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Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047 2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Fort	he 201	1 calendar year, or tax year beginning $10/01$, 2011,	and ending	09,	/30 , 20 12
		C Name of organization		D Employer identifica	ation number
Check if	applicable	HELIOS EDUCATION FOUNDATION		94-2850977	
	iresa nge	Doing Business As			
	ne change	Number and street (or P O box if mail is not delivered to street address)	Room/suite	E Telephone number	
	al return	2415 E. CAMELBACK ROAD	500	(602) 381-2	260
_	minated	City or town, state or country, and ZIP + 4			
	ended	PHOENIX, AZ 85016		G Gross receipts \$	53,092,207
	urn dication	F Name and address of principal officer PAUL LUNA		H(a) is this a group return	
per	nding			affiliates?	\vdash
		SAME AS C ABOVE		H(b) Are all affiliates inclu If "No," attach a list	
	exempt sta	1-1-1-1-1	r 527	┨	
		WWW.HELIOS.ORG	1	H(c) Group exemption nu	·i
	of organ		L Year of forma	ition 2004 M State	of legal domicile AZ
art I		nmary			
1		describe the organization's mission or most significant activities			
۵ ا	THRO	OUGH ITS SUPPORT OF EDUCATIONAL ORGANIZATIONS	THE FOUNDAT	ION	
	ENR	CHES THE LIVES OF INDIVIDUALS IN ARIZONA AND	FLORIDA BY	CREATING	
2 Sovernance	OPPO	PRTUNITIES FOR SUCCESS IN POSTSECONDARY EDUCAT	ION.		
2	Check	this box 🕨 🔃 if the organization discontinued its operations or disposed	d of more than 25%	% of its net assets	
				1 - 1	8
3 4 5 6		er of independent voting members of the governing body (Part VI, line 1b)			5
,		number of individuals employed in calendar year 2011 (Part V, line 2a)		· · · · · · · · · · · · · · · · · · ·	18
6					
~ I		* *************************************			
		unrelated business revenue from Part VIII, column (C), line 12			
+-'	D Net ur	nrelated business taxable income from Form 990-T, line 34	 	Prior Year	
1 _					Current Year
8		butions and grants (Part VIII, line 1h)		9	
9	Progra	am service revenue (Part VIII, line 2g)		9	
10	Invest	ment income (Part VIII, column (A), lines 3, 4, and 7d)		14,283,400.	12,599,294
11	Other	revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		o	
12		revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12).	- F. F. F.	14,283,400.	12,599,294
13	Grant	s and similar amounts paid (Part IX, column (A), lines 1-3)		14,840,189.	19,336,754
14	Benef	its paid to or for members (Part IX, column (A), line 3) JAN . 2 4 - 204		0	
1	Calar	oc. other compensation, employee benefits (Bart/IV) religion (A), lines 5, 11% (3 · · Q ·	3,224,749.	3,505,185
1 16	a Drofo	ecional fundraising food (Part IV, column (A), line (11a)		0	
	h Total:	ssional fundraising fees (Part IX, column (A), line 11e)			
ٔ ۔ ا ز	o iotai	randraising expenses (Fart IX, Column (D), line 25)	<u>'''</u>	2,953,487.	2,905,149
			· · · · · · · · —		
18		expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		21,018,425.	25,747,088
19	Rever	nue less expenses Subtract line 18 from line 12		-6,735,025.	-13,147,794
Seo L				nning of Current Year	End of Year
20	Total	assets (Part X, line 16)		534,337,381.	603,762,687
21	Total	liabilities (Part X, line 26)		19,880,914.	25,602,374
20 21 22		ssets or fund balances Subtract line 21 from line 20		514,456,467.	578,160,313
art I		gnature Block			
			and statements, and	to the best of my knowle	dge and belief it is true
orrect,	and com	f perjury, I declare that I have examined this return, including accompanying schedules a plete Declaration of preparer (other than officer) is based on all information of which pre-	eparer has any knowl	ledge	A
				1/10	114
ign		Signature of officer		Date	<u> </u>
ere			7.7	Date	
•		Michael J Chesin StUPAC	<u> </u>	-	
		Type or print name and title		· · · · · · · · · · · · · · · · · · ·	-
	Print	Type preparer's name Preparer's signature	Date	Check if F	TIN
aid	BRE	NDA D. GRIESEMER Menda Giesens	12/20/13	self-employed	P00264669
epare	Firm's	name ▶ ERNST & YOUNG U.S. LLP		Firm's EIN ▶ 34-	6565596
se Onl	ıy	saddress Two North Central Avenue, Ste 2300 PHOENIX, AZ 85004			/322-3000
av the		cuss this return with the preparer shown above? (see instructions)	·	Trilone no 002	T T T. T
_			 	 	
or Pap	erwork	Reduction Act Notice, see the separate instructions.			Form 990 (201

JSA 1E1010 1 000 59456U 1546

PAGE 1

		esponse to any question in this Part	<u> </u>	· · · · X
	ribe the organization's mission		FOUNDATION	
		TIONAL ORGANIZATIONS THE DUALS IN ARIZONA AND FLOR		
		POSTSECONDARY EDUCATION		
prior Form 9 If "Yes," des Did the or services?	990 or 990-EZ? cribe these new services on Seganization cease conducting.	chedule O. , or make significant changes in	how it conducts, any program	Yes X
Describe the expenses.	Section 501(c)(3) and 501(c)	vice accomplishments for each of	f its three largest program services 47(a)(1) trusts are required to repo ach program service reported	
(Code:		136,797. including grants of \$	19,336,754) (Revenue \$	0_)
b (Code.) (Expenses \$	including grants of \$) (Revenue \$)
c (Code) (Expenses \$	including grants of \$) (Revenue \$)
	<u></u>			
d Other progr	ram services (Describe in Sche	•		
(Expenses	including gramservice expenses ►		nue \$	

•	1155 55 55 55 55 55 55 55 55 55 55 55 55			
	90 (2011) W. Chacklist of Beguired Schodules		<u> </u>	Page 3
Part	V 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,"		- 65	110
•	complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		X
	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		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		X
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,	İ		
	VII, VIII, IX, or X as applicable.			J
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete	444	x	
_	Schedule D, Part VI	11a		
D	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		х
•	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more	110		_^
C	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
A	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	110		
u	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	110		X
۵	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	,		
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	х	
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	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if			
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance		1]
	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services			
	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	_	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			۱
	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?	4.		,
	If "Yes," complete Schedule G, Part III	19	-	X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	ZUD	I	I.

	HELIOS EDUCATION FOUNDATION 94-2850	1977		
Pari	100 (2011) Checklist of Required Schedules (continued)			Page 4
	<u> </u>		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization			
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States			
	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	X	
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than		-	
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	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			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II.	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		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		Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		Х
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			
	IV, and V, line 1	34		X
35 a	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			i
	meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and			
	19? Note. All Form 990 filers are required to complete Schedule O	38	Х	l

Form **990** (2011)

Pag	Θ	5

411	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V			
	Check if Schedule O contains a response to any question in this Part V	• • •		_
_			Yes	_
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			_
	reportable gaming (gambling) winnings to prize winners?	1 c	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 18			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			_
Ba	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		
h	If "Yes," enter the name of the foreign country: ▶	74		-
•	See instructions for filling requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
				-
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		-
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		-
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	-	-
a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	_		
	organization solicit any contributions that were not tax deductible?	6a	<u> </u>	-
þ	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		_
7	Organizations that may receive deductible contributions under section 170(c).	١		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			,
	and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7 c		
d	If "Yes," indicate the number of Forms 8282 filed during the year		39, °3	1000
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	-	٠
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		-
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		-
3	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	\$ 81 °	1	-
•	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring	A 51	1	3
		8		-
•	organization, have excess business holdings at any time during the year?			-
	Sponsoring organizations maintaining donor advised funds.			-
	Did the organization make any taxable distributions under section 4966?	9a		-
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		-
)	Section 501(c)(7) organizations. Enter	`, <u>*</u> *;	3	
	Initiation fees and capital contributions included on Part VIII, line 12	ŀ		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities [10b]	Į		
l	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders	l		
þ	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			•
}	Section 501(c)(29) qualified nonprofit health insurance issuers.	1 :		
	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.	<u> </u>	1	
h	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	1		
_				
	Enter the amount of reserves on hand	44-		-
ŀа	Did the organization receive any payments for indoor tanning services during the tax year?	14a 14b	-	-

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a Part VI 'No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management No 1a Enter the number of voting members of the governing body at the end of the tax year lift here are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with Х 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? . . . 4 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?..... 5 Did the organization become aware during the year of a significant diversion of the organization's assets?.... 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint b Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following. 8a Х 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, 10b affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? . . Describe in Schedule O the process, if any, used by the organization to review this Form 990. b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." Х 13 13 Х 14 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15a Х 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶_AZ______ 17 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) 18 available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website | X | Upon request Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, 19 and financial statements available to the public during the tax year. State the name, physical address, and telephone number of the person who possesses the books and records of the 20

organization ►MICHAEL CHESIN 2415 E. CAMELBACK ROAD, SUITE 500 PHOENIX, AZ 85016

ISA

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organization's tax year.

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

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

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

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

(A) Name and Title	(B) Average hours per week (describe hours for	box,	ot ch unles	Pos neck is pe	more rson	than one that the the that the the the the the the the the the th	an	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the
	related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)		organization and related organizations
(1) PAUL LUNA PRESIDENT & CEO	40.00	х		Х				402,446.	0	60,842.
(2) VINCENT ROIG CHAIRMAN	15.00	Х		х				175,919.	0	38,378.
(3) IOANNA MORFESSIS DIRECTOR	6.00	Х						45,300.	0	0
(4) DON ARIPOLI DIRECTOR	6.00	х						30,165.	0	
(5) TOM HERNDON DIRECTOR & TREASURER	6.00	Х		х				56,087.	0	0
(6) MARK FERNANDEZ DIRECTOR & SECRETARY	6.00	х		Х				38,134.	0	C
	6.00	Х						33,292.	0	C
(8) MARIA SASTRE DIRECTOR	6.00	Х						27,515.	0	0
(9) MICHAEL CHESIN SR VICE PRESIDENT & CFO	40.00			Х				217,803.	0	66,400.
(10) BARBARA RYAN EXEC. VICE PRESIDENT & COO	40.00			х				267,554.	0	38,552.
	40.00			х				141,357.	0	
(12) KAREN ORTIZ VP & PROGRAM DIRECTOR	40.00					х		133,087.	0	
(13) ANTONIA FRANCO VP & PROGRAM DIRECTOR	40.00					х		131,251.	0	
(14) LINDA THOMPSON VP, GRANTS ADMINISTRATION	40.00					х		136,728.	0	

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(A) Name and title	(B) Average hours per week (describe	box, office	unles	neck sspe dad	c) intion more irson lirect	than o	ne an ee)	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
5) JO ANNE VASQUEZ VP & PROGRAM DIRECTOR	40.00					х		128,600.		35,88
6) STACY CARLSON VP & PROGRAM DIRECTOR	40.00					х		120,062.	C	
b Sub-total c Total from continuation sheets to Part VII, S d Total (add lines 1b and 1c)	ection A .						> >	1,836,638. 248,662. 2,085,300.	(80,99
2 Total number of individuals (including but not reportable compensation from the organization		hose 1		d a	bov	e) wh	о ге	ceived more than	\$100,000 of	
Did the organization list any former office employee on line 1a? If "Yes," complete Schedule For any individual listed on line 1a, is the organization and related organizations greaters.	<i>ule J for su</i> sum of rep	ch ind oortal	lividi ole d	<i>ual</i> com	 iper	 nsatio	 na	nd other compens	sation from the	Yes 3
Individual										4 X
for services rendered to the organization? If "You because the contractors for the con	es," comple	te Sci	hedu	ile J	l for	such	per	son		5
Complete this table for your five highest com- compensation from the organization. Report of year.										
(A) Name and business add	Iress							(B) Description of se	ervices	(C) Compensation
ATTACHMENT 1							+			,
							‡	•		
							- 1		ļ.	
2 Total number of independent contractors (ii	ncludina b	ut no	t lın	nite	d to	thos	se I	sted above) who	received	

94-2850977

!					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
af af	1a	Federated campaigns	1a					
Gra	b	Membership dues	1b					
Ar.	С	Fundraising events	1c					
흔힐	d	Related organizations	<u>1d</u>					1
Sir	е	Government grants (contribu	tions) 1e					
漢	f	All other contributions, gifts, gran	ts,					
흥		and similar amounts not included	labove 1f	<u> </u>				
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contributions included i					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	h	Total. Add lines 1a-1f	 		0			
a l				Business Code				
Š	2 a							
9	b				-	 		
Ę	C							_
Š	d							
Ē	e							
Program Service Revenue	f g	All other program service rev Total. Add lines 2a-2f			0	- 14 · 15 · 15		***
	3					***		************
	3	Investment income (includin other similar amounts)			11,957,243			11,957,243
	4	Income from investment of t		_	0			11,951,243
	5				0	-		
		Royalties	(ı) Real	(II) Personal	14 · · · · · · · · · · · · · · · · · · ·	F. V. X	19.7.	\$3 24 W
	6a	Gross rents						1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	b	Less rental expenses						
	С	Rental income or (loss)						
	d	Net rental income or (loss).	<u> </u>		0			
	7 a	Gross amount from sales of	(ı) Securities	(II) Other				7 700
	• •	assets other than inventory	41,125,718	9,246.	STORM OF			Carried Section
	b	Less cost or other basis						
		and sales expenses	40,492,913					
	С	Gain or (loss)	632,805	9,246.	27 28 av. 4	3 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		
	d	Net gain or (loss)		. <u>,</u>	642,051	N 12000 X 000000 X 1000	4 4 9 34 30 00	642,051
ne	8a	Gross income from fundra	iising					
evenue		events (not including \$			1 1 1 1 1			
		of contributions reported on				S Cars		100
7		See Part IV, line 18					1,	
Other R	Ь	Less direct expenses					<u> </u>	*****
0	C	Net income or (loss) from fur	•		0	* * * * * * * * * * * * * * * * * * * *	≥ ₹ ↑ × ½	*
	9a	Gross income from gaming a See Part IV, line 19			* ''			
	L			1	, ² ,			4.
	b C	Less. direct expenses Net income or (loss) from ga			0	<u> </u>	***************************************	1
	10a	Gross sales of invento			*	1 1 % 1 3		14 1
	ıva	returns and allowances			* ·-			r.
	h	Less cost of goods sold			` .		-	
	c	Net income or (loss) from sal	les of inventory.		0			
		Miscellaneous Reven		Business Code		· »		
ļ	11a			1				
	b							
	c							
	d	All other revenue						
	e	Total. Add lines 11a-11d .		-	0			,
	12	Total revenue. See instructio						12,599,294

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).

	Check if Schedule O contains a respo			<u> </u>		
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	' ' I Intal evapaçõe I Drogram consce				
1		10 005 = 7:	10.00%			
	organizations in the United States See Part IV, line 21 .	19,336,754.	19,336,754.		· · · · · · · · · · · · · · · · · · ·	
2	Grants and other assistance to individuals in the United States See Part IV, line 22	0				
3	Grants and other assistance to governments,					
	organizations, and individuals outside the United States See Part IV, lines 15 and 16	0				
4	Benefits paid to or for members	0				
5	Compensation of current officers, directors,					
•	trustees, and key employees	2,225,778.	1,247,936.	977,842.		
6	Compensation not included above to disqualified			,		
•	persons (as defined under section 4958(f)(1)) and					
	persons described in section 4958(c)(3)(B)	o				
7	Other salaries and wages	523,176.	207,790.	315,386.		
8	Pension plan accruals and contributions (include section					
	401(k) and 403(b) employer contributions)	197,274.	102,064.	95,210.		
9	Other employee benefits	417,751.	207,679.	210,072.		
0	Payroll taxes	141,206.	86,480.	54,726.		
1	Fees for services (non-employees)					
а	Management	0				
	Legal	7,273.	402.	6,871.		
С	Accounting	38,246.		38,246.		
d	Lobbying	0				
е	Professional fundraising services See Part IV, line 17	0				
f	Investment management fees	1,047,141.		1,047,141.		
g	Other	443,759.	264,883.	178,876.		
2	Advertising and promotion	184,681.	92,442.	92,239.		
3	Office expenses	126,013.	65,549.	60,464.		
4	Information technology	111,742.	48,578.	63,164.		
5	Royalties	0	161 651	4.64 0.51		
6	Occupancy	322,548.	161,274.	161,274.		
7	Travel	378,064.	171,558.	206,506.		
8	Payments of travel or entertainment expenses					
_	for any federal, state, or local public officials	29,913.	17 462	12 450		
9	Conferences, conventions, and meetings	29,913.	17,463.	12,450.		
0	Interest	0				
1	· · · · · · · · · · · · · · · · · · ·	126,528.	63,264.	63,264.		
2	Depreciation, depletion, and amortization	20,444.	10,222.	10,222.		
3	Insurance	20,444.	10,222.	10,222.		
4	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 O)					
2	EVENT SPONSORSHIPS	45,889.	45,889.			
	FOUNDATION SPONSORED EVENTS	17,926.	4,079.	13,847.		
	PERSONAL PROPERTY TAX	4,982.	2,491.	2,491.		
d				-,		
	All other expenses					
	Total functional expenses. Add lines 1 through 24e	25,747,088.	22,136,797.	3,610,291.		
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)					

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Pa	ırt X	Balance Sheet			rage 11
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	1,156,175.	1	299,346.
	2	Savings and temporary cash investments.	19,693,618.	2	17,300,966.
	3	Pledges and grants receivable, net	0	3	
	4	Accounts receivable, net	0	4	(
	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees Complete Part II of			
	6	Schedule L. 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	0		(
Š	_	employees' beneficiary organizations (see instructions)	0		(
Assets	7	Notes and loans receivable, net	0	7	(
As	8	Inventories for sale or use	0	8	(
	9	Prepaid expenses and deferred charges	28,770.	9	46,575.
	10a	Land, buildings, and equipment cost or			
		other basis Complete Part VI of Schedule D 10a 1,092,252.			
	b	Less: accumulated depreciation	255,825.		242,403.
	11	Investments - publicly traded securities	493,495,457.		565,159,132.
	12	Investments - other securities. See Part IV, line 11	19,699,180.		20,638,076.
	13	Investments - program-related. See Part IV, line 11		13	(
	14	Intangible assets	0		(
	15	Other assets See Part IV, line 11	8,356.		76,189.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	534,337,381.		603,762,687.
	17	Accounts payable and accrued expenses	665,492.		917,151.
	18	Grants payable	19,215,422.		24,685,223.
	19	Deferred revenue	0	19	(
	20	Tax-exempt bond liabilities	0	20	(
es	21	Escrow or custodial account liability. Complete Part IV of Schedule D	0	21	(
Ħ	22	Payables to current and former officers, directors, trustees, key		l	
Liabilities		employees, highest compensated employees, and disqualified persons.			
_		Complete Part II of Schedule L	0	22	
	23	Secured mortgages and notes payable to unrelated third parties	0	23	(
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24) Complete Part X			
		of Schedule D		25	(
	26	Total liabilities. Add lines 17 through 25	19,880,914.	26	25,602,374.
ces		Organizations that follow SFAS 117, check here ► X and complete lines 27 through 29, and lines 33 and 34.			
lan	27	Unrestricted net assets	514,456,467.	27	578,160,313.
æ	28	Temporarily restricted net assets	0	28	(
Ē	29	Permanently restricted net assets	0	29	(
Net Assets or Fund Balances		Organizations that do not follow SFAS 117, check here ▶ and complete lines 30 through 34.			
şţs	30	Capital stock or trust principal, or current funds		30	
SS	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
t A	32	Retained earnings, endowment, accumulated income, or other funds		32	
Š	33	Total net assets or fund balances	514,456,467.	33	578,160,313.
	34	Total liabilities and net assets/fund balances	534,337,381.	34	603,762,687.

Form **990** (2011)

For	m 990 (2011)			Pa	ge 12
Pa	Reconciliation of Net Assets Check if Schedule O contains a response to any question in this Part XI			х	
1	Total revenue (must equal Part VIII, column (A), line 12)	1	12,5		
2		2	25,7	47,0	088.
3			-13 , 1		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	514,4	56,4	467.
5		5	76,8	51,	640.
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33,	-			
		6	578 , 1	60,3	313.
Pa	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: Cash _X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," expl	aın in	ļ		
	Schedule O				İ
2a	The state of the s		2a		X
b	The state of the s		2b	Х	
С	The second of th				
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, exp	laın ın			
	Schedule O			-	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year	were		1	
	issued on a separate basis, consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis		ļ		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set for	orth in			
	the Single Audit Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo	30 the			
_	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

Form **990** (2011)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

OMB No 1545-0047 Open to Public Inspection

Employer identification number

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

HE:	LIOS	EDUCATION FOU	INDATION							94-	-2850977
Pa	rt I	Reason for Publ	ic Charity Status	(All organizations mu	st con	plete	this pa	ırt.) Se	e instru	uctions.	
The	orga	nization is not a priv	ate foundation bed	ause it is: (For lines 1 thr	ough '	11, che	ck only	one box	c)		
1	Ш	A church, convention	on of churches, or	association of churches o	iescrib	ed ın s	ection '	170(b)(1)(A)(i).		
2	Щ			1)(A)(ii). (Attach Scheduk							
3		•	•	ervice organization descri			•		•		
4	Ш	A medical research	h organization ope	erated in conjunction will	th a h	ospita	descri	bed in	section	n 170(b)(1)(A)(iii). Enter the
	$\overline{}$	hospital's name, city									
5	Ш			nefit of a college or univer	ersity o	owned	or ope	rated t	y a go	vernme	ntal unit described in
		section 170(b)(1)(A		•							
6	Н	•	•	or governmental unit des					,,,,		
7		_		es a substantial part of its	s supp	ort fro	m a go	vernme	ental un	it or fro	m the general public
_		described in sectio			-1-4- 5	۱ ال الحدد ا					
8	\vdash	·		on 170(b)(1)(A)(vi). (Com							arehin food and areas
9	Ш	_	•	s (1) more than 331/3% exempt functions - subj							
		•		me and unrelated busi							
		•		e 30, 1975 See section						. 511	tax) Irom businesses
10	\Box			ted exclusively to test for			•		•	١.	
11	X	-		ated exclusively for the	•	•				•	or to carry out the
	تت	•	•	pported organizations de							· -
				es the type of supporting							
		a X Type I	b Type	ll c Type	III - Fu	ınction	ally inte	grated		d 🗌	Type III - Other
•	X	By checking this I	box, I certify that	the organization is not	contr	olled o	directly	or ind	rectly	by one	or more disqualified
		persons other than	foundation mana	gers and other than one	or mo	re pub	licly su	pported	l organ	ızatıons	described in section
		509(a)(1) or section									
1	f	If the organization	received a writte	n determination from the	e IRS	that it	is a Ty	ype I, T	ype II,	or Type	e III supporting
		organization, check									
9	9		006, has the organ	nization accepted any gift	or co	ntributi	on from	any of	the		
		following persons?		-11							(ii) Yes No
				ctly controls, either alor		-	er with	person	s aesc	ribea in	' \"''
		• •		ly of the supported organ scribed in (i) above?	iizauon	٠					11g(i) X X X X X X X X
				on described in (i) or (ii) a	 hove?	• • •	• • • •				11g(iii) X
	h			ut the supported organiza			• • • •			• • • •	
		ame of supported	(ii) EIN	(iii) Type of organization	<u> </u>	ls the	(v) Did v	ou notify	(vi) I	s the	(vii) Amount of
		organization	(.,,	(described on lines 1-9	organi	zation in listed in	the orga	anızatıon	organiz	zation in	support
				above or IRC section (see Instructions))	your go	overning ment?		(i) of		rganized US?	
					Yes	No	Yes	No	Yes	No	
(A)											·
(A)	SEE	PART IV									(
(B)								i			
(C)											
							ļ				
(D)											
_				<u></u>						-	
(E)										<u> </u>	
Tot	tal						<u> </u>	l	l		

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

Schedule A (Form 990 or 990-EZ) 2011

Par	Support Schedule for Or (Complete only if you chec Part III. If the organization it	ked the box or	n line 5, 7, or 8	of Part I or if	the organizat	ion failed to qu	A)(vi) ualify under
Sec	tion A. Public Support				-		
Caler	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 include any "unusual grants")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4	<u></u>	L	<u> </u>		<u> </u>	
	tion B. Total Support	1 (1) 0007	410000	() 0000	1 (1) 0040	1 1 2 2 2 4	1 10 7 11
	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7 8	Amounts from line 4						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11	Total support. Add lines 7 through 10	manus as consistent as where we	m where when a re-				
12	Gross receipts from related activities, etc. (
13	First five years. If the Form 990 is organization, check this box and stop here	<u> </u>		nd, third, fourth,	or fifth tax ye	ar as a section	501(c)(3) ▶
Sec	tion C. Computation of Public Sup	•				 	
14	Public support percentage for 2011 (I	· ·				14	
15	Public support percentage from 2010						<u>%</u>
16a	331/3% support test - 2011. If the						
	this box and stop here. The organizat						
D	331/3% support test - 2010. If the check this box and stop here. The org						
172	10%-facts-and-circumstances test -						
,, a	10% or more, and if the organization		-				
	Part IV how the organization meets					•	•
	organization			_	•	• •	• • • • • • • • • • • • • • • • • • • •
b	10%-facts-and-circumstances test - 15 is 10% or more, and if the org Explain in Part IV how the organizat supported organization	2010. If the organization meets the "	ganization did r s the "facts-an 'facts-and-circur	ot check a bood- d-circumstances nstances" test.	c on line 13, 16 s" test, check t The organization	ea, 16b, or 17a this box and so on qualifies as	, and line top here. a publicly
18	Private foundation. If the organization						
	instructions					<u></u>	

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.)

Sec	tion A. Public Support						
Caler	dar 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						
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						
	Amounts included on lines 1, 2, and 3				· · · · · · · · · · · · · · · · · · ·		
, .	received from disqualified persons						
b	Amounts included on lines 2 and 3				 		
	received from other than disqualified						
	persons that exceed the greater of \$5,000				1		
_	or 1% of the amount on line 13 for the year						
8 8	Add lines 7a and 7b Public support (Subtract line 7c from						
٠	line 6)						
Sec	tion B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9	Amounts from line 6		, ,	`,'	1 11	, , ,	,,
-	Gross income from interest, dividends, payments received on securities loans,						
	rents, royalties and income from similar sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975				ļ		
c	Add lines 10a and 10b	·-·			<u> </u>		
11	Net income from unrelated business						·
• •	activities not included in line 10b,						
	whether or not the business is regularly						
4.0	carried on						
12	Other income Do not include gain or loss from the sale of capital assets						
	(Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11,				<u> </u>	<u> </u>	-
	and 12)						
14	First five years. If the Form 990 is for	the organization	n's first second	third fourth or	fifth tax vear a	s a section 501	(c)(3)
• •	organization, check this box and stop here	-			•		```
Sec	tion C. Computation of Public Sur						
15	Public support percentage for 2011 (line 8			mn (f))		15	%
16	Public support percentage from 2010 Scho					16	%
	tion D. Computation of Investmen					****	······································
17	Investment income percentage for 2011 (li			13, column (f))		17	%
18	Investment income percentage from 2010					18	%
	331/3% support tests - 2011. If the or						
	17 is not more than 331/3%, check th	_					
b	331/3% support tests - 2010. If the orga		-				
_	line 18 is not more than 331/3%, check						
20	Private foundation. If the organization		•	•			

Schedule A (Form 990 or 990-EZ) 2011

Page 4

Part IV Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See

SUPPORTED ORGANIZATIONS

instructions).

PART I, LINE 11H

AS STATED IN ITS ARTICLES OF ORGANIZATION, HELIOS EDUCATION FOUNDATION SUPPORTS EDUCATIONAL ORGANIZATIONS, INCLUDING UNIVERSITIES, TWO- AND FOUR-YEAR COLLEGES, VOCATIONAL AND TECHNICAL SCHOOLS, SECONDARY SCHOOLS, MIDDLE SCHOOLS, ELEMENTARY SCHOOLS AND OTHER EDUCATIONAL ORGANIZATIONS LOCATED IN ARIZONA AND FLORIDA. THE FOUNDATION ONLY PROVIDES SUPPORT TO PUBLIC CHARITIES DESCRIBED IN SECTIONS 509(A)(1) OR 509(A)(2) OF THE INTERNAL REVENUE CODE AND ONLY TO CHARITIES ORGANIZED IN THE UNITED STATES. DURING FY12, THE FOUNDATION PROVIDED OVER \$19.3 MILLION IN GRANTS TO ITS SUPPORTED CHARITIES.

SCHEDULE D (Form 990)

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.

2011
Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990. ► See separate instructions.

Name of the organization Employer identification number HELIOS EDUCATION FOUNDATION 94-2850977 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Aggregate contributions to (during year) Aggregate grants from (during year) 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 Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Part II Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space 2 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. 2a 2b h Number of conservation easements on a certified historic structure included in (a) 2c C Number of conservation easements included in (c) acquired after 8/17/06, and not on a Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 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 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 6 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) (ı) and section 170(h)(4)(B)(ii)? 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. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 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. 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: 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:

Par	Organizations Maintaining Colle	ctions of Art, F	iistori	cai ireas	ures,	or c	Jiner :	oimilar A	ssets (C	onunue	ia)	
3	Using the organization's acquisition, access collection items (check all that apply):	sion, and other	records	s, check a	iny of	the	followi	ng that a	re a sign	ificant (ise of	ıts
а	Public exhibition	d		Loan	or exch	nang	je progi	ams				
b	Scholarly research	е		Other								
С	Preservation for future generations											
4	Provide a description of the organization's	collections and	explair	n how the	y furth	ner t	the org	anızation's	exempt	purpos	e in f	Part
	XIV.											
5	During the year, did the organization solicit	or receive donation	ons of a	art, histori	cal trea	asure	es, or o	ther simila	ar	_		
	assets to be sold to raise funds rather than to	o be maintained	as part	of the org	janizati	ion's	collec	tion? · · ·		Yes		No
Par	t IV Escrow and Custodial Arrangem line 9, or reported an amount on				ation a	ansv	wered	"Yes" to f	Form 99	0, Part 	IV,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?									Yes		No
b	If "Yes," explain the arrangement in Part XIV											
				•				Aı	mount			
С	Beginning balance	<i></i>			1	l c						
	Additions during the year				_	$\overline{}$						
е	Distributions during the year	. .			1	ie						
f	Ending balance				4	lf						
2a	Did the organization include an amount on F	Form 990, Part X	(, line 2°	1?					L	Yes		No
b	If "Yes," explain the arrangement in Part XIV											
Par	t V Endowment Funds. Complete if	the organization	n ans	wered "Y	es" to	For	m 990					
		rrent year (b) Prior y	year	(c) Two	years	back	(d) Three y	ears back	(e) Four	years i	oack
	Beginning of year balance											
	Contributions											
С	Net investment earnings, gains,											1
	and losses											
	Grants or scholarships											
е	Other expenditures for facilities .											,
	and programs											
	Administrative expenses											
	End of year balance		1	()	/	- \ \ \						
2	Provide the estimated percentage of the cur		liance ((line 1g, co	olumin (a)) r	ielo as.					
a	Board designated or quasi-endowment ► Permanent endowment ► %											
	Temporarily restricted endowment ▶	0/										
•	The percentages in lines 2a, 2b, and 2c sho											
3.a	Are there endowment funds not in the poss		ianizati	on that ar	a hald	and	Ladmin	stared for	the			
-	organization by	ession of the org	jailizati	ion that ar	e neiu	anu	aumm	istered for	u ic	ſ	Yes	No
	(i) unrelated organizations									3a(i)	163	110
	(ii) related organizations									3a(ii)		
b	If "Yes" to 3a(ıı), are the related organization									3b		
4	Describe in Part XIV the intended uses of the	-				• •				1 1		
	t VI Land, Buildings, and Equipment.											
	Description of property	(a) Cost or other b		(b) Cost or o	ther basi	s		umulated eciation	(d	l) Book va	lue	
1a	Land	-				\top						
b	Buildings					\top						
С	Leasehold improvements			18	2,496	ó.	10	51,030.			21,4	66.
d	Equipment			22	8,375	5.	19	7,793.			30,5	82.
е	Other				1,381	_		91,026.		1	90,3	55.
Tota	il. Add lines 1a through 1e (Column (d) must	t equal Form 990,	Part X	, column (B), line	10(c).)	▶			42,4	
									0-6-4	ula D (Ea	000	

Part VII	Investments - Other Securities. See F	orm 990, Part X, line	e 12.	
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuati Cost or end-of-year marki	on et value
(1) Financi	al derivatives			
	-held equity interests			
				
				
<u>(B)</u>				
(C)				
(D) (E)				
<u>\</u> E/				
(G)				
(H)				
(1)				
	in (b) must equal Form 990, Part X, col. (B) line 12)			
Part VIII		orm 990, Part X, Iin	e 13.	
	(a) Description of investment type	(b) Book value	(c) Method of valuat Cost or end-of-year mark	on et value
(1)				
(2)				
(3)				
(4)				
(5)				_
(6)				
(7)		-		
(8)				
(10)		<u> </u>		
<u> </u>	nn (b) must equal Form 990, Part X, col (B) line 13)			
Part IX	Other Assets. See Form 990, Part X,	ine 15.		
	(a) Description		(b) Book value
(1)				
(2)				
(3)				
(4)		.		<u> </u>
(5) (6)	• • • • • • • • • • • • • • • • • • • •			
(7)				
(8)		-		
(9)				
(10)				- ·
Total (Colum	nn (b) must equal Form 990, Part X, col (B) line 15)			
Part X	Other Liabilities. See Form 990, Part			
1.	(a) Description of liability	(b) Book valu	18	
_(1) Fede	eral income taxes			
_(2)				
_(3)				
_(4)				
<u>(5)</u>			 	
(6)				
(7)			 [
<u>(8)</u> (9)				
(10)				
(11)				
	mn (b) must equal Form 990, Part X, col (B) line 25) ▶		
	(ASC 740) Eastrate In Bost VIV provide the			

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

Total revenue (Form 990, Part VIII, column (A), line 12)	
2 Total expenses (Form 990, Part IX, column (A), line 25) 3 Excess or (deficit) for the year. Subtract line 2 from line 1 3 -13, 147 4 Net urrealized gains (losses) on investments 5 Donated services and use of facilities 6 Investment expenses 7 Pror period adjustments 7 Other (Describe in Part XIV) 7 Total adjustments (early Add lines 4 through 8 7 Total expenses or (deficit) for the year per audited financial statements. Combine lines 3 and 9 7 Total adjustments (early Add lines 4 through 8 9 Total adjustments (early Add lines 4 through 8 9 Total adjustments (early Add lines 4 through 8 10 Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9 11 Total revenue, gains, and other support per audited financial statements With Revenue per Return 1 Total revenue, gains, and other support per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12. a Net unrealized gains on investments b Donated services and use of facilities c Recoveries of prior year grants d Other (Describe in Part XIV) e Add lines 2a through 2d 2 Total revenue, and form 990, Part VIII, line 12, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b 4 Amounts included on Form 990, Part VIII, line 7b 4 Add lines 4 a and 4b 5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) 5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) 5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part II, line 12) 6 Other (Describe in Part XIV) 6 Add lines 2a through 2d 7 Amounts included on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments c Other (Describe in Part XIV) 6 Add lines 2a through 2d 7 Amounts included on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments c Other (Describe in Part XIV) 7 Add lines 24 and 4b 7 Amounts included on Form 990, Part IX, line 25 and 4c. (This must equal Form 990, Part I	
3	
Net unrealized gains (losses) on investments \$ \$ \$ \$ \$ \$ \$ \$ \$	088.
Net unrealized gains (losses) on investments \$ \$ 76,851	794.
5	640.
Investment expenses	
7 Proro period adjustments	
8 Other (Describe in Part XIV) 8 7 total adjustments (net) Add lines 4 through 8 9 76,851 10 Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9 10 63,703	
9 Total adjustments (net) Add lines 4 through 8 10 Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9 10 63, 703 Part XIII Reconcilitation of Revenue per Audited Financial Statements With Revenue per Return 1 Total revenue, gains, and other support per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12. A Net unrealized gains on investments b Donated services and use of facilities c Recoveries of prior year grants d Other (Describe in Part XIV) 2 Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part VIII, line 7b 4 Add lines 4a and 4b 5 Total expenses and losses per audited financial statements With Expenses per Return 1 Total expenses and losses per audited financial Statements With Expenses per Return 1 Total expenses and losses per audited financial Statements With Expenses per Return 1 Total expenses and losses per audited financial Statements With Expenses per Return 1 Total expenses and losses per audited financial Statements With Expenses per Return 1 Total expenses and losse per audited financial Statements With Expenses per Return 1 Total expenses and losse per audited financial Statements With Expenses per Return 1 Total expenses and losse per audited financial Statements With Expenses per Return 1 Total expenses and losse per audited financial Statements With Expenses per Return 1 Total expenses and lose of facilities b Prior year adjustments c Other lossers d Other (Describe in Part XIV) e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25; but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b 4 Amounts included on Form 990, Part VIII, line 7b 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part III, lines 18). 5 5 25, 747 Part XIV Supplemental Information Complete this part to provide the descriptions required for Part II, line 87, and 9, Part III, lines 2d and 4b	
10 Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9 10 63,703	640.
Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return 1 Total revenue, gains, and other support per audited financial statements	
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a Net unrealized gains on investments b Donated services and use of facilities c Recoveries of prior year grants d Other (Describe in Part XIV) e Add lines 2a through 2d 3 Subtract line 2e from line 1 a Investment expenses not included on Form 990, Part VIII, line 12, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b 4 Add lines 4a and 4b 5 Total expenses and losses per audited financial Statements With Expenses per Return 1 Total expenses and losses per audited financial Statements With Expenses per Return 1 Total expenses and losses per audited financial Statements With Expenses per Return 1 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 b Prior year adjustments c Other losses d Other (Describe in Part XIV) e Add lines 2a through 2d 3 Subtract line 2e from line 1 3 Investment expenses not included on Form 990, Part IX, line 1: a Investment expenses not included on Form 990, Part IX, line 1: a Investment expenses not included on Form 990, Part IX, line 1: a Investment expenses not included on Form 990, Part IX, line 1: a Investment expenses not included on Form 990, Part IX, line 1: b Other (Describe in Part XIV) c Add lines 4: and 4b 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18). 5 25,747 Part XIV Supplemental Information Characteristics 2d and 4b. Also 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 IV, line 4; Part X, line 2; Part XII, line 8; Part XIII, line 8; Par	
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d Other (Describe in Part XIV) e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b 4 Add lines 4a and 4b 5 Total expenses and losses per audited financial statements C Other (Describe in Part XIV) C Add lines 4a and 4b 7 1,056 5 Total expenses and losses per audited financial statements With Expenses per Return C Total expenses and losses per audited financial statements C Other (Describe in Part XIV) C Add lines 4a and 4b C 1,056 C Other (Describe in Part XIV) C Add lines 2a through 2d C Other (Describe in Part XIV) C Add lines 2a through 2d C Other (Describe in Part XIV) C Add lines 2a through 2d C Other (Describe in Part XIV) C Add lines 2a through 2d C Other (Describe in Part XIV) C Add lines 4a and 4b C 1,047 C Add lines 4a and 4b C 1,056 C Add l	
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a Investment expenses not included on Form 990, Part VIII, line 7b	507 .
b Other (Describe in Part XIV) c Add lines 4a and 4b 5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) 5 12, 599 Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments c Other losses d Other (Describe in Part XIV) e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIV) c Add lines 4a and 4b 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) 5 25, 747 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 XII, line 8; Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide	
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SEE PAGE 5	
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Part XIV Supplemental Information (continued)

FIN 48 (ASC 740) FOOTNOTE

PART X, LINE 2

THE FINANCIAL ACCOUNTING STANDARDS BOARD (FASB) ISSUED NEW GUIDANCE ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES. THE FOUNDATION INITIALLY ADOPTED THIS NEW GUIDANCE FOR THE YEAR ENDED SEPTEMBER 30, 2010.

MANAGEMENT EVALUATED THE FOUNDATION'S TAX POSITIONS AND CONCLUDED THAT THE FOUNDATION HAD TAKEN NO UNCERTAIN TAX POSITIONS THAT REQUIRE ADJUSTMENT TO THE FINANCIAL STATEMENTS TO COMPLY WITH THE PROVISIONS OF THIS GUIDANCE. THE FOUNDATION IS NO LONGER SUBJECT TO U.S. FEDERAL OR STATE AND LOCAL INCOME TAX EXAMINATIONS BY TAX AUTHORITIES FOR THE YEARS BEFORE 2008. AS OF SEPTEMBER 30, 2012, THE FOUNDATION HAS ADDRESSED UNCERTAINTY IN ITS INCOME TAX POSITIONS UNDER THIS NEW GUIDANCE AND DETERMINED THERE ARE NO UNRECOGNIZED/DERECOGNIZED TAX BENEFITS REQUIRING AN ACCRUAL.

OTHER REVENUE ON RETURN NOT ON BOOKS

PART XII, LINE 4B

GAIN ON DISPOSAL OF ASSETS \$9,246

OTHER EXPENSES ON BOOKS NOT ON RETURN

PART XIII, LINE 2D

GAIN ON DISPOSAL OF ASSETS \$(9,246)

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.

Open to Public

OMB No 1545-0047

► Attach to Form 990. ► See separate instructions.

Department of the Treasury Internal Revenue Service Inspection Employer identification number Name of the organization HELIOS EDUCATION FOUNDATION 94-2850977 General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Part I Form 990, Part IV, line 14b. 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed) (a) Region (b) Number of (c) Number of (d) Activities conducted in (e) If activity listed in (d) is (f) Total offices in the employees, region (by type) (e.g., a program service, expenditures for describe specific type of region agents, and fundraising, program services, investments, and investments independent service(s) in region in region contractors grants to recipients in region located in the region) (1) CENTRAL AMERICA/CARIBBEAN INVESTMENTS N/A 20,638,000 (2) (3) (4) (5) (6) (7) (8) (9) (10) (11) (12) (13) (14)(15)(16)

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

Schedule F (Form 990) 2011

(17)

Sub-total.....

Total from continuation sheets to Part I Totals (add lines 3a and 3b) 20,638,000

20,638,000.

HELIOS EDUCATION FOUNDATION

Schedule F	Schedule F (Form 990) 2011								Page 2
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 recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000.	ance to Organization scipient who received additional space is	ons or Entities Outside ed more than \$5,000. needed	the United SI Check this bo	ates. Complete I	f the organiza	ation answered " nore than \$5,000	res" to Form 99	. –
-	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)									
(2)									
(3)									
(4)	* * * * *								
(2)	, , . , . , . , . , . , . , . , . ,								
(9)									
		7. ***							

(14)		
(15)		
(16)		
2 Enter total number of recipient organ	2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt	

(11)

(10)

6

(12)

(13)

E

8

34

1E1275 1 000

JSA

59456U 1546

Schedule F (Form 990) 2011

Page 3

HELIOS EDUCATION FOUNDATION

Schedule F (Form 990) 2011 (h) Method of valuation (book, FMV, appraisal, other) Schedule F (Form 990) 2011

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 (g) Description of non-cash assistance (f) Amount of non-cash assistance (e) Manner of cash disbursement (d) Amount of cash grant (c) Number of recipients (b) Region (a) Type of grant or assistance Ξ 2 3 ₹ 3 14 (16) 9 9 8 6 9 <u>=</u> (12) (13) (15) 13 (18)

1E1276 1 000 JSA

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 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 U.S. Owner (see Instructions for Forms 3520 and 3520-A)		X 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 US Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)		☐ 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)		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)		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)		X No

Schedule F (Form 990) 2011

Schedule F (Form 990) 2011

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); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions)

SCHEDULE 1 (Form 990)

Department of the Treasury

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

	OMB No 1545-0047	2011	
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Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990.

Internal Revenue Service		▼ Att	▶ Attach to Form 990.				Inspection
Name of the organization						Employer identification number	n number
HELIOS EDUCATION FOUNDATION						94-2850977	
Part General Information on Grants and Assistance	Assistance						
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and	bstantiate the	amount of the	grants or assistan	ce, the grantees' e	ligibility for the grants		
the selection criteria used to award the grants or assistance?	s or assistance ures for moni	oring the use of	f grant funds in the	United States		_ · · · · · · · · · · · · · · · · · · ·	Yes No
ar	overnments ny recipient	and Organiza that received	itions in the Unit more than \$5,00	ed States. Comp 0. Check this bo	olete if the organiza x if no one recipien	tion answered "Ye t received more th	s" an \$5,000.
(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
(1) A NEW LEAF						ı	POSTSECONDARY -
ME	86-0558407	501(C)(3)	100,000				SEE PART IV
(2) ACT INC							TRANSITION -
500 ACT DR IOWA CITY, IA 52245	42-0841485	501(C)(3)	275,000				SEE PART IV
_(3) AMERICAN RED CROSS GRAND CANYON CHAPTER							EDUCATION -
6135 N BLACK CANYON HWY PHOENIX, AZ 85015	53-0196605	501(C)(3)	25,000				SEE PART IV
(4) AMERICAN RED CROSS GRAND CANYON CHAPTER							TRANSITION -
6135 N BLACK CANYON HWY PHOENIX, AZ 85015	53-0196605	501(C)(3)	10,000				SEE PART IV
(5) ARIZONA CENTENNIAL 2012 FOUNDATION							INNOVATIVE -
1110 W WASHINGTON ST PHOENIX, AZ 85007	27-0746191	501(C)(3)	20,000			ŀ	SEE PART IV
-(6) ARIZONA COLLEGE SCHOLARSHIP FOUNDATION							POSTSECONDARY -
4040 E CAMELBACK RD PHOENIX, AZ 85018	20-2366755	501(C)(3)	15,000				SEE PART IV
(7) ARIZONA COLLEGE SCHOLARSHIP FOUNDATION							POSTSECONDARY -
4040 E CAMELBACK RD PHOENIX, AZ 85018	20-2366755	501 (C) (3)	40,000				SEE PART IV
(8) ARIZONA COMMUNITY FOUNDATION							TRANSITION -
2201 E CAMELBACK RD PHOENIX, AZ 85016	86-0348306	501 (C) (3)	415,000				SEE PART IV
_ i ;	1						TRANSITION -
(10) ADITOMY DIMMONDRACE DAINDANTON	905046308	(5) (3)	006.121				POSTSECONDARY -
AND E TEREBOOM OF BUILDING AND SOOM	- 26-0001615	501 (2)	טטט טטצ				SEE PART IV
		(5) (5) 150					TRANSITION -
401 E JEFFERSON ST PHOENIX, AZ 85004	86-0901615	501(C)(3)	50,000				SEE PART IV
(12) ARIZONA GRANTWAKERS FORUM							EDUCATION -
1505 E MISSOURI AVE PHOENIX, AZ 85014	86-1040394	501(C)(3)	15,000				SEE PART IV
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	jovernment or	ganizations list	ed in the line 1 table			▲ :: :: ::	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
3 Enter total number of other organizations listed in the line 1 table	ed in the line	table				•	
-	structions fo	tions for Form 990.	<u> </u>			Schedu	Schedule I (Form 990) (2011)

1E1288158456U 1546

SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

HELIOS EDUCATION FOUNDATION

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

OMB No 1545-0047 8

Open to Public

94-2850977

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

² 7 × Yes Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Part I General Information on Grants and Assistance

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II

Part II can be duplicated if additional space	space is needed	eded					
1 (a) Name and address of organization or government	(p) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
_(1) ARIZONA NATIONAL SCIENCE TEACHERS ASSOC							TRANSITION -
400 E VAN BUREN ST PHOENIX, AZ 85004	86-0622405	501 (C) (3)	50,000				SEE PART IV
(2) ARIZONA SCIENCE CENTER							INNOVATIVE -
600 E WASHINGTON ST PHOENIX, AZ 85004	86-0390558	501 (C) (3)	40,000				SEE PART IV
(3) ARIZONA STATE UNIVERSITY FOUNDATION							EDUCATION -
P O BOX 2260 TEMPE, AZ 85280-2260	86-6051042	501 (C) (3)	25,000				SEE PART IV
(4) ARIZONA STATE UNIVERSITY FOUNDATION							TRANSITION -
P O BOX 2260 TEMPE, AZ 85280-2260	86-6051042	501 (C) (3)	120,000				SEE PART IV
(5) ARIZONA STATE UNIVERSITY FOUNDATION							EDUCATION -
P O BOX 2260 TEMPE, AZ 85280-2260	86-6051042	501(C)(3)	6,000				SEE PART IV
(6) BE A LEADER FOUNDATION							TRANSITION -
6850 NORTH CENTRAL AVE PHOENIX, AZ 85012	55-0850279	501 (C) (3)	15,000				SEE PART IV
_(7) CENTER_FOR_THE_FUTURE_OF_ARIZONA							TRANSITION -
	82-0538372	501(C)(3)	525,000				SEE PART IV
_(8) CHILDSPLAY							EARLY CHILDHOOD -
900 S MITCHELL DR TEMPE, AZ 85281	86-0336473	501(C)(3)	347,000.	į			SEE PART IV
(9) CONSORTIUM OF FLORIDA EDUCATION FOUNDATIONS							EDUCATION -
P O BOX 358719 GAINSVILLE, FL 32635-8719	65-1086820	501 (C) (3)	10,000				SEE PART IV
(10) COUNCIL FOR EDUCATIONAL CHANGE							TRANSITION -
3265 MERIDIAN PKWY WESTIN, FL 33331	01-0638224	501 (C) (3)	471,000				SEE PART IV
(11) FLORIDA COLLEGE SYSTEM FOUNDATION							POSTSECONDARY -
325 W GAINES ST TALLAHASSEE, FL 32399	65-0530384	501 (C) (3)	495,000				SEE PART IV
(12) FLORIDA EDUCATION FOUNDATION							EDUCATION -
325 W GAINES ST TALLAHASSEE, FL 32399-0400	59-2718509 b01(C)(3)	501(C)(3)	7,500				SEE PART IV

3 Enter total number of other organizations moved in the form 990. For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (2011)

SCHEDULEI (Form 990) Department of the Treasury Internal Revenue Service

Name of the organization

Part I General Information on Grants and Assistance

HELIOS EDUCATION FOUNDATION

Governments, and Individuals in the United States

OMB No 1545-0047

Open to Public

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

Grants and Other Assistance to Organizations,

Employer identification number 94-2850977

%		
1 Does the organization maintain records to substantiate the amount of the grants or assistance, and the selection criteria used to award the grants or assistance?	Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990. Part IV. line 21, for any recipient that received more than \$5,000.	Part II can be duplicated if additional space is needed

במולה וו כפון הם מחלווים של וו מכון לו מילוים ומים וו	space is liceded						
(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
(1) FLORIDA EDUCATION FOUNDATION							TRANSITION -
325 W GAINES ST TALLAHASSEE, FL 32399-0400	59-2718509	501(C)(3)	15,000				SEE PART IV
(2) FLORIDA PHILANTHROPIC NETWORK							EDUCATION -
1211 N WESTSHORE BLVD TAMPA, FL 33607	20-1328734	501(C)(3)	7,500				SEE PART IV
(3) FLORIDA PHILANTHROPIC NETWORK							EDUCATION -
1211 N WESTSHORE BLVD TAMPA, FL 33607	20-1328734	501(C)(3)	20,000				SEE PART IV
(4) FLORIDA PHILANTHROPIC NETWORK							EDUCATION -
1211 N WESTSHORE BLVD TAMPA, FL 33607	20-1328734	501(C)(3)	2,000				SEE PART IV
(5) FLORIDA STATE UNIVERSITY FOUNDATION				•			POSTSECONDARY -
2010 LEVY AVE TALLAHASSEE, FL 32306-4450	59-6152180	501 (C) (3)	20,000				SEE PART IV
(6) GILA COUNTY EDUCATION SERVICE AGENCY							TRANSITION -
1400 EAST ASH ST GLOBE, AZ 85501	86-0262489	PUBLIC ENTITY	1,274,000				SEE PART IV
(7) GRANTWAKERS FOR EDUCATION							INNOVATIVE -
720 SW WASHINGTON ST PORTLAND, OR 97205	33-0919329	501(C)(3)	100,000				SEE PART IV
(8) GRANTMAKERS FOR EDUCATION							EDUCATION -
720 SW WASHINGTON ST PORTLAND, OR 97205	33-0919329	501 (C) (3)	7,000				SEE PART IV
(9) LAWTON CHILES FOUNDATION							EARLY CHILDHOOD -
1614 MAHAN CENTER TALLAHASSEE, FL 32308	59-3400148	501 (C) (3)	40,000				SEE PART IV
(10) MARICOPA COMMUNITY COLLEGES FOUNDATION	-	-					POSTSECONDARY -
2419 W 14TH STREET TEMPE, AZ 85281	86-0327449	501 (C) (3)	25,000				SEE PART IV
(11) MARICOPA COMMUNITY COLLEGES FOUNDATION							INNOVATIVE -
2419 W 14TH STREET TEMPE, AZ 85281	86-0327449	501(C)(3)	15,000				SEE PART IV
(12) MARICOPA COMMUNITY COLLEGES FOUNDATION				•			POSTSECONDARY -
2419 W 14TH STREET TEMPE, AZ 85281	86-0327449	501(C)(3)	40,000				SEE PART IV
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	overnment or	ganizations liste	ed in the line 1 table	0		•	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

Enter total number of other organizations listed in the line 1 table 3 Enter total number of other organizations listed in the line 1 table For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (2011)

SCHEDULEI (Form 990)

Name of the organization

Department of the Treasury Internal Revenue Service HELIOS EDUCATION FOUNDATION

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

OMB No 1545-0047

Open to Publi Inspection

Employer identification number

94-2850977

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

ž X Yes 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States the selection criteria used to award the grants or assistance? Part I General Information on Grants and Assistance

to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" Part II

Part II can be duplicated II additional space is needed	space is net	eded					
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) MIAMI DADE COLLEGE FOUNDATION INC.							INNOVATIVE -
300 NE SECOND AVE MIAMI, FL 33132-2296	59-6169745	501 (C) (3)	100,000				SEE PART IV
(2) NATIONAL LATING CHIEDREN'S INSTITUTE							EDUCATION -
118 BROADWAY SAN ANTONIO, TX 78205	74-2814887	501 (C) (3)	10,000				SEE PART IV
(3) RAYS BASEBALL FOUNDATION INC							POSTSECONDARY -
ONE TROPICAN DR ST PETERSBURG, FL 33705	20-4103240	501 (C) (3)	200,000				SEE PART IV
(4) SCIENCE FOUNDATION ARIZONA							TRANSITION -
400 E VAN BUREN ST PHOENIX, AZ 85004	20-4365711	501(C)(3)	4,050,000				SEE PART IV
(5) SOCIAL VENTURE PARTNERS							POSTSECONDARY -
1505 E MISSOURI AVE PHOENIX, AZ 85016	86-0348306	501 (C) (3)	5,500				SEE PART IV
(6) STAND FOR CHILDREN							INNOVATIVE -
645 N 4TH AVE PHOENIX, AZ 85003-1595	52-1957214	501 (C) (3)	1,500,000				SEE PART IV
(7) STARTING RIGHT NOW, INC							TRANSITION -
TAMPA, FL 33647-2	26-3725699	501(C)(3)	10,000				SEE PART IV
(8) TAKE STOCK IN CHILDREN							TRANSITION -
8600 NW 36TH ST MIAMI, FL 33166	59-3331584	501(C)(3)	20,000				SEE PART IV
(9) TAKE STOCK IN CHILDREN							TRANSITION -
8600 NW 36TH ST MIAMI, FL 33166	59-3331584	501(C)(3)	10,000			ļ	SEE PART IV
(10) TAKE STOCK IN CHILDREN.							TRANSITION -
8600 NW 36TH ST MIAMI, FL 33166	59-3331584	501 (C) (3)	40,000				SEE PART IV
(11) TEACH FOR AMERICA					-		TRANSITION -
3030 N CENTRAL AVE PHOENIX, AZ 85012	13-3541913	501 (C) (3)	800,000				SEE PART IV
(12) UNITED WAY OF NORTHERN ARIZONA							INNOVATIVE -
	7,71100	501 (0) (3)	000				SEE DART IV

For Paperwork Reduction Act Notice, see the Instructions for Form 990. Enter total number of other organizations listed in the line 1 table.

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

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Schedule I (Form 990) (2011)

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

Name of the organization

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

OMB No 1545-0047

2011 Open to Public

InSpecification number

94-2850977

ž

X Yes

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Part | General Information on Grants and Assistance

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II

Part II can be duplicated if additional space	space is needed	eded					→
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) UNITED MAY OF NORTHERN ARIZONA							EARLY CHILDHOOD -
1515 E CEDAR AVE FLAGSTAFF, AZ 86004	86-0211666	501 (C) (3)	330,000				SEE PART IV
(2) UNITED WAY OF TAMPA BAY INC							EARLY CHILDHOOD -
5201 W KENNEDY BLVD TAMPA, FL 33609	59-3725701	501(C)(3)	1,000,000				SEE PART IV
(3) UNITED WAY OF TUCSON AND SOUTHERN ARIZONA							EARLY CHILDHOOD -
P O BOX 86750 TUCSON, AZ 85754-6750	86-0098932	501(C)(3)	310,000				SEE PART IV
(4) UNITED WAY OF YUMA COUNTY							EARLY CHILDHOOD -
180 W 1ST ST YUMA, AZ 85364	86-0211326	501 (C) (3)	150,000				SEE PART IV
(5) UNIVERSITY OF SOUTH FLORIDA FOUNDATION, INC.							POSTSECONDARY -
4202 E FOWLER AVE TAMPA, FL 33620	59-0879015	501(C)(3)	25,000				SEE PART IV
(6) UNIVERSITY OF SOUTH FLORIDA FOUNDATION, INC.							TRANSITION -
4202 E FOWLER AVE TAMPA, FL 33620	59-0879015	501(C)(3)	225,000				SEE PART IV
(7) UNIVERSITY OF SOUTH FLORIDA FOUNDATION, INC.							POSTSECONDARY -
4202 E FOWLER AVE TAMPA, FL 33620	59-0879015	501 (C) (3)	40,000				SEE PART IV
(8) VALLE DEL SOL							EDUCATION -
3807 N 7TH ST PHOENIX, AZ 85014	86-0251255	501 (C) (3)	10,000				SEE PART IV
(9) VALLEY OF THE SUN UNITED WAY							EDUCATION -
1515 E OSBORN RD PHOENIX, AZ 85014	86-0104419	501 (C) (3)	5,344				SEE PART IV
(10) VALLEY OF THE SUN UNITED WAY							EDUCATION -
1515 E OSBORN RD PHOENIX, AZ 85014	86-0104419	501(C)(3)	5,344				SEE PART IV
(11) VALLEY OF THE SUN UNITED MAY							EDUCATION -
1515 E OSBORN RD PHOENIX, AZ 85014	86-0104419	501(C)(3)	25,000				SEE PART IV
(12) VALLEY OF THE SUN UNITED MAY							EARLY CHILDHOOD -
1515 E OSBORN RD PHOENIX, AZ 85014	86-0104419	501(C)(3)	15,000				SEE PART IV

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Schedule I (Form 990) (2011)

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

3 Enter total number of other organizations listed in the line 1 table ... For Paperwork Reduction Act Notice, see the Instructions for Form 990.

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Part I General Information on Grants and Assistance

HELIOS EDUCATION FOUNDATION

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

OMB No 1545-0047 Open to Publi 2001

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

Employer identification number

94-2850977

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and	ostantiate the	amount of the	grants or assistan	ce, the grantees'	eligibility for the grants		;;
ure selection criteria used to award the grants of assistance? Describe in Part IV the organization's procedures for monitor.	or assistance ires for monit	oring the use of	for monitoring the use of grant funds in the United States	United States			Yes
Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000 Part II can be duplicated if additional space is needed	overnments iy recipient	and Organiza that received	tions in the Unit more than \$5,00	ed States. Com 00. Check this bo	plete if the organiza ox if no one recipier	tton answered "Ye	s" an \$5,000
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section	(d) Amount of cash grant	(e) Amount of non-	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) VALLEY OF THE SUN UNITED WAY.	0	, 6, , 5, 10	000				EARLY CHILDHOOD -
(2) MESTED POLICY CENTER	86-0104419	PUBLIC ENTITY	250,000				SEE PART IV SEE PART IV
(3) YUMA UNION HIGH SCHOOL DISTRICT #70 3150 SOUTH AVENUE A YUMA, AZ 85364	0825233	PUBLIC ENTITY	3,900,000.				TRANSITION - SEE PART IV
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)						7000	
(11)							
(12)						-	
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	overnment or	ganizations liste	ed in the line 1 table	9		A	39.
3 Enter total number of other organizations liste	d in the line	table				A	3.
For Paperwork Reduction Act Notice, see the Instructions for Form 990.	structions for	. Form 990.				Schedi	Schedule I (Form 990) (2011)

Page 2

HELIOS EDUCATION FOUNDATION

Schedule I (Form 990) (2011) Part III

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

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
-						
2						
m m						
4						
ro.						
و						
7						
Part IV	Part IV Supplemental Information. Complete this part to provide the information required in Part I. line 2, and any other additional information.	is part to prov	olde the informat	tion required in	Part I, line 2, and an	y other additional information.

DESCRIPTION OF ORGANIZATION'S PROCEDURES FOR MONITORING THE USE OF GRANTS

PART I, LINE 2

SEE SCHEDULE O

PURPOSE OF GRANTS

PART II, COLUMN H

SEE SCHEDULE O

Schedule I (Form 990) (2011)

PAGE 33

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees
Complete if the organization answered "Yes" to Form 990,
Part IV, line 23.

► Attach to Form 990. ► See separate Instructions.

OMB No 1545-0047 Open to Public

Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer Identification number HELIOS EDUCATION FOUNDATION 94-2850977 Questions Regarding Compensation

all	waestions regarding compensation			
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form		Yes	No
	990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	Troubling directions for personal acc			
	— Aymono to business and a posterior residence			
	X 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	1b	х	
2	explain	10		
2			х	
	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.			
	- Somponeation componeation control of state			
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		Х
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Х
С		4c		Х
	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	ŀ		
	compensation contingent on the revenues of:			
а	The organization?	5a		X
b	Any related organization?	5b		Х
	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		Х
b		6b		Х
	If "Yes" to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed			
	payments not described in lines 5 and 6? If "Yes," describe in Part III	7	Х	
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject			
	to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe			
	ın Part III	8		х
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53 4958-6(c)?	9		

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

Schedule J (Form 990) 2011

Schedule J (Form 990) 2011

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

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	of W-2 and/or 1099-MISC compensation	compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name	(I) Base compensation	(II) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(F(D)	reported as deferred in prior Form 990
0	316,250.	45,000.	41,196.	24,500.	36,342.	463,288.	0
1 PAUL LUNA (ii)	C	0	0	0		- 1	0
(C)	121,750.	45,000.	9,169.		38,378.	214,297	0 0
	168,750.	25,000.	24,053.	21,974.	44,426.	284,203.	0
3 MICHAEL CHESIN (ii)	 	0	 		1		0
	221,250.	35,000.	11,304.	24,500.	14,052.	306,106.	0
4 BARBARA RYAN		0	' 1	0		0	0
(0)	116,250.	15,000.	1,837.	13,339.	12,143.	158,569.	0
5 KAREN ORTIZ		d	0	0	0	0	0
	122,500.	17,000.	1,857.	14,136.	11,644.	167,137	0 0 0 0 0 0 0 0 0 0
6 IAN SMITH	0	0	0	0	0	0	0
	116,250.	15,000.	1.	13,175.	12,143.	156,569.	0
7 ANTONIA FRANCO		O	0	0	0	0	0
	121,250.	16,000.	-522.	13,777.	22,757.	173,262.	0
8 LINDA THOMPSON		þ	0	0	0	0	0
0)	116,250.	14,000.	-1,650.	13,365.	22,520.	164,485.	0
9 JO ANNE VASQUEZ		0		0	O	0	0
(0)	116,250.	13,000.	-9,188.	13,100.	32,009.	165,171.	0
10 STACY CARLSON (ii)				0	0	0	0
(1)							
11 (ii)							
(0)					1		
13 (ii)							
(1)			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
14 (ii)							
<u> </u>	1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			1 1 1 1 1 1	
15 (ii)		The state of the s					
		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1		
16 (ii)							
						Scho	Schedule J (Form 990) 2011

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Schedule J (Form 990) 2011

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

FIRST CLASS TRAVEL

PART I, QUESTION 1A

BOARD MEMBERS MAY TRAVEL "FIRST CLASS" FOR FOUNDATION-RELATED BUSINESS IF

THE TRAVEL TIME EXCEEDS THREE HOURS. ON OCCASION, FOUNDATION STAFF

TRAVELING WITH A BOARD MEMBER ON FLIGHTS EXCEEDING THREE HOURS MAY BE

UPGRADED TO "FIRST CLASS."

COMPANION TRAVEL IS PROVIDED IN LIMITED CIRCUMSTANCES AND IS REPORTED AS

TAXABLE INCOME TO THE INDIVIDUAL.

CERTAIN BENEFITS SUCH AS IPAD USAGE ARE GROSSED UP AND REPORTED AS

PERSONAL TAXABLE INCOME TO THE EMPLOYEE.

NON-FIXED PAYMENTS

PART I, QUESTION 7

DISCRETIONARY BONUSES WERE AUTHORIZED BY THE BOARD FOR CERTAIN

INDIVIDUALS BASED ON PERFORMANCE.

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Schedule J (Form 990) 2011 Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PART II, COLUMN (B)(II) - BONUSES

FORM 990, PART VII, COLUMN (D) INCLUDES BONUSES EARNED FOR FY10 AND FY11

PAID IN CALENDAR YEAR 2011.

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SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

2011
Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

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.

Employer identification number

94-2850977

HELIOS EDUCATION FOUNDATION

AMENDED RETURN

THIS RETURN IS BEING AMENDED TO ATTACH FORM 5471 THAT WAS PREVIOUSLY OMITTED.

FURTHER DESCRIPTION OF MISSION AND PROGRAM SERVICE ACCOMPLISHMENTS

FORM 990, PART III, LINE 4A

HELIOS EDUCATION FOUNDATION'S PURPOSE IS TO CREATE OPPORTUNITIES FOR

POSTSECONDARY EDUCATION SUCCESS IN ARIZONA AND FLORIDA THROUGH ITS

SUPPORT OF EDUCATIONAL ORGANIZATIONS. THE FOUNDATION'S COMMITMENT TO

EDUCATION IS LONG-TERM AND ITS FINANCIAL SUPPORT IS FOCUSED ON BUILDING

SUSTAINABLE PROGRAMS AT EDUCATIONAL ORGANIZATIONS, WHILE IMPACTING THE

EDUCATIONAL SUCCESS OF STUDENTS.

HELIOS EDUCATION FOUNDATION WORKS TO CREATE A COLLEGE GOING CULTURE BY SUPPORTING EDUCATIONAL ORGANIZATIONS THAT IMPLEMENT EFFECTIVE PROGRAMS AIMED AT CHANGING LIVES THROUGH EDUCATION. ULTIMATELY, THE FOUNDATION'S CONTRIBUTIONS ARE WORKING TO INCREASE THE NUMBER OF STUDENTS WHO SUCCESSFULLY COMPLETE POSTSECONDARY EDUCATION WITH THE SKILLS AND KNOWLEDGE NECESSARY TO COMPETE IN A GLOBAL ECONOMY.

DURING FY12, HELIOS EDUCATION FOUNDATION PROVIDED \$19.3 MILLION IN GRANTS
TO EDUCATIONAL ORGANIZATIONS LOCATED IN ARIZONA AND FLORIDA; PROVIDED
FUNDING TO SUPPORT SCHOOLS AND UNIVERSITIES; AND PROVIDED FUNDING TO A
VARIETY OF OTHER EDUCATIONAL ORGANIZATIONS FOR THE PURPOSE OF IMPROVING

THE CONDITIONS OF AND ACCESS TO EDUCATION.

ENSURING STUDENT SUCCESS AND IMPROVING QUALITY OF LIFE IS AT THE CENTER OF THE FOUNDATION'S EFFORTS. THE GOALS OF THE FOUNDATION ARE TO ENSURE (1) CHILDREN, AGES BIRTH TO FIVE, ENTER SCHOOL PREPARED TO SUCCEED; (2) YOUTH IN GRADES 5-12 STAY IN SCHOOL, TRANSITION BETWEEN THE VARIOUS STAGES OF EDUCATION AND GRADUATE ACADEMICALLY PREPARED; AND (3) YOUNG ADULTS HAVE ACCESS TO AND SUCCESSFULLY COMPLETE A POSTSECONDARY PROGRAM.

HELIOS EDUCATION FOUNDATION VIEWS COLLABORATION AND PARTNERSHIP AS

CRITICAL TO CULTIVATING INNOVATIVE IDEAS AND DEVELOPING SOLUTIONS TO THE

COMPLEX CHALLENGES FACING EDUCATION. THE FOUNDATION INVESTS ITS

FINANCIAL RESOURCES AND STRATEGIC EXPERTISE ACROSS THE "EDUCATION

CONTINUUM" AND FOCUSES COMMUNITY INVESTMENTS ACROSS THREE KEY IMPACT

AREAS:

- 1) EARLY CHILDHOOD EDUCATION IMPROVING THE QUALITY OF EARLY LEARNING ENVIRONMENTS BY INCREASING TEACHER QUALITY, INTEGRATING EMERGENT LITERACY ACQUISITION INTO POSTSECONDARY PROGRAMS, AND BRIDGING EARLY CHILDHOOD AND K-3 EDUCATION.
- 2) TRANSITION YEARS FOCUSING ON HELPING YOUTH SUCCESSFULLY TRANSITION

 FROM ELEMENTARY SCHOOL TO MIDDLE SCHOOL, MIDDLE SCHOOL TO HIGH SCHOOL AND
 HIGH SCHOOL TO POSTSECONDARY EDUCATION BY IMPROVING TEACHER QUALITY,
 INCREASING CURRICULUM RIGOR AND STUDENT READINESS, AND PROMOTING FAMILY

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AND COMMUNITY INVOLVEMENT.

FORM 990 REVIEW PROCESS

3) POSTSECONDARY SCHOLARSHIPS - CREATING OPPORTUNITIES FOR INDIVIDUALS TO ATTEND AND SUCCEED IN POSTSECONDARY EDUCATION, INCLUDING HIGHER EDUCATION AND VOCATIONAL TRAINING OPPORTUNITIES FOR TRADITIONALLY UNDERREPRESENTED POPULATIONS, SUCH AS FIRST-GENERATION STUDENTS, STUDENTS FROM RURAL AREAS AND STUDENTS WHO ARE ECONOMICALLY DISADVANTAGED.

FROM RURAL AREAS AND STUDENTS WHO ARE ECONOMICALLY DISADVANTAGED.

FAMILY OR BUSINESS RELATIONSHIP

FORM 990, PART VI, QUESTION 2

JANE ROIG AND VINCENT ROIG HAVE A FAMILY RELATIONSHIP.

FILING WITH THE INTERNAL REVENUE SERVICE.

FORM 990, PART VI, QUESTION 11B

THE FOUNDATION'S SENIOR STAFF AND BOARD OF DIRECTORS (ALL VOTING MEMBERS

OF THE GOVERNING BODY) REVIEW AND APPROVE THE FORM 990 PRIOR TO ITS

THERE ARE SEVERAL REVIEW AND DUE DILIGENCE STEPS THAT OCCUR PRIOR TO THE BOARD RECEIVING THE COMPLETED FORM 990 FOR ITS CONSIDERATION. THE FOUNDATION'S FORM 990 IS PREPARED, REVIEWED AND APPROVED IN THE FOLLOWING MANNER:

1. THE FOUNDATION'S FORM 990 IS PREPARED BY A CERTIFIED PUBLIC ACCOUNTING FIRM IN CONJUNCTION WITH THE FOUNDATION'S CHIEF FINANCIAL OFFICER AFTER

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COMPLETION OF THE ANNUAL AUDITED FINANCIAL STATEMENTS. THE FORM 990 IS THEN SHARED WITH INDEPENDENT TAX COUNSEL FOR REVIEW AND COMMENT.

- 2. UPON COMPLETION OF THE REVIEW BY INDEPENDENT TAX COUNSEL, THE CHIEF FINANCIAL OFFICER REVIEWS THE FORM 990 AND RELATED SCHEDULES WITH SENIOR STAFF WHICH INCLUDES THE PRESIDENT AND CHIEF EXECUTIVE OFFICER, THE CHIEF OPERATING OFFICER, AND THE CHIEF COMMUNICATIONS OFFICER.
- 3. FOLLOWING THE REVIEW AND CONCURRENCE BY SENIOR STAFF, THE FORM 990 IS REVIEWED WITH THE FOUNDATION'S AUDIT COMMITTEE. THE AUDIT COMMITTEE IS A REGULAR STANDING COMMITTEE OF THE BOARD OF DIRECTORS, AND IT IS CHARGED WITH REVIEWING THE FORM 990. A FULL COPY OF THE FORM 990 AND RELATED SCHEDULES IS PROVIDED TO ALL MEMBERS OF THE AUDIT COMMITTEE AS WELL AS ALL MEMBERS OF THE BOARD OF DIRECTORS (ALL VOTING MEMBERS OF THE GOVERNING BODY) IN ADVANCE OF THE REVIEW MEETING IN ORDER TO GIVE THE AUDIT COMMITTEE MEMBERS AND BOARD MEMBERS AMPLE TIME FOR REVIEW. ONCE THE AUDIT COMMITTEE IS SATISFIED WITH THE FORM 990, IT APPROVES THE FORM 990 AND RECOMMENDS IT TO THE FULL BOARD OF DIRECTORS FOR APPROVAL AND FILING.
- 4. FOLLOWING APPROVAL AND RECOMMENDATION BY THE AUDIT COMMITTEE, THE BOARD OF DIRECTORS TAKES ACTION ON THE FORM 990. THE CHAIR OF THE AUDIT COMMITTEE PROVIDES THE BOARD OF DIRECTORS WITH AN OVERVIEW OF THE FORM 990 REVIEW CONDUCTED BY THE AUDIT COMMITTEE AND RECOMMENDS APPROVAL BY THE BOARD OF DIRECTORS. IF REQUIRED, THE BOARD OF DIRECTORS MAY FURTHER

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REVIEW THE FORM 990 AND ENGAGE IN ADDITIONAL DISCUSSIONS. ONCE THE BOARD OF DIRECTORS IS SATISFIED WITH THE FORM 990, IT VOTES ON APPROVAL AND ACCEPTANCE. ONCE APPROVED, SENIOR STAFF IS DIRECTED TO FILE THE FORM 990 WITH THE INTERNAL REVENUE SERVICE.

CONFLICT OF INTEREST POLICY MONITORING AND ENFORCEMENT FORM 990, PART VI, QUESTION 12C THE FOUNDATION HAS CREATED A COMPREHENSIVE CONFLICT OF INTEREST POLICY FOR THE ENTIRE ORGANIZATION. THE CONFLICT OF INTEREST POLICY IS MONITORED AND ENFORCED AT TWO DISTINCT LEVELS OR TIERS WITHIN THE FOUNDATION. THESE TIERS ARE:

- BOARD MEMBERS AND OFFICERS INTERESTED PERSONS
- FOUNDATION STAFF NON-INTERESTED PERSONS

THE PRIMARY DISTINGUISHING FACTOR BETWEEN THE TIERS IS WHETHER THE PERSON IS CONSIDERED AN "INTERESTED PERSON". AN INTERESTED PERSON IS DEFINED AS ANY INDIVIDUAL, RELATED PARTY, OR ENTITY IN A POSITION TO EXERCISE CONTROL OR INFLUENCE OVER THE FOUNDATION, INCLUDING, WITHOUT LIMITATION, DIRECTORS, OFFICERS AND MEMBERS OF A COMMITTEE WITH BOARD DELEGATED POWERS, WHO HAS A DIRECT OR INDIRECT FINANCIAL OR BENEFICIAL INTEREST IN A TRANSACTION WITH THE FOUNDATION.

BOARD MEMBERS AND OFFICERS - INTERESTED PERSON:

EVERY EMPLOYEE, OFFICER AND BOARD MEMBER RECEIVES A COPY OF THE

FOUNDATION'S CONFLICT OF INTEREST POLICY. THE POLICY IS AVAILABLE AND INCORPORATED INTO THE FOUNDATION'S EMPLOYEE HANDBOOK. THE POLICY IS REVIEWED AND SHARED WITH ALL EMPLOYEES (INCLUDING OFFICERS) EVERY JANUARY. THE BOARD OF DIRECTORS DISCUSSES AND REVIEWS THE POLICY ANNUALLY AS WELL.

- MONITORING. THE FOUNDATION, IN CONJUNCTION WITH ITS TAX ADVISOR, HAS
DEVELOPED AND CUSTOMIZED A COMPREHENSIVE CONFLICTS OF INTEREST AND
RELATED PARTY TRANSACTION QUESTIONNAIRE. THIS QUESTIONNAIRE ADDRESSES
AND ALIGNS WITH THE KEY GOVERNANCE AND POLICY QUESTIONS ASKED IN THE FORM
990. THE QUESTIONNAIRE IS REVIEWED AND UPDATED ANNUALLY. ALL FOUNDATION
OFFICERS AND BOARD MEMBERS ARE REQUIRED TO ANSWER THE QUESTIONNAIRE ON AN
ANNUAL CYCLE COMMENCING IN JANUARY. ADDITIONALLY, EACH OFFICER AND BOARD
MEMBER UPON COMPLETION SIGNS AN ACKNOWLEDGEMENT OF DUTIES, CONFLICTS OF
INTEREST POLICY AND CONFIDENTIALITY STATEMENT.

KEY ELEMENTS OF OUR CONFLICT OF INTEREST POLICY AND BEST PRACTICES OF THE FOUNDATION INCLUDE THE FOLLOWING PROTOCOLS:

- DUTY TO DISCLOSE. AN INTERESTED PERSON MUST DISCLOSE ANY ACTUAL OR

 POTENTIAL CONFLICT OF INTEREST TO THE BOARD AND/OR MEMBER OF PERTINENT

 COMMITTEES OF THE BOARD THAT ARE CONSIDERING THE PROPOSED TRANSACTION OR

 ARRANGEMENT.
- DETERMINING WHETHER A CONFLICT OF INTEREST EXISTS. A DETERMINATION OF

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WHETHER THE CONFLICT EXISTS IS MADE BY THE BOARD OR RELEVANT COMMITTEE OF THE BOARD.

- PROCEDURES FOR ADDRESSING THE CONFLICT OF INTEREST.
- * IN THE CASE OF AN ACTUAL CONFLICT OF INTEREST, AN INTERESTED PERSON MAY MAKE A PRESENTATION AT THE BOARD OR COMMITTEE OF THE BOARD CONCERNING THE TRANSACTION, BUT MAY NOT PARTICIPATE IN ANY DELIBERATION OR VOTE OR FUTURE MEETINGS DURING THE DISCUSSION OF, DELIBERATIONS ABOUT, AND THE VOTE ON, THE TRANSACTION OR ARRANGEMENT THAT RESULTS IN THE CONFLICT OF INTEREST.
- * IF APPROPRIATE, A DISINTERESTED PERSON OR COMMITTEE MAY BE APPOINTED TO INVESTIGATE ALTERNATIVES TO THE PROPOSED TRANSACTION. IF A MORE ADVANTAGEOUS TRANSACTION IS NOT NECESSARILY ATTAINABLE UNDER CIRCUMSTANCES THAT WOULD NOT GIVE RISE TO A CONFLICT OF INTEREST, THE BOARD OR COMMITTEE MAY DETERMINE WHETHER THE TRANSACTION OR ARRANGEMENT IS IN THE FOUNDATION'S BEST INTEREST.
- * THE INTERESTED PERSON SHALL NOT INFLUENCE OR ATTEMPT TO INFLUENCE THE DECISIONS OF THE BOARD OR COMMITTEE CONSIDERING THE TRANSACTION.
- VIOLATIONS OF THE CONFLICTS OF INTEREST POLICY. IF THE BOARD OR

 COMMITTEE HAS REASONABLE CAUSE TO BELIEVE THAT AN INTERESTED PERSON HAS

 FAILED TO DISCLOSE ACTUAL OR POSSIBLE CONFLICTS OF INTEREST, IT SHALL

 INFORM THE INTERESTED PERSON OF THE BASIS FOR SUCH BELIEF AND AFFORD THE

 INTERESTED PERSON AN OPPORTUNITY TO EXPLAIN THE ALLEGED FAILURE TO

 DISCLOSE. IF THE BOARD OR COMMITTEE DETERMINES THAT THE INTERESTED

PERSON HAS IN FACT FAILED TO DISCLOSE AN ACTUAL OR POSSIBLE CONFLICT OF INTEREST, IT SHALL TAKE APPROPRIATE DISCIPLINARY AND CORRECTIVE ACTION.

FOUNDATION STAFF - NON-INTERESTED PERSON:

ON AN ANNUAL BASIS AND AS PART OF NEW HIRE ORIENTATION ALL FOUNDATION

STAFF (INCLUDING OFFICERS) ARE MADE AWARE OF AND BRIEFED ON THE

FOUNDATION'S CONFLICT OF INTEREST POLICY. THE POLICY IS INCLUDED IN THE

EMPLOYEE HANDBOOK. EVERY JANUARY, ALL EMPLOYEES SIGN A STATEMENT

ACKNOWLEDGING THAT THEY READ, UNDERSTAND AND AGREE TO COMPLY WITH THE

FOUNDATION'S CONFLICT OF INTEREST POLICY.

- MONITORING. EVERY JANUARY EACH EMPLOYEE (INCLUDING OFFICERS) PREPARES AND SIGNS AN ANNUAL CONFIDENTIALITY AND CONFLICT OF INTEREST DISCLOSURE STATEMENT. THE STATEMENT ADDRESSES THE EMPLOYEE'S DUTY TO DISCLOSE ANY POTENTIAL OR ACTUAL DUALITY OF INTEREST OR CONFLICT OF INTEREST. ALL EMPLOYEES ARE REQUIRED TO MAKE PROMPT AND FULL DISCLOSURE IN WRITING TO THEIR MANAGER OF ANY POTENTIAL SITUATION WHICH MAY INVOLVE A CONFLICT OF INTEREST.
- PROCEDURES FOR ADDRESSING THE CONFLICT OF INTEREST. EMPLOYEES WITH A CONFLICT OF INTEREST QUESTION SHOULD SEEK ADVICE FROM MANAGEMENT. PRIOR TO ENGAGING IN ANY ACTIVITY, TRANSACTION, OR RELATIONSHIP THAT MAY GIVE RISE TO A CONFLICT OF INTEREST, EMPLOYEES MUST SEEK REVIEW FROM THEIR MANAGERS OR THE HUMAN RESOURCE DEPARTMENT. THE PRESIDENT AND CHIEF

EXECUTIVE OFFICER WILL MAKE THE FINAL DETERMINATION IF THE MATTER REMAINS UNRESOLVED. ANY VIOLATION OF THIS POLICY WILL SUBJECT THE EMPLOYEE OF THE FOUNDATION TO DISCIPLINARY ACTION UP TO AND INCLUDING TERMINATION.

PROCESS FOR DETERMINING COMPENSATION

FORM 990, PART VI, QUESTIONS 15A & 15B

COMPENSATION FOR THE FOLLOWING POSITIONS IS REVIEWED AND APPROVED BY THE BOARD OF DIRECTORS ANNUALLY.

CHAIRMAN OF THE BOARD

TREASURER

SECRETARY

PRESIDENT AND CHIEF EXECUTIVE OFFICER

EXECUTIVE VICE PRESIDENT AND CHIEF OPERATING OFFICER

SENIOR VICE PRESIDENT AND CHIEF FINANCIAL OFFICER

SENIOR VICE PRESIDENT AND CHIEF COMMUNICATIONS OFFICER

THERE IS NO ADDITIONAL COMPENSATION PAID TO BOARD MEMBERS WHO ALSO SERVE AS CORPORATE OFFICERS. THE MOST RECENT REVIEWS OCCURRED IN 2011.

- THE PROCESS FOR DETERMINING SENIOR STAFF COMPENSATION COMMENCES WITH AN ANNUAL PERFORMANCE REVIEW FOR EACH POSITION.
- SALARY RANGES FOR EACH POSITION ARE DETERMINED BY THE FOUNDATION'S PARTICIPATION AND REVIEW OF MULTIPLE SALARY SURVEYS FOR COMPARABLE

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COMPENSATION FOR SIMILARLY QUALIFIED INDIVIDUALS IN FUNCTIONALLY

COMPARABLE POSITIONS AT SIMILARLY SITUATED LIKE-KIND ORGANIZATIONS. THE

FOUNDATION HAS ALSO ENGAGED AN INDEPENDENT COMPENSATION CONSULTANT TO

STUDY AND ASSIST IN DETERMINING APPROPRIATE COMPENSATION RANGES FOR ALL

STAFF POSITIONS.

- THE BOARD REVIEWS PERFORMANCE AND THE SALARY SURVEYS AND ANY OTHER COMPARABILITY DATA. ANY RECOMMENDED ADJUSTMENT IS DISCUSSED AND APPROVED BY THE BOARD OF DIRECTORS.
- CONTEMPORANEOUS DOCUMENTATION AND RECORDKEEPING WITH RESPECT TO THE DISCUSSION AND DECISIONS REGARDING THE COMPENSATION ARRANGEMENT ARE REFLECTED IN THE BOARD MINUTES.

FORM 990 GOVERNING DOCUMENTS

FORM 990, PART VI QUESTION 19

THE FOLLOWING FOUNDATION GOVERNING DOCUMENTS ARE NOT REQUIRED TO BE MADE AVAILABLE TO THE GENERAL PUBLIC.

- GOVERNING DOCUMENTS
- FINANCIAL STATEMENTS
- CONFLICT OF INTEREST POLICY

CERTAIN GOVERNING DOCUMENTS AND FINANCIAL INFORMATION MAY BE FOUND THROUGH OTHER SOURCES SUCH AS THE ARIZONA CORPORATION COMMISSION OR GUIDESTAR.

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RECONCILIATION OF NET ASSETS

FORM 990, PART XI, LINE 5

NET UNREALIZED GAIN(LOSS) FROM INVESTMENTS: \$76,851,640

DESCRIPTION OF ORGANIZATION'S PROCEDURES FOR MONITORING THE USE OF GRANTS SCHEDULE I, PART I, LINE 2 PRIOR TO AWARDING AND PAYING A GRANT, THE FOLLOWING DOCUMENTS ARE

- MOST RECENT AUDITED FINANCIAL STATEMENTS, IF APPLICABLE
- MOST RECENT MANAGEMENT LETTER (OR A STATEMENT FROM THE AUDITOR ATTESTING THAT NO MANAGEMENT LETTER WAS ISSUED)

COLLECTED AS PART OF THE DUE DILIGENCE AND OVERSIGHT PROCEDURES:

- MOST RECENT IRS FORM 990, MATCHING AUDITED FINANCIAL STATEMENTS
- CURRENT BOARD OF DIRECTORS ROSTER INCLUDING NAMES, AFFILIATIONS, LENGTHS OF SERVICE AND POSITIONS HELD
- STAFF PROFILES AND/OR RESUMES OF THOSE WHO WILL BE DIRECTLY INVOLVED IN THE IMPLEMENTATION OF THE PROJECT
- A BRIEF DESCRIPTION OF ANY PENDING LEGAL ACTION TO WHICH THE ORGANIZATION IS A PARTY OR A LETTER VALIDATING THAT THERE IS NO CURRENT LITIGATION IN WHICH THE ORGANIZATION IS INVOLVED.
- STATEMENT VERIFYING THAT THE ORGANIZATION HAS A CURRENT OFFICE OF FOREIGN ASSETS CONTROL (OFAC) COMPLIANCE POLICY, AN EQUAL EMPLOYMENT OPPORTUNITY POLICY, AND AN ANTI-DISCRIMINATION POLICY THAT MEET LOCAL, STATE AND FEDERAL REQUIREMENTS AND WITH WHICH THE ORGANIZATION IS IN FULL COMPLIANCE.
- 501(C)(3) DETERMINATION LETTER
- ARTICLES OF INCORPORATION

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- ORGANIZATIONAL BY-LAWS

IN ADDITION, APPLICANTS MAY SUBMIT THE FOLLOWING ATTACHMENTS IF THEY FEEL

IT STRENGTHENS THE PROPOSAL AND/OR CLARIFIES THE INFORMATION:

- LOGIC MODEL
- STRATEGIC PLAN
- BUSINESS PLAN
- MEMORANDUMS OF UNDERSTANDING (MOUS)
- INTERGOVERNMENTAL AGREEMENTS (IGAS)
- LETTERS OF SUPPORT
- ANNUAL REPORT
- RECENT, RELEVANT PUBLICATIONS
- PROPOSAL BUDGET WORKSHEET (PROVIDED BY HELIOS EDUCATION FOUNDATION FOR MULTI-YEAR GRANTS)

FINANCIAL DOCUMENTS ARE ANALYZED FOR RISK AND APPROPRIATENESS BY THE VICE PRESIDENT AND DIRECTOR OF GRANTS ADMINISTRATION. DATA OUTSIDE OF THE NORM IS REFERRED TO THE FOUNDATION'S CHIEF FINANCIAL OFFICER; LIKEWISE, LEGAL DOCUMENTS ARE REVIEWED BY THE VICE PRESIDENT AND DIRECTOR OF GRANTS ADMINISTRATION AND REFERRED TO THE CHIEF OPERATING OFFICER FOR REVIEW AND FINAL DISPOSITION.

ONCE A GRANT HAS BEEN AWARDED, A CUSTOMIZED CONTRACT IS DEVELOPED AND EXECUTED. CONTRACTS GENERALLY CONTAIN CUSTOMIZED DELIVERABLES INCLUDING INTERIM REPORTING, SITE VISITS, AND FINAL REPORT. DELIVERABLES ARE

ENTERED INTO A TRACKING DATABASE AND MONITORED FOR COMPLIANCE. THE GRANTS ADMINISTRATOR, VICE PRESIDENT AND DIRECTOR OF GRANTS ADMINISTRATION OR PROGRAM DIRECTOR MONITORS GRANT COMPLIANCE AND PROACTIVELY ADDRESSES ANY GRANT EXCEPTIONS.

PURPOSE OF GRANTS

SCHEDULE I, PART II, COLUMN H

AS DESCRIBED IN PART III OF THE FORM 990, HELIOS EDUCATION FOUNDATION FOCUSES COMMUNITY INVESTMENTS ACROSS THREE KEY IMPACT AREAS: 1) EARLY CHILDHOOD EDUCATION; 2) TRANSITION YEARS; AND 3) POSTSECONDARY SCHOLARSHIPS.

EARLY CHILDHOOD EDUCATION - PREPARING CHILDREN AGES 0-5 TO ENTER SCHOOL READY TO SUCCEED THROUGH:

- IMPROVING EARLY CHILDHOOD EDUCATION TEACHER QUALITY
- INTEGRATING EMERGENT LITERACY AND LANGUAGE CURRICULUM INTO

POSTSECONDARY PROGRAMS

- BRIDGING EARLY CHILDHOOD AND K-3 EDUCATION

TRANSITION YEARS - HELPING YOUTH, GRADES 5-12, SUCCESSFULLY TRANSITION BETWEEN THE STAGES OF EDUCATION THROUGH:

- INCREASING CURRICULUM RIGOR AND RELEVANCE WITH AN EMPHASIS ON STEM EDUCATION (GRADES 5-10)
- CREATING AND SUSTAINING A PIPELINE OF QUALITY STEM EDUCATORS
- CULTIVATING STRONG MIDDLE AND HIGH SCHOOL LEADERSHIP
- FOSTERING PERSONAL GROWTH, CHARACTER DEVELOPMENT AND COLLEGE READINESS

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- IMPROVING FAMILY AND COMMUNITY ENGAGEMENT IN STUDENT SUCCESS

POSTSECONDARY SCHOLARSHIPS - PROVIDING POSTSECONDARY EDUCATION
OPPORTUNITIES FOR YOUNG ADULTS THROUGH:

- INCREASING ACCESS TO POSTSECONDARY EDUCATION FOR UNDERSERVED
- POPULATIONS
- CREATING A PIPELINE OF STUDENTS AND EDUCATORS FOCUSED ON STEM

EDUCATION

- CULTIVATING EARLY CHILDHOOD EDUCATION TEACHERS AND PRACTITIONERS

INNOVATIVE - PROGRAMS ALIGNED TO THE VALUES, VISION AND MISSION OF THE FOUNDATION THAT DO NOT FIT WITHIN THE OTHER FUNDING AREAS.

RACTORS	
OF SERVICES	COMPENSATION
	1,081,648.
CONSULTING	148 314

ATTACHMENT 1

990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

NAME AND ADDRESS DESCRIPTION OF SERVICES COMPENSATION

RAYMOND JAMES FINANCIAL SERVICES, INC. INVESTMENT
880 CARILLON PARKWAY
ST PETERSBURG, FL 33716

MARKETING SAVVY LLC 1052 CAMINO DEL ARROYO DRIVE SAN MARCOS, CA 92078 MARKETING/CONSULTING

140,514

TOTAL COMPENSATION

1,229,962.