records of the organizat | on 🕨 | | |
| | JOHN R.PRIMEAU NACEPF INC (401)934-1100 | | | |
| | 2419 HARTFORD AVENUE, JOHNSTON, RI 02919 | | - | |

Form **990** (2011)

| Form 990 (2011) ` | PROGRAMMING FOUNDATION, INC. | |
|--------------------|---|---------------------------|
| Part VII Compensat | tion of Officers, Directors, Trustees, Key Employ | yees, Highest Compensated |
| Employees | , and Independent Contractors | • |

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

| Check this box if neither the organizat (A) | (B) | | | (0 | C) | - | | (D) | (E) | (F) |
|--|-------------------|---------------------|-----------------------|---------|--------|------------------------------|--------|-----------------|-----------------|------------------------------|
| Name and Title | Average | (do | not c | Pos | ition | than | one | Reportable | Reportable | Estimated |
| | hours per | box | , unle | ss pe | rson | is bot | han | compensation | compensation | amount of |
| | week | - | cer ar | dad | recto | or/trus | tee) | from | from related | other |
| | (describe | trustee or director | | | | | | the | organizations | compensation |
| | hours for related | P o | 8 | | | sated | | organization | (W-2/1099-MISC) | from the |
| | organizations | ustee | trust | | 98 | npens | | (W-2/1099-MISC) | | organization |
| | in Schedule | <u>=</u> | trona | | nploy | yee ye | _ | | | and related organizations |
| | 0) | Individual | Institutional trustee | Officer | Key er | Highest compensated employee | Former | | | organizations |
| (1) JOHN PRIMEAU | | | | | | | | | | |
| PRESIDENT, TREASURER & DIR | 60.00 | X | | X | X | X | | 178,005. | 0. | 25,000 |
| (2) BARBARA PRIMEAU | | | | | | | | | | |
| V. PRESIDENT, SECRETARY & | 10.00 | X | | Х | | | | 0. | 0. | 0 |
| (3) IRENE PRIMEAU | | | | | | | | | | |
| DIRECTOR | 0.00 | X | | X | | | | 0. | 0. | 0 |
| (4) ARCHBISHOP G. PEARCE | | | | | | | | _ | _ | |
| PROGRAM GOVENOR | 0.00 | X | | | | - | | 0. | 0. | 0 |
| | | | | | | | | | | |
| | | - | - | | | | | | | |
| | | | | | | | | | | |
| | | ┢╌ | | | | Н | | | | · |
| | | | | | | | | | | |
| | | | - | - | | | | | | |
| | ļ | | | | | | | | | |
| - Apr | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | <u></u> | | - |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | · - |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | L | _ | | | | | | | |
| | | | | | | | | | | |
| | | <u> </u> | | | | - | | | | |
| | | | | | ļ | | | | | |
| | | | | | | | | | | |
| | | | | | | 1 | | | | |

132007 01-23-12

PROGRAMMING FOUNDATION, INC.

| Pa | t VII Section A. Officers, Directors, Tru | rustees, Key Employees, and Highest Compensated Employees (continue | | | | | | | | ees (continued) | | | | | |
|-----------|---|---|--------------------------------|-----------------------|----------------------|-----------------------------|------------------------------|----------------|--|---|---------|-----------------|---|------------------|--|
| | (A) Name and title | (B) Average hours per week (describe | (do box offi | not c | Pos heck ss pe | C) itior more rson | | one h an | (D) Reportable compensation from | (E) Reportable compensatio from related | on d | ar | (F) stimate mount other | of | |
| | | hours for related organizations in Schedule O) | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Рог тег | the organization (W-2/1099-MISC) | organization (W-2/1099-MIS | | fı org an | npensa rom the ganizat id relat anizati | e tion ted | |
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | · | | | |
| | ····· | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| 1b | Sub-total | L | | | | | | | 178,005. | | 0. | 2 | 5,0 | 00. | |
| с d | Total from continuation sheets to Part VI Total (add lines 1b and 1c) | I, Section A | | | | | > | | 178,005. | | 0. | 2 | 5,0 | 0. | |
| 2 | Total number of individuals (including but no compensation from the organization | ot limited to th | ose | liste | ed at | oove | e) wh | o re | eceived more than \$100 | ,000 of reportabl | e | | | 1 | |
| | | | | | | | | | | | | | Yes | No | |
| 3 | Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s | | stee | e, ke | y en | nplo | yee, | or l | highest compensated ei | mployee on | | 3 | | X | |
| 4 | For any individual listed on line 1a, is the su | ım of reportabl | | | | | | | • | the organization | ŀ | | | | |
| 5 | and related organizations greater than \$150 Did any person listed on line 1a receive or a | | | | | | | | | dual for convece | } | 4 | X | | |
| | rendered to the organization? If "Yes," com | | | | | | | eiai | ed organization or indivi | dual for services | | 5 | | X | |
| Sec | tion B. Independent Contractors | | | | | | | _ | | | | | | | |
| 1 | Complete this table for your five highest co the organization. Report compensation for | | | | | | | | | | pensa | ation f | rom | | |
| | (A) Name and business | | | | | | | | (B) Description of s | | C, | (C ompe | C) nsatio | n | |
| <u>43</u> | IN MCDERMOTT, PLLC WILSON BLVD, ARLINGTON DMAS J. DOUGHERTY, ESQ | | | | חנז | C I | | | LEGAL SERVIC | ES | | 12 | 6,5 | 44. | |
| | ITE 1100, ARLINGTON, V | | N • 1 | | | . G | · , | | LEGAL SERVIC | ES | | 12 | 4,3 | <u>75.</u> | |
| | | | | | | <u> </u> | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| 2 | Total number of independent contractors (i \$100,000 of compensation from the organic | = | ot lir | mited | d to | | se lis 2 | ted | above) who received m | ore than | | | | | |

Form **990** (2011)

Page 9

PROGRAMMING FOUNDATION, INC.

Statement of Revenue Part VIII (D) Revenue (A) (B) (C) Related or Total revenue Unrelated excluded from exempt function business tax under sections 512, 513, or 514 revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a 1b **b** Membership dues c Fundraising events 1c d Related organizations 1d e Government grants (contributions) 1e All other contributions, gifts, grants, and similar amounts not included above 1f Noncash contributions included in lines 1a-1f \$ h Total. Add lines 1a-1f **Business Code** 2 a ITFS/EBS BROADBAND SPE 611710 6812779. 6812779 Program Service 611710 450,000. **b** LEGAL SETTLEMENT 450,000. 611710 241,871. 241,871 c EBSA - MOBILE BEACON d EDUCATION TV - ITFS RE 611710 170,425. 170,425 TOWER RENT INCOME 900099 27,300 27,300. f All other program service revenue 7702375 g Total. Add lines 2a-2f Investment income (including dividends, interest, and 174,325 174,325. other similar amounts) Income from investment of tax-exempt bond proceeds 4 5 Royalties (ı) Real (II) Personal 6 a Gross rents **b** Less rental expenses c Rental income or (loss) d Net rental income or (loss) (i) Securities (II) Other 7 a Gross amount from sales of 188741 assets other than inventory b Less cost or other basis 0 and sales expenses 188741. c Gain or (loss) 188,741 188,741. d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c) See Part IV, line 18 b Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 а b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a d All other revenue Total. Add lines 11a-11d 7675075. <u>390,366.</u> 8065441. Total revenue. See instructions. 132009 01-23-12

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

| | not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII. | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
|----|--|-----------------------|------------------------------|-------------------------------------|--------------------------------|
| 1 | Grants and other assistance to governments and | | | | |
| | organizations in the United States. See Part IV, line 21 | 822,930. | 822,930. | | |
| 2 | Grants and other assistance to individuals in | | | | |
| | the United States. See Part IV, line 22 | | | | |
| 3 | Grants and other assistance to governments, | | | | |
| | organizations, and individuals outside the | | | | |
| | United States See Part IV, lines 15 and 16 | | | | |
| 4 | Benefits paid to or for members | | | | |
| 5 | Compensation of current officers, directors, | | | | |
| | trustees, and key employees | 178,005. | 71,202. | 106,803. | |
| 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 | 159,818. | 59,530. | 100,288. | |
| 8 | Pension plan accruals and contributions (include | | | | |
| | section 401(k) and section 403(b) employer contributions) | 94,456. | 35,893. | 58,563. | |
| 9 | Other employee benefits | 60,307. | 22,917. | 37,390. | |
| 0 | Payroll taxes | 139,211. | 52,900. | 86,311. | |
| 1 | Fees for services (non-employees) | | | | |
| а | Management | | | | |
| b | Legal | 421,212. | 421,212. | | |
| C | Accounting | 5,693. | 5,693. | | |
| d | Lobbying | | | | |
| е | Professional fundraising services. See Part IV, line 17 | | | | · · · |
| f | Investment management fees | | | | |
| g | Other | | | | |
| 2 | Advertising and promotion | | | | |
| 3 | Office expenses | | | | <u></u> |
| 4 | Information technology | | | | |
| 5 | Royalties | | . ,, . | | |
| 6 | Occupancy | | | | |
| 7 | Travel | 65,979. | 65,979. | | |
| 8 | Payments of travel or entertainment expenses | | | | |
| | for any federal, state, or local public officials | | | | |
| 9 | Conferences, conventions, and meetings | | | | |
| 0: | Interest | | | | |
| 1 | Payments to affiliates | | | | |
| 2 | Depreciation, depletion, and amortization | 58,735. | 42,189. | 16,546. | |
| 3 | Insurance | 42,898. | 27,898. | 15,000. | |
| 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 | MARKETING | 272,801. | 272,801. | | |
| b | RADIO TV MINISTRY | 42,000. | 42,000. | | |
| С | CONSULTING EXPENSE | 16,999. | 16,999. | | |
| d | OFFICE SUPPLIES | 16,473. | 16,473. | | |
| е | All other expenses | 148,829. | 148,829. | | |
| 5_ | Total functional expenses. Add lines 1 through 24e | 2,546,346. | 2,125,445. | 420,901. | C |
| 6 | 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) | | | | |

| Part X | Balance Sheet | · · · · · | | |
|-----------------------------|--|--------------------------|-----|------------------------|
| | | (A) Beginning of year | | (B) End of year |
| 1 | Cash - non-interest-bearing | 64,492. | 1 | 379,957. |
| 2 | Savings and temporary cash investments | 46,930,028. | 2 | 51,671,093. |
| 3 | Pledges and grants receivable, net | | 3 | |
| 4 | Accounts receivable, net | 401,152. | 4 | 326,152. |
| 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 8 | Notes and loans receivable, net | 15,873. | 7 | 0. |
| 8 8 | Inventories for sale or use | 91,213. | 8 | 97,523. |
| ` 9 | Prepaid expenses and deferred charges | | 9 | |
| 10 | a Land, buildings, and equipment, cost or other | | | |
| 1 | basis Complete Part VI of Schedule D 10a 1,683,702. | | | |
| | b Less: accumulated depreciation 10b 977, 221. | 753,487. | 10c | 706.481. |
| 11 | Investments - publicly traded securities | 5,117,198. | 11 | 706,481. 5,117,198. |
| 12 | Investments - other securities See Part IV, line 11 | | 12 | 0,12,12,00 |
| 13 | Investments - program-related. See Part IV, line 11 | · | 13 | |
| 14 | Intangible assets | 287. | 14 | 287. |
| 15 | Other assets. See Part IV, line 11 | 271,838. | 15 | 260,108. |
| 16 | Total assets. Add lines 1 through 15 (must equal line 34) | 53,645,568. | 16 | 58,558,799. |
| 17 | Accounts payable and accrued expenses | 35,336. | 17 | 61,485. |
| 18 | Grants payable | | 18 | |
| 19 | Deferred revenue | 26,381,795. | 19 | 25,756,952. |
| 20 | Tax-exempt bond liabilities | | 20 | |
| ဖွ 21 | Escrow or custodial account liability Complete Part IV of Schedule D | · · · · · | 21 | 81,88 |
| Liabilities 51 | Payables to current and former officers, directors, trustees, key employees, | - | | |
| abi | highest compensated employees, and disqualified persons. Complete Part II | | | |
| 5 | 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 | 74.00 | 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 | 7,170. | 25 | 0. |
| 26 | Total liabilities. Add lines 17 through 25 | 26,424,301. | 26 | 25,818,437. |
| | Organizations that follow SFAS 117, check here | | | |
| တ္ထ | lines 27 through 29, and lines 33 and 34. | | | |
| ğ 27 | Unrestricted net assets | | 27 | |
| g 28 | Temporarily restricted net assets | | 28 | |
| B 29 | Permanently restricted net assets | | 29 | |
| <u>.</u> 5 | Organizations that do not follow SFAS 117, check here X and | | | - |
| P | complete lines 30 through 34. | | | |
| ध्र 30 | Capital stock or trust principal, or current funds | 0. | 30 | 0. |
| SS 31 | Paid in or capital surplus, or land, building, or equipment fund | 0. | 31 | 0. |
| Net Assets or Fund Balances | Retained earnings, endowment, accumulated income, or other funds | 27,221,267. | 32 | 32,740,362. |
| ž 33 | Total net assets or fund balances | 27,221,267. | 33 | 32,740,362. |
| 34 | Total liabilities and net assets/fund balances | 53,645,568. | 34 | 58,558,799. |
| | | | 1 | Form 990 (2011) |

NORTH AMERICAN CATHOLIC EDUCATIONAL PROGRAMMING FOUNDATION, INC.

| Form | 990 (2011) PROGRAMMING FOUNDATION, INC. | 22- | 3032 | 456 | Pa | ge 12 |
|------|---|----------|----------|-----|-----|--------------|
| Pa | rt XI Reconciliation of Net Assets | | | | | |
| | Check if Schedule O contains a response to any question in this Part XI | | | | | |
| | | | | _ | | |
| 1 | Total revenue (must equal Part VIII, column (A), line 12) | 1 | 8 | ,06 | 5,4 | 41. |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | 2,546, | | | 46. |
| 3 | Revenue less expenses Subtract line 2 from line 1 | 3 | <u> </u> | ,51 | 9,0 | 95. |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | 4 | 27 | ,22 | 1,2 | 67. |
| 5 | Other changes in net assets or fund balances (explain in Schedule O) | 5 | | | | 0. |
| 6 | Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B)) | 32 | ,74 | 0,3 | 62. | |
| Pa | rt XII Financial Statements and Reporting | | | | | |
| | Check if Schedule O contains a response to any question in this Part XII | | | | | |
| | | | | | Yes | No |
| 1 | Accounting method used to prepare the Form 990. X Cash Accrual Other | | | | | |
| | If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule | 0 | | | | |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant? | | | 2a | | X |
| b | Were the organization's financial statements audited by an independent accountant? | | | 2b | | X |
| С | If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the | e audıt, | | | | |
| | review, or compilation of its financial statements and selection of an independent accountant? | | ŀ | 2c | | |
| | If the organization changed either its oversight process or selection process during the tax year, explain in Sch | edule O | | | | |
| d | If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue | d on a | | | | |
| | separate basis, consolidated basis, or both. | | | | | |
| | Separate basis Consolidated basis Both consolidated and separate basis | | | | | |
| За | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sil | ngle Aud | int | | | |
| | Act and OMB Circular A-133? | | | 3a | | X |
| b | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi | red aud | lit (| | | |

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

Form 990 (2011)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

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

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

NORTH AMERICAN CATHOLIC EDUCATIONAL

2011

Open to Public Inspection

Employer identification number

| PROGRAI | MMING FOUNDAT | ION, | INC. | | | | 22 | <u>2-3032</u> | <u>456</u> | | |
|---|---|---------------------------------------|---|-------------------------|---------------------------|----------------------|--------------|-------------------------|------------|------|--|
| Part I Reason for Public Cha | | | | | | tructions | | | | | |
| The organization is not a private foundation 1 | es, or association of chur (70(b)(1)(A)(ii). (Attach Sc oital service organization (| ches desc chedule E.) described | ribed in se | ection 170 | (b)(1)(A)(i) (A)(iii). | | i). Enter th | ne hospital | 's nam | 1e, | |
| section 170(b)(1)(A)(iv). (Comp 6 A federal, state, or local governr 7 An organization that normally re section 170(b)(1)(A)(vi). (Compl 8 A community trust described in 9 X An organization that normally re | An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment | | | | | | | | | | |
| income and unrelated business See section 509(a)(2). (Complet An organization organized and of An organization organized and of more publicly supported organized describes the type of supporting a Type I b By checking this box, I certify the foundation managers and other If the organization received a wire supporting organization, check to g Since August 17, 2006, has the (i) A person who directly or in the governing body of the se (ii) A family member of a person (iii) A 35% controlled entity of | activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h a Type II b Type III c Type III - Functionally integrated d Type III - Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type III, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? | | | | | | | | | | |
| (i) Name of supported organization (ii) EIN | (iii) Type of organization (described on lines 1-9 above or IRC section | in col. (i) lu governing | organization sted in your document? | organızat (i) of you | ion in col. support? | organization in col. | | (vii) Amount support | | f | |
| | (see instructions)) | Yes | No | Yes | No | Yes | No | | | | |
| | | | | | | | | | | | |
| Total LHA For Paperwork Reduction Act Notice | e, see the Instructions fo | or | | | | Schedule | e A (Form | 990 or 99 | D-EZ) | 2011 | |

132021 01-24-12

Form 990 or 990-EZ.

| Part II | Support Schedul | le for Organizations I | Described in S | Sections 1 | 70(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 | ction A. Public Support | | | | | | |
|----------|---|--------------------|---------------------|---------------------------|--|-----------------------------------|---------------|
| Cale | ndar year (or fiscal year beginning in) | (a) 2007 | (b) 2008 | (c) 2009 | (d) 2010 | (e) 2011 | (f) Total |
| 1 | Gifts, grants, contributions, and | | | _ | | | |
| | membership fees received (Do not | | 1 | | | | |
| | include any "unusual grants.") | | | | | | |
| 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 | | 1 | | | | |
| | the organization without charge | | | | 1 | | |
| 4 | Total. Add lines 1 through 3 | | | | | 7.7 | |
| | The portion of total contributions | | | | | | |
| • | by each person (other than a | | | | | | |
| | governmental unit or publicly | | | | | | |
| | supported organization) included | | Ï | | | | |
| | on line 1 that exceeds 2% of the | | | | | | |
| | amount shown on line 11, | | | | | | |
| | column (f) | | | | | | |
| 6 | Public support. Subtract line 5 from line 4 | | | | | | |
| | etion B. Total Support | - | | | | | |
| | ndar year (or fiscal year beginning in) | (a) 2007 | (b) 2008 | (c) 2009 | (d) 2010 | (e) 2011 | (f) Total |
| | Amounts from line 4 | (4) | (5) = 55 | (0/200 | 10729.5 | (6) = 5 | <u> </u> |
| 8 | Gross income from interest, | | - | | | · | |
| Ŭ | dividends, payments received on | | | | | | |
| | securities loans, rents, royalties | | | | | | |
| | and income from similar sources | | | | | | |
| 9 | Net income from unrelated business | | | | | | <u>·</u> |
| 3 | activities, whether or not the | | | | | | |
| | business is regularly carried on | | | | | | |
| 10 | Other income Do not include gain | | | | <u> </u> | | ·· <u></u> |
| 10 | or loss from the sale of capital | | | | | | |
| | assets (Explain in Part IV) | | | | | | |
| 44 | Total support. Add lines 7 through 10 | | | | | | |
| | Gross receipts from related activities, | oto (see instructi | one) | | · | 12 | |
| | First five years. If the Form 990 is for | • | • | rd fourth or fifth to | av voar ac a coctio | | |
| 13 | organization, check this box and stop | | s mst, second, tim | a, lourer, or mark | ax year as a section |) | ightharpoonup |
| Sec | ction C. Computation of Publ | | rcentage | <u>-</u> | | | |
| | Public support percentage for 2011 (I | | | column (fl) | | 14 | % |
| | Public support percentage from 2010 | , ,, | • • | | | 15 | % |
| | 33 1/3% support test - 2011. If the c | | - | n line 13, and line | 14 is 33 1/3% or r | | |
| | stop here. The organization qualifies | - | | | , | nore, enternance de | > |
| ь | 33 1/3% support test - 2010. If the c | | | | d line 15 is 33 1/3% | 6 or more, check th | is box |
| _ | and stop here. The organization qual | - | | | | · · · · · · · · · · · · · · · · · | ▶ □ |
| 17a | 10% -facts-and-circumstances tes | • | | | e 13. 16a. or 16h | and line 14 is 10% | or more. |
| | and if the organization meets the "fac | | | | | | |
| | meets the "facts-and-circumstances" | | | | · · | How the organ | L |
| . | 10% -facts-and-circumstances test | | | • • • | _ | 17a and line 15 is | 10% or |
| U | more, and if the organization meets th | - | - | | | • | |
| | organization meets the "facts-and-circ | | | | • | | ▶ [] |
| 12 | Private foundation. If the organization | | - | | | | |
| | THE TO A TO | Jid Hot brioon a | 227 011 1110 10, 10 | <u>, 100, 174, 01 171</u> | | edule A (Form 990 | |

Schedule A (Form 990 or 990-EZ) 2011 PROGRAMMING FOUNDATION, INC.

22-3032456 Page 3

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2007 (b) 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants") 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose 5,154,081 4.875.394. 5,732,132 6,661,000 7 195 424 29,618,031. 3 Gross receipts from activities that are not an unrelated trade or business under section 513 4 Tax revenues levied for the organization'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 5,154,081 4,875,394 5,732,132 6,661,000 7,195,424, 29,618,031. 7a Amounts included on lines 1, 2, and 3 received from disqualified persons 0. 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 0. amount on line 13 for the year c Add lines 7a and 7b 0. 8 Public support (Subtract line 7c from line 6) 29,618,031, Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (f) Total (e) 2011 9 Amounts from line 6 5,154,081 4,875,394 5,732,132 6,661,000 7,195,424 29,618,031, 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties 946,759. 706,115. 865,378. 580,916. 363,083. and income from similar sources 3 462 251. b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 946,759. 706,115. 865,378. 580,916. 363,083. c Add lines 10a and 10b 3,462,251. 11 Net income from unrelated husiness activities not included in line 10b, whether or not the business is regularly carried on 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) 6,100,840. 5,581,509. 6,597,510, 7.241.916 7,558,507. 33,080,282. 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 15 Public support percentage for 2011 (line 8, column (f) divided by line 13, column (f) 89.53 15 % Public support percentage from 2010 Schedule A, Part III, line 15 86.61 16 % Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2011 (line 10c, column (f) divided by line 13, column (f)) 10.47 17 % 18 Investment income percentage from 2010 Schedule A, Part III, line 17 18 13.39 19a 33 1/3% support tests - 2011. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization $\triangleright \mathbf{X}$ b 33 1/3% support tests - 2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

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 Inspection

Name of the organization

NORTH AMERICAN CATHOLIC EDUCATIONAL PROGRAMMING FOUNDATION,

Employer identification number 22-3032456

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 2 Aggregate contributions to (during year) Aggregate grants from (during year) 3 Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year > Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year > \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items a Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

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

| = | dule D (Form 990) 2011 PROGRAM T III Organizations Maintaining C | MING FOUND Collections of A | | | sures, o | r Other | | | 32456 ts (conti | | |
|--------|--|-----------------------------|-----------------|--------------------|----------------|-------------|-----------|-----------|--|--------------------|----------|
| 3 | Using the organization's acquisition, accessi | | | | | | | | | | |
| - | (check all that apply) | | • | | | J | | | | | |
| а | Public exhibition | c | I Loan | or exchan | ge progran | ns | | | | | |
| b | Scholarly research | e | | | • | | | | | | |
| C | Preservation for future generations | | | | | _ | | | | _ | |
| 4 | Provide a description of the organization's co | ollections and explai | n how they fu | rther the o | rganizatioi | n's exemp | ot purpo | se in Pai | t XIV | | |
| 5 | During the year, did the organization solicit of | • | - | | _ | | | | | | |
| _ | to be sold to raise funds rather than to be ma | | | | | | | | Yes | | No |
| Par | t IV Escrow and Custodial Arran | | | | | es" to Fo | rm 990. | Part IV. | | | |
| | reported an amount on Form 990, Pa | | J | | | | · | • | | | |
| | Is the organization an agent, trustee, custod | an or other intermed | diary for contr | butions or | other ass | ets not in | cluded | | | | |
| | on Form 990, Part X? | | - | | | | | | Yes | | No |
| b | If "Yes," explain the arrangement in Part XIV | and complete the fo | llowing table | | | | | | | | |
| _ | | • | J | | | | | | Amount | | |
| С | Beginning balance | | | | | | 1c | | - | | |
| d | Additions during the year | _ | | | | | 1d | | | | |
| e | Distributions during the year | | | | | | 1e | | | | |
| f | Ending balance | | | | | | 1f | | | | |
| 2a | Did the organization include an amount on F | orm 990. Part X. line | 21? | | | | <u> </u> | | Yes | op | No |
| | If "Yes," explain the arrangement in Part XIV | | | | | | | | _ ,,, | | |
| Par | | | swered "Yes | to Form 9 | 990, Part I\ | /, line 10 | | | | | |
| | | (a) Current year | (b) Prior y | |) Two years | | Three ve | ears back | (e) Four | vears | back |
| 1a | Beginning of year balance | (2) | (5) | 10 | <u> </u> | 100. | | | 107:00: | ,,,,, | <u> </u> |
| b | Contributions | | | | | | | | | | |
| - | Net investment earnings, gains, and losses | | | | | | | | | | |
| d | Grants or scholarships | | | | | | | | | | |
| e | Other expenditures for facilities | | | | | | | | | | |
| C | and programs | | | | | | | | | | |
| | Administrative expenses | | | | _ | -+ | | | | | |
| ' | End of year balance | | - | | | | | | | | |
| 9 2 | Provide the estimated percentage of the cur | rent year end haland | e /line 1g. col | umn (a)) he | ald as | | | | 1 | | |
| | Board designated or quasi-endowment | rem year end balanc | % | umm (<i>a))</i> m | ciu as | | | | | | |
| a | Permanent endowment | % | _′° | | | | | | | | |
| b | Temporarily restricted endowment | % | | | | | | | | | |
| С | The percentages in lines 2a, 2b, and 2c shou | | | | | | | | | | |
| 20 | Are there endowment funds not in the posse | | ation that are | hald and a | dminietora | ed for the | Organiz | ation | | | |
| Sa | by: | osion of the organiz | anon mar arc | noid and a | 20111111131616 | od ioi tiie | Organiz. | ation | Γ | Yes | No |
| | | | | | | | | | 3a(i) | 163 | 110 |
| | | | | | | | | | | | |
| | (ii) related organizations If "Yes" to 3a(ii), are the related organizations | e lietod ae regiured d | n Schodula E | 2 | | | | | 3a(ii) 3b | | |
| 4 | Describe in Part XIV the intended uses of the | | | | | | | | [30] | | |
| | rt VI Land, Buildings, and Equipm | | | | | | | | | | |
| | Description of property | (a) Cost or o | |) Cost or c | othor | (a) Acc | umulate | 4 | (d) Book | · volue | |
| | Description of property | basis (investr | | basis (oth | ľ | | ciation | , | (u) DOOK | value | , |
| | Land | | | 161, | | 30010 | | - | 161 | 3 | 61. |
| - | Buildings | | | 796, | | 20 | 5,31 | R - | | 7: | |
| | Leasehold improvements | | | , ,,,, | 020. | 45 | , , , , , | | 300 | , , , . | 10. |
| | Equipment Equipment | | | 708, | 282 | 66 | 3,87 | 72 | 1/ | 1 1 | 10. |
| | Other | | | | 031. | | 8,03 | | | . , . . | 0. |
| | Add lines 1a through 1e (Column (d) must e | gual Form 990. Part | X. column (R) | | | | | <u> </u> | 706 | 5.4 | |

| Schedule D (Form 990) 2011 PROGRAMMIN | G FOUNDATION | , INC. | 22-3032456 Page 3 |
|---|---------------------------------------|--------------------------------|---|
| Part VII Investments - Other Securities. | See Form 990, Part X, line | 12 | |
| (a) Description of security or category | (b) Book value | | (c) Method of valuation |
| (including name of security) | | C | ost or end-of-year market value |
| (1) Financial derivatives | - | | |
| (2) Closely-held equity interests | | | |
| (3) Other | | | |
| (A) (B) | | | - · · · · · |
| (C) | | | |
| (D) | | | 7,1 16 1 |
| (E) | | | |
| | | | |
| (G) | | | |
| (H) | | | |
| (1) | | | |
| Total. (Col (b) must equal Form 990, Part X, col (B) line 12.) | | | |
| Part VIII Investments - Program Related. | See Form 990, Part X, lin | e 13 | |
| (a) Description of investment type | (b) Book value | Co | (c) Method of valuation ost or end-of-year market value |
| (1) | | | |
| (2) | | | |
| (3) | | | |
| (4) | | | |
| (5) | | | |
| (6) | | | |
| | | | |
| (8) | | | |
| (9) | | | |
| (10) Total (Col (b) must equal Form 990, Part X, col (B) line 13.) ▶ | | | |
| Part IX Other Assets. See Form 990, Part X, Iir | | | |
| | a) Description | | (b) Book value |
| (1) | | | (0, 200 |
| (2) | | | |
| (3) | | | |
| (4) | | | |
| (5) | | | |
| (6) | | | |
| (7) | | | |
| (8) | | | |
| (9) | | | |
| (10) | · | | |
| Total. (Column (b) must equal Form 990, Part X, col (B) In Part X Other Liabilities. See Form 990, Part X | | · · | > |
| 1. (a) Description of liability | | (b) Book value | |
| (1) Federal income taxes | | · | _] |
| (2) | | | |
| (3) | | | |
| (4) | | | 1 |
| (5) | | | |
| (6) | - | | _ |
| (7) | | | - |
| (8) | | | 4 |
| (9) | | | - |
| (10) | | | - |
| (11) | 25.05.1 | | - |
| Total. (Column (b) must equal Form 990, Part X, col (B) In FIN 48 (ASC 740) Footnote in Part XIV, provide the text of the footnote FIN 48 (ASC 740) | e to the organization's financial sta | tements that reports the organ | l nization's liability for uncertain tax positions under |
| 132053 | | | Schedule D (Form 990) 2011 |
| 01-23-12 | | | Schedule D (Form 990) 2011 |

NORTH AMERICAN CATHOLIC EDUCATIONAL Schedule D (Form 990) 2011 PROGRAMMING FOUNDATION, 22-3032456 Page 4 Part XI | Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements Total revenue (Form 990, Part VIII, column (A), line 12) Total expenses (Form 990, Part IX, column (A), line 25) 2 2 Excess or (deficit) for the year. Subtract line 2 from line 1 3 3 Net unrealized gains (losses) on investments 4 Donated services and use of facilities 5 Investment expenses 6 7 Prior period adjustments 7 8 Other (Describe in Part XIV) 8 9 Total adjustments (net). Add lines 4 through 8 9 Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9 10 Part XII | Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Total revenue, gains, and other support per audited financial statements Amounts included on line 1 but not on Form 990, Part VIII, line 12 2 Net unrealized gains on investments 2a Donated services and use of facilities 2b Recoveries of prior year grants 2c Other (Describe in Part XIV) 2d e Add lines 2a through 2d 2e Subtract line 2e from line 1 3 Amounts included on Form 990, Part VIII, line 12, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIV) ь Add lines 4a and 4b 4c Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities 2a Prior year adjustments 2b Other losses 2c d Other (Describe in Part XIV) 2d Add lines 2a through 2d 2e 3 Subtract line 2e from line 1 3 Amounts included on Form 990, Part IX, line 25, but not on line 1 a investment expenses not included on Form 990, Part VIII, line 7b 4a Other (Describe in Part XIV) 4h c Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) 5 Part XIV Supplemental Information Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4; Part X, line 2; Part XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

SCHEDULE'F (Form 990)

Statement of Activities Outside the United States

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

2011
Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number

| NORTH AMERICAN | | | ONAL | | 00 00004 | F.C |
|---|---------------------------------------|---|--|------------------|--|-------------------------------|
| PROGRAMMING FOU | , NDATION | INC. | haida dha Ulaida d Olaisa | | 22-30324 | 56 |
| | | ctivities Ou | tside the United States. Comple | ete if the organ | ization answered | "Yes" |
| to Form 990, Pa | | _ | | | | |
| ₹ | - | | ds to substantiate the amount of its gra | | | ٦ |
| the grantees' eligibility f | or the grants or a | assistance, and | the selection criteria used to award the | grants or assi | stance? L | Yes X No |
| 2 For grantmakers. Desc | cribe in Part V the | e organization's | procedures for monitoring the use of its | grants and ot | her assistance ou | tside the |
| United States. | | | | | | |
| 3 Activities per Region. (T | he following Part | | an be duplicated if additional space is r | needed) | | |
| (a) Region | (b) Number of | (c) Number of employees, | , · · | | /ity listed in (d) | (f) Total expenditures |
| | offices in the region | agents, and independent contractors | (by type) (e g , fundraising, program services, investments, grants to recipients located in the region) | describe | gram service, specific type e(s) in region | for and investments in region |
| | | in region | | | | iii region |
| | | | | | | |
| CENTRAL AMERICA | | | GRANTS | | | 42,500. |
| | | | | | | |
| | | | | | | |
| AFRICA | | | GRANTS | | | 47,000. |
| | | | | | | |
| | | | | | | |
| SOUTH AMERICA | | | GRANTS | | | 19,089, |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | · · · · · · · · · · · · · · · · · · · | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | _ | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | 1 | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| 3 a Sub-total | 0 | 0 | | | ··· | 108,589. |
| b Total from continuation sheets to Part I | 0 | 0 | | | | |
| c Totals (add lines 3a | <u>_</u> | | | | | 0. |
| and 3 <u>b)</u> | 0 | 0 | | | | 108 589. |
| | <u> </u> | | ·————————————————————————————————————— | | | |

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

NORTH AMERICAN CATHOLIC EDUCATIONAL PROGRAMMING FOUNDATION, INC.

Page 2

22-3032456

| 22-3032456 | Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any | than \$5,000 | |
|----------------------------|--|---|---|
| INC. | Jnited States. | it received more | |
| IING FOUNDATION, INC. | ations or Entities Outside the l | recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 | is needed |
| PROGRAMMING F | ' Assistance to Organiza | 31ved more than \$5,000. C | Part II can be duplicated if additional space is needed |
| Schedule F (Form 990) 2011 | Grants and Other | recipient who rece | Part II can be dup |
| Schedule | PartII | | |

| (i) Method of valuation (book, FMV, appraisal, other) | | | | | | |
|---|---|---|--|---|--|---|
| (h) Description of non-cash assistance | | | | | | |
| (g) Amount of non-cash assistance | 0 | 0 | | | | empt by |
| (f) Manner of cash disbursement | 42,500, WIRE TRANSFER | 47 000 WIRE TRANSFER | | | | recognized as tax-ex |
| (e) Amount of cash grant | 42,500. | 47,000. | | | | foreign country, |
| (d) Purpose of grant | CONSTRUCTION OF A CHURCH AND ITS RELATED FACILITIES | CONSTRUCTION OF A CHURCH AND ITS RELATED FACILITIES | | | | Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by |
| (c) Region | CENTRAL AMERICA | AFRICA | | | | is listed above that are i |
| (b) IRS code section and EIN (if applicable) | | | | , | | recipient organization |
| 1 (a) Name of organization | | | | | | 2 Enter total number of r |

the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

Enter total number of other organizations or entities

က

PROGRAMMING FOUNDATION, INC.

Schedule F (Form 990) 2011

Page 3

22-3032456

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

Part III can be duplicated if additional space is needed.

| , , | l | 1 | ı | 1 | ı | ı | 1 | 1 | , |
|---|---------------|---|---|---|---|---|---|---|---|
| (h) Method of valuation (book, FMV, appraisal, other) | | | | | | | | | |
| (g) Description of non-cash assistance | | | | | | | | | |
| (f) Amount of non-cash assistance | 0 | | | | | | | | |
| (e) Manner of cash disbursement | WIRE TRANSFER | | | | | | | | |
| (d) Amount of cash grant | 19,089 | | | | | | | | |
| (c) Number of recipients | 1 | | | | | | | | |
| (b) Region | SOUTH AMERICA | | | | | | | | |
| (a) Type of grant or assistance | | | | | | | | | |

22

| <u>Scnea</u> | ule F (Form 990) 2011 PROGRAMMING FOUNDATION, INC. | <u> </u> | Page 4 |
|--------------|---|-----------|--------|
| Part | IV Foreign Forms | | |
| | | | |
| 1 | Was the organization a U.S transferor of property to a foreign corporation during the tax year? If "Yes." the | | |
| | organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign | | |
| | Corporation (see Instructions for Form 926) | Yes | X No |
| 2 | Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization | | |
| 2 | may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and | | |
| | Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With | | |
| | a 11.0. Occasion for a factorist and for Fig. 11. 0500. 1.0500. 1. | □ v | X No |
| | a U.S. Owner (see Instructions for Forms 3520 and 3520-A) | . L_l Yes | LA NO |
| 3 | Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," | | |
| | the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To | | |
| | Certain Foreign Corporations (see Instructions for Form 5471) | Yes | X No |
| 4 | Was the organization a direct or indirect shareholder of a passive foreign investment company or a | | |
| | qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621. | | |
| | Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. | | |
| | (see Instructions for Form 8621) | Yes | X No |
| | | | |
| 5 | Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," | | |
| | the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain | | |
| | Foreign Partnerships. (see Instructions for Form 8865) | Yes | X No |
| | | | |
| 6 | Did the organization have any operations in or related to any boycotting countries during the tax year? If | | |
| | "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions | | |
| | for Form 5713) | Yes | X No |
| | | | |

| Schedule F (Form 990) 2011 PROGRAMMING FOUNDATION, INC. | 22-3032456 Page 5 |
|--|---|
| Part V Supplemental Information | |
| Complete this part to provide the information required by Part I, line 2 (monitoring of funds) | Part I, line 3, column (f) (accounting method |
| amounts of investments vs expenditures per region), Part II, line 1 (accounting method); P | |
| (c) (estimated number of recipients), as applicable. Also complete this part to provide any a | |
| | |
| SCHEDULE F, PART I, LINE 2: CONTRIBUTIONS ARE MONITOR | ORED BY RELIGIOUS |
| BOHLDON I THE TANKE IT DELLE IN CONTRIBUTION INCL. MONTH | AND DI KBBIGIOOD |
| STAFF AT FOREIGN MISSIONS BY THEIR U.S. STAFF | |
| DIMIT AT TOKETON MIDDIONO DI THEIR O.D. DIAFT | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | - |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| · · · · · · · · · · · · · · · · · · · | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | : - |
| | |
| | |
| | |

SCHEDULE I (Form 990)

Grants and Other Assistance to Organizations,

OMB No 1545-0047

| (Form 990) | | | Government | Governments, and Individuals in the United States | in the United Sta | tes | | 2011 | |
|--|--|--------------------|--|---|---|---|---|---|---------------|
| Department of the Treasury | | Comple | Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. | n answered "Yes" | ' to Form 990, Par | t IV, line 21 or 22. | | Open to Public | . i |
| Internal Revenue Service | | | | ► Attach to Form 990. | n 990. | | | Inspection | _ |
| Name of the organization I | NORTH AMERICAN CATHOLIC PROGRAMMING FOUNDATION, | \Box | | EDUCATIONAL INC. | | | | Employer identification number 22–3032456 | umber 156 |
| Part I General Informa | General Information on Grants and Assistance | d Assistance | | | | | | | |
| 1 Does the organization maintain records to substantiate the amount of | maintain records to | substantiate the | | or assistance, the | grantees' eligibilit | y for the grants or ass | the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection | noı | |
| criteria used to award the grants or assistance? | the grants or assist | tance? | | | | | | X Yes | % □ |
| 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States | organization's proc | cedures for monito | oring the use of grant | funds in the United | States | | | | |
| Part II Grants and Othe | er Assistance to G | sovernments and | Organizations in the | e United States. C | omplete if the orga | anization answered "Y | Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any | IV, line 21, for any | |
| recipient that rec | served more than \$ | 5,000 Check this | box if no one recipier | t received more th | an \$5,000. Part II | can be duplicated if a | recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed | ded | |
| 1 (a) Name and address of organization or government | of organization ent | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, EMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance | |
| MALAWI BENEFACTION-HOLY GHOST | ASOHO A' | | | | | | | פווסדטרופם פתדאספם סת | |
| FATHERS - 48/49 37TH STREET - 1.ONG | STREET - LONG | | | | | | | TO THE WEST TOTOLS | 5 |
| ISLAND, NY 11101 | | 11-2424823 | | 47,000 | 0 | | | DONALIONS TO RELIGIO ORGANIZATIONS | o S |
| ST PATRICK ACADEMY | | | | | | | | | |
| 244 SMITH STREET | | | | | | | | FUNDING FOR TUITION | |
| PROVIDENCE, RI 02908 | | 05-0259044 | | 100,000. | 0 | | | GRANTS, | |
| | | | | | | | | TO PROVIDE LAPTOP | |
| | SCHOOL | | | | | | | COMPUTERS AS LEARNING | ניז |
| TWOOD | | | | | | | | TOOLS TO EDUCATIONAL | |
| ANCHORAGE, AK 99517 | | 92-0063628 | | 0 | 4,828, | COST | LAPTOPS | ORGANIZATIONS. | |
| | | | | | | | | TO PROVIDE LAPTOR | |
| BARTON COUNTY ACADEMY | | | | | | | | COMPUTERS AS LEARNING | ניז |
| 5220 w. 10TH STREET | | | | | | | | TOOLS TO EDUCATIONAL | |
| GREAT BEND, KS 67530 | | 48-1069538 | | 0 | 13,189. | COST | LAPTOPS | ORGANIZATIONS, | |
| | | | | | | | | TO PROVIDE LAPTOP | |
| BISHOP MOORE CATHOLIC HIGH SCHOOL | HIGH SCHOOL | | | | | | | COMPUTERS AS LEARNING | ריז |
| 3EWA | | | | | | | | TOOLS TO EDUCATIONAL | |
| ORLANDO, FL 32804 | | 26-2360648 | | 0 | 480 | COST | LAPTOPS | ORGANIZATIONS. | |
| | | | | | | | | TO PROVIDE LAPTOP | |
| BLESSED TERESA SCHOOL | | | | | | | | COMPUTERS AS LEARNING | ניז |
| 150 NORTH ELIZABETH AVENUE | ENUE | | | | | | | TOOLS TO EDUCATIONAL | |
| FERGUSON MO 63135 | | 43-0745285 | | 0. | 480, COST | COST | LAPTOPS | ORGANIZATIONS. | İ |
| 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table | ection 501(c)(3) an | d government org | anizations listed in the | e line 1 table | | | | ^ | |

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

22-3032456

Page 1

Schedule I (Form 990) PROGRAMMING FOUNDATION, INC.

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

| | on on minimum | or minimum or gar | | | m (1/200) | , | |
|--|---------------|----------------------------------|-----------------------------|-----------------------------------|--|--|---|
| (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 |
| CATHOLIC PARTNERSHIP SCHOOL 808 MARKET STREET CAMDEN NJ 88102 | 27-3236916 | | c | 4 0 8 | #20J | раона к .н | TO PROVIDE LAPTOP COMPUTERS AS LEARNING TOOLS TO EDUCATIONAL |
| IA SC | 91-6001891 | | 0 | | LSOO | , Septions , | TO PROVIDE LAPTOP COMPUTERS AS LEARNING TOOLS TO EDUCATIONAL ORGANIZATIONS |
| DAY SPRING CHRISTIAN ACADEMY 120 COLLEGE AVENUE MOUNTVILLE: PA 18554 | 23-2833032 | | O | 433 | ESOO | L.A.PTOPS | TO PROVIDE LAPTOP COMPUTERS AS LEARNING TOOLS TO EDUCATIONAL ORGANIZATIONS |
| DENISON HIGH SCHOOL 1901 SOUTH MIRICK DENISON, TX 75020 | 75-6001307 | | 0 | 910 | COST | LAPTOPS | TO PROVIDE LAPTOP COMPUTERS AS LEARNING TOOLS TO EDUCATIONAL ORGANIZATIONS, |
| EAST OTERO SCHOOL DISTRICT 1802 COLORADO AVE, STE 200 LA JUNTA, CO 81050 | 84-6014414 | | 0 | 13.097.8 | LSOO | LAPTOPS | TO PROVIDE LAPTOP COMPUTERS AS LEARNING TOOLS TO EDUCATIONAL ORGANIZATIONS. |
| EMPORIA CHRISTIAN SCHOOL 1325 C OF E DRIVE EMPORIA, KS 66801 | 48-1118690 | | 0 | 910. | COST | LAPTOPS | TO PROVIDE LAPTOP COMPUTERS AS LEARNING TOOLS TO EDUCATIONAL ORGANIZATIONS, |
| ENGLISH FOR ACTION 122 MANTON AVENUE PROVIDENCE, RI 02909 | 05-0517099 | | 0 | 4,800,0 | cost | LAPTOPS | TO PROVIDE TECHNOLOGY RESOURCES TO NONPROFIT ORGANIZATIONS, |
| HOMELESS NETWORK 1713 FORTVIEW ROAD AUSTIN, TX 78704 | 74-2646586 | | 0 | 480.0 | COST | LAPTOPS | TO PROVIDE TECHNOLOGY RESOURCES TO NONPROFIT ORGANIZATIONS, |
| FLORIDA VIRTUAL SCHOOL 2145 METROCENTER BLVD ORLANDO, FL 32835 | 85-8013320 | | 0 | 12,000, COST | TSO | LAPTOPS | TO PROVIDE LAPTOP COMPUTERS AS LEARNING TOOLS TO EDUCATIONAL ORGANIZATIONS, |

22-3032456

Page 1

PROGRAMMING FOUNDATION, INC.

Schedule I (Form 990)

COMPUTERS AS LEARNING COMPUTERS AS LEARNING COMPUTERS AS LEARNING COMPUTERS AS LEARNING COMPUTERS AS LEARNING COMPUTERS AS LEARNING COMPUTERS AS LEARNING COMPUTERS AS LEARNING COMPUTERS AS LEARNING (h) Purpose of grant or assistance FOOLS TO EDUCATIONAL FOOLS TO EDUCATIONAL COOLS TO EDUCATIONAL COOLS TO EDUCATIONAL COOLS TO EDUCATIONAL OOLS TO EDUCATIONAL FOOLS TO EDUCATIONAL FOOLS TO EDUCATIONAL FOOLS TO EDUCATIONAL TO PROVIDE LAPTOP O PROVIDE LAPTOP RGANIZATIONS. RGANIZATIONS. RGANIZATIONS. RGANIZATIONS, ORGANIZATIONS, ORGANIZATIONS, ORGANIZATIONS. RGANIZATIONS. RGANIZATIONS (g) Description of non-cash assistance APTOPS APTOPS APTOPS APTOPS APTOPS APTOPS APTOPS APTOPS LAPTOPS Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule | (Form 990), Part II.) appraisal, other) (f) Method of valuation (book, FMV, COST COST COST COST COST 7,365,cosT 22,910,COST 6,225,COST 11,433,cosT 1,920. 12,000. 11.477. 480. (e) Amount of non-cash assistance 12,000, 0 Ö Ö o. ٥. (d) Amount of cash grant 0 o. o. (c) IRC section if applicable 86-6000515 36-3390462 86-0858084 35-0992114 20-4513784 05-0519201 94-6002635 91-6001571 (p) EIN CAPE PARISH - 468 STONY BROOK RD -FR BERNARD BARIS- OUR LADY OF THE JACK LONDON ELEMENTARY SCHOOL HOLY FAMILY CATHOLIC ACADEMY INTERNATIONAL CHARTER SCHOOL (a) Name and address of organization or government GALVESTON ELEMENTARY SCHOOL HOLY CROSS LUTHERAN SCHOOL KIONA-BENTON MIDDLE SCHOOL 1601 ST JOE RIVER DRIVE 17606 NORTH 7TH AVENUE 2707 FRANCISCO AVENUE BENTON CITY, WA 99320 FORT WAYNE, IN 46805 VERO BEACH, FL 32968 PAWTUCKET , RI 02860 SANTA ROSA, CA 95403 334 PLEASANT STREET INVERNESS, IL 60067 CHANDLER, AZ 85225 2515 PALATINE ROAD 661 E GALVESTON ST PHOENIX , AZ 85023 BREWSTER, MA 02631 1107 GRACE AVENUE IMAGINE SCHOOLS 6000 4TH STREET HEARN ACADEMY

| EDUCATIONAL | INC. |
|----------------|---------------|
| CATHOLIC | FOUNDATION, I |
| NORTH AMERICAN | PROGRAMMING I |

| Schedule I (Form 990) PROGRAMMING FOUNDATION, | MMING FOUNDA | NDATION, INC. | | | | | 22-3032456 Page 1 |
|--|------------------|----------------------------------|--------------------------|---|--|---|------------------------------------|
| Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II) | Assistance to Go | vernments and Organ | nizations in the Ur | ited States (Sche | dule I (Form 990), Pa | (L | |
| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
| | | | | | | | TO PROVIDE LAPTOP |
| LAWRENCE CATHOLIC ACADEMY | | | | | | | COMPUTERS AS LEARNING |
| 101 PARKER STREET | | | | | | - | TOOLS TO EDUCATIONAL |
| LAWRENCE MA 01843 | 27-2281636 | : | 0 | 480. | COST | LAPTOPS | ORGANIZATIONS, |
| | | | | | | | TO PROVIDE LAPTOP |
| LUTHERAN SOUTH UNITY SCHOOL | | | | | | | COMPUTERS AS LEARNING |
| 1601 ST JOE RIVER DRIVE | | | | | | | TOOLS TO EDUCATIONAL |
| FORT WAYNE, IN 46805 | 23-3266542 | | 0 | 4,582,0 | COST | LAPTOPS | ORGANIZATIONS, |
| | | | | | | | TO PROVIDE LAPTOP |
| MALVERN HIGH SCHOOL | | | | | | | COMPUTERS AS LEARNING |
| 525 EAST HIGHLAND | | | | | | | TOOLS TO EDUCATIONAL |
| MALVERN, AR 72104 | 71-6020823 | | 0 | 4,150, | COST | LAPTOPS | ORGANIZATIONS, |
| | | | | | | | TO PROVIDE LAPTOP |
| MANZANITA ELEMENTARY SCHOOL | | | | | | | COMPUTERS AS LEARNING |
| 2601 DETROIT AVENUE | | | | | | | TOOLS TO EDUCATIONAL |
| KINGMAN, AZ 86401 | 86-0815844 | | 0 | 4,150. | COST | LAPTOPS | ORGANIZATIONS, |
| | | | | | | | TO PROVIDE LAPTOP |
| MAUNA LOA SCHOOL | | | | | | | COMPUTERS AS LEARNING |
| 172 KAPIOLANI STREET | | | | | | | TOOLS TO EDUCATIONAL |
| ніго, ні 96720 | 99-0222903 | | 0 | 12,027,COST | OST | LAPTOPS | ORGANIZATIONS. |
| | | | | | | | TO PROVIDE LAPTOP |
| MAYWOOD MIDDLE SCHOOL | | | | | | | COMPUTERS AS LEARNING |
| 1666 MARGUERITA AVENUE | | | | | | | TOOLS TO EDUCATIONAL |
| CORNING, CA 96021 | 16-1689300 | | 0 | 13,165, | COST | LAPTOPS | ORGANIZATIONS, |
| | | | | | | | TO PROVIDE LAPTOP |
| MESSIAH COLLEGE | | | | | | | COMPUTERS AS LEARNING |
| 1 COLLEGE AVENUE | | | | | | _ | FOOLS TO EDUCATIONAL |
| GRANTHAM, PA 17027 | 23-1352661 | | 0 | 11,477. | COST | LAPTOPS | ORGANIZATIONS. |
| | | | | | | | TO PROVIDE LAPTOP |
| MINERETS HIGH SCHOOL | | | | | | | COMPUTERS AS LEARNING |
| 45077 ROAD 200 | | | | | | | TOOLS TO EDUCATIONAL |
| O'NEALS, CA 96345 | 35-2247258 | | 0 | 619. | COST | LAPTOPS | ORGANIZATIONS. |
| | _ | | | | | | TO PROVIDE LAPTOP |
| MT CARMEL ACADEMY | | | | | | | COMPUTERS AS LEARNING |
| 7027 MILNE BLVD | | | | | | | TOOLS TO EDUCATIONAL |
| NEW ORLEANS, LA 70124 | 72-0655732 | | 0. | 480, COST | TSO: | LAPTOPS | ORGANIZATIONS. |
| | | | | | | | Schedule I (Form 990) |

132241 05-01-11

| EDUCATIONAL |
|-------------|
| CATHOLIC |
| AMERICAN |
| ORTH |

| NORTH AMERIC Schedule (Form 990) PROGRAMMING | NORTH AMERICAN CATHOLIC PROGRAMMING FOUNDATION, | 1 | EDUCATIONAL INC. | | | 2 | 22-3032456Page 1 |
|---|--|-------------------------------|--------------------------|-----------------------------------|---|---|--|
| Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) | Assistance to Go | vernments and Organ | nizations in the Ur | nited States (Sch | edule I (Form 990), Pa | rt II.) | |
| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant on assistance |
| NOBLE ACADEMY 1329 BETHEL ROAD <u>COLUMBUS</u> , OH 43220 | 20-4460475 | | 0 | 4,150, | FSOST | LAPTOPS | TO PROVIDE LAPTOP COMPUTERS AS LEARNING TOOLS TO EDUCATIONAL ORGANIZATIONS. |
| | 94-6002635 | | c | 10 375 | Evo | | TO PROVIDE LAPTOP COMPUTERS AS LEARNING TOOLS TO EDUCATIONAL |
| . ~ | | | | | | 0 101 101 | TO PROVIDE LAPTOP COMPUTERS AS LEARNING TOOLS TO EDUCATIONAL |
| LAKE HAVASU CITY, AZ 86403 | 32-0267687 | | 0 | 2,287. | COST | LAPTOPS | ORGANIZATIONS, |
| PINER OLIVET CHARTER SCHOOL 2707 FRANCISCO AVENUE SANTA ROSA CA 95403 | 72-1604701 | | 0 | 9,628 | LSOO | LAPTOPS | TO PROVIDE LAPTOP COMPUTERS AS LEARNING TOOLS TO EDUCATIONAL ORGANIZATIONS. |
| | | | | | | | TO PROVIDE LAPTOP COMPUTERS AS LEARNING TOOLS TO EDUCATIONAL |
| PROVIDENCE, RI 02905 | 05-6000329 | | 0 | 12,100, | COST | LAPTOPS | ORGANIZATIONS. |
| PLEASANTVILLE SCHOOL DISTRICT 801 MILL ROAD 3RD FLOOR PLEASANTVILLE, NJ 08232 | 21-6000286 | | 0 | 12,275, | COST | LAPTOPS | TO PROVIDE LAPTOP COMPUTERS AS LEARNING TOOLS TO EDUCATIONAL ORGANIZATIONS, |
| REDEEMER LUTHERAN SCHOOL 1955 STRATFORD AVENUE SALT LAKE CITY, UT 84106 | 87-6114070 | | *0 | 6,225, | COST | LAPTOPS | TO PROVIDE LAPTOP COMPUTERS AS LEARNING TOOLS TO EDUCATIONAL ORGANIZATIONS, |
| REGINA COELI/ST JOSEPH SCHOOL 733 FERNWOOD BLVD ALLIANCE, OH 44601 | 34-0823458 | | 0 | 12,000. | COST | LAPTOPS | TO PROVIDE LAPTOP COMPUTERS AS LEARNING TOOLS TO EDUCATIONAL ORGANIZATIONS, |
| THE LEUKEMIA & LYMPHOMA SOCIETY 1210 PONTIAC AVE CRANSTON, RI 02920 | 13-5644916 | | 0 | 480, COST | COST | LAPTOPS | TO PROVIDE TECHNOLOGY RESOURCES TO NONPROFIT ORGANIZATIONS, |

29

| EDUCATIONAL | INC. |
|-------------|------------|
| CATHOLIC | OUNDATION, |
| AMERICAN | MMING FO |
| NORTH | PROGR! |

| Schedule I (Form 990) PROGRAMMING | NORTH AMERICAN CATHOLIC PROGRAMMING FOUNDATION | TION, INC. | EDUCATIONAL INC. | odoo) ooqoqo boqio | 20 (000 ms/2) I dish | | 22-3032456 Page 1 |
|--|--|----------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| | Assistance to do | rei iiiieiiis aitu Oigai | Incations in the O | nied States (Schie | dule 1 (1 01111 930), FAI | | |
| (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 on assistance |
| | | | | | | | TO PROVIDE LAPTOP |
| RONCALLI HIGH SCHOOL | | | | | | | COMPUTERS AS LEARNING |
| 3000 PRAGUE ROAD | | | | | | | TOOLS TO EDUCATIONAL |
| INDIANOPOLIS, IN 46227 | 35-1159685 | | 0 | 480. | COST | LAPTOPS | ORGANIZATIONS, |
| | | | | | | | TO PROVIDE LAPTOP |
| SACRED HEART HIGH SCHOOL | | | | | | | COMPUTERS AS LEARNING |
| 234 E CLOUD | | | | | | | TOOLS TO EDUCATIONAL |
| SALINA, KS 67401 | 26-2936071 | | 0 | 11,433 | COST | LAPTOPS | ORGANIZATIONS, |
| | | | | • | | | TO PROVIDE LAPTOP |
| SACRED HEART SCHOOL | | | | | | | COMPUTERS AS LEARNING |
| 102 COTTONWOOD | | | | | | | TOOLS TO EDUCATIONAL |
| EMPORIA, KS 66801 | 48-0561965 | | 0 | 11,477. | COST | LAPTOPS | ORGANIZATIONS. |
| | | | | | | | TO PROVIDE LAPTOP |
| SILVER RIVER MENTORING & | | | | | | | COMPUTERS AS LEARNING |
| INSTRUCTION - 2500 SE 44TH COURT - | | | | | | | TOOLS TO EDUCATIONAL |
| OCALA, FL 34471 | 65-0509268 | | 0. | 12,275. | COST | LAPTOPS | ORGANIZATIONS. |
| | | | | | | | TO PROVIDE LAPTOP |
| SPROUL JUNIOR HIGH SCHOOL | | | | | | | COMPUTERS AS LEARNING |
| 235 SUMAC | | | | - | | | TOOLS TO EDUCATIONAL |
| COLORADO SPRINGS, CO 80911 | 84-6001176 | | 0. | 12,275. | COST | LAPTOPS | ORGANIZATIONS, |
| | | | | | | | TO PROVIDE LAPTOP |
| ST BRIGID OF KILDARE SCHOOL | | | | | | | COMPUTERS AS LEARNING |
| 7175 AVERY ROAD | | | | | | | TOOLS TO EDUCATIONAL |
| DUBLIN, OH 43017 | 31-1210510 | | 0 | 480. | COST | LAPTOPS | ORGANIZATIONS. |
| | | | | | | | TO PROVIDE LAPTOP |
| ST FRANCIS OF ASSISI SCHOOL | | | | | | | COMPUTERS AS LEARNING |
| 1938 ALFRESO PLACE | | | | | | | TOOLS TO EDUCATIONAL |
| LOUISVILLE, KY 40205 | 61-0444804 | | 0 | 480.0 | COST | LAPTOPS | ORGANIZATIONS. |
| | | | | | | | TO PROVIDE LAPTOP |
| ST JOHN NEUMANN CATHOLIC SCHOOL | | | | | | | COMPUTERS AS LEARNING |
| 721 POLO ROAD | | | | | | | TOOLS TO EDUCATIONAL |
| COLUMBIA, SC 29223 | 57-0812070 | | 0. | 480.0 | COST | LAPTOPS | ORGANIZATIONS. |
| | | | | | | | TO PROVIDE LAPTOP |
| ST JOSEPH SCHOOL | | | | | | | COMPUTERS AS LEARNING |
| 4011 ALEXANDRIA PIKE | | | | | | | TOOLS TO EDUCATIONAL |
| COLD SPRING, KY 41076 | | | 0 | 480, COST | COST | LAPTOPS | ORGANIZATIONS, |
| | | | | | | | Schedule I (Form 990) |

30

Page 1 22-3032456

Schedule I (Form 990) PROGRAMMING FOUNDATION, INC.

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

| | | | | | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | |
|--|------------|----------------------------------|--------------------------|-----------------------------------|---|---|---|
| (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 |
| ST JUDE THE APOSTLE SCHOOL | | | | | | | TO PROVIDE LAPTOP COMPUTERS AS LEARNING |
| ATLANTA, GA 30328 | 58-0877839 | | 0. | 480°C | COST | LAPTOPS | TOOLS TO EDUCATIONAL ORGANIZATIONS. |
| | | | | | | | TO PROVIDE LAPTOP |
| ST MARGARET CATHOLIC SCHOOL | | | | - | | | COMPUTERS AS LEARNING |
| 2510 ENTERPRISE BLVD | 73467 | | c | 08.4 | E o | Sachae | TOOLS TO EDUCATIONAL |
| | | | | - | | | TO PROVIDE LAPTOP |
| ST PATRICK SCHOOL AND EDUCATION | | | | | | | COMPUTERS AS LEARNING |
| | | | | | | | TOOLS TO EDUCATIONAL |
| LOWELL, MA 01854 | 20-1566134 | | 0 | 480.0 | COST | LAPTOPS | ORGANIZATIONS, |
| | | | | | | | TO PROVIDE LAPTOP |
| | | | | | | | COMPUTERS AS LEARNING |
| 4141 41ST AVENUE | | | | | | | TOOLS TO EDUCATIONAL |
| SEATTLE, WA 98116 | 91-0967016 | | 0. | 12,027. | COST | LAPTOPS | ORGANIZATIONS, |
| | | | | | | | TO PROVIDE LAPTOP |
| ST GERALD CATHOLIC HIGH SCHOOL | | | | | | | COMPUTERS AS LEARNING |
| 521 SOUTH NEW BRAUNFELS AVE | | | | - | | | TOOLS TO EDUCATIONAL |
| SAN ANTONIO, TX 78203 | 23-7419164 | | 0. | 18,198,0 | COST | LAPTOPS | ORGANIZATIONS. |
| | | | | | | | TO PROVIDE LAPTOP |
| ST JOHN VIANNEY SCHOOL | | | | | | | COMPUTERS AS LEARNING |
| S. | | | | | | | TOOLS TO EDUCATIONAL |
| KAILUA , HI 96734 | 99-0109424 | | 0 | 7,228.0 | COST | LAPTOPS | ORGANIZATIONS, |
| | | | | | | | TO PROVIDE LAPTOP |
| ST MICHAELS ACADEMY | | | | | | | COMPUTERS AS LEARNING |
| 8599 NORTH STREET | | | | | | | TOOLS TO EDUCATIONAL |
| SPOKANE, WA 99217 | 71-0908285 | | 0. | 11,477,0 | COST | LAPTOPS | ORGANIZATIONS. |
| | | | | | | | TO PROVIDE LAPTOP |
| ST PATRICK CATHOLIC SCHOOL | | | | | | _ | COMPUTERS AS LEARNING |
| 235 SOUTH BEAVER STEET | _ | | | | | | FOOLS TO EDUCATIONAL |
| YORK, PA 17401 | 23-1352473 | | 0. | 4,617,0 | COST | LAPTOPS | ORGANIZATIONS. |
| | • | | | | | | TO PROVIDE LAPTOP |
| ST PAUL'S LUTHERAN SCHOOL | • | | | | | | COMPUTERS AS LEARNING |
| r.a | | | | | | | FOOLS TO EDUCATIONAL |
| FORT WAYNE, IN 46805 | 26-3266542 | | 0. | 4,582,COST | OST | LAPTOPS | ORGANIZATIONS, |
| | | | | | | | Schedule I (Form 990) |

Page 1

NORTH AMERICAN CATHOLIC EDUCATIONAL PROGRAMMING FOUNDATION, INC.

| PROGRAMMING FOUNDATION, INC. | rants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II) |
|------------------------------|---|
| | Continuation of Gra |
| Schedule | Part II |

| (a) Name and address of (b) EIN (c) IRC section organization or government (a) EIN (b) EIN (c) IRC section organization or government (b) EIN (c) IRC section (d) Amount of (d) Amount of (e) Amount of (f) Method o | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|----------------------------------|--------------------------|-----------------------------------|---|---|--|
| ST STEPHEN'S EPISCOPAL SCHOOL 215 NORTH FRONT STREET HARRISBURG, PA 17101 | 23-2107935 | | 0 | 6.225 | LSOO | LAPTOPS | TO PROVIDE LAPTOP COMPUTERS AS LEARNING TOOLS TO EDUCATIONAL ORGANIZATIONS |
| TIMAE AVENU FI | 59-2438918 | | c | 555 | | арторс | TO PROVIDE LAPTOP COMPUTERS AS LEARNING TOOLS TO EDUCATIONAL |
| TIELD SCH VISTRATIV ST - COLC | 84-6001176 | | ó | 12 275.0 | | LAPTOPS | TO PROVIDE LAPTOP COMPUTERS AS LEARNING TOOLS TO EDUCATIONAL ORGANIZATIONS |
| WORD OF OUTREACH CHRISTIAN ACADEMY 3300 ASHER AVENUE LITTLE ROCK, AR 72204 | 71-0825982 | | 0 | 18,093,0 | | APTOPS | TO PROVIDE LAPTOP COMPUTERS AS LEARNING TOOLS TO EDUCATIONAL ORGANIZATIONS, |
| YORK CATHOLIC HIGH SCHOOL 601 EAST SPRINGETTISBURY AVENUE YORK, PA 17403 | 23-2047570 | | 0 | 7,365,7 | ESOO | LAPTOPS | TO PROVIDE LAPTOP COMPUTERS AS LEARNING TOOLS TO EDUCATIONAL ORGANIZATIONS |
| S. P? | 31-1041555 | | 0 | | | SECURITY SYSTEMS | TO PROVIDE ENHANCED SECURITY & MONITORING OVER EBS BROADBAND SECURITY SYSTEMS NETWORKS FOR EDUCATIONAL |
| CHRIST THE KING SCHOOL 1551 E. DANA AVENUE MESA, AZ 85204 | 30-0513890 | | o | 5,601,8 | COST | SECURITY SYSTEMS | TO PROVIDE ENHANCED SECURITY & MONITORING OVER EBS BROADBAND SECURITY SYSTEMS NETWORKS FOR EDUCATIONAL |
| COLUMBIA SCHOOL DISTRICT 755 MAPLE STREET BURBANK, WA 99323 | 91-6001891 | | 0 | 5,601,0 | COST | SECURITY SYSTEMS | TO PROVIDE ENHANCED SECURITY & MONITORING OVER EBS BROADBAND SECURITY SYSTEMS NETWORKS FOR EDUCATIONAL |
| DAY SPRING CHRISTIAN ACADEMY 120 COLLEGE AVENUE MOUNTVILLE, PA 17554 | 23-2833032 | | 0 | 5,601,0 | COST | TO PROVII SECURITY OVER EBS SECURITY SYSTEMS NETWORKS | TO PROVIDE ENHANCED SECURITY & MONITORING OVER EBS BROADBAND NETWORKS FOR EDUCATIONAL |

22-3032456

Schedule (Form 990) PROGRAMMING FOUNDATION, INC.

SECURITY SYSTEMS NETWORKS FOR EDUCATIONAL SECURITY SYSTEMS NETWORKS FOR EDUCATIONAL SECURITY SYSTEMS NETWORKS FOR EDUCATIONAL SECURITY SYSTEMS NETWORKS FOR EDUCATIONAL SECURITY SYSTEMS NETWORKS FOR EDUCATIONAL SECURITY SYSTEMS NETWORKS FOR EDUCATIONAL SECURITY SYSTEMS NETWORKS FOR EDUCATIONAL SECURITY SYSTEMS NETWORKS FOR EDUCATIONAL SECURITY SYSTEMS NETWORKS FOR EDUCATIONAL SECURITY & MONITORING (h) Purpose of grant or assistance TO PROVIDE ENHANCED OVER EBS BROADBAND OVER EBS BROADBAND VER EBS BROADBAND VER EBS BROADBAND VER EBS BROADBAND OVER EBS BROADBAND OVER EBS BROADBAND VER EBS BROADBAND OVER EBS BROADBAND (g) Description of non-cash assistance 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 COST COST COST COST COST COST COST COST 5 601 COST 5,601, 5,601, 5,601, 5,601, 5,601 5,601. (e) Amount of non-cash 5,601 5,601, assistance (d) Amount of cash grant Ö ٥. o. o. Ö Ö o ö (c) IRC section if applicable 59-2295209 86-0683168 33-0743985 86-0858084 35-0992114 20-4513784 94-6002635 91-6001571 93-0794669 (b) EIN DISTRICT - 45-950 DUNE PALMS ROAD ESPECIALLY FOR CHILDREN SCHOOL GUIDING LIGHT CHRISTIAN SCHOOL JACK LONDON ELEMENTARY SCHOOL LIGHTHOUSE CHRISTIAN ACADEMY (a) Name and address of organization or government DESERT SANDS UNIFIED SCHOOL LAKE HAVASU CITY, AZ 86403 HOLY CROSS LUTHERAN SCHOOL KIONA-BENTON MIDDLE SCHOOL INDIAN HARBOUR, FL 32937 1240 BANANA RIVER DRIVE 1601 ST JOE RIVER DRIVE 17606 NORTH 7TH AVENUE 2707 FRANCISCO AVENUE - LA QUINTA, CA 92253 BENTON CITY, WA 99320 SANTA ROSA, CA 95403 FORT WAYNE, IN 46805 VERO BEACH, FL 32968 PENDLETON, OR 97801 417 NW 21ST STREET 1107 GRACE AVENUE PHOENIX, AZ 85023 220 MESCAL LANE IMAGINE SCHOOLS 6000 4TH STREET HEARN ACADEMY

Page 1

Schedule I (Form 990) PROGRAMMING FOUNDATION, INC.

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

| | assistance to do | Veriffication of gar | ובמווחווש ווו נוופ סו | ווכח סומוכם לחבו | edule I (I OIIII 330), I di | () | |
|--|------------------|-------------------------------|--------------------------|---|--|--|---|
| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
| | | | | | | | TO PROVIDE ENHANCED |
| NOBLE ACADEMY | | | | | | | SECURITY & MONITORING |
| 1329 BETHEL ROAD | | | | | | | OVER EBS BROADBAND |
| COLUMBUS, OH 43220 | 20-4460475 | | 0 | 5,601. | COST | SECURITY SYSTEMS | NETWORKS FOR EDUCATIONAL |
| | | | | | | | TO PROVIDE ENHANCED |
| NORTHWEST PREP | | | | | | | SECURITY & MONITORING |
| 2590 PINTER ROAD | | | | | | | OVER EBS BROADBAND |
| SANTA ROSA, CA 95401 | 94-6002635 | | 0. | 5,601. | COST | SECURITY SYSTEMS | NETWORKS FOR EDUCATIONAL |
| | | | | | | | TO PROVIDE ENHANCED |
| NORTHWESTERN OKLAHOMA STATE | | | | | | | SECURITY & MONITORING |
| UNIVERSITY - 2929 EAST RANDOLPH - | | | | | | | OVER EBS BROADBAND |
| ENID, OK 73701 | 73-6017987 | | 0. | 5,601. | COST | SECURITY SYSTEMS | SECURITY SYSTEMS NETWORKS FOR EDUCATIONAL |
| | | | | | | | TO PROVIDE ENHANCED |
| OUR LADY OF THE LAKE PRESCHOOL | | • | | | | | SECURITY & MONITORING |
| 1975 DAYTONA DRIVE | | | | | | | OVER EBS BROADBAND |
| LAKE HAVASU CITY, AK 86403 | 32-0267687 | | 0. | 5,601, | COST | SECURITY SYSTEMS | SECURITY SYSTEMS NETWORKS FOR EDUCATIONAL |
| | | | | | | | TO PROVIDE ENHANCED |
| PLEASANT VIEW ELEMENTARY SCHOOL | | | | | | | SECURITY & MONITORING |
| щ | | | | | | | OVER EBS BROADBAND |
| PROVIDENCE, RI 02905 | 05-6000329 | | 0 | 5,601. | COST | SECURITY SYSTEMS | NETWORKS FOR EDUCATIONAL |
| | | | | | | | TO PROVIDE ENHANCED |
| PLEASANTVILLE SCHOOL DISTRICT | - | | | | | | SECURITY & MONITORING |
| c | | | | | | | OVER EBS BROADBAND |
| PLEASANTVILLE NJ 08232 | 21-6000286 | | 0 | 5,601. | COST | SECURITY SYSTEMS | SECURITY SYSTEMS NETWORKS FOR EDUCATIONAL |
| | | | | | | | TO PROVIDE ENHANCED |
| REDEEMER LUTHERAN SCHOOL | | | | | | | SECURITY & MONITORING |
| 1955 STRATFORD AVENUE | | | | | | | OVER EBS BROADBAND |
| SALT LAKE CITY, UT 84106 | 87-6114070 | | 0 | 5,601. | COST | SECURITY SYSTEMS | SECURITY SYSTEMS NETWORKS FOR EDUCATIONAL |
| | | | | | | | TO PROVIDE ENHANCED |
| REGINA COELI/ST JOSEPH SCHOOL | | | | | | | SECURITY & MONITORING |
| 00 | | | | | | | OVER EBS BROADBAND |
| ALLIANCE, OH 44601 | 34-0823458 | | 0 | 5,601. | COST | SECURITY SYSTEMS | SYSTEMS NETWORKS FOR EDUCATIONAL |
| | | | | | | | TO PROVIDE ENHANCED |
| SALT LAKE CITY SCHOOL DISTRICT | | | | | | | SECURITY & MONITORING |
| 5 | | | | | | | OVER EBS BROADBAND |
| SALT LAKE CITY, UT 84111 | 74-2563849 | | 0. | 5,601, | COST | SECURITY SYSTEMS | SECURITY SYSTEMS NETWORKS FOR EDUCATIONAL |
| | | | | | | | Schodule 1 (Form 000) |

| ı] |
|------|
| ΝĀ |
| CIL |
| K |
| EDUC |
| |
| H |
| IOI |
| ij |
| ປັ |
| Z |

| | 22-3032456 | | |
|-------------------------------------|--|--|--|
| NORTH AMERICAN CATHOLIC EDUCATIONAL | Schedule (Form 990) PROGRAMMING FOUNDATION, INC. | Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II) | |
| | Sched | Part | |

| (a) Name and address of (b) EIN (c) IRC section organization or government (b) EIN (c) IRC section organization organizati | (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 or assistance |
|--|------------|-------------------------------|--------------------------|-----------------------------------|---|--|--|
| ST JOSEPH SCHOOL 1000 ULULANI STREET HILO, HI 96720 | 99-6000779 | | 0 | 5,601, | LSOO | SECURITY SYSTEMS | TO PROVIDE ENHANCED SECURITY & MONITORING OVER EBS BROADBAND NETWORKS FOR EDUCATIONAL |
| ST NICHOLAS CATHOLIC SCHOOL 3555 EDWARDS DRIVE GIG HARBOR WA 98335 | 91-0566267 | | 0 | 601. | | SECURITY SYSTEMS | TO PROVIDE ENHANCED SECURITY & MONITORING OVER EBS BROADBAND SECURITY SYSTEMS NETWORKS FOR EDUCATIONAL |
| ST STEPHEN'S EPISCOPAL SCHOOL 215 NORTH FRONT STREET HARRISBURG, PA 17101 | 23-2107935 | | 0,0 | | | SECURITY SYSTEMS | TO PROVIDE ENHANCED SECURITY & MONITORING OVER EBS BROADBAND SECURITY SYSTEMS NETWORKS FOR EDUCATIONAL |
| HOLY GHOST FATHERS OF IRELAND 4849 37TH STREET LONG ISLAND, NY 11101 | 11-2424823 | | 7,000. | 0. | | | TO PROVIDE DONATIONS FOR OUTREACH TO THE NEEDY |
| EUDIST SERVANTS OF THE 11TH HOUR 3542 GOVERNOR DR SAN DIEGO, CA 92122 | 20-3784449 | | 34,000. | 0 | | | TO PROVIDE DONATIONS FOR DUTREACH TO THE NEEDY |
| ST EDWARD'S CHURCH 997 BRANCH AVENUE PROVIDENCE, RI 02904 | 20-2178919 | | 2,500 | 0. | | | TO PROVIDE DONATIONS FOR CUTREACH TO THE NEEDY |
| ST AUGUSTINE CHURCH 635 MT PLEASANT AVE PROVIDENCE, RI 02908 | 05-0342670 | | 20,000, | 0 | | | TO PROVIDE DONATIONS FOR CUTREACH TO THE NEEDY |
| ST PATRICK/MARY HOUSE 244 SMITH STREET PROVIDENCE, RI 02908 | 05-0259044 | | 7,000 | 0 | : | | TO PROVIDE DONATIONS FOR DUTREACH TO THE NEEDY |
| | | | | | | | |

PROGRAMMING FOUNDATION, INC.

Schedule I (Form 990) (2011)

Part III

Page 2

22-3032456

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

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

Schedule I (Form 990) (2011)

SCHEDULE J '(Form 990)

Department of the Treasury

Internal Revenue Service

Compensation Information

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

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

► Attach to Form 990. ► See separate instructions.

2011

OMB No 1545-0047

Open to Public Inspection

Name of the organization

Questions Regarding Compensation

NORTH AMERICAN CATHOLIC EDUCATIONAL PROGRAMMING FOUNDATION, INC.

Employer identification number 22-3032456

| | | | Yes | No |
|----|--|-----|-----|------------|
| 1a | Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, | | | |
| | Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items | | | |
| | First-class or charter travel Housing allowance or residence for personal use | | | |
| | Travel for companions Payments for business use of personal residence | | | |
| | Tax indemnification and gross-up payments Health or social club dues or initiation fees | | | |
| | Discretionary spending account Personal services (e.g., maid, chauffeur, chef) | | | |
| | | | | |
| b | If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or | | | |
| | reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain | 1b | | |
| 2 | Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, | | | |
| | trustees, and the CEO/Executive Director, regarding the items checked in line 1a? | 2 | | |
| | | | | |
| 3 | Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's | | | |
| | CEO/Executive Director Check all that apply. Do not check any boxes for methods used by a related organization to | | | |
| | establish compensation of the CEO/Executive Director Explain in Part III. | | | |
| | Compensation committee Written employment contract | | | |
| | Independent compensation consultant Compensation survey or study | | | |
| | Form 990 of other organizations Approval by the board or compensation committee | | | |
| | | | | |
| 4 | During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing | | | |
| | organization or a related organization | | | |
| а | Receive a severance payment or change-of-control payment? | 4a | | <u> </u> |
| b | Participate in, or receive payment from, a supplemental nonqualified retirement plan? | _4b | | _X_ |
| С | Participate in, or receive payment from, an equity-based compensation arrangement? | 4c | | _X_ |
| | If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III | | | |
| | | | | |
| | Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9. | | | |
| 5 | For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation | | | |
| | contingent on the revenues of: | | | |
| а | The organization? | 5a | | _X_ |
| b | Any related organization? | 5b | | <u> </u> |
| | If "Yes" to line 5a or 5b, describe in Part III | | | |
| 6 | For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation | | | |
| | contingent on the net earnings of | | | |
| а | The organization? | 6a | | <u>X</u> |
| b | Any related organization? | 6b | | _X_ |
| | If "Yes" to line 6a or 6b, describe in Part III | | ĺ | |
| 7 | For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments | | | |
| | not described in lines 5 and 6? If "Yes," describe in Part III | 7 | | <u>X</u> _ |
| 8 | Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the | | | |
| | ınıtıal contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III | _8_ | | _X_ |
| 9 | If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in | | Ţ | |
| | Regulations section 53 4958-6(c)? | 9 | | |

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

PROGRAMMING FOUNDATION, INC.

Schedule J (Form 990) 2011

22-3032456

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

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

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

| | | (B) Breakdown of | (B) Breakdown of W-2 and/or 1099-MISC compensation | SC compensation | 0 | 0 | (E) | (4) |
|----------------|------|--------------------------|--|-------------------------------------|-----------------------------|------------|------------------|---|
| | | CA Book | 9 0110000 (11) | 2045 | Retirement and | Nontaxable | Total of columns | Compensation |
| (A) Name | | (i) base compensation | (II) Bonus & Incentive compensation | (III) Otner reportable compensation | other deferred compensation | benefits | (a)·(l)(a) | reported as deferred in prior Form 990 |
| | Θ | 178,005. | 0 | 0 | 25,000. | 0 | 203,005. | 0 |
| 1 JOHN PRIMEAU | (ii) | | | 0. | 0 | 0 | | |
| | (3) | | | | | | | |
| 2 | (II) | | | | | | | |
| | Ξ | | | | | | | |
| 8 | Ξ | | | | | | | |
| | € | | | | | | | |
| 4 | (ii) | | | | | | | |
| | (E) | | | | | | | |
| S | (ii) | | | | | | | |
| | Ξ | | | | : | | | |
| 9 | (ii) | | | | | | | |
| | Ξ | | | | | | | |
| 7 | ⊞ | | | | | | | |
| | Ξ | | | | | | | |
| 8 | (11) | | | | | | | |
| | Ξ | | | | | | | |
| 0 | ⊞ | | | | | | | |
| | Ξ | | | | | | | |
| 10 | (i) | | | | | | | |
| | Ξ | | | | | | | |
| 11 | Œ | | | | | | | |
| | Ξ | | | | | | | |
| 12 | (ii) | | | | | | | |
| | Ξ | | | | | | | |
| 13 | ⊞ | | | | | | | |
| | Ξ | | | | | | | |
| 14 | (1) | | | | | | | |
| | Ξ | | | | | | | |
| 15 | (1) | | i | | | | | |
| | Ξ | | | - | | | | |
| 16 | (ii) | | | | | | | |

SCHEDULE O' (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

OMB No 1545-0047 Inspection

Department of the Treasury Internal Revenue Service Name of the organization

NORTH AMERICAN CATHOLIC EDUCATIONAL

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

39

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

Related Organizations and Unrelated Partnerships

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

OMB No 1545-0047

Employer identification number 22-3032456 2011 Open to Public Inspection

> ▶ See separate instructions. ▶ Attach to Form 990.

NORTH AMERICAN CATHOLIC EDUCATIONAL PROGRAMMING FOUNDATION, INC. Name of the organization

Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) Part 1

| | ntrolling ty | A CATHOLIC ROGRAMMING NC. | |) | Section 512(bX13) controlled entity? Yes No | - | |
|----------|---|---|--|---|--|---|--|
| 9 | Direct controlling entity | NORTH AMERICAN CATHOLIC EDUCATIONAL PROGRAMMING FOUNDATION INC. | | related tax-exemp | (f) Direct controlling entity | | |
| (e) | End-of-year assets | | | it had one or more | (e) Public charity Status (if section 501(c)(3)) | | |
| | өшо | | | secause | Publ status 5C | | |
| <u> </u> | Тота іпсоте | | | art IV, line 34 t | (d) Exempt Code section | | |
| (c) | Legal domicile (state or foreign country) | RHODE ISLAND | | wered "Yes" to Form 990, F | (c) Legal domicile (state or foreign country) | | |
| (q) | Primary activity | LC DEVELOP/EXPAND INST/PROG/ & EDUC, BROADBAND SVCS TO 02904 NONPROFITS & RURAL AREAS | | ions (Complete if the organization ans | (b) Primary activity | | |
| (a) | Name, address, and EIN of disregarded entity | EDUCATIONAL BROADBAND SERVICE AGENCY, LLC D/B/A MOBILE BEACON - 27-2858507, 47 MEADOWVIEW BLVD, NORTH PROVIDENCE, RI 02904 N | | Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) | (a) Name, address, and EIN of related organization | | |

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

132161 01-23-12 LHA

PROGRAMMING FOUNDATION, INC.

Schedule R (Form 990) 2011

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

Page 2

22-3032456

General or Percentage managing ownership Percentage ownership Schedule R (Form 990) 2011 Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year) 3 Yes No Share of end-of-year assets Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) Share of total income ate allocations? Disproportion-Yes Ξ Type of entity (C corp, S corp, or trust) Share of end-of-year assets <u>e</u> <u>6</u> Direct controlling entity Share of total income ε Predominant income (related, unrelated, excluded from tax under sections 512-514) Legal domicile (state or foreign country) <u>e</u> 41 Primary activity (d)
| Direct controlling | entity 9 (c)
Legal
domicile
(state or
foreign Primary activity <u>e</u> Name, address, and EIN of related organization Name, address, and EIN of related organization 132162 01-23-12 Part IV

Schedule R (Form 990) 2011 PROGRAMMING FOUNDATION, INC.

22-3032456 Page 3

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

| Note Complete line 1 if any entity is listed in Parts II III or IV of this schedule | | | | * | Vos | , |
|---|----------------------------------|--|---|----------------------------|----------------|----|
| 1 During the tax year, did the organization engage in any of the following transactions | s with one or more re | transactions with one or more related organizations listed in Parts II-IV? | in Parts II:1V? | | ↓ — | أد |
| a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity | | | | 1a | | |
| b Gift, grant, or capital contribution to related organization(s) | | | | 4 | | |
| c Gift, grant, or capital contribution from related organization(s) | | | | 2 | | |
| d Loans or loan guarantees to or for related organization(s) | | | | 19 | | |
| e Loans or loan guarantees by related organization(s) | | | | 1 | | |
| | | | | | | |
| f Sale of assets to related organization(s) | | | | * | _ | 1 |
| g Purchase of assets from related organization(s) | | | | 19 | _ | ١ |
| h Exchange of assets with related organization(s) | | | | ŧ | | |
| i Lease of facilities, equipment, or other assets to related organization(s) | | | | = | _ | ı |
| j Lease of facilities, equipment, or other assets from related organization(s) | | | | ; | | |
| k Performance of services or membership or fundraising solicitations for related organization(s) | ınızatıon(s) | | | * | | |
| I Performance of services or membership or fundraising solicitations by related organization(s) | ınızatıon(s) | | | = | | |
| | on(s) | | | £ | | |
| n Sharing of paid employees with related organization(s) | | | | 두 | - | 1 |
| Reimbi issement paid to related organization(s) for expenses | | | | | | |
| | | | | 2 2 | ļ | 1 |
| | | | | | | 1 |
| q Other transfer of cash or property to related organization(s) r Other transfer of cash or property from related organization(s) | | | | ₽ + | | 1 |
| 2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds | vho must complete th | is line, including covered | relationships and transaction thresholds | | | |
| (a) Name of other organization | (b) Transaction type (a-r) | (c) Amount involved | (d) Method of determining amount involved | | | |
| (1) | | | | | | 1 |
| Ş | | | | | | |
| | | | | | | 1 |
| | | | | | | 1 |
| | | | | | | I |
| (5) | | | | | | 1 |
| (6) | | | | | | |
| 132183 01-23-12 | 42 | | Schedule | Schedule R (Form 990) 2011 | 90) 201 | _ |

22-3032456 Page 4

PROGRAMMING FOUNDATION, INC. Schedule R (Form 990) 2011 Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

| (k) Percentage ownership | | | ! | |
|--|--|------|----------|------|
| General or managing partner? | | | | |
| (h) | | | | |
| Dispropor- Bonate a allocations? | | | | |
| Olsr Block | | | • | |
| (g) Share of end-of-year assets | | | | |
| (f) Share of total income | | | | |
| (e) Are all 501(c)(3) 00gs 7 | | | | |
| (d) Areal Areal Predominant income parinessec (related, unrelated, 501(e)) excluded from tax under section 512-514) yes No | | | | |
| (c) Legal domicile (state or foreign country) | | | | |
| (b) Primary activity | | | | |
| (a) Name, address, and EIN of entity | | | | |

NORTH AMERICAN CATHOLIC EDUCATIONAL Schedule R (Form 990) 2011 PROG Part VII Supplemental Information PROGRAMMING FOUNDATION, INC. 22-3032456 Page 5 Complete this part to provide additional information for responses to questions on Schedule R (see instructions)