

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



Form **990**Department of the Treasury Internal Revenue Service

SCANNED DEC 1 1 2013

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)

2012

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

Open to Public Inspection

A	For the	e 2012 calendar year, or tax year beginning and e	nding						
	Check if applicable	C Name of organization		D Employer identific	cation number				
٦	Addre	nellie mae education foundation, inc.							
F	Name			04-2	755323				
Ē	Initial		Room/suite	E Telephone number					
F	Termi		05N	781-348-4200					
Ē	ated Amen		0 311	G Gross receipts \$	163,634,433.				
┢	return Applic			H(a) Is this a group re					
_	ltiòn pendi:	F Name and address of principal officer NICHOLAS C. DONOHUE	!	for affiliates? Yes X No					
		SAME AS C ABOVE	•	H(b) Are all affiliates inc					
_	Tayley	empt status	527	1 ' '	list. (see instructions)				
_		te: NWW.NMEFOUNDATION.ORG	JE1	H(c) Group exemption	•				
		organization: X Corporation Trust Association Other	I Vaar		State of legal domicile: MA				
	art I	Summary	Lical	oriormation. 1990 N	n State of legal doffliche. PIA				
	T 4	Briefly describe the organization's mission or most significant activities. TO ST	AJITMT	TE TRANSFOR	MATTVE				
Activities & Governance	'	CHANGE OF PUBLIC EDUCATION SYSTEMS ACROSS							
Ē	2	Check this box I if the organization discontinued its operations or dispose							
Ver	3	Number of voting members of the governing body (Part VI, line 1a)	ou or more	3	14				
ලි	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	14				
•ර ග	5	Total number of individuals employed in calendar year 2012 (Part V, line 2a)		5	31				
ij	ء ا	Total number of individuals employed in calendar year 2012 (Fait V, line 2a)		6	71				
ž	7.	Total unrelated business revenue from Part VIII, column (C), line 12		7a	-33,691.				
¥	/ a	Net unrelated business teveride from Form 990-T, line 34		7a 7b	-33,691.				
_	+ 5	Net unrelated business taxable income from Form 950-1, line 34		-1					
		Contributions and grants (Part VIII line 1b)		Prior Year 359,575.	Current Year 0 .				
Revenue	8	Contributions and grants (Part VIII, line 1h)			769,350.				
Ven	9	Program service revenue (Part VIII, line 2g)		755,637.					
Re	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		9,543,549.	5,406,424.				
	1	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	0.				
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		10,658,761.	6,175,774.				
	1	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		14,662,357.	12,260,341.				
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0. 3,312,148.	3 310 000				
Expenses	15	Salaries, other compensation, employee benefits (Partix Columnia)	-		3,219,089.				
ē	16a	Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D) / line 25)	۸ 	0.	0.				
ΕχΕ	l b	10 miles (mil	0.	2 206 112	2 (51 521				
_	17	Trail		3,286,113.	3,651,531.				
		Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	.	21,260,618.	19,130,961.				
	19	Revenue less expenses Subtract line 18 from line 12) GDEN UT		10,601,857.	-12,955,187.				
SO		The second secon		ginning of Current Year	End of Year				
SSE	20	Total assets (Part X, line 16)	4	52,722,307.	488,648,057.				
Net Assets or	21	Total liabilities (Part X, line 26)	·	12,676,984.	8,708,824.				
		Net assets or fund balances Subtract line 21 from line 20	4	40,045,323.	479,939,233.				
_	art II	Signature Block							
		Ities of perjury. Leaclare that I have examined this return, including accompanying schedules			y knowledge and belief, it is				
true	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of which	ch preparer	, , ,					
		Signature of officer		// / 3 / Date	13				
Sig		•		Date					
He	re	NICHOLAS C. DONOHUE, PRESIDENT & CEO Type or print name and title							
				Date / Check	PTIN				
D.:		Print/Type preparer's name Preparer's signature	l'	!- ! 12 1					
Pai		CRAIG KLEIN GOTTAG		7/3 self-employe					
	parer	Firm's name CBIZ TOFIAS		Firm's EIN	26-3753134				
use	Only	Firm's address 500 BOYLSTON STREET		, [Diameter 2	17 761 0600				
		BOSTON, MA 02116		Jenone no. 6	17-761-0600				
		RS discuss this return with the preparer shown above? (see instructions)			X Yes No				
2326	001 12-1 C			יאַדיי רייאיד איזיי	Form 990 (2012) ₍				
	ت	EE SCHEDULE O FOR ORGANIZATION MISSION ST	WI DING	NT CONTINUA	TION				

	990 (2012) NELLIE MAE EDUCATION FOUNDATION, INC. 04-2755323 Page 2
Par	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission:
	THE MISSION OF THE FOUNDATION IS, THROUGH SUPPORTING EDUCATIONAL
	ORGANIZATIONS, TO STIMULATE TRANSFORMATIVE CHANGE OF PUBLIC EDUCATION
	SYSTEMS ACROSS NEW ENGLAND BY GROWING A GREATER VARIETY OF HIGHER
	EDUCATIONAL OPPORTUNITIES THAT ENABLE ALL LEARNERS - ESPECIALLY AND
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
3	If "Yes," describe these changes on Schedule O.
_	·
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code) (Expenses \$16,044,135. including grants of \$12,260,341.) (Revenue \$769,350.)
	THE NELLIE MAE EDUCATION FOUNDATION ("FOUNDATION") IS COMMITTED TO
	RESHAPING PUBLIC EDUCATION IN NEW ENGLAND TO BE MORE EQUITABLE AND MORE
	EFFECTIVE SO EVERY LEARNERESPECIALLY AND ESSENTIALLY THE
	UNDERSERVEDIS PREPARED FOR SUCCESS. RESEARCH FROM NEUROSCIENCE AND
	DEVELOPMENTAL THEORY SUPPORTS A MOVE AWAY FROM "ONE-SIZE-FITS-ALL"
	EDUCATION PRACTICES, TOWARD CUSTOMIZED, INNOVATIVE APPROACHES TO
	LEARNING, UNCONSTRAINED BY THE SCHOOL CALENDAR OR CREDIT HOURS. THE
	FOUNDATION SUPPORTS EDUCATIONAL INSTITUTIONS, COMMUNITY ORGANIZATIONS,
	FOUNDATIONS, GOVERNMENT AGENCIES AND OTHERS TO PROMOTE CHANGE IN THE
	CURRENT PUBLIC EDUCATION SYSTEM THROUGH STUDENT-CENTERED APPROACHES TO
	LEARNING. THE FOUR PRINCIPLES OF STUDENT-CENTERED APPROACHES ARE:
	LEARNING OPPORTUNITIES TRANSCEND THE TRADITIONAL SCHOOL DAY AND YEAR;
4b	(Code) (Expenses \$
4c	(Code) (Expenses \$ including grants of \$) (Revenue \$)
-10	(COUR) (LAPERISES #) (NOTATION #)
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$
4e	Total program service expenses ► 16,044,135.
	Form 990 (2012)
23200: 12-10-	
	2

NELLIE MAE EDUCATION FOUNDATION, INC. Form 990 (2012) Page 3 Part IV | Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? X If "Yes," complete Schedule A 1 X Is the organization required to complete Schedule B, Schedule of Contributors? 2 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I 3 X Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect X during the tax year? If "Yes," complete Schedule C, Part II 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 X 5 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to X provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I Did the organization receive or hold a conservation easement, including easements to preserve open space, X the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete X 8 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? X If "Yes," complete Schedule D, Part IV 9 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent X 10 endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D. X 11a b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 11b c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total X assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 11c d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 11d e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses X the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 11f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete X Schedule D. Parts XI and XII 12a 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 and XII is optional 12b X Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a 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 X or more? If "Yes," complete Schedule F, Parts I and IV 14b 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 X 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals X located outside the United States? If "Yes," complete Schedule F, Parts III and IV 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, X column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII. lines X 1c and 8a? If "Yes," complete Schedule G, Part II 18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," X

Form 990 (2012)

X

19

20a

complete Schedule G, Part III

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

Part IV | Checklist of Required Schedules (continued)

Form 990 (2012)

2012) NELLIE MAE EDUCATION FOUNDATION, INC.
Statements Regarding Other IRS Filings and Tax Compliance

a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 11a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12a		Check if Schedule O contains a response to any question in this Part V			
be First the number of Forms W-2G included in line 1s, Enter 2- 6 final applicable 1b 0				Yes	No
Country of the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) withwings to prize wereners? 2. Enter the number of employees reported on Form W.3, Transmittal of Wage and Tax Statements, field for the catendar year ending with or within the year overved by this return 3. In the catendar year ending with or within the year overved by this return 3. In the catendar year ending with or within the year overved by this return 3. In the catendar year ending with or within the year overved by this return 3. In the catendar year ending with or within the year overved by this return 3. In the catendar year ending with or within the year overved by this return 3. In the catendar year ending with or within the year overved by this return 3. In the catendar year ending with or within the year overved by this return 3. In the catendar year ending with or within the year overved by this return 3. In the catendar year ending with year or within the year of the catendar year. 3. In the catendar year ending with year or within the year of the year of the catendar year. 3. In the year of the catendar year of the year of year of the year of the year of the year of the year of	1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 42			
(gambling) writings to prize winners 2 for the protect on Form W3, Transmittal of Wage and Tax Statements, field for the calendar year ending with or within the year covered by this return b if at least one is reported on line 2a, did the organization file all required fideral employment tax returns? Note. If the sum of lines 1 and 2a greater than 250, you may be required to e-file (see instructions) 30. Did the organization have unrelated business gross income of \$1,000 or more during the year? 31. A stary time during the calendar year, did the organization file all required hederal employment tax returns? 32. Will a stary 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 bark account, securities account, or other financial accounts? 33. Will a stary 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 bark account, securities account, or other financial accounts? 34. Was the organization for filing requirements for Form TD F5 90'22.1, Report of Foreign Bank and Financial Accounts 35. Was the organization and party to a proribided tax shelter transaction at any time during the tax year? 36. Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization shelf or was a contribution on express statement that such contributions or gifts were no fits deductible? 36. Was the organization include with every solicitation an express statement that such contributions or gifts were no fits deductible? 37. Organizations that may receive deductible contributions under section 170(c). 38. If Yes, and deductible? 39. If Yes, and deductible?	b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
22 Enter the number of employees reported on Form W.3. Transmittat of Wage and Tax Statements, filed for the calendary seer anding with or within the year covered by this return. 31 bill if at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note, if the sum of lines Ta and 2a is greater than 250, you may be required to e-file (see instructions) 32	С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
filed for the calendary year enting with or within the year covered by this return If all least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a. Did the organization have unrelated business gross income of \$1,000 or more during the year? 4b. If "Yes," and is filed a Form 990 F10 fit this year? If "No," provide an explanation in 5chedule 0 5b. If "Yes," and is filed a Form 990 F10 fit this year? If "No," provide an explanation in 5chedule 0 5c. If year, yea		(gambling) winnings to prize winners?	1c_	X	
If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b X	2a				
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3		filed for the calendar year ending with or within the year covered by this return . 2a 31			
3.8 DK the organization have unreliated business gross income of \$1,000 or more during the year? b if "Yes," has it filed a Form 990.7 for this year? if "No," provide an explanation in Schedule O b if "Yes," and it filed a Form 990.7 for this year? if "No," provide an explanation in Schedule O b if "Yes," and it filed a Form 990.7 for this year? if "No," provide an explanation in Schedule O b if "Yes," and the foreign country (such as a bank account, securities account, or other financial account)? See instructions for filing requirements for Form TD F 90.22.1, Report of Foreign Bank and Financial Accounts See instructions for filing requirements for Form TD F 90.22.1, Report of Foreign Bank and Financial Accounts See instructions for filing requirements for Form TD F 90.22.1, Report of Foreign Bank and Financial Accounts See instructions for filing requirements for Form TD F 90.22.1, Report of Foreign Bank and Financial Accounts See instructions for filing requirements for Form TD F 90.22.1, Report of Foreign Bank and Financial Accounts See instructions for filing requirements for Form TD F 90.22.1, Report of Foreign Bank and Financial Accounts See instructions for filing requirements for Form TD F 90.22.1, Report of Foreign Bank and Financial Accounts B Was the organization of the foreign cause or is a party to a prohibited tax shelter transaction? 5a	b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
b if "Yes," has it filled a Form 990-T for this year/ if "No," provide an explanation in Schedule O 4a At any time during the calendary 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)? 4b if "Yes," either the name of the foreign country; i> See instructions for filing requirements for Form TD F 9022.1, Report of Foreign Bank and Financial Accounts 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5b Did any taxable party norify the organization file Form 886.7? 6c 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? 6c Jobs 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? 6c Jobs the organization receive deductible contributions under section 170(c). 6c Job the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6c Organizations that may receive deductible contributions under section 170(c). 6c Job the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7c Organizations that may receive deductible contributions under section 170(c). 8d Job the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7d Organizations that may receive deductible contributions under section 170(c). 8d Job the organization on notify the donor of the value of the goods or services provided? 9d If "Yes," indicate the number of Forms 8282 filed during the year and property for which it was required? 9d If "Yes," indicate the number of Forms 8282 filed during the year and prop					
48 At any time during the calendary 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? 59 Be instructions for filing requirements for Form TD F 90:22.1, Report of Foreign Bank and Financial Accounts 50 Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year? 50 Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 50 Does the organization that an annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 50 If "Yes," fold the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 71 Organizations that may receive deductible contributions under section 170(c). 82 Did the organization receive a payment in excess of \$75 made party as a contribution and partly for goods and services provided to the payor? 83 If "Yes," indicate the number of Forms 8282 filed during the year 94 Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 75 Did the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 85 If the organization received a contribution of qualified intellectual property, did the organization file Form 1098-C? 86 Spansoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization make a distribution of cars, boats, airplanes, or other vehicles, did the organization file Form 1098-C? 87 Spansoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization make a distribution of cars, boats, airplanes, or other vehic			3a_		
financial account in a foreign country (such as a bank account, securities account, or other financial account?) b if "Yes," either the name of the foreign country. ▶ See instructions for filing requirements for Form TD F 90:22.1. Report of Foreign Bank and Financial Accounts See instructions for filing requirements for Form TD F 90:22.1. Report of Foreign Bank and Financial Accounts b Did any taxable party notify the organization that it was or as a party to a prohibited tax shelter transaction? 5b. X if "Yes," to line 5a or 5b, did the organization filine Form 8886 T? 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 as charitable contributions. b if "Yes," did the organization include with every solicitation an express statement that such contributions or grifs were not tax deductible? 7 organizations that may receive deductible contributions under section 170(c). B Uffer organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? To the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? To the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? To the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? To the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? To the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? To the organization manufacture of forms 8:282 filed during the year. To the organization manufacture of forms 8:282 filed during the year. To the organization manufacture of forms 8:282 filed during the year. Section 50 (1c)(27) organi			3b	X	
b if "Yes," enter the name of the foreign country; See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts 3 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5 Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5 Did 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 as charitable contributions? 5 Dif "Yes," did the organization include with every solicitation an express statement that such contributions or grits were not tax deductible? 5 Organizations that may receive deductible contributions under section 170(c). 5 Did the organization shart may receive deductible contributions under section 170(c). 5 Did the organization nature in access of \$75 made party as a contribution and partly for goods and services provided to the payor? 5 Did the organization nature in access of \$75 made party as a contribution of tanglible personal property for which it was required to file Form 8282? 6 Did the organization nature of Forms 8282 filed during the year 6 Did the organization in cerewed a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7 If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 8 Spensoring organization seceived a contribution of cars, boats, amplanes, or other vehicles, did the organization file Form 8899 are required? 9 Sponsoring organization semaintaining donor advised funds and section \$99(a) supporting organizations. Did the supporting organization, a donor advised fund manitamed by a sponsoring organization. 9 Sponsoring organization make a distribution to a donor, donor	4a				
See instructions for filing requirements for Form TD F 90/22.1, Report of Foreign Bank and Financial Accounts 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5b Did any taxable party notify the organization that it was or a party to a prohibited tax shelter transaction? 5c If "Yes," to line 5a or 5b, did the organization file Form 8886-T? 5c Does the organization annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? 7 organizations that may receive deductible contributions under section 170(c). 8 If "Yes," did the organization include with every solicitation an express statement that such contributions or grits were not tax deductible? 8 If "Yes," did the organization receive a payment in excess of \$75 made partly as a contribution and parity for goods and services provided to the payor? 9 If "Yes," did the organization orthy the donor of the value of the goods or services provided? 9 If "Yes," indicate the number of Forms 8282 filed during the year 9 If "Yes," indicate the number of Forms 8282 filed during the year 9 If "Yes," indicate the number of Forms 8282 filed during the year 9 If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C? 9 Sponsoring organization measured a contribution of qualified intellectual property, did the organization file a Form 1098-C? 9 Sponsoring organization maintaining donor advised frinds and section 509(4)8 supporting organization file a Form 1098-C? 9 Sponsoring organization maintaining donor advised frinds and section 509(4)8 supporting organization file a Form 1098-C? 9 Sponsoring organization maintaining donor advised frinds and section 509(4)8 supporting organization file a Form 1098-C? 9 Sponsoring organization maintaining donor advised frinds. 9 If the organization make any taxable distributions under section 4966? 9 Section 501(c)(27) organizations. Enter: 9 If			4a		X
5.6 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5.6 Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5.6 Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that time not tax deductible as chartable contributions? 6. Does the organization include with every solicitation an express statement that such contributions or grifts were not tax deductible as chartable contributions? 7. Organizations that may receive deductible contributions under section 170(c). 8. Did the organization shart may receive deductible contributions under section 170(c). 8. Did the organization shart may receive deductible contributions under section 170(c). 8. Did the organization shart may receive deductible contributions under section 170(c). 8. Did the organization shart may receive deductible contributions under section 170(c). 8. Did the organization shart may receive deductible contributions under section 170(c). 8. Did the organization shart may receive deductible contributions under section 170(c). 8. Did the organization shart may receive deductible contributions under section 170(c). 8. Did the organization shart may receive deductible contribution and partly for goods and services provided to the payor? 7. Did the organization shart may receive on the goods or services provided? 8. Tay and the organization receive any funds, directly or indirectly, or pay premiums on a personal benefit contract? 9. Did the organization receive any funds, directly or indirectly, or any premiums on a personal benefit contract? 9. The the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C? 10. The organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C? 10. Sponsoring organizations maintaining doner advised	b				
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? b If "Yes," to line 5a or 5b, did the organization file Form 8886-T? 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 as charitable contributions? b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization set a payment in excess of \$75 made party as a contribution and partly for poods and services provided to the payor? b If "Yes," did the organization notify the donor of the value of the goods or services provided? C Did the organization set, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 If Did the organization received a contribution of qualified intellectual property, did the organization file a Form 1988-C? Spensoring organizations make any taxable distributions under section 598(a)(3) supporting organizations. Did the supporting organizations maintaining donor advised funds and section 598(a)(3) supporting organizations. Did the supporting organizations make any taxable distributions under section 4986? 9 Did the organization make any taxable distributions under section 4986? 9 Did the organization make any taxable distributions under section 4986? 9 Did the organization make any taxable distributions under section 4986? 9 Did the organization make any taxable distributions of the supporting organizations. Enter: a Gross income from members or shareholders 6 Gross income from members or shareholders 6 Gross income from members or sh					
til "Yes," to line 5a or 5b, did the organization file Form 8886-T7 8a 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 as charitable contributions? b if "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). a bid the organization netice a payment in excess of \$57 made partly as a contribution and partly for goods and services provided to the payor? 5 If "Yes," did the organization notify the donor of the value of the goods or services provided? 6 Did the organization netice were in excess of \$57 made partly as a contribution and partly for goods and services provided to the payor? 7 If "Yes," indicate the number of Forms 8282 filed during the year 9 Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 9 Types," if the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C? 9 Sponsoring organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C? 9 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organizations maintaining donor advised funds. 2 Did the organization make any taxable distributions under section 4966? 9 Did the organization make any diaxable distributions under section 4966? 9 Did the organization make a distribution to a donor, donor advised, or related person? 9 Did the organization make a distribution to a donor, donor advised funds. 10 Did becomparization make any diaxable distributions under section 4966? 9 Did the organization make any diaxable distributions under section 4966? 9 Did the organization received promition and the promition of the supportin	5a				
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 as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? Organizations that may receive deductible contributions under section 170(c). If "Yes," did the organization notify the donor of the value of the goods or services provided? If "Yes," did the organization notify the donor of the value of the goods or services provided? If "Yes," indicate the number of Forms 8282 filed during the year If "Yes," indicate the number of Forms 8282 filed during the year If obt the organization receive any funds, directly or indirectly, to pay premiums, directly, or a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If the organization received a contribution of qualified intellectual property, did the organization file Form 1098-C? Sponsoring organizations maintaining donor advised funds and section 5094(3) supporting organizations. But the supporting organizations in maintaining donor advised funds. If the organization make any taxable distributions under section 4966? Do the organization make any taxable distributions under section 4966? Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12 Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) Section 501(c)(12) organizations. Enter: Section 501(c)(12) organizations. Enter: Section 501(c)(12) organizations. Enter: Section 501(c)(12) organizations included on Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter: Section 501(c)(12) organizations. Enter: Section 501(c)(12) organizations included on Form 900,	b				<u> </u>
any contributions that were not tax deductible as charitable contributions? 1	_		5c		
b if "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). 8 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? 7 To 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? 8 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? 7 To Did the organization receives any funds, directly or indirectly property for which it was required to file Form 8282? 8 Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 9 If the organization received a contribution of cars, boats, ariplanes, or other vehicles, did the organization file Form 8899 as required? 10 If the organization received a contribution of cars, boats, ariplanes, or other vehicles, did the organization file Form 8899 as required? 11 If the organization received a contribution of cars, boats, ariplanes, or other vehicles, did the organization file a Form 1098-C? 12 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organizations make any taxable distributions under section 4966? 12 Sponsoring organization make any taxable distributions under section 4966? 13 Did the organization make any taxable distributions under section 4966? 14 Did the organization make any taxable distributions under section 4966? 15 Section 501(c)(7) organizations. Enter 16 Indiator fees and capital contributions included on Part VIII, line 12 17 Indiator fees and capital contributions included on Part VIII, line 12 18 Section 501(c)(12) organizations. Enter 19 Gross income from other sources (Do not net amounts due	6a				37
were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 5 b If "Yes," did the organization notify the donor of the value of the goods or services provided? 5 c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 6 d If "Yes," indicate the number of Forms 8282 filed during the year 7 e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 8 if the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C? 8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fundmainaned by a sponsoring organization, have excess business holdings at any time during the year? 9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? 9 b Did the organization make a distribution to a donor, donor advisor, or related person? 9 g b Did the organization funds a distribution to a donor advisor, or related person? 9 g b Did the organization selection to a donor, donor advisor, or related person? 9 g b Did the organization funds a distribution to a donor advisor, or related person? 9 g b Did the organization funds a distribution or paid to other sources against amounts due or received from them) 12 Section 501(c)(7) organizations. Enter: a Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 12a		•	_6a_		_ <u>X</u> _
7 Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7 A	b				
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? b if "Yes," did the organization notify the donor of the value of the goods or services provided? C Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d if "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7c	_		OD		
b If "Yes," did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7c		· ·	7.		v
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7c	a				
to file Form 8282? d if "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 but the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7 but the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? 9a but the organization make any taxable distributions under section 4966? 9a but the organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11a Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 11b 12a Section 4047(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization incressed to issue qualified health plans in more than one state? Note, See the instructions for additional information the organization must report on Schedule O b Enter the amo	0		75		
d if "Yes," indicate the number of Forms 8282 filed during the year e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7c	C		7c		x
Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? f If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C? If the organization received a contribution of cars, boats, arplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter: Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13b Is the organization licensed to issue qualified health plans in more than one state? Note, See the instructions for additional information the organization must report on Schedule O Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans in more than one state? Note, See the instructions for additional information the organization must report on Sc	d				
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? g if the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? h if the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? b Did the organization make any taxable distributions under section 4966? b Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? 9b John the organization make any taxable distributions included on Part VIII, line 12 a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11a John Section 501(c)(12) organizations. Enter: a Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 12a Section 4947(a)(1) non-exempt charitable trusts, is the organization filing Form 990 in lieu of Form 1041? b if "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 14a Did the organization receive any payments for indoor tanning services during the tax	e		 7е		X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organizations file a Form 1098-C? 8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? 9 Section 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 12 Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note, See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 14 Did the organization receive any payments for indoor tanning services during the tax year? 14 X 15 If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedul	_				
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? 9 Section 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 1 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 1 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? 14b 15 If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	g		7g		
organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? 9b Did the organization make a distribution included on Part VIII, line 12 10a	-	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		-
9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? 9b Intitation fees and capital contributions included on Part VIII, line 12	8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting			
a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b It is "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b		organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		X
b Did the organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c 14a X If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b	9	Sponsoring organizations maintaining donor advised funds.			
a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c 14a X If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b	а	Did the organization make any taxable distributions under section 4966?	9a		_
a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13b 13c 13a 13b 13b 14a 14a 14b 15 "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b	b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13b 13c 14a X If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	10	Section 501(c)(7) organizations. Enter			
a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b c Enter the amount of reserves any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	а	Initiation fees and capital contributions included on Part VIII, line 12			
a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b c Enter the amount of reserves on hand 14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13b 14a X 14a X 14b	11	Section 501(c)(12) organizations. Enter:		-	
amounts due or received from them) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13c 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O					
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13c 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	b				
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13b 13c 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O					
13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b			12a		
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13b 13c 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b	_	• • • • • • • • • • • • • • • • • • • •			
Note. See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b	13				
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b	а	· · · · · · · · · · · · · · · · · · ·	13a		
organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c 13b 13c 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b	_	· · · · · · · · · · · · · · · · · · ·			
c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b	b				
14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b					
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	_	· · · · · · · · · · · · · · · · · · ·	44-		~
				-	
	0	ii res, has it nieu a Funn / 20 to report these payments / ii No, provide an explanation in Schedule O		ഉളവ	(2012) (2012)

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Check if Schedule O contains a response to any question in this Part VI			X							
Sec	tion A. Governing Body and Management										
			Yes	No							
1a	Enter the number of voting members of the governing body at the end of the tax year 14										
	If there are material differences in voting rights among members of the governing body, or if the governing										
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.										
b	Enter the number of voting members included in line 1a, above, who are independent 1b 14										
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other										
	officer, director, trustee, or key employee?	2		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?	3		Х							
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X							
	5 Did the organization become aware during the year of a significant diversion of the organization's assets?										
6	Did the organization have members or stockholders?	5 6		X							
-	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or										
. –	more members of the governing body?	7a		х							
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or										
~	persons other than the governing body?	7b		x							
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:										
а	The governing body?	8a	x								
b	Each committee with authority to act on behalf of the governing body?	8b	X								
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	00									
Ŭ	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		х							
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			-11							
	The second by the escalar broquests information about periode not required by the internal revenue code.		Yes	No							
10a	Did the organization have local chapters, branches, or affiliates?	10a	163	X							
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	iou									
-	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b									
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X								
b											
12a											
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12a 12b	X								
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe										
	in Schedule O how this was done	12c	X								
13	Did the organization have a written whistleblower policy?	13	Х	_							
14	Did the organization have a written document retention and destruction policy?	14	X								
15	Did the process for determining compensation of the following persons include a review and approval by independent										
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			-							
а	The organization's CEO, Executive Director, or top management official	15a	х								
b	Other officers or key employees of the organization	15b	X								
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)										
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			_							
	taxable entity during the year?	16a		X							
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation										
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's										
	exempt status with respect to such arrangements?	16b									
Sec	tion C. Disclosure										
17	List the states with which a copy of this Form 990 is required to be filed ►MA										
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a	vailab	le	· 							
	for public inspection. Indicate how you made these available. Check all that apply										
	X Own website Another's website X Upon request Other (explain in Schedule O)										
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and	d finar	icial								
	statements available to the public during the tax year										
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	ion: 🕨									
	MICHAEL CAREY - 781-348-4271	-									
232006	1250 HANCOCK STREET, 205N, QUINCY, MA 02169										

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

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

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

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

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

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

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

(A) Name and Title	(B) Average hours per	box.	not c , unle	(C Posi heck ss pe	C) ItION more rson	than	one han	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer		Highest compensated employee	Ĺ	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) ALLEN BOSTON DIRECTOR	3.00	x						20,236.	0.	0.
(2) HENRY BOURGEOIS DIRECTOR	2.00	x						24,236.	0.	0.
(3) JAMES P. COMER DIRECTOR	2.00	x						20,090.	0.	0.
(4) GREGORY GUNN DIRECTOR	3.00	x						20,000.	0.	0.
(5) KAREN HAMMOND DIRECTOR	3.00	х						24,000.	0.	0.
(6) CHRISTINA KISHIMOTO DIECTOR	1.00	х						13,000.	0.	0.
(7) STEPHEN KOSSAKOSKI DIRECTOR	2.00	х						13,236.	0.	0.
(8) JOANNA LAU DIRECTOR	3.00	х						24,471.	0.	0.
(9) JAMES W. MACALLEN DIRECTOR	3.00	х						24,000.	0.	0.
(10) CLAUDIO MARTINEZ DIRECTOR	2.00	X						20,000.	0.	0.
(11) JANET PHLEGAR DIRECTOR	2.00	X						24,000.	0.	0.
(12) JOHN REMONDI DIRECTOR	1.00	x						12,000.	0.	0.
(13) DUDLEY WILLIAMS DIRECTOR	3.00	x						30,000.	0.	0.
(14) DAVID WOLK DIRECTOR	3.00	x						24,000.	0.	0.
(15) NICHOLAS C. DONOHUE PRESIDENT & CEO	40.00			х				355,563.	0.	60,149.
(16) MICHAEL CAREY TREASURER & DIR, OF FIN.	40.00			x				183,364.	0.	31,429.
(17) PAMELA WHITE CLERK	40.00			х				81,694.	0.	*

Part VII Section A. Officers, Directors, True	stees, Key Em	ploy	ees	, an	d Hi	ghe	st C	ompensated Employed	es (continued)			
(A) Name and title	(B) Average hours per week	(do box	(C) Position on not check more than one ox, unless person is both an ficer and a director/trustee)				one h an	(D) Reportable compensation from	(E) Reportable compensation from related	Esti amo	(F) mate ount o	_
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compen- from organiz and rel organiza		e ion ed
(18) MARY HARRISON	40.00								_			
VP_OF_PROGRAMS					X			199,457.	0.	54	, 1	<u>62.</u>
(19) BETH MILLER	40.00								_			
DIR. OF RESEARCH & EVALUAT					_	X		142,164.	0.	43	, 2	<u> 28.</u>
(20) LYNN D'AMBROSE SENIOR PROGRAM OFFICER	40.00					x		123,034.	0.	3.3	. 2	54.
(21) CHARLES TOULMIN	40.00			-	-	Λ		123,034.		34	, ,	74.
DIRECTOR OF POLICY	40.00					x		116,984.	0.	38	2	67.
(22) PAUL MARSH	40.00	_		_				220,3021				
IT MANAGER						x		113,711.	0.	35	.5	35.
(23) JESSICA SPOHN	40.00									-		
SENIOR PROGRAM OFFICER						X		103,344.	0.	33	,7	02.
1b Sub-total c Total from continuation sheets to Part VII, Section A 1,712,584. 0. 0.								353	, 2	<u>64.</u> 0.		
d Total (add lines 1b and 1c)						•		1,712,584.	0.	353	, 2	<u> </u>
Total number of individuals (including but compensation from the organization	not limited to th	ose	liste	ed a	bove	e) wh	no re					8
			_							١	/es	No
3 Did the organization list any former office	, director, or tru	ste	e, ke	у ег	nplo	yee,	or I	nighest compensated er	nployee on			

Tyes No

3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

5 X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
PRIME BUCHHOLZ & ASSOCIATES 273 CORPORATE DRIVE, PORTSMOUTH, NH 03801	INVESTMENT COUNSEL	196,002.
FENTON COMMUNICATIONS, 1000 VERMONT AVE NW, SUITE 200, WASHINGTON, DC 20005	COMMUNICATIONS CONSULTANT	149,892.
Total number of independent contractors (including but not limited to those lis	ted above) who received more than	

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization > 2 - -

Form **990** (2012)

	n 990 (rt VII	2012) NELL:	IE MAE EI	UCATION	FOUNDATION	, INC.	04-2755	323 Page 9
		Check if Schedule O con		to any question i		(D)		
	_				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
Contributions, Girts, Grants and Other Similar Amounts	1 a b c d e f	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contributions, gifts, gransimilar amounts not included about the contributions included in lines Total. Add lines 1a-1f	nts, and ove 1f				·	
Program Service Revenue	2 a b c d	STUDENT LOAN INCOME		Business Code 611710	769,350.	769,350.		
L	3	All other program service revolutions and lines 2a-2f Investment income (including other similar amounts) Income from investment of ta	dividends, intere	. •	769,350. 4,188,502.			4,188,502,
	c	Gross rents Less. rental expenses Rental income or (loss) Net rental income or (loss)	(i) Real	(ii) Personal	: : : :			-
	b	Gross amount from sales of assets other than inventory Less: cost or other basis and sales expenses Gain or (loss) Net gain or (loss)	(i) Securities 158,676,581, 157,458,659, 1,217,922,	(ii) Other	1,217,922.		-33,691,	1,251,613.
Other Revenue	Ь	Gross income from fundraising including \$	of e 1c). See a b	-				
	9 a b c	Gross income from gaming and Part IV, line 19 Less direct expenses Net income or (loss) from gam Gross sales of inventory, less	ctivities. See a b ning activities		-			
	ł	and allowances Less: cost of goods sold Net income or (loss) from sale Miscellaneous Revenu					-	
	b c d	All other revenue Total. Add lines 11a-11d		•				
	12	Total revenue See instructions.		>	6 175 774	769 350	-33 691.	5 440 115

5 440 115. Form **990** (2012)

Secti	on 501(c)(3) and 501(c)(4) organizations must com			omplete column (A).	
	Check if Schedule O contains a respoi			····	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and			,	
-	organizations in the United States. See Part IV, line 21	12.260.341.	12,260,341.	-	
2	Grants and other assistance to individuals in				
~	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,				
3	organizations, and individuals outside the				•
	·				
	United States See Part IV, lines 15 and 16				····
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	1 000 450	556 450	E12 200	
	trustees, and key employees	1,289,478.	576,158.	713,320.	<u> </u>
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	1,346,351.	1,006,533.	339,818.	
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	178,899.		46,412.	
9	Other employee benefits	264,244.	187,607.	76,637.	
10	Payroll taxes	140,117.	91,010.	49,107.	
11	Fees for services (non-employees):				
а	Management				
b	Legal	31,982.		31,982.	
С	Accounting	66,374.		66,374.	
d	Lobbying	56,000.		56,000.	
	Professional fundraising services. See Part IV, line 17	•	, ·		
f	Investment management fees	1,240,058.		1,240,058.	
g	Other. (If line 11g amount exceeds 10% of line 25,	•		•	
J	column (A) amount, list line 11g expenses on Sch O.)	1,296,493.	1,135,944.	160,549.	
12	Advertising and promotion	45.	28.	17.	
13	Office expenses	127,753.	78,987.	48,766.	
14	Information technology	33,339.	20,497.	12,842.	
15	Royalties .				
16	Occupancy	305,404.	187,762.	117,642.	
17	Travel .	165,129.	106,223.	58,906.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	136,423.	136,423.		
20	Interest				
21	Payments to affiliates .				
22	Depreciation, depletion, and amortization	50,540.	31,072.	19,468.	
23	Insurance	39,997.	24,590.	15,407.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				,
а	REGIONAL ASSOC & MSHP	101,927.	101,927.		
b	PROF. DVLPMT/MEMBERSHIP	11,659.	5,027.	6,632.	
c	UNCOLLECTIBLE STU LOANS	-38,632.	-38,632.	7	
d					
	All other expenses	27,040.	151.	26,889.	
25	Total functional expenses. Add lines 1 through 24e	19,130,961.	16,044,135.	3,086,826.	0.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined	n			
	educational campaign and fundraising solicitation.		-	- -	
	Check here If following SOP 98-2 (ASC 958-720)				

Pan		balance Sneet			
		Check if Schedule O contains a response to any question in this Part X			
-			(A) Beginning of year		(B) End of year
	1	Cash · non-interest-bearing	3,174,995.	1	2,708,950
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	11,616,421.	4	8,908,381
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees. Complete			
İ		Part II of Schedule L		5	
-	6	Loans and other receivables from other disqualified persons (as defined under	er		
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributi			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
		employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
ets	7	Notes and loans receivable, net	841,875.	7	720,288
Assets	8	Inventories for sale or use		8	•
•	9	Prepaid expenses and deferred charges		9	"
l		Land, buildings, and equipment cost or other			
		basis. Complete Part VI of Schedule D 10a 882,69	0.		
	b	Less: accumulated depreciation 10b 675,78		10c	206,903
	11	Investments - publicly traded securities	176,126,861.	11	201,018,654
	12	Investments - other securities. See Part IV, line 11	260,720,603.	12	275,084,881
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	* * *
	15	Other assets See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	452,722,307.	16	488,648,057
	17	Accounts payable and accrued expenses	803,229.	17	711,087
1	18	Grants payable	11,873,755.	18	7,997,737
ı	19	Deferred revenue		19	
İ	20	Tax-exempt bond liabilities		20	
<u>"</u>	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to current and former officers, directors, trustees,			
	_	key employees, highest compensated employees, and disqualified persons			
֡֡֞֜֞֞֜֞֜֡֞֡֡֓֓֡֡֡֡֡֡֡֡֡֡֡		Complete Part II of Schedule L	•	22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
1	25	Other liabilities (including federal income tax, payables to related third			
j	20	parties, and other liabilities not included on lines 17-24) Complete Part X of			
ļ		Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	12,676,984.	26	8,708,824
	20	Organizations that follow SFAS 117 (ASC 958), check here ► X and			
<u>ب</u>		complete lines 27 through 29, and lines 33 and 34.	_		
ĕ	27	Unrestricted net assets	439,859,323.	27	479,939,233
튵	28	Temporarily restricted net assets	186,000.	28	0
<u> </u>		Permanently restricted net assets	130,000.	29	
5	29	Organizations that do not follow SFAS 117 (ASC 958), check here	7		
בַ		and complete lines 30 through 34.	-	l	
ဗ္ဗ	20	Capital stock or trust principal, or current funds		30	
1	30	Paid-in or capital surplus, or land, building, or equipment fund		31	
စ္တို့	24	r alumi di caditai suldius. Di ianu, duliunu, di euuldinent lunu		<u> </u>	ļ
Asse	31	· · · · · · · · · · · · · · · · · · ·		30	ĺ
Net Assets or Fund Balances	31 32 33	Retained earnings, endowment, accumulated income, or other funds Total net assets or fund balances	440,045,323.	32 33	479,939,233

orm	990 (2012) NELLIE MAE EDUCATION FOUNDATION, INC.	04-2	75532	23	Pag	ge 12		
Pai	rt XI Reconciliation of Net Assets							
	Check if Schedule O contains a response to any question in this Part XI							
1 2 3 4 5 6 7 8 9	Total revenue (must equal Part VIII, column (A), line 12) Total expenses (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 2 from line 1 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) Net unrealized gains (losses) on investments Donated services and use of facilities Investment expenses Prior period adjustments Other changes in net assets or fund balances (explain in Schedule O) Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,	1 2 3 4 5 6 7 8	6,1 19,3 -12,9 440,0 52,8	13(95!)4!),9 5,1 5,3	87. 23.		
	column (B))	10	479,9	339	9,2	33.		
Pa	rt XII Financial Statements and Reporting		_					
	Check if Schedule O contains a response to any question in this Part XII					<u> </u>		
			_		Yes	No		
1	Accounting method used to prepare the Form 990: Cash Accrual Other	_	_	į				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0	1					
2a	· · · · · · · · · · · · · · · · · · ·		<u> </u>	2a		X		
L	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both. Separate basis Consolidated basis Both consolidated and separate basis							
b	Were the organization's financial statements audited by an independent accountant?	o hacie	 	2b	X			
c	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate consolidated basis, or both. X Separate basis Consolidated basis Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the							
-	review, or compilation of its financial statements and selection of an independent accountant?	_		2c	X	-		
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.						
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si		t					
	Act and OMB Circular A-133?	-		За	-	X		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	iired audit	:	T				
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3b				

Form **990** (2012)

SCHEDULE A (Form 990 or 990-EZ)

Name of the organization

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

4947(a)(1) nonexempt charitable trust.

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

NELLIE MAE EDUCATION FOUNDATION, INC.

Employer identification number

		NELLIE	MAE EDUCA	TION	FOU	NDATI	ON, I	NC.		0	4-2755323
Part	Reason	for Public Cha	rity Status (All o	ganizat	ions mu	st complet	te this part	t.) See inst	tructions		
The org. 1	An organizat section 170 A community An organizat section 170 A community An organizat section 170 A community An organizat section 170 See section	for Public Cha a private foundation invention of churchis cribed in section 1 a cooperative hosp search organization te. inon operated for the b(b)(1)(A)(iv). (Complate, or local governmental pre- ion that normally re- ion that normally re- i	rity Status (All of because it is: (For es, or association of 70(b)(1)(A)(ii). (Atta or or or or or or or or or or or or or	ganizati lines 1 ti church ch Sche ation de ction wi e or univ al unit d part of n 33 1/3 certain s section	hrough hrough hrough hes descedule E.) scribed th a hos versity or lescribed its suppomplete 3% of its exception 511 ta	st completed 11, check on the character of the completed or operation of the completed of t	te this part only one be ection 170 170(b)(1) inbed in secondary perated by on 170(b)(1) government rom contri 2) no more sinesses a	t.) See instructions.) (b)(1)(A)(i) (A)(iii). (ction 170 (a governormal)(A)(v). (chickless of the control of th	(b)(1)(A)(ii mental uni or from the nembershi 1/3% of its y the orga	ii). Enter it describ general	the hospital's name,
10 L 11 X e X f g	An organizate more publicly describes the a X Type By checking foundation multiple fo	y supported organize type of supporting	pperated exclusively ations described in a organization and copye II contact the organization at the organization at the determination this box organization accept directly controls, etcapported organization described in (i) at a person described	for the section complete Type Is not coublicly serom the seed any ther alon ion? ove? In (i) or (ii)	benefit of 509(a)(1 5	of, to perform to perform the through the	orm the fui on 509(a)(2 n 11h. integrated r indirectly ations desc pe I, Type	nctions of, P) See sec dr by one or cribed in s II, or Type	or to carry ction 509(Typ r more dis- ection 509 e III	a)(3). Ch e III - No qualified e(a)(1) or sons?	n-functionally integrated persons other than section 509(a)(2).
	ne of supported rganization	(ii) EIN	(iii) Type of organiz (described on lines above or IRC sect (see instructions	1-9 in ion go	col. (i) lis	rganization sted in your document?			(vi) Is organizatio (i) organiz U.S Yes	on in col. ed in the	(vii) Amount of monetary support
SEE_	PART IV		2,6,7 & 9								12,260,341.
	ART IV										12,260,341.
Γotal [⊑] '	C17.1 T Λ	I	1	i					l	1 1	, 14,40U,341•

232021 12-04-12

Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2012

LHA For Paperwork Reduction Act Notice, see the Instructions for

	lule A (Form 990 or 990-EZ) 2012					===	Page 2
Part	(Complete only if you checked fails to qualify under the tests	d the box on line 5	i, 7, or 8 of Part I o	r if the organizatio			=
Sect	ion A. Public Support						
Calend	lar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
n	Gifts, grants, contributions, and nembership fees received. (Do not not notine)						
12	ax revenues levied for the organ- zation's benefit and either paid to or expended on its behalf						
fi	The value of services or facilities urnished by a governmental unit to the organization without charge						
	otal. Add lines 1 through 3 The portion of total contributions						
b g s	oy each person (other than a governmental unit or publicly supported organization) included						
_	on line 1 that exceeds 2% of the imount shown on line 11,						
c	column (f)	· · · · · · · · · · · · · · · · · · ·					
	Public support. Subtract line 5 from line 4			-			
	ion B. Total Support			4 1 2 2 4 2	4 0 0044	1 1 2010	
	dar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	Amounts from line 4						
	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources					 	
-	Net income from unrelated business				İ		
	activities, whether or not the						
	ousiness is regularly carried on		 				
	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV.)						
	Fotal support. Add lines 7 through 10	ete /eee instructi	L	<u> </u>		12	- · ·
	Gross receipts from related activities, First five years. If the Form 990 is for	•	•	d fourth or fifth to	ay vear as a sectio		
			a mai, second, iiii	a, router, or mer e	un year as a section	50 I (C)(O)	▶□
Sect	organization, check this box and stor tion C. Computation of Publ	ic Support Pe	rcentage				

organization, check this box and stop here		
ection C. Computation of Public Support Percentage		
4 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f))	14	%

15	Public support percentage from 2011 Schedule A, Part II, line 14	15		
16a	33 1/3% support test - 2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or m	iore, c	heck this box an	ıd
	stop here. The organization qualifies as a publicly supported organization			
	20 1/20/ 1. 1 2014 [51] - 2014 151] - 2014 151] - 2014 151] - 2014 151] - 2014 151] - 2014 151] - 2014 151] - 2014 151] - 2014 151] - 2014 151] - 2014 151] - 2014 20	ar m/	are abook this b	

b 33 1/3% support test - 2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% o	or more, check this box
and stop here. The organization qualifies as a publicly supported organization	
a 40% facts and direct materials 4049. If the organization did not check a how on line 13, 16a, or 16b, and	d line 14 is 10% or mo

7а	10% -facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more,
	and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization
	meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

b	10% -facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or
	more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the
	organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

18	Private foundation.	If the organization did not	check a box on line 13,	16a, 16b, 1	7a, or 17b, c	check this box and	see instructions

Schedule A (Form 990 or 990-EZ) 2012

Section A. Public Support

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.)

Cale	ndar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and	İ					
	membership fees received (Do not	1				1	
	ınclude any "unusual grants ")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513					 	· · -
4	Tax revenues levied for the organ- ization's benefit and either paid to						
	or expended on its behalf				<u> </u>	-	
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge					 	
-	Total. Add lines 1 through 5						
7 a	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 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6)		<u> </u>	<u> </u>			<u> </u>
Sec	ction B. Total Support			,		' 	1
	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
_	Amounts from line 6			-		<u> </u>	
10a	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						
,	Add lines 10a and 10b						
11							
	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
	Total support. (Add lines 9, 10c, 11, and 12)		<u> </u>		<u> </u>	501(-)(0)	
14	First five years. If the Form 990 is for	r the organization'	s first, second, thi	ra, tourth, or fifth t	tax year as a secti	on 501(c)(3) organı	zation,
<u>-</u>	check this box and stop here	ic Support Da	rcentage				
				column (f)	·	45	%
	Public support percentage for 2012 (· ·	Column (i))		15	
	Public support percentage from 2011 ction D. Computation of Investigation		·				
	Investment income percentage for 20					17	%
	Investment income percentage from			,	•	18	%
	a 33 1/3% support tests - 2012. If the			on line 14, and lin	e 15 is more than	· · · · · · · · · · · · · · · · · · ·	
150	more than 33 1/3%, check this box a						▶□
ł	33 1/3% support tests - 2011. If the						and
	line 18 is not more than 33 1/3%, che						
<u>20</u> -	Private foundation. If the organization						▶□
					_		000 FT) 0040

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

2012

Open to Public Inspection

Department of the Treasury Internal Revenue Service ➤ Complete if the organization is described below. ➤ Attach to Form 990 or Form 990-EZ. ➤ See separate instructions.

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations. Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations Complete Part I-A only.

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), or Form 990-EZ, Part V, line 35c (Proxy Tax), then

 Section 501(c)(4), (5), or (6) organizate 	ons Complete Part III.	, , , , , , , , , , , , , , , , , , , ,	, , ,	<i>"</i>
Name of organization			Empl	oyer identification number
NELLIE	MAE EDUCATION FO	UNDATION, I	NC.	04-2755323
Part I-A Complete if the org	anization is exempt und	er section 501(c)	or is a section 527 o	rganization.
 Provide a description of the organiz Political expenditures Volunteer hours 	ation's direct and indirect politic	al campaign activities	ın Part IV. . ►\$	
Part I-B Complete if the org	anization is exempt und	er section 501(c)	(3)	
1 Enter the amount of any excise tax			<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	
2 Enter the amount of any excise tax	· · ·		. .	
3 If the organization incurred a section	, ,			Yes No
4a Was a correction made?				Yes No
b If "Yes," describe in Part IV				
Part I-C Complete if the org	anization is exempt und	er section 501(c)	, except section 501(c)(3).
1 Enter the amount directly expended		•		
2 Enter the amount of the filing organ	zation's funds contributed to ot	her organizations for s	_	
exempt function activities	·	. =	▶\$	
3 Total exempt function expenditures	. Add lines 1 and 2 Enter here a	ind on Form 1120-POL	-1 • •	
line 17b 4 Did the filing organization file Form	1120 BOL for this year?		. •	Yes No
5 Enter the names, addresses and en made payments. For each organizar contributions received that were propolitical action committee (PAC). If a	tion listed, enter the amount pai comptly and directly delivered to	d from the filing organ a separate political org	ization's funds. Also enter th ganization, such as a separa	ne amount of political
(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0
			-	

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

Schedule C (Form 990 or 990-EZ) 2012

232041 01-07-13

Schedule C (Form 990 or 990-EZ) 2012 I Part II-A Complete if the organization	NELLIE anization	MAE is exe	EDUCATION I	FOUNDATION, on 501(c)(3) and fil	INC. 04- ed Form 5768	2755323 Page 2
(election under sect	tion 501(h)).				
A Check ► fthe filing organizat	on belongs	to an affi	iliated group (and list	ın Part IV each affiliated	group member's na	me, address, EIN,
expenses, and share					•	
B Check ► if the filing organizat	on checked	box A a	nd "limited control" p	rovisions apply.		
Limit	s on Lobbyi	ng Expe			(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influ	ence public	opinion ((grass roots lobbying)			
b Total lobbying expenditures to influ	•			• • •		
c Total lobbying expenditures (add lir	_		ay (direct lobbying)			
, , , , , , , , , , , , , , , , , , ,		0,				 -
d Other exempt purpose expenditure		4 .	1/	•	· · · · · · · · · · · · · · · · · · ·	
e Total exempt purpose expenditures	•		•		_ _	
f Lobbying nontaxable amount. Ente					-	
If the amount on line 1e, column (a) or	(b) is:	The lob	bying nontaxable an	nount is:		
Not over \$500,000		20% of	the amount on line 1	9		
Over \$500,000 but not over \$1,000	,000	\$100,00	00 plus 15% of the ex	cess over \$500,000.		
Over \$1,000,000 but not over \$1,50	00,000	\$175,00	00 plus 10% of the ex	cess over \$1,000,000.		
Over \$1,500,000 but not over \$17,0	000,000	\$225,00	00 plus 5% of the exc	ess over \$1,500,000		
Over \$17,000,000		\$1,000,	000.			
<u></u>						
g Grassroots nontaxable amount (ent		•			· · · · · · · · · · · · · · · · · · ·	
h Subtract line 1g from line 1a If zero	or less, ente	er -0-	•		···	
i Subtract line 1f from line 1c. If zero	or less, ente	r -0-		Į		
j If there is an amount other than zer	o on either li	ne 1h or	line 1i, did the organi	zation file Form 4720		
reporting section 4911 tax for this y	ear?			. <u></u>		Yes No
	ations that n	nade a s		r Section 501(h) on do not have to comp es 2a through 2f on pa		
	Lobbyir	ng Expe	nditures During 4-Ye	ear Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 200	9	(b) 2010	(c) 2011	(d) 2012	(e) Total
2a Lobbying nontaxable amount						
b Lobbying ceiling amount						
(150% of line 2a, column(e))						
c Total lobbying expenditures						
d Grassroots nontaxable amount						
e Grassroots ceiling amount (150% of line 2d, column (e))						
f Crossrate labburg avanditures						

Schedule C (Form 990 or 990-EZ) 2012

Schedule C (Form 990 or 990-EZ) 2012 NELLIE MAE EDUCATION FOUNDATION, INC. 04-2755323 Page 3 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For e	ach "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description	(2	a)	(b)
of the	e lobbying activity	Yes	No	Amo	unt
1	During the year, did the filing organization attempt to influence foreign, national, state or				
	local legislation, including any attempt to influence public opinion on a legislative matter				
	or referendum, through the use of:				
а	Volunteers?		X		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		X		
С	Media advertisements?		X		
d	Mailings to members, legislators, or the public?		X		
е	Publications, or published or broadcast statements?		X	_	
f	Grants to other organizations for lobbying purposes?		X		
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	X		56	,000.
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	ļ	X		-
i	Other activities?	<u> </u>	Х		
j	Total Add lines 1c through 1i			56	,000.
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X		-
	If "Yes," enter the amount of any tax incurred under section 4912		-		
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? t III-A Complete if the organization is exempt under section 501(c)(4), secti	on 501(a)	(F) or one	tion.	
Pai	501(c)(6).	OII 50 I(C)	(5), or sec	tuon	
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
3_	Did the organization agree to carry over lobbying and political expenditures from the prior year?		3		
Par	t III-B Complete if the organization is exempt under section 501(c)(4), secti				
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	"No," OI	R (b) Part	III-A, lin	e 3, IS
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	cal			
	expenses for which the section 527(f) tax was paid).				
а	Current year		2a		
b	Carryover from last year		2b		
c	Total		2c		_
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex-	cess			
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	oolitical			
	expenditure next year?		4		
	Taxable amount of lobbying and political expenditures (see instructions)		5	_	
	t IV Supplemental Information				
	plete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5; P	art II-A (affilia	ated group lis	st); Part II-	A, line 2,
	Part II-B, line 1 Also, complete this part for any additional information				
PAI	RT II-B, LINE 1, LOBBYING ACTIVITIES:				
<u>A 1</u>	LOBBYING FIRM WAS HIRED DURING 2012 TO MONITOR ACTI	VITY C	N PROP	OSED	
ST	ATE LEGISLATION AFFECTING THE FOUNDATION'S PRACTICE	S AND	TO MEE	T WIT	H
	MITTEE AND COMMITTEE STAFF MEMBERS TO DISCUSS SUCH				
	TITLE CONTILIED SINE MEMBERS IO DISCUSS SUCE	. negra	TOTA	•	

Schedule C (Form 990 or 990-EZ) 2012

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

➤ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ➤ Attach to Form 990. ➤ See separate instructions. 2012
Open to Public Inspection

Name of the organization

NELLIE MAE EDUCATION FOUNDATION, INC.

Employer identification number

Par	t I Organizations Maintaining Donor Advised			s or Accou	
Fai			i Other Sillinai Fullu	S OF ACCOU	its.Complete if the
	organization answered "Yes" to Form 990, Part IV, line ((h) [:	do and other appoints
		(a) DC	onor advised funds	(b) run	ds and other accounts
1	Total number at end of year				
2	Aggregate contributions to (during year)				
3	Aggregate grants from (during year)				
4	Aggregate value at end of year				
5	Did the organization inform all donors and donor advisors in wi	_		sed funds	
	are the organization's property, subject to the organization's ex	•		•	Yes No
6	Did the organization inform all grantees, donors, and donor adv		-	•	
	for charitable purposes and not for the benefit of the donor or	donor advis	or, or for any other purpose	e conferring	 1
D	impermissible private benefit?			_ ::	Yes No
Par				Part IV, line 7.	
1	Purpose(s) of conservation easements held by the organization				
	Preservation of land for public use (e.g., recreation or ed	ucation)	Preservation of an hi		
	Protection of natural habitat		Preservation of a cer	tified historic s	tructure
	Preservation of open space			_	
2	Complete lines 2a through 2d if the organization held a qualifie	ed conservat	tion contribution in the form	n of a conserva	tion easement on the last
	day of the tax year				
	~				Held at the End of the Tax Year
a	Total number of conservation easements			2a	
b	Total acreage restricted by conservation easements			2b	
c	Number of conservation easements on a certified historic structure.		• •	. 2c	
d	Number of conservation easements included in (c) acquired af	ter 8/17/06,	and not on a historic struct	1 1	
_	listed in the National Register			_ 2d	
3	Number of conservation easements modified, transferred, release	asea, exting	juisned, or terminated by th	ie organization	during the tax
	year >				
4	Number of states where property subject to conservation ease				
5	Does the organization have a written policy regarding the period violations, and enforcement of the conservation easements it has been expected as the conservation of the conservation easements in the conservation easement easements in the conservation easements in the conservation easements in the conservation easements in the conservation easements in the conservation easements in the conservation easements in the conservation easements in the conser	-	ing, inspection, nationing of		Yes No
•	Staff and volunteer hours devoted to monitoring, inspecting, a		n conconvation easements (during the year	·
6	Amount of expenses incurred in monitoring, inspecting, and er				
7 8	Does each conservation easement reported on line 2(d) above	-			'
0	and section 170(h)(4)(B)(ii)?	Sausiy ule	requirements of scotlon 171	5(1)(1)(5)(1)	Yes No
9	In Part XIII, describe how the organization reports conservation	n assamanti	s in its revenile and expens	e statement a	
9	include, if applicable, the text of the footnote to the organization				
	conservation easements.		a diatomonio inal decombet	o trio organizati	on a accounting for
Pai	t III Organizations Maintaining Collections of	Art. Histo	orical Treasures, or C	Other Simila	ar Assets.
	Complete if the organization answered "Yes" to Form 9	•	·		
1a	If the organization elected, as permitted under SFAS 116 (ASC	958), not to	o report in its revenue state	ment and bala	nce sheet works of art,
~	historical treasures, or other similar assets held for public exhib	· -			
	the text of the footnote to its financial statements that describe				
ь	If the organization elected, as permitted under SFAS 116 (ASC			nt and balance	sheet works of art, historical
	treasures, or other similar assets held for public exhibition, edu				
	relating to these items:				-
	(i) Revenues included in Form 990, Part VIII, line 1			▶ \$	S
	(ii) Assets included in Form 990, Part X			▶ \$	3
2	If the organization received or held works of art, historical treas	sures, or oth	ner sımılar assets for financı	al gain, provide	
	the following amounts required to be reported under SFAS 116	6 (ASC 958)	relating to these items		
а	Revenues included in Form 990, Part VIII, line 1	•		▶ \$	S
	Assets included in Form 990, Part X			▶ 9	· .

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 232051

Schedule D (Form 990) 2012

Sche Pa r		MAE EDUCAT					275532		age 2
3	Using the organization's acquisition, accessi								
3	(check all that apply):	on, and other record	us, check any or	ine lollowing this	at are a Si	grillicarit use o	i its collectio	ii iteiii	5
_	Public exhibition	c	d	exchange progr	ame				
a	Scholarly research	_		acitalige progr	aiiis				
b	· ·	•						_	
C	Preservation for future generations	allandrana and arrala					Dod VIII		
4	Provide a description of the organization's co						Part XIII.		
5	During the year, did the organization solicit of		•		ier similar	assers		_	1
Pa	to be sold to raise funds rather than to be me t IV Escrow and Custodial Arran				"Voo" to I	Corre 000 Dort	Yes Cor	<u> </u>	No_
	reported an amount on Form 990, Pa	•	ete ii trie organiza	tion answered	162 101	ronn 990, Pan	IV, IIIIE 9, UI		
			diani for contribut	vone or other o	nooto not			·	
ıa	Is the organization an agent, trustee, custod	an or other intermed	diary for contribu	ions or other as	ssers not	inciaaea	F-7 v		1
	on Form 990, Part X?				•		Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing table					<u>.</u>	
							Amoun	<u> </u>	
С	Beginning balance	•	•		•	1 <u>c</u>			
ď	Additions during the year					1d			
е	Distributions during the year	•	•	•		1e			
f	Ending balance					1f			
2a	Did the organization include an amount on F			•			L Yes	<u> </u>	No
	If "Yes," explain the arrangement in Part XIII								<u></u>
Pai	t V Endowment Funds. Complete		nswered "Yes" to						
		(a) Current year	(b) Prior year	(c) Two yea	rs back ((d) Three years b	ack (e) Four	years	back
1a	Beginning of year balance								
b	Contributions .								
C	Net investment earnings, gains, and losses								
d	Grants or scholarships .								
е	Other expenditures for facilities			l l					`
	and programs	<u> </u>							
f	Administrative expenses	<u> </u>							
g	End of year balance .								
2	Provide the estimated percentage of the cur	rent year end baland	ce (line 1g, colum	n (a)) held as:					
а	Board designated or quasi-endowment		%						
b	Permanent endowment	%							
С	Temporarily restricted endowment ▶	%							
	The percentages in lines 2a, 2b, and 2c should	uld equal 100%							
За	Are there endowment funds not in the posse	ession of the organiz	ation that are hel	d and administ	ered for th	ne organization			
	by:							Yes	No
	(i) unrelated organizations						3a(i)		
	(ii) related organizations						3a(ii)		
b	If "Yes" to 3a(ii), are the related organizations	s listed as required o	on Schedule R?				. 3b		<u> </u>
_4	Describe in Part XIII the intended uses of the	e organization's ende	owment funds						
Pai	t VI Land, Buildings, and Equipm	nent. See Form 990	0, Part X, line 10						
	Description of property	(a) Cost or o	other (b) C	ost or other	(c) Ac	cumulated	(d) Boo	k valu	—— e
		basis (investi	ment) ba	sis (other)	dep	reciation			
1a	Land						L		
b	Buildings								
c	Leasehold improvements			48,420.		41,888.		6,5	32.
d	Equipment			329,898.	1	89,807.		0,0	
е	Other			504,372.		144,092.		0,2	
Tota	. Add lines 1a through 1e. (Column (d) must e	egual Form 990. Part						6.9	

Schedule D (Form 990) 2012

Schedule D (Form 990) 2012 NELLIE MAE	EDUCATION FOU	NDATION, INC.	04-2755323 Page 3
Part VII Investments - Other Securities. Sec			Cook or and of the control to
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of Valuation	on: Cost or end-of-year market value
(1) Financial derivatives			
(2) Closely-held equity interests (3) Other		<u> </u>	
(A) DOMESTIC EQUITY	43,765,229.	END-OF-YEAR	MARKET VALUE
(B) FOREIGN EQUITY	78,190,482.		MARKET VALUE
(C) HEDGE FUND OF FUNDS	51,629,936.		MARKET VALUE
(D) HEDGE FUNDS - DISTRESSED			
(E) CREDIT	18,227,643.	END-OF-YEAR	MARKET VALUE
(F) HEDGE FUNDS - FIXED			
(G) INCOME	6,941,525.	END-OF-YEAR	MARKET VALUE
(H) HEDGE FUNDS - LONG/SHORT			
(I) EQUITY	19,425,013.		MARKET VALUE
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	<u>275,084,881.</u>		
Part VIII Investments - Program Related. Se			- Cook or and of your modest value
(a) Description of investment type	(b) Book value	(c) Method of Valuation	on: Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6) (7)			* ***
(8)			
(9)			
(10)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets. See Form 990, Part X, line			
(a)	Description	·-	(b) Book value
(1)		_	
(2)			
(3)			
(4)			
(5)			
(6)			
(7)		_ .	
(8)			
(9) (10)	 		
Total. (Column (b) must equal Form 990, Part X, col (B) line	e 15)		D
Part X Other Liabilities. See Form 990, Part X,			
1. (a) Description of liability		(b) Book value	
(1) Federal income taxes			
(2)			•
(3)			-
(4)		_	
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
(11)	205)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 2. FIN 48 (ASC 740) Footnote. In Part XIII, provide the term		rapprotection in Francial state	amonto that reports the argentration!
2. FIN 48 (ASC 740) Footnote. In Part XIII, provide the tell liability for uncertain tax positions under FIN 48 (ASC 7			· [==]-

	dule D (Form 990) 2012 NELLIE MAE EDUCATION FOUND	ATIO	N, INC.		2755323 Page 4
Pai	t XI Reconciliation of Revenue per Audited Financial Stateme	ents W	<u>lith Revenue per R</u>	etur	n
1	Total revenue, gains, and other support per audited financial statements			1	57,784,812.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains on investments	2a	52,849,096.		
b	Donated services and use of facilities	2b			
C	Recoveries of prior year grants	2c		_	
þ	Other (Describe in Part XIII)	2d		1	
е	Add lines 2a through 2d			2e	52,849,096.
3	Subtract line 2e from line 1			3	4,935,716.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			1	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	1,240,058.		
b	Other (Describe in Part XIII)	4b		_	
С	Add lines 4a and 4b			4c	1,240,058.
5_	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	6,175,774.
Pa	rt XII Reconciliation of Expenses per Audited Financial Statem	ents V	Vith Expenses per	Retu	ım
1	Total expenses and losses per audited financial statements			1	17,890,903.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b		1	
	Other losses	2c			
d	-	2d		ĺ	
	Add lines 2a through 2d			2e	0.
3	Subtract line 2e from line 1	• •	•	3	17,890,903.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1	•			2.702372001
-	Investment expenses not included on Form 990, Part VIII, line 7b	4a	1,240,058.	,	
	Other (Describe in Part XIII.)	4b		1	
	Add lines 4a and 4b		<u></u>	4c	1,240,058.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5	19,130,961.
	rt XIII Supplemental Information		· · · · · · · · · · · · · · · · · · ·		13/130/3011
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part II	II lines	1a and 4: Part IV lines 1	h and	2h: Part V line 4: Part
	e 2; Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to				25,1 (11 1, 1110 4, 1 (11
	RT X, LINE 2: THE FOUNDATION ACCOUNTS FOR	-	-		
	VI A, BINE 2: IND LOUNDATION RECOGNIB FOR		DITECT OF THE		
TNI	CERTAIN TAX POSITIONS BASED ON A "MORE LIK	ELV.	ייים ארש ארשי ייים ארשי	RES	HOLD TO THE
<u> </u>	MINIM IM TODITIOND DADED ON IT MONE LIN		111111 1101 111		HOLD TO THE
o ㅠ (COGNITION OF THE TAX POSITIONS BEING SUSTA	TNED	BASED ON TH	TP T	PCHNTCAT.
<u> </u>	CONTITION OF THE TAX FORTITIONS DETING BODIA	TIALL	DADED ON III		ВСПИТСКИ
MET	RITS OF THE POSITION UNDER SCRUTINY BY THE	λDD	T.TCART.E ጥልΥT	NC	עייד פ∩ניייז ג
VI.E-1	CITS OF THE POSITION UNDER SCRUTINI BI THE	WLI	DICADDE INAI	140	AUTHORITI.
TE	A TAX POSITION OR POSITIONS ARE DEEMED TO	DEC	דוו.יי דאז וואורידים	тат	NTTES OF
<u> </u>	TIME LOSTITON ON LOSTITONS WE DEFUND TO	KED	OHI TH OHCEN	. TVT	HITED OF
יעק	OSE POSITIONS, THE UNRECOGNIZED TAX BENEFI	т тс	ESTIMATED P	ASE	ים מע מי
<u>. 11(</u>	NOT FOULTIONS, THE UNKECOGNIZED INV DEWELL	<u></u>	TOITEMIED D	TO E	D ON A
יי ריו	JMULATIVE PROBABILITY ASSESSMENT" THAT AGG	REGA	ייים אויי בייד	МΔπ	אַר תאַי
<u> </u>	AND THE PROPERTY OF THE PROPERTY OF THE PARTY	HDII			

LIABILITY FOR ALL UNCERTAIN TAX POSITIONS. INTEREST AND PENALTIES

Schedule D (Form 990) 2012

Schedule D (Form 990) 2012 NELLIE MAE EDUCATION FOUNDATION, INC. 04-2755323 Page 5 Part XIII Supplemental Information (continued)
ASSESSED, IF ANY, ARE ACCRUED AS INCOME TAX EXPENSE. THE FOUNDATION HAS
IDENTIFIED ITS TAX STATUS AS A TAX EXEMPT ENTITY AND ITS DETERMINATIONS AS
TO ITS INCOME BEING RELATED OR UNRELATED AS ITS ONLY SIGNIFICANT TAX
POSITIONS AND HAS DETERMINED THAT SUCH TAX POSITIONS DO NOT RESULT IN AN
UNCERTAINTY REQUIRING RECOGNITION. THE FOUNDATION IS NOT CURRENTLY UNDER
EXAMINATION BY ANY TAXING JURISDICTION. FEDERAL AND STATE INCOME TAX
RETURNS ARE GENERALLY OPEN FOR THREE YEARS FOLLOWING THE DATE FILED.

Part XIII Supplemental Information (continued)

Part VII Investments - Other Securities. See Form 990, Part X,	line 12.	(-) Madhad of collection
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
HEDGE FUND - MULTI-STRATEGY	8,310,001.	FMV
REAL ASSETS	26,100,344.	FMV
REAL ESTATE FUND	4,384,363.	FMV
DIRECT REAL ASSET - TIMBER	2,808,583.	FMV
PRIVATE COMMODITY	5,098,829.	FMV
NATURAL RESOURCES FUND OF FUNDS	10,202,933.	FMV
	,	

SCHEDULE F

Statement of Activities Outside the United States

➤ Complete if the organization answered "Yes" to Form 990,
Part IV, line 14b, 15, or 16.

➤ Attach to Form 990. ➤ See separate instructions.

2012
Open to Public

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

Employer identification number

Schedule F (Form 990) 2012

NEI	LLIE MAE EDUC	ATION FO	UNDATION	, INC.		04-27553	23
Pa	rt I General Infor	mation on A	ctivities Out	side the United States. Comple	te if the organ		
	to Form 990, Pari	t IV, line 14b					
1	For grantmakers. Does	the organization	n maintain record	ds to substantiate the amount of its gra	ints and other	assistance,	
	the grantees' eligibility fo	or the grants or a	assistance, and t	the selection criteria used to award the	grants or assi	stance?	Yes No
						_	
2	For grantmakers. Desc	ribe in Part V the	organization's p	procedures for monitoring the use of its	grants and of	her assistance ou	ıtsıde the
	United States.						
3	Activities per Region. (Th			an be duplicated if additional space is r			
	(a) Region	(b) Number of	(c) Number of employees,	(d) Activities conducted in region		rity listed in (d)	(f) Total expenditures
		offices in the region	agents, and independent	(by type) (e g , fundraising, program services, investments, grants to	-	gram service, specific type	for and
		in the region	contractors	recipients located in the region)		e(s) in region	investments
			ın region	icopionio iconio in inci i sg.c.i,			in region
	TRAL AMERICA &						
CAR	IBBEAN	0	0	INVESTMENTS			85,603,157,
			<u></u>				
					-		
							<u> </u>
		1					
	0 1 1 1 1 1	_				<u>-</u>	
	Sub-total	0	0	 	<u> </u>		85,603,157.
b	Total from continuation	_	_	.			
	sheets to Part I	0	0				
С	Totals (add lines 3a]	_				DE 603 155
	and 3b)	1 0	00	<u></u>			85 603 157

232071

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

NELLIE MAE EDUCATION FOUNDATION, INC.

Schedule F (Form 990) 2012

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. Part II can be duplicated if additional space is needed

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
	-							
-	-							
								,
 Enter total number of recipient organizations listed at the IRS, or for which the grantee or counsel has progressed as Enter total number of other organizations or entities 	recipient organization the grantee or counse other organizations o	is listed above that are if has provided a section if entities	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter Enter total number of other organizations or entities	foreign country,	recognized as tax-e>	empt by		

27

Schedule F (Form 990) 2012

NELLIE MAE EDUCATION FOUNDATION, INC.

Page 3

04-2755323

Schedule F (Form 990) 2012

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

(h) Method of valuation (book, FMV, appraisal, other)		•				
(g) Description of non-cash assistance						
(f) Amount of non-cash no assistance						
(e) Manner of cash disbursement						
	-					
f (d) Amount of cash grant						
(c) Number of recipients	}					
(b) Region						
(a) Type of grant or assistance (b) Region						
(a) Type of gra						

Schedule F (Form 990) 2012

Schedule F (Form 990) 2012

Yes

X No

for Form 5713)

SCHEDULE (Form 990)

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

Open to Public OMB No 1545-0047 Inspection ² []

Employer identification number 04 - 2755323X 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 the selection Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ► Attach to Form 990. NELLIE MAE EDUCATION FOUNDATION, INC General Information on Grants and Assistance criteria used to award the grants or assistance? Name of the organization Department of the Treasury Internal Revenue Service

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part

Part II Grants and Other Assistance to Governments and Organizati	3overnments and	Organizations in the	United States. C	omplete if the orga	nization answered "Y	ons in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any	IV, line 21, for any
recipient that received more than \$5,000. Part II can be duplicated if additional space is needed	5,000. Part II can	be duplicated if addition	onal space is need	led			
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
-							
JOBS FOR MAINE'S GRADUATES							
45 COMMERCE DRIVE, SUITE 9	01-0482628	501(C)(3)	563,096.	0			DLSC IMPLEMENTATION
JOBS FOR THE FUTURE							
88 BROAD STREET, 8TH FLOOR ROSTON MA 02110	06-1164568	501(C)(3)	500,000.	0			RESEARCH DEVELOPMENT INTERMEDIARY
EDUCATION DEVELOPMENT CENTER							
(EDCI) - 43 FOUNDRY AVENUE -							
WALTHAM, MA 02453	04-2241718	501(C)(3)	424,543.	0.			DLSC EVALUATION
CENTÉR FOR COLLABORATIVE EDUCATION							
33 HARRISON AVENUE, 6TH FLOOR							PERFORMANCE ASSESSMENT
BOSTON, MA 02111	04-3241676	501(C)(3)	400,000.	0			SYSTEMS
PDICATION DRUFT CENTER							
The section of the se							CROSS DISTRICT LEARNING
WALTHAM MA 02453	04-2241718	501(C)(3)	350,000.	0			INTERMEDIARY
GREAT SCHOOLS PARTNERSHIP							
482 CONGRESS STREET, SUITE 500							NEW ENGLAND SECONDARY
PORTLAND, ME 04101	26-3834610	501(C)(3)	300,000	.0			SCHOOL CONSORTIUM
		The state of the s	- hand table				204.

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

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

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

Schedule I (Form 990) (2012)

•	ments and Organizations in the United States (Schedule I (Form 990), Part II)
, INC	ns in th
OUNDATION,	nents and Organizatio
E MAE EDUCATION FOUNDATION,	r Assistance to Governn
MAE	d Other As
NELLIE M	n of Grants and O
le I (Form 990)	Continuation
Schedul	Part II

(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
AMERICAN INSTITUTES FOR RESEARCH PELAVIN RESEARCH CENTER; 1000 THOMAS JEFFERSON STREET, NW - WASHINGTON, DC 2	25-0965219	501(C)(3)	281,957.	0.			CREATING AND SUSTAINING SCL ENVIRONMENTS FOR UNDERSERVED SECONDARY
EXPEDITIONARY LEARNING SCHOOLS OUTWARD BOUND - 7 NORTH PLEASANT ST., STE. 3A - AMHERST, MA 01002	04-2375956	501(C)(3)	263,080.	0			AN EVALUATION OF SCL IN EXPEDITIONARY LEARNING SCHOOLS
NORWALK PUBLIC SCHOOLS 125 EAST AVE PO BOX 6001 NORWALK, CT 06852	GOV'T UNIT	PUBLIC SCHOOL	254,897.	0			BUILDING A COLLABORATIVE CULLTURE
BURLINGTON SCHOOL DISTRICT 150 COLCHESTER AVENUE BURLINGTON, VT 05401	03-6000410	PUBLIC SCHOOL	252,666.	0.			DLSC IMPLEMENTATION
DANBURY PUBLIC SCHOOLS 63 BEAVER BROOK ROAD DANBURY, CT 06810	GOV'T UNIT	PUBLIC SCHOOL	250,000.	0			BUILDING A COLLABORATIVE
EDUCATION CONNECTION PO BOX 909 LITCHPIELD, CT 06759	06-0842189	501(C)(3)	249,783.	0			A MIXED METHODS EVALUATION OF THE IMPACT OF BLENDED INSTRUCTION MODEL ON UNDERSERVED
NEW HAVEN PUBLIC SCHOOLS 54 MEADOW STREET NEW HAVEN, CT 06510	GOV'T UNIT	PUBLIC SCHOOL	249,141.	0			BUILDING A COLLABORATIVE CULTURE
LELAND STANFORD JUNIOR UNIVERSITY OFFICE OF SPONSORED RESEARCH, 340 STANFORD, CA 94305	94-1156365	PUBLIC UNIV.	240,186.	0			DOCUMENTING SUCCESSFUL
BROWN UNIVERSITY/ANNENBERG CENTER FOR SCHOOL REFORM - BOX 1985 - PROVIDENCE, RI 02912	05-0258809	501(C)(3)	223,735.	0			SUPPORTING COMMUNITY ORGANIZING AND ENGAGEMENT

Schedule I (Form 990)

Ф	E EDUCATION	ON FOUNDATION,	ON, INC.		:		04-2755323 Page 1
Part II Continuation of Grants and Other Assistance to Governments	Assistance to Go	vernments and Organ	nizations in the U	nited States (Sche	and Organizations in the United States (Schedule I (Form 990), Part II.)	(H)	
(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
EDUCATION DEVELOPMENT CENTER (EDCI) - 43 FOUNDRY AVENUE - WALTHAM, MA 02453	04-2241718	501(C)(3)	208,110.	•0			BUILDING A COLLABORATIVE CULTURE EVALUATION
NEW ENGLAND RESOURCE CENTER FOR HIGHER EDUCATION (NERCHE) - UNIVERSITY OF MASSACHUSETTS, 100 MORRISSEY BOULEVARD - BOSTON, MA	GOV'T UNIT	PUBLIC UNIV.	201,607.	0,			PROJECT COMPASS
BOSTON BEYOND 89 SOUTH STREET, SUITE 601 BOSTON, MA 02111	20-1308560	501(C)(3)	200,000.	0.			THE BOSTON SUMMER LEARNING PROJECT
MASSACHUSETTS AFTERSCHOOL PARTNERSHIP - 128A TREMONT STREET, 4TH FLOOR FRONT - BOSTON, MA 02108	20-5116880	501(C)(3)	200,000	0.			AFTER SCHOOL AND OUT OF SCHOOL TIME COORDINATING COUNCIL SUPPORT PROJECT
SANFORD SCHOOL DEPARTMENT 917 MAIN STREET, SUITE 200 SANFORD, ME 04073	GOV'T UNIT	PUBLIC SCHOOL	181,503.	0.			DLSC IMPLEMENTATION
EDUCATE MAINE 295 WATER STREET, STE. 5 AUGUSTA, ME 04330	20-3559947	501(C)(3)	.000,271	.0			SANDARDS-BASED EDUCATION POLICY INITIATIVE
SCHOTT FOUNDATION FOR PUBLIC EDUCATION - 675 MASSACHUSETTS AVENUE, 8TH FLOOR - CAMBRIDGE, MA 02139	04-3457065	501(C)(3)	165,000.	0			MASSACHUSETTS OPPORTUNITY TO LEARN CAMPAIGN
MASSINC 18 TREMONT STREET, SUITE 1120 BOSTON, MA 02108	04-3271457	501(C)(3)	151,105.	.0			GATEWAY CITIES INSTITUTE - EDUCATION
E-P EDUCATION SERVICES 15 BRITTANY COURT CHESHIRE, CT 06410	06-0889523	501(C)(3)	150,000.	0			COMMUNICATIONS, PROFESSIONAL DEVELOPMENT AND ADVOCACY SUPPORT

Schedule I (Form 990)

•		
(١
•		
Ł	ſ	
L	ſ	
t	•	•
C	`	١
	ı	

Page 1

C.	the United States (Schedule I (Form 990), Part II.)
I, INC	izations in the U
NELLIE MAE EDUCATION FOUNDATION,	ments and Organiza
LLIE MAE EDUCATION	sistance to Govern
MAE	Other As
NELLIE	n of Grants and C
e I (Form 990)	Continuation
Schedul	Part II

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 394), Part III,	Assistance to Go	vernments and Organ	izations in the Or	illed States (Sour	dule i (roni 390), rat	(11.)	
(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
PROJECT R.I.G.H.T. 320A BLUE HILL AVENUE DORCHESTER MA 02121	04-3265420	501(C)(3)	150 000	0			BOSTON UNITED FOR STUDENTS COALITION
IAL PUING	20-0310109	501(C)(3)	149,600.	0			COMPETENCY WORKS
PITTSFIELD YOUTH WORKSHOP P.O. BOX 206 PITTSFIELD, NH 03263	02-0414050	501(C)(3)	130,000.	.0			DLSC LEAD COMMUNITY
PORTLAND HEALTH & HUMAN SERVICES SOCIAL SERVICES DIVISION, 190-192 LANCASTER STREET - PORTLAND, ME 04101	01-6000032	GOVT AGENCY	130,000.	0.			DLSC LEAD COMMUNITY PARTNER
STRATEGIES FOR A STRONG SANFORD P.O. BOX 958 SANFORD, ME 04073	80-0144697	501(C)(3)	130,000.	.0			DLSC LEAD COMMUNITY PARTNER
VOICES FOR VERMONT'S CHILDREN P.O. BOX 261 MONTPELIER, VT 05601	22-2611535	501(C)(3)	120,000.	.0			DLSC LEAD COMMUNITY PARTNER
JOBS FOR MAINE'S GRADUATES 45 COMMERCE DRIVE, SUITE 9 AUGUSTA, ME 04330	01-0482628	501(C)(3)	103,500.	0.			COMMUNICATIONS PLAN
BOSTON DAY & EVENING ACADEMY 20 KEARSARGE AVENUE ROXBURY, MA 02119	31-1708923	501(C)(3)	100,000.	0			LARRY O'TOOLE LEADERSHIP AWARD
BOSTON EDUCATIONAL DEVELOPMENT FOUNDATION - 26 COURT STREET, 6TH FLOOR - BOSTON, MA 02108	22-2514422	501(C)(3)	100,000.	0			RACE TO THE TOP DISTRICT APPLICATION
							Schedule I (Form 990)

Schedule I (Form 990)

സ
~
m
S
Ŋ
_
~
<u> </u>
4
0

Page 1

Schedule I (Form 990) NELLIE MAE EDUCATION FOUNDATION, INC.

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

Part III Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 999), Part III,	Assistance to GC	vernments and Orgar	uzations in the Or	nied States (Sche	dule I (Portil 990), Par	, II.,	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BRANDEIS UNIVERSITY P.O. BOX 549110 WALTHAM, MA 02454	04-2103552	501(C)(3)	100,000	0			PROJECT COMPASS DATA COMMUNITY OF PRACTICE
PROTEUS FUND 15 RESEARCH DRIVE, SUITE B AMHERST, MA 01002	04-3243004	501(C)(3)	100,000.	0			DIVERSITY FELLOWSHIP
UNIVERSITY OF WASHINGTON FOUNDATION - 407 GERBERDING HALL, CAMPUS BOX 351210 - SEATTLE, WA 98195	94-3079432	501(C)(3)	100,000.	0,			FINANCING SCHOOLS FOR INNOVATION: DO BUDGET CONSTRAINTS, REAL AND IMAGINED, IMPACT THE WAY
BURLINGTON SCHOOL DISTRICT 150 COLCHESTER AVENUE BURLINGTON, VT 05401	03-6000410	PUBLIC SCHOOL	93,627.	0			FUBLIC ENGAGEMENT AND COMMUNICATION PLAN
MAINE DEPARTMENT OF EDUCATION 23 STATE HOUSE STATION AUGUSTA, ME 04333	GOV'T UNIT	STATE AGENCY	92,000.	0.0			VIRTUTAL CENTER FOR BEST PRACTICES AND POLICIES
GREAT SCHOOLS PARTNERSHIP 482 CONGRESS STREET, SUITE 500 PORTLAND, ME 04101	26-3834610	501(C)(3)	86,381.	0.			THE GLOSSARY OF EDUCATION REFORM FOR JOURNALISTS
VOICES FOR VERMONT'S CHILDREN P.O. BOX 261 MONTPELIER, VT 05601	22-2611535	501(C)(3)	85,300.	0.			DLSC LEAD COMMUNITY PARTNER
CENTRAL FALLS SCHOOL DISTRICT 54 MEADOW STREET NEW HAVEN, CT 06510	GOV'T UNIT	PUBLIC SCHOOL	80,651.	0			STUDENT CENTERED SYSTEMS PLANNING INITIATIVE
MAINE SCHOOL ADMINISTRATIVE DISTRICT #60 (MSAD #60) - P.O. BOX 819 - NORTH BERWICK, ME 03906	GOV'T UNIT	PUBLIC SCHOOL	80,000.	0			COMPETENCY BASED EDUCATION SYSTEM
							Schedule I (Form 990)

Page 1

	izations in the United States (Schedule I (Form 990), Part II.)
I, INC.	ns in the
FOUNDATION,	nents and Organizatio
EDUCATION FOUNDATION	Assistance to Governn
၂	ther A
NELLIE MA	n of Grants and O
le I (Form 990)	Continuation
Schedul	Part II

		6:5				,,,,	
(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
RANDOLPH PUBLIC SCHOOLS 40 HIGHLAND AVENUE RANDOLPH, MA 02368	GOV'T UNIT	PUBLIC SCHOOL	80,000.	0			FRESHMAN ACADEMY
GRANITE STATE ORGANIZING PROJECT 383 BEECH STREET MANCHESTER, NH 03101	47-0873896	501(C)(3)	79,000.	.0			YOUTH ORGANIZERS UNITED
HYDE SQUARE TASK FORCE 375 CENTRE STREET JAMAICA PLAIN, MA 02130	04-3118543	501(C)(3)	79,000.	0			BOSTON PARENT ORGANIZING NETWORK
YOUNG VOICES 150 MILLER AVE PROVIDENCE, RI 02905	43-2103674	501(C)(3)	79,000.	0.			STUDENTS' AND PARENTS' GRASSROOTS MOVEMENT
YOUTH IN ACTION 672 BROAD STREET PROVIDENCE, RI 02907	05-0495230	501(c)(3)	79,000.	, 0			STUDENT CENTERED CLASSROOMS
ASIA SOCIETY 725 PARK AVENUE NEW YORK, NY 10021	13-3234632	501(C)(3)	75,000.	0.0			EXPANDING HORIZONS THROUGH EXPANDED LEARNING
BOSTON BEYOND 89 SOUTH STREET, SUITE 601 BOSTON, MA 02111	20-1308560	501(C)(3)	75,000.	0.			BOSTON AFERSCHOOL AND BEYOND
GOODWIN COLLEGE ONE RIVERSIDE DRIVE EAST HARTFORD, CT 06118	06-1627882	501(0)(3)	75,000.	.0			CONNECTICUT RIVER EXTENDED LEARNING INSTITUTE
JFY NETWORKS 44 SCHOOL STREET, SUITE 1010 BOSTON, MA 02109	04-2607239	501(C)(3)	75,000.	0			JEYNET/OE PORTAL TO STUDENT CENTERED LEARNING Schedule (Form 990)
							מכוומתחום ולומיוים

	id Organizations in the United States (Schedule I (Form 990), Part II)
, INC.	ns in the
FOUNDATION	rnments ar
MAE EDUCATION	ther Assistance to Gove
: MAE	nd Other As
NELLIE	n of Grants and O
le I (Form 990)	Continuation
Schedu	Part II

(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
OUR PIECE OF THE PIE, INC. 20-28 SARGEANT STREET HARTFORD, CT 06105	06-0939659	501(C)(3)	75,000.	0.			STUDENT DATA INTEGRATION PROJECT
SEARSPORT DISTRICT HIGH SCHOOL 24 MORTLAND STREET SEARSPORT, ME 04974	GOV'T UNIT	PUBLIC SCHOOL	75,000.	0			TAKING A MULTIPLE PATHWAYS STRANDARDS-BASED SYSTEM TO SCALE
THE BOSTON FOUNDATION 75 ARLINGTON STREET, 10TH FLOOR BOSTON, MA 02116	04-2104021	501(C)(3)	75,000.	.0	_		BOSTON OPPORTUNITY AGENDA ADMINISTRATIVE SUPPORT
UNIVERSITY OF WASHINGTON FOUNDATION - 407 GERBERDING HALL, CAMPUS BOX 351210 - SEATTLE, WA 98195	94-3079432	501(C)(3)	65,451.	.0			DO LEADING CMOS USE SCL TO SUCCEED WITH HIGH NEEDS STUDENTS? A REVIEW OF INTERVIEWS AND
VISUAL UNDERSTANDING IN EDUCATION VISUAL THINKING STRATEGIES, 109 SOUTH 5TH STREET - BROOKLYN, NY 11249	04-3299055	501(C)(3)	56,462.	0.			VTS MIDDLE SCHOOL PROGRAM MODEL DEVELOPMENT PROJECT
SANFORD SCHOOL DEPARTMENT 917 MAIN STREET, SUITE 200 SANFORD, ME 04073	GOV'T UNIT	PUBLIC SCHOOL	56,400.	0.0			COMMUNICATION PLAN IMPLEMENTATION
JOBS FOR MAINE'S GRADUATES 45 COMMERCE DRIVE, SUITE 9 AUGUSTA, ME 04330	01-0482628	501(C)(3)	56,000.	0			COMMUNICATIONS PLAN
PITTSFIELD SCHOOL DISTRICT SAU 51, 23 ONEIDA STREET, UNIT 1 PITTSFIELD, NH 03263	GOV'T UNIT	PUBLIC SCHOOL	53,300.	°°			COMMUNICATION PLAN IMPLEMENTATION
GREAT SCHOOLS PARTNERSHIP 482 CONGRESS STREET, SUITE 500 PORTLAND, ME 04101	26-3834610	501(C)(3)	52,437.	0.		,	EDUCATION JOURNALIST GLOSSARY AND ONLINE RESOURCE TOOL

Schedule I (Form 990)

	Organizations in the United States (Schedule I (Form 990), Part II.)
0) NELLIE MAE EDUCATION FOUNDATION, INC.	tion of Grants and Other Assistance to Governments and Organizations in t
Schedule I (Form 99	Part II Continua

(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
STRATEGIES FOR A STRONG SANFORD P.O. BOX 958 SANFORD, ME 04073	80-0144697	501(C)(3)	52,113.	0.			DLSC LEAD COMMUNITY PARTNER
ASIA SOCIETY 725 PARK AVENUE NEW YORK, NY 10021	13-3234632	501(C)(3)	50,000.	0			EXPANDED LEARNING
BOSTON EDUCATIONAL DEVELOPMENT FOUNDATION - 26 COURT STREET, 6TH FLOOR - BOSTON, MA 02108	22-2514422	501(C)(3)	50,000.	0.			DIPLOMA PLUS CHARLESTOWN - PBP: INTERDISCIPLINARY WEEK
CENTER FOR COLLABORATIVE EDUCATION 33 HARRISON AVENUE, 6TH FLOOR BOSTON, MA 02111	04-3241676	501(C)(3)	50,000.	.0			STRENGTHENING GRADUATION BY PROFICIENCY IN RI'S HIGH SCHOOLS
CONNECTICUT COUNCIL FOR EDUCATION REFORM - 195 CHURCH STREET, 8TH FLOOR - NEW HAVEN, CT 06510	27-4704040	501(C)(3)	50,000.	0			ALLIANCE DISTRICT PROJECT
Y PUBLIC SCHOOLS VER BROOK ROAD Y, CT 06810	GOV'T UNIT	PUBLIC SCHOOL	50,000.	0.			CROSS DISTRICT LEARNING
EXPEDITIONARY LEARNING - NEW YORK 247 W. 35TH STREET, 8TH FLOOR NEW YORK, NY 10001	06-1576405	501(C)(3)	50,000.	0			PROFICIENCY BASED PATHWAYS: PATHWAYS TO SUCCESS
MASSACHUSETTS 2020 24 SCHOOL STREET, 3RD FLOOR BOSTON, MA 02108	04-3534001	501(C)(3)	50,000.	0.			LAWRENCE TRANSITION
NATIONAL CENTER ON EDUCATION AND THE ECONOMY (NCEE) - 2000 PENNSYLVANIA AVENUE, NW, STE. 5300 - WASHINGTON, DC 20006	52-1539258	501(C)(3)	50,000.	0			PROFICIENCY BASED PATHWAYS: EXCELLENCE FOR ALL
							Schedule I (Form 990)

(a) Name and address of (b) EIN (c) IRC section (d) Amount of organization or government cash grant	(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
NEW ENGLAND LITERACY RESOURCE CENTER (WORLD EDUCATION, INC.) - 44 FARNSWORTH STREET - BOSTON, MA 02210	13-1804349	501(C)(3)	.000,05	0.			WORDS2LEARN: USING MOBILE - PHONES TO ACCELERATE LEARNING
NEW, HAVEN PUBLIC SCHOOLS 54 MEADOW STREET NEW HAVEN, CT 06510	GOV'T UNIT	PUBLIC SCHOOL	.000,05	.0			CROSS DISTRICT LEARNING
NORWALK PUBLIC SCHOOLS 125 EAST AVE PO BOX 6001 NORWALK, CT 06852	GOV'T UNIT	PUBLIC SCHOOL	.000,05	0.			CROSS DISTRICT LEARNING
OUR PIECE OF THE PIE, INC. 20-28 SARGEANT STREET HARTFORD, CT 06105	6596260-90	501(C)(3)	50,000.	0.		·	DATA INTEGRATION IMPLEMENTATION SUPPORT
TECHNICAL EDUCATION RESEARCH CENTERS, INC. (TERC) - 2067 MASSACHUSETTS AVENUE - CAMBRIDGE, MA 02140	04-6134355	501(C)(3)	50,000.	0		fi .	PROFICIENCY BASED PATHWAYS: DEVELOPMENT OF COMPETENCY BASED ONLINE SUPPORT IN TARGETED MATH
VERGENNES UNION HIGH SCHOOL ADDISON NORTHWEST SUPERVISORY UNION, 48 GREEN STREET - VERGENNES, VT 05491	GOV'T UNIT	PUBLIC SCHOOL	50,000.	0.			PROFICIENCY BASED PATHWAYS: PERFORMANCE BASED GRADUATION REQUIREMENTS
YOUTH IN ACTION 672 BROAD STREET PROVIDENCE, RI 02907	05-0495230	501(C)(3)	.000,05	.0			STRENGTHENING THE CAPACITY OF THE COMMUNITY OF CHORT
PITTSFIELD SCHOOL DISTRICT SAU 51, 23 ONEIDA STREET, UNIT 1 PITTSFIELD, NH 03263	GOV'T UNIT	PUBLIC SCHOOL	49,250.	0.			RACE TO THE TOP APPLICATION
PORTLAND HEALTH & HUMAN SERVICES SOCIAL SERVICES DIVISION, 190-192 LANCASTER STREET - PORTLAND, ME 04101	01-6000032	GOVT AGENCY	46,250.	0.			DLSC LEAD COMMUNITY PARTNER
•							Schedule I (Form 990)

Schedule I (Form 990) NELLIE MAE EDUCATION FOUNDATION, INC.

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

(a) Name and address of organization or government	(b) EiN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE RHODE ISLAND FOUNDATION ONE UNION STATION PROVIDENCE, RI 02903	22-2604963	501(C)(3)	45,000.	0			RI EDUCATION PUBLIC AWARENESS CAMPAIGN
BALLET THEATRE OF BOSTON 400 HARVARD STREET CAMBRIDGE, MA 02138	04-2773619	501(C)(3)	40,000.	0		·	YOUTH IMMIGRANT LEADERSHIP NETWORK
COMMUNITY POUNDATION OF WESTERN MASSACHUETTS - P.O. BOX 15769 - SPRINGFIELD, MA 01115	22-3089640	501(C)(3)	40,000.	0.			FUNDER COLLABORATIVE FOR READING SUCCESS
YALE UNIVERSITY CHILD STUDY CENTER 47 COLLEGE ST., STE. 203, P.O. BOX NEW HAVEN, CT 06520	06-0646973	501(C)(3)	40,000.	0.			MSCS COMER SCHOOL DEVELOPMENT PROGRAM
BURLINGTON SCHOOL DISTRICT 150 COLCHESTER AVENUE BURLINGTON, VT 05401	03-6000410	PUBLIC SCHOOL	36,125.	0.			COMMUNICATIONS PLAN
PITTSFIELD YOUTH WORKSHOP P.O. BOX 206 PITTSFIELD, NH 03263	02-0414050	501(C)(3)	35,347.	0			DLSC LEAD COMMUNITY PARTNER
MENT OF HIGHER URTON PLACE, MA 02108	GOV'T UNIT	501(C)(3)	35,000.	0.			LEAP CONFERENCE
INTERNATIONAL ASSOCIATION OF R-12 ONLINE LEARNING (INACOL) - 1934 OLD GALLOWS RD, SUITE 350 - VIENNA, VA 22182	20-0310109	501(C)(3)	33,000.	0			DISTRIBUTION OF KNOWLEDGE FROM PROFICIENCY-BASED PATHWAYS PROJECT
CENTER FOR COLLABORATIVE EDUCATION 33 HARRISON AVENUE, 6TH FLOOR BOSTON, MA 02111	04-3241676	501(C)(3)	30,250.	0			QUALITY PERFORMANCE ASSESSMENTS TRAINING GUIDE/TOOL KIT Schedule I (Form 990)
							Scriedule I (FOITI SSS)

3
7
S
2
S
7
7
- 1
4
0

INC.	izations in the United States (Schedule I (Form 990), Part II)	
EDUCATION FOUNDATION,	istance to Governments and Organ	
le (Form 990) NELLIE MAE	Continuation of Grants and Other Ass	
Schedu	Part II	

(a) Name and address of organization or government	(9) 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
MASSINC 18 TREMONT STREET, SUITE 1120 BOSTON, MA 02108	04-3271457	501(C)(3)	30,000.	0.			OPEN MINDS
PROVIDENCE AFTER SCHOOL ALLIANCE 140 BROADWAY PROVIDENCE, RI 02903	26-0319193	501(C)(3)	3000'08	.0			AFTERZONE'S SUMMER SCHOLARS PROGRAM
READING IS FUNDAMENTAL 1730 RHODE ISLAND AVENUE, NW, P.O. WASHINGTON, DC 20036	52-0976257	501(C)(3)	30,000.	0.0			\$10,000 TO THE MULTICULTURAL BOOK COLLECTION AND \$20,000 TO THE GENERAL FUND
VIRTUAL LEARNING ACADEMY CHARTER SCHOOL - 30 LINDEN STREET, P.O. BOX 1050 - EXETER, NH 03833	56-2668724	501(C)(3)	30,000.	0			COURSE AND COMPETENCY DEVELOPMENT
HYDE SQUARE TASK FORCE 375 CENTRE STREET JAMAICA PLAIN, MA 02130	04-3118543	501(C)(3)	29,000.	0.			YOUTH COMMUNITY ORGANIZING
COMMUNITY LABOR UNITED NONPROFIT CENTER, 89 SOUTH ST., #70 BOSTON, MA 02111	20-3404034	501(C)(3)	.000,62	.0			BOSTON YOUTH ORGANIZING PROJECT
YOUTH ON BOARD (YOUTHBUILD USA) 58 DAY STREET SOMERVILLE, MA 02144	22-3076454	\$01(C)(3)	29,000.	0.			BOSTON STUDENT ADVISORY COUNCIL
NEW HAMPSHIRE DEPARTMENT OF EDUCATION - 101 PLEASANT STREET - CONCORD, NH 03301	GOV'T UNIT	STATE AGENCY	25,550.	0.			NH FLEXIBILITY WAIVER
GREAT SCHOOLS PARTNERSHIP 482 CONGRESS STREET, SUITE 500 PORTLAND, ME 04101	26-3834610	501(c)(3)	25,350.	0.			IMPLICATIONS OF PROFICIENCY-BASED LEARNING ON STATE ASSESSMENT SYSTEMS
							Schedule I (Form 990)

• •	ernments and Organizations in the United States (Schedule I (Form 990), Part II)
, INC.	ns in t
FOUNDATION,	Governments and Organization
${f z}$ DUCA	stance to
AE E	r Assis
NELLIE MAE EDUCATION	of Grants and Other Assistance to
le I (Form 990)	Continuation
Schedu	Part II

	S on collection			alloc) comes com	פתמום ו (ו סוווו פפס), ו מוכ וו	()	
(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
CENTER FOR COLLABORATIVE EDUCATION 33 HARRISON AVENUE, 6TH FLOOR BOSTON, MA 02111	04-3241676	501(C)(3)	.000.	0.			QPA COMMUNICATIONS STRATEGY
FINANCE AUTHORITY OF MAINE P.O. BOX 949 AUGUSTA, ME 04332	01-0392006	501(C)(3)	25,000.	0.			HAROLD ALFOND COLLEGE
HARVARD MEDICAL SCHOOL 25 SHATTUCK STREET BOSTON, MA 02115	04-2103580	501(C)(3)	25,000.	0.			MEDSCIENCE PROGRAM
INNOVATE-EDUCATE 263 STAAB STREET SANTA FE, NM 87501	26-3205739	501(C)(3)	25,000.	0.			COLLOQUIUM SERIES ON REDESIGNING THE CURRICULUM
PUBLIC INTEREST PROJECTS 45 WEST 36TH STREET, 6TH FLOOR NEW YORK, NY 10018	13-3191113	501(C)(3)	25,000.	0.			JUST AND FAIR SCHOOLS
THE COLLEGE CRUSADE 134 THURBERS AVENUE, SUITE 111 PROVIDENCE, RI 02905	22-3031765	501(C)(3)	25,000.	0.			READABOUT LITERACY PROGRAM
THOMPSON ISLAND OUTWARD BOUND P.O. BOX 127 BOSTON, MA 02127	04-3027900	501(C)(3)	25,000.	0			CONNECTIONS
NATIONAL CENTER FOR THE IMPROVEMENT OF EDUCATIONAL ASSESSMENT, INC P.O. BOX 351 - DOVER, NH 03821	02-0501917	501(C)(3)	23,000.	.0	,		COMMON CORE AND SCL
BOSTON DAY & EVENING ACADEMY 20 KEARSARGE AVENUE ROXBURY, MA 02119	31-1708923	501(C)(3)	20,000.	0			REAL INSTITUTE
							Schedule I (Form 990)

Schedule I (Form 990)

	()
	rnments and Organizations in the United States (Schedule I (Form 990), Part II.)
	990)
	orm
) (F
	edule
	(Sch
	of Grants and Other Assistance to Governments and Organizations in the United States (Sche
	d St
	Jnite
٠,	the L
, INC.	s in
	ıtion
FOUNDATION,	aniza
ΑT	Org
2	and
Š	ents
z	rnm
OI	зоvе
AT	ce to Governn
崩	ance
囶	ssist
NELLIE MAE EDUCATION FOUNDATION	on of Grants and Other Ass
(A)	g
5	and
NELLI	ants
4	Q.
6	ion
96 LI	inua
Fon	onti
l elle	
chec	Part
ונט	ш

(a) Name and address of (b) EIN (c) IRC organization or government	(b) EIN		section (d) Amount of (e) Amount of cable cash grant non-cash valuation assistance appraisal, other)	(e) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CASTLETON STATE COLLEGE 62 ALUMNI DRIVE CASTLETON, VT 05735	03-0213787	501(C)(3)	20,000.	0.		STUDENT ENRICHMENT PROGRAMS
CASTLETON STATE COLLEGE 62 ALUMNI DRIVE CASTLETON, VT 05735	03-0213787	501(C)(3)	20,000.	0.		STUDENT ENRICHMENT PROGRAMS
NATIONAL CENTER ON EDUCATION AND THE ECONOMY (NCEE) - 2000 PENNSYLVANIA AVENUE, NW, STE, 5300 - WASHINGTON, DC 20006	52-1539258	501(C)(3)	20,000.	0.		BOARD EXAMINATION SYSTEMS PILOT - TECHNICAL ASSISTANCE
NEW HAVEN PUBLIC SCHOOLS 54 MEADOW STREET NEW HAVEN, CT 06510	GOV'T UNIT	PUBLIC SCHOOL	20,000.	0.	:	SCHOOL YEAR DISTRICT-STUDENT CENTERED LEARNING CONSORTIUM
OUR PIECE OF THE PIE, INC. 20-28 SARGEANT STREET HARTFORD, CT 06105	06-0939659	501(C)(3)	20,000.	0		NETWORK OF KEY STAKEHOLDERS AND COMMUNITY OF PRACTICE
RANDOLPH COMMUNITY PARTNERS RANDOLPH HIGH SCHOOL, RM 133, 70 MEMORIAL PARKWAY - RANDOLPH, MA 02368	76-0710382	501(C)(3)	20,000.	0.		RANDOLPH PARTNERSHIP
UNITED WAY OF YORK COUNTY P.O. BOX 727 KENNEBUCK, ME 04043	01-0276862	501(C)(3)	20,000.	0		MSAD PARTNERSHIP PLAN
YOUNG VOICES 150 MILLER AVE PROVIDENCE, RI 02905	43-2103674	501(C)(3)	20,000.	0.		YOUTH AND FAMILY ORGANIZING
PITTSFIELD SCHOOL DISTRICT SAU 51, 23 ONEIDA STREET, UNIT 1 PITTSFIELD, NH 03263	GOV'T UNIT	PUBLIC SCHOOL	19,000.	0.		COMMUNICATION PLAN DEVELOPMENT

Schedule I (Form 990)

Schedule I (Form 990) NELLIE MAE EDUCATION FOUNDATION, INC.

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BIG PICTURE COMPANY 325 PUBLIC STREET PROVIDENCE, RI 02905	05-0485883	501(C)(3)	15,000.	.0			BIG PICTURE PPI - TECHNICAL ASSISTANCE
BURLINGTON SCHOOL DISTRICT 150 COLCHESTER AVENUE BURLINGTON, VT 05401	03-6000410	PUBLIC SCHOOL	15,000.	.0		Ĭ	COMMUNICATIONS PLAN
EDUCATE MAINE 295 WATER STREET, STE, 5 AUGUSTA, ME 04330	20-3559947	501(C)(3)	15,000.	.0		-	HAROLD ALFOND COLLEGE
ESSEX COUNTY COMMUNITY FOUNDATION 175 ANDOVER STREET, STE. 101 DANVERS, MA 01923	04-3407816	501(C)(3)	15,000.	.0			BETTY BELAND GREATER LAWRENCE SUMMER FUND
JOHN F. KENNEDY LIBRARY FOUNDATION COLUMBIA POINT BOSTON, MA 02125	04-6113130	501(C)(3)	15,000.	0			PROFILES OF COURAGE AWARD
MCLEAN HOSPITAL HARVARD GRADUATE SCHOOL OF EDUCATION; 8 STORY STREET, 3RD FLOOR - CAMBRIDGE,	04-2697981	501(C)(3)	15,000.	0.			PEAR CONFERENCE
YALE SCHOOL OF MANAGEMENT P.O. BOX 208200 NEW HAVEN, CT 06520	06-0546973	S01(C)(3)	15,000.	.0			YALE EDUCATION LEADERSHIP MANAGEMENT CONFERENCE
YALE SCHOOL OF MANAGEMENT P.O. BOX 208200 NEW HAVEN, CT 06520	06-0546973	501(C)(3)	15,000.	0			YALE EDUCATION LEADERSHIP
EDUCATION CONNECTION PO BOX 909 LITCHFIELD, CT 06759	06-0842189	501(C)(3)	11,720.	0			A MIXED METHODS EVALUATION OF THE IMPACT OF BLENDED INSTRUCTION MODEL ON UNDERSERVED
							Schedule I (Form 990)

NELLIE MAE EDUCATION FOUNDATION, INC. Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)
E MAE EDUCATION FOUNDATION, INC. 1 Other Assistance to Governments and Organizations in the United States (Schedule I (Fo
E MAE EDUCATION FOUNDATION, INC. 1 Other Assistance to Governments and Organizations in the United States (Sch
E MAE EDUCATION FOUNDATION, INC. 1 Other Assistance to Governments and Organizations in the United
E MAE EDUCATION FOUNDATION, INC. 1 Other Assistance to Governments and Organizations in the
E MAE EDUCATION FOUNDATION, Other Assistance to Governments and Organization
E MAE EDUCATION FOUNDATI
E MAE EDUCATION FOUN
E MAE EDUCATION JOther Assistance to Governm
E MAE EDUCAT
E MAE EL
E MA
141 to 1
NELLI] Prants and
NE) n of Grant
n 990) nuation
e I (Forr
Schedul Part II

					n - 1/000 - 110 - 1 000	·	
(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
WHAT KIDS CAN DO, INC. P.O. BOX 603252 PROVIDENCE, RI 02906	05-0512364	501(C)(3)	11,500.	0.			YOUR BRAIN ON INFORMATION ANIMATED VIDEO
BIG BROTHER BIG SISTER OF MERCER COUNTY - 535 E. PRANKLIN STREET - TRENTON, NJ 08610	06-1653897	501(C)(3)	10,000.	0.			UNITED YOUTH MENTOR LINK
BLUE ENGINE 150 COURT STREET, 2ND FLOOR BROOKLYN, NY 11201	27-1182991	501(C)(3)	10,000.	0.			GENERAL SUPPORT
BOSTON CHINATOWN NEIGHBORHOOD CENTER - 885 WASHINGTON STREET - BOSTON, MA 02111	23-7209691	501(C)(3)	10,000.	0,			ANNUAL NEW YEAR'S BANQUET
BOSTON EDUCATIONAL DEVELOPMENT FOUNDATION - 26 COURT STREET, 6TH FLOOR - BOSTON, MA 02108	22-2514422	501(C)(3)	10,000.	0			BRIDGING THE GAP CONFERENCE
BRYANT UNIVERSITY 1150 DOUGLAS PIKE SMITHPIELD, RI 02917	05-0258810	501(C)(3)	10,000.	0			SCHOLARSHIPS
CATHEDRAL HIGH SCHOOL 74 UNION PARK STREET BOSTON, MA 02118	56-2438574	501(C)(3)	10,000.	0.			ADOPT-A-STUDENT PROGRAM
CATHOLIC SCHOOLS FOUNDATION 260 FRANKLIN STREET, STE. 630 BOSTON, MA 02110	22-2485502	501(C)(3)	10,000.	.0			INNER-CITY SCHOLARSHIP FUND
CONNECTICUT COUNCIL FOR EDUCATION REFORM - 195 CHURCH STREET, 8TH FLOOR - NEW HAVEN, CT 06510	27-4704040	501(C)(3)	10,000.	0.			GREAT EXPECTATIONS: RAISING EDUCATIONAL ACHIEVEMENT
							Schedule I (Form 990)

Schedule I (Form 990)

-	- D	l
0	5	l
		l

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EUGENIO MARIA DE HOSTOS COMMUNITY COLLEGE FOUNDATION - 500 GRAND CONCOURSE - BRONX, NY 10451	13-3116643	501(C)(3)	10,000.	0			HOSTOS FOUNDATION SCHOLARSHIP FUND
EXPLORE SCHOOLS, INC. 20 JAY STREET, STE, 504 BROOKLYN, NY 11201	26-3282250	501(C)(3)	10,000.	ò			GENERAL SUPPORT
HYDE SQUARE TASK FORCE 375 CENTRE STREET JAMAICA PLAIN, MA 02130	04-3118543	501(C)(3)	10,000.	0			ANNUAL HSTF BREAKFAST
INTERNATIONAL DOCUMENT ASSOCIATION 1201 WEST 5TH ST., STE. M270 LOS ANGELES, CA 90017	95-3911227	501(C)(3)	10,000.	0		:	FIRST GENERATION
MAINE PHILANTHROPY CENTER USM GLICKMAN FAMILY LIBRARY, RM 321, P.O. BOX 9301 - PORTLAND, ME 04104	01-0503126	501(C)(3)	10,000.	0			2012 PHILANTHROPY PARTNERS CONFERENCE
MCLEAN HOSPITAL HARVARD GRADUATE SCHOOL OF EDUCATION, 8 STORY STREET, 3RD FLOOR - CAMBRIDGE,	04-2697981	501(C)(3)	10,000.	.0			PEAR CONFERENCE
MORGAN STATE UNIVERSITY FOUNDATION P.O. BOX 64261 BALTIMORE, MD 21264	23-7089143	501(C)(3)	10,000.	0			SCHOOL OF BUSINESS HONORS PROGRAM
MUSEUM OF SCIENCE SCIENCE PARK BOSTON, MA 02114	04-2103916	501(C)(3)	10,000.	0.			THE SCIENCE BEHIND THE STARS
PEOPLE FOR PEOPLE, INC. 800 NORTH BROAD STREET PHILADELPHIA, PA 19130	23-2676655	501(C)(3)	10,000.	0.			MENTORING PROGRAM
							Schedule I (Form 990)

S
~
3
Ŋ
5
7
~
- 1
4
0

	Part II)
	ule I (Form 990), F
	hedule l
	in the United States (Schedule
	United S
N, INC.	s in the
ION,	nizatior
AE EDUCATION FOUNDATION	and Org
N FOU	nments
EDUCATION	ther Assistance to Gover
EDUC	ssistance
	ther As
NELLIE M	rants and C
]	ion of G
l (Form 99(Continuat
Schedule	Part II

	on college			Supplemental	n (600 m) (con	, ,	
(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
RIDER UNIVERSITY 2083 LAWRENCEVILLE ROAD LAWRENCEVILLE, NJ 08648	21-0650678	501(C)(3)	10,000.	0.		-	ASPIRING ACCOUNTING PROFESSIONALS PROGRAM
SOUTH SHORE YMCA 79 CODDINGTON STREET QUINCY, MA 02169	04-2105881	501(C)(3)	10,000.	0.			YOUTH IN GOVERNMENT
STAMFORD PUBLIC EDUCATION FOUNDATION - 62 PALMER HILL ROAD - STAMFORD, CT 06902	06-1462359	501(C)(3)	10,000.	0.			HOPE UNITED
THE MATCH SCHOOL FOUNDATION (MEDIA AND TECHNOLOGY CHARTER HIGH SCHOOL) - 1001 COMMONWEALTH AVENUE - BOSTON, MA 02215	04-3476160	501(C)(3)	10,000.	0.			GENERAL SUPPORT
THE STEPPINGSTONE FOUNDATION 155 FEDERAL STREET, STE. 800 BOSTON, MA 02110	04-3086666	501(C)(3)	10,000.	0.			NPEA CONFERENCE
UNITED WAY OF WESTERN CONNECTICUT 85 WEST STREET DANBURY, CT 00810	06-0646577	501(C)(3)	10,000.	0.			SANDY HOOK SCHOOL SUPPORT FUND
VOICES FOR VERMONT'S CHILDREN P.O. BOX 261 MONTPELIER, VT 05601	22-2611535	501(C)(3)	10,000.	0.			DLSC LEAD COMMUNITY PARTNER
WILLISTON NORTHAMPTON SCHOOL 19 PAYSON AVE EASTHAMPTON, MA 01027	04-1975990	501(c)(3)	10,000.	0.			WILLISTON+
YEAR UP - NEW YORK 55 EXCHANGE PLACE #403 NEW YORK, NY 10005	04-3534407	501(C)(3)	10,000.	0.			GENERAL SUPPORT
							Schedule I (Form 990)

NELLIE MAE EDUCATION FOUNDATION, INC.

Schedu	ile I (Form 990)	NE	04-275
Part II	Continu	nuation of Grants and Other Assistance to Governments and Organizations in the United States (Sched	i (Form 990), Part II.)

				- Consonant		(:)	
(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
YEAR UP-PROVIDENCE 10 DORRANCE STREET, SUITE 1108 PROVIDENCE, RI 02903	04-3534407	501(C)(3)	10,000.	.0			SCHOLARSHIPS
CASTLETON STATE COLLEGE 62 ALUMNI DRIVE CASTLETON, VT 05735	03-0213787	501(C)(3)	9,000,	0.			STUDENT ENRICHMENT PROGRAMS
MOSËS BROWN SCHOOL 25- LLOYD AVENUE PROVIDENCE, RI 02906	05-0393999	501(C)(3)	9,000.	0			ANNUAL FUND
MOUSE, INC. 50 WEST 23RD STREET, STE. 702 NEW YORK, NY 10010	13-3973196	501(C)(3)	9,000.	0			GENERAL SUPPORT
SPRINGFIELD SCHOOL VOLUNTEERS 195 STATE STREET SPRINGFIELD, MA 01102	04-2643527	501(C)(3)	9,000.	0.			SPRINGFIELD RENAISSANCE SCHOOL
WILLISTON NORTHAMPTON SCHOOL 19 PAYSON AVE EASTHAMPTON, MA 01027	04-1975990	501(C)(3)	9,000.	0.			FACULTY DEVELOPMENT FUND
EDITORIAL PROJECTS IN EDUCATION SUITE 100, 6935 ARLINGTON ROAD BETHESDA, MD 20814	53-0246895	501(C)(3)	8,505.	0			POWERING UP SUCCESS
NATICK EDUCATION FOUNDATION P.O. BOX 2221 NATICK, MA 01760	04-3166767	501(C)(3)	8,500.	0			EDUCALTONAL PROGRAMS
THE CENTER FOR THE ARTS IN NATICK 14 SUMMER STREET NATICK, MA 01760	04-3364016	501(C)(3)	8,500.	0			EDUCATIONAL PROGRAMS

Schedule I (Form 990)

INC.	its and Organizations in the United States (Schedule I (Form 990), Part II.)
NELLIE MAE EDUCATION FOUNDATION, INC	on of Grants and Other Assistance to Governments and Organization
Schedule I (Form 990)	Part II Continuation o

(a) Name and address of organization or government	(b) EIN	(c) IRC section If applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BURLINGTON SCHOOL DISTRICT 150 COLCHESTER AVENUE BURLINGTON, VT 05401	03-6000410	PUBLIC SCHOOL	8,160.	0			BACK TO SCHOOL STRATEGY
EDUCATORS FOR SOCIAL RESPONSIBILITY - 23 GARDEN STREET - CAMBRIDGE, MA 02138	04-2764204	501(¢)(3)	8,000.	0			EDUCATIONAL PROGRAMS
AS 220 95 MATHEWSON STREET PROVIDENCE, RI 02903	22-2754566	501(c)(3)	7,500.	.0			HOPE UNITED
HANOVER PERMANENT SCHOLARSHIP FOUNDATION - P.O. BOX 67 - HANOVER, MA 02339	04-2625836	501(c)(3)	7,500.	•0			JENNA A. ATTURIO MEMORIAL SCHOLARSHIP
JFY NETWORKS 44 SCHOOL STREET, SUITE 1010 BOSTON, MA 02109	04-2607239	501(c)(3)	7,500.	0.			JEYNET INNOVATION AWARDS
SOUTH SHORE YMCA 79 CODDINGTON STREET QUINCY, MA 02169	04-2105881	201(c)(3)	.002,7	•0			GIRL POWER
YEAR UP - PROVIDENCE 10 DORRANCE STREET, SUITE 1108 PROVIDENCE, RI 02903	04-3534407	501(¢)(3)	7,500.	•0			SCHOLARSHIPS
EDITORIAL PROJECTS IN EDUCATION SUITE 100, 6935 ARLINGTON ROAD BETHESDA, MD 20814	53-0246895	501(0)(3)	7,495.	.0			LEADERSHIP FORUM
XAVERIAN BROTHERS HIGH SCHOOL 800 CLAPBOARDTREE STREET WESTWOOD, MA 02090	04-2314036	501(C)(3)	6,750.	0.			FUND FOR XAVERIAN
							Schedule I (Form 990)

Schedule I (Form 990)

, INC.	ions in the United States (Schedule I (Form 990), Part II.)
(Form 990) NELLIE MAE EDUCATION FOUNDATION,]	Continuation of Grants and Other Assistance to Governments and Organizations
Schedule I	PartII

(a) Name and address of (b) EIN (c) IRC section organization or government (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (f) Method of (f) Method of (f) Method of (g) assistance (book, FMV, appraisal, other)	(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
COLUMBIA UNIVERSITY 622 WEST 113TH STREET, 3RD FLOOR NEW YORK, NY 10025	13-5598093	501(C)(3)	.000,3	.0			COLUMBIA COLLEGE FUND
MORGAN STATE UNIVERSITY FOUNDATION P.O. BOX 64261 BALTIMORE, MD 21264	23-7089143	501(C)(3)	6,000.	0			GRAVES SCHOOL HONOR'S PROGRAM
NATIONAL COLLEGE ACCESS NETWORK (NCAN) - 1001 CONNECTICUT AVE, NW, SUITE 632 - WASHINGTON, DC 20036	31-1793562	501(C)(3)	6,000.	0			ANNUAL CONFERENCE
THE FOUNDATION CENTER 79 PIFTH AVENUE NEW YORK, NY 10003	13-1837418	501(C)(3)	6,000	.0			GENERAL PROGRAM FUNDING
THE HAYMARKET PEOPLE'S FUND 42 SEAVENS AVENUE BOSTON, MA 02130	04-2586725	501(C)(3)	6,000.	.0			ANTI-RACISM JOURNEY
YEAR-UP - BOSTON 93 SUMMER STREET, 5TH FLOOR BOSTON, MA 02110	04-3534407	501(C)(3)	6,000.	0			GENERAL SUPPORT
BOSTON EDUCATIONAL DEVELOPMENT FOUNDATION - 26 COURT STREET, 6TH FLOOR - BOSTON, MA 02108	22-2514422	501(C)(3)	5,000.	0.			MUNIZ ACADEMY PRINCIPAL'S FUND FOR EDUCATIONAL PURPOSES
BREAKTHROUGH CAMBRIDGE P.O. BOX 381486 CAMBRIDGE, MA 02238	04-3307783	501(C)(3)	5,000.	0.			20TH ANNIVERSARY GALA
CATHOLIC SCHOOLS FOUNDATION 260 FRANKLIN STREET, STE, 630 BOSTON, MA 02110	22-2485502	501(C)(3)	5,000.	0.			INNER-CITY SCHOLARSHIP FUND
							Schedule I (Form 990)

3
N
'n
Ŋ
2
7
7
ı
4
0

INC.	tions in the United States (Schedule I (Form 990), Part II.)
AE EDUCATION FOUNDATION,	rnments and Organization
E EDUCATION	Assistance to Goverr
NELLIE MAE	f Grants and Other
Schedule I (Form 990)	Part II Continuation o

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CATHOLIC SCHOOLS FOUNDATION 260 FRANKLIN STREET, STE. 630 BOSTON, MA 02110	22-2485502	501(C)(3)	.000,2	0.			INNER-CITY SCHOLARSHIP
CITIZENS SCHOOL MUSEUM WHARF, 308 CONGRESS STREET BOSTON, MA 02210	04-3259160	501(C)(3)	5,000.	0.			A WOW AFFAIR
COLLEGE BOUND DORCHESTER 18 SAMOSET STREET DORCHESTER, MA 02124	04-2383512	501(C)(3)	5,000.	0			WE ARE COLLEGE BOUND
COMMUNITY LEARNING CENTER 19 BROOKLINE STREET CAMBRIDGE, MA 02139	04-3148659	501(C)(3)	5,000.	0			BRIDGE TO COLLEGE PROGRAM
CONNECTICUT APPLESEED CENTER FOR LAW & JUSTICE, INC 25 DUDLEY ROAD - WILTON, CT 06897	06-1501061	501(C)(3)	5,000.	0.			CONNECTING THROUGH LITERACY INCARCERATED PARENTS, CHILDREN AND CAREGIVERS (CLICC)
CONNECTICUT COUNCIL FOR PHILANTHROPY - 221 MAIN STREET - HARTFORD, CT 06106	23-7024016	501(C)(3)	5,000.	0.			CT PHILANTHROPY SUMMIT
CTE, INC. 34 WOODLAND AVENUE STAMFORD, CT 06902	06-0797967	501(C)(3)	5,000.	.0			CULTURAL FINE ART AND LITERACY PROGRAM
GIRLS SCOUTS OF EASTERN MASSACHUSETTS - 95 BERKELEY STREET - BOSTON, MA 02116	04-2703281	501(C)(3)	5,000.	0			LEADING WOMEN AWARDS
GRANITE STATE ORGANIZING PROJECT 383 BEECH STREET MANCHESTER, NH 03101	47-0873896	501(C)(3)	5,000.	o			PROFESSIONAL DEVELOPMENT SERIES
-							Schedule I (Form 990)

1	
1	•
ı	
ı	~
i	۳.
Ļ	1

Schedule I (Form 990) NELLIE MAE EDUCATION FOUNDATION, INC.	E EDUCATION	ON FOUNDATION,	ON, INC.	nited States (Sche	dula I (Form 990) Par		04-2755323 Page 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
HARTFORD KNIGHTS CORP. CT PARENT'S UNION, P.O. BOX 3004 MERIDEN, CT 06451	83-0368833	501(C)(3)	2,000.	0.			THE PARENT EXPRESS BUS/TIS THE SEASON TO BE READING
INTERNATIONAL INSTITUTE OF NEW ENGLAND (BOSTON) - ONE MILK STREET - BOSTON, MA 02109	04-2104325	501(C)(3)	5,000.	.0			WORKFORCE DEVELOPMENT, HONORING JEANNE SHAHEEN
KIDS CONNECT, INC. 43 MAIN STREET NATICK, MA 01760	04-3459158	501(C)(3)	5,000.	0.0			LEARNING TO SUCCEED
LET'S GET READY 89 SOUTH STREET BOSTON, MA 02111	31-1698832	501(C)(3)	5,000	0.			LET'S GET READY EVENT
MAINE DEVELOPMENT FOUNDATION 295 WATER STREET, STE. 5 AUGUSTA, ME 04330	01-0355563	501(C)(3)	.000,2	0	,		ANNUAL MEETING
MASSACHUSETTS ASSOCIATION FOR BILINGUAL EDUCATION (MABE) - 15 MILFORD STREET - HULL, MA 02045	04-2879833	501(C)(3)	5,000.	° o			SOUTHERN NEW ENGLAND CONFERENCE
MASSACHUSETTS WORKFORCE BOARD ASSOCIATION - 40 COURT STREET, 11TH FLOOR - BOSTON, MA 02108	04-3345830	501(C)(3)	5,000.	0.			JOBS AND WORKFORCE SUMMIT
MAYOR'S OFFICE OF NEW BOSTONIANS - CITY OF BOSTON - C/O BOSTON ADULT LITERACY FUND, 1 MILK STREET - BOSTON, MA 02108	GOV'T UNIT	GOVT AGENCY	2,000,2	•0			WE ARE BOSTON 2012
NATIONAL COLLEGE TRANSITION NETWORK/WORLD EDUCATION - LEARNING FORWARD, 504 S. LOCUST STREET - OXFORD, OH 45056	13-1804349	501(C)(3)	.000,2	.0			LEARNING FORWARD CONFERENCE
		!					Schedule I (Form 990)

(a) Name and address of (b) EIN (c) IRC section organization or government (a) Amount of (b) Amount of (c) IRC section organization or government (d) Amount of (e) Amount of (f) Method of (g) (f) Method of (g) (g) Amount of (e) Amount of (e) Amount of (f) Method of (g) (f) Method of (g) (g) (g) (g) (g) (g) (g) (g) (g) (g)	(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
NEW ENGLAND BOARD OF HIGHER EDUCATION (NEBHE) - 45 TEMPLE PLACE - BOSTON, MA 02109	04-2207418	501(C)(3)	5,000.	0.			2012 EXCELLENCE AWARDS DINNER
NEW ENGLAND EDUCATIONAL OPPORTUNITY ASSOCIATION (NEOA) / BOSTON UNIVERSITY - 31 ST. JAMES AVENUE - BOSTON, MA 02116	22-2589628	501(C)(3)	5,000.	0			NEOA ANNUAL CONFERENCE
SCOTTY MONTEIRO JR FOUNDATION 154 SWIFT BEACH ROAD WAREHAM, MA 02571	45-4167522	501(C)(3)	5,000.	0			ANTI-BULLING EDUCATION
SIMMONS COLLEGE 300 THE FENWAY BOSTON, MA 02115	04-2103629	501(C)(3)	5,000.	0.			ELL - TEACHER TRAINING
STAMFORD FUBLIC SCHOOLS 888 WASHINGTON STREET, P.O. BOX 93. STAMFORD, CT 00904	GOV'T UNIT	PUBLIC SCHOOL	5,000.	0.			RITES OF PASSAGE PROGRAM
THE POSSE FOUNDATION 45 FRANKLIN ST., 3RD FLOOR BOSTON, MA 02110	13-3840394	501(C)(3)	5,000.	.0			THE POWER OF 10
UNITED WAY OF MASSACHUSETTS BAY 51 SLEEPER STREET BOSTON, MA 02210	04-2382233	501(C)(3)	.000,2	.0			COMMUNITY AMBASSADOR PROGRAM
VERGENNES UNION HIGH SCHOOL ADDISON NORTHWEST SUPERVISORY UNION, 48 GREEN STREET - VERGENNES, VT 05491	GOV'T UNIT	PUBLIC SCHOOL	5,000.	0			STUDENTS A& TEACHERS UNDERSTANDING & DESIGNING INIDVIDUAL OPTIONS (STUDIO)
WORLD EDUCATION / NATIONAL STAFF DEVELOPMENT CENTER - 44 FARNSWORTH STREET - BOSTON, MA 02210	13-1804349	501(C)(3)	5,000.	0			NATIONAL COLLEGE TRANSITION NETWORK
							Schedule I (Form 990)

04 - 2755323

Schedule I (Form 990) (2012)

NELLIE MAE EDUCATION FOUNDATION, INC.

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

Part III Gan be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
			•		
Part IV Supplemental Information. Complete this part to provide th	ide the informatio	n required in Part I,	line 2, Part III, columi	e information required in Part I, line 2, Part III, column (b), and any other additional information.	ormation.
SCHEDULE I, PART I, LINE 2: AS PART	RT OF THE	GRANT	AGREEMENT, THE	E GRANTEE IS	
REQUIRED TO SUBMIT A PROGRESS REPORT	ORT AND A	FINAL REPORT	ORT TO THE	FOUNDATION.	
DEPENDING ON THE SIZE AND COMPLEXITY	ITY OF THE	GRANT,	THE GRANTEE	GRANTEE WOULD SUBMIT	
A NARRATIVE AND BUDGET SPENT TO DA	DATE WITH	THE PROGRESS	AND	FINAL REPORTS.	
THE REPORTS INCLUDE NARRATIVES TO	REPORT	QUESTIONS I	INCLUDING T	THE MEASURABLE	
PROGRESS OF THE ORIGINAL GOALS AND	OBJECTIVES	OF	THE GRANT.		

PART II, LINE 1, COLUMN (H):

NAME OF ORGANIZATION OR GOVERNMENT: AMERICAN INSTITUTES FOR RESEARCH 232102 12-18-12

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.

Part IV, line 23.

Attach to Form 990.

See separate instructions.

2012

Open to Public Inspection

Schedule J (Form 990) 2012

Internal Revenue Service

Name of the organization

Department of the Treasury

Pricedition of the book process and the

NELLIE MAE EDUCATION FOUNDATION.

Employer identification number 04-2755323

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

-232111 42 40 43

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

04 - 2755323

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

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

Note. The sum of columns (B)(1)-(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.

(i) Base			-			
compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(Q)·(i)(g)	reported as deferred in prior Form 990 °.
355,563.	0	0	38,987.	21,162.	415,712.	0.
4	0	0	0	0	0	0
183,364		0	29,351.	2,078.	214,793.	0.
	0	0		0	0	0
199,	.0	0.	33,000.	21,162.	253,619.	0.
	0	0	• 0	0		0
(i) 142,164		0	22,066.	21,162.	185,392.	0.
		0	0	Ì		0
123,03		0	18,011.	4	٦.	0
		0	1	ı	- 1	0
(1) 116,984		0	٦,	21,162.	٦.	0.
	0	0	0	0	0	0
(0)						
(ii)						
(9)						
(ii)						
(9)						
(ii)						
(9)						
(ii)						
0						
(ii)						
(9)						
(ii)						
(9)	,					
(ii)						
(ii)						
(ii)						
(ii)						
	183,364 0 199,457 0 142,164 0 123,034 116,984	364. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0	364. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0	, 364. 0. 0. 29,35 0. 0. 0. 33,00 0. 0. 0. 0. 22,06 0. 0. 0. 0. 18,01 0. 0. 0. 0. 0. 17,10 0. 0. 0. 0. 0. 17,10 0. 0. 0. 0. 0. 0. 17,10 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0	364. 0. 0. 29,351. 2,00. 0. 0. 0. 0. 21,00. 0. 0. 0. 0. 0. 164. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.	364 0 0 0 0 0 0 0 0 0

Schedule J (Form 990) 2012

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2012
Open to Public Inspection

Name of the organization

NELLIE MAE EDUCATION FOUNDATION, INC.

Employer identification number 04-2755323

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
EDUCATIONAL ORGANIZATIONS.
·
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
ESSENTIALLY UNDERSERVED LEARNERS - TO OBTAIN THE SKILLS, KNOWLEDGE AND
SUPPORTS NECESSARY TO BECOME CIVICALLY ENGAGED, ECONOMICALLY
SELF-SUFFICIENT LIFE-LONG LEARNERS.
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:
LEARNING HAPPENS THROUGH EXPERIENCES BEYOND SCHOOL WALLS; STUDENTS ARE
ENGAGED IN AUTHENTIC TASKS THAT INCORPORATE NEW BASIC SKILLS; AND
PROGRESS IS BASED ON ACTUAL MASTERY, NOT AGE, CREDITS OR HOURS ON A
TASK. THE FOUNDATION IS CURRENTLY FOCUSING ITS INVESTMENTS ON
INFLUENCING STATE AND FEDERAL POLICIES THAT SUPPORT STUDENT-CENTERED
LEARNING AT SCALE; GROWING PUBLIC UNDERSTANDING AND DEMAND FOR
STUDENT-CENTERED APPROACHES; BUILDING A STRONG KNOWLEDGE BASE TO INFORM
OUR WORK THROUGH RESEARCH AND EVALUATION; AND SUPPORTING THE
IMPLEMENTATION OF STUDENT-CENTERED APPROACHES IN SCHOOLS AND DISTRICTS
THROUGHOUT THE NEW ENGLAND REGION.
ro stil
WE AWARD GRANTS PRIMARILY THROUGH OUR FOUR STRATEGIC INITIATIVES:
DISTRICT LEVEL SYSTEMS CHANGE - WHICH INCLUDES THE PROMOTION AND
INTEGRATION OF STUDENT-CENTERED APPROACHES, AS WELL AS POLICY AND
ADVOCACY WORK AT THE DISTRICT LEVEL. THE OBJECTIVE IS TO PROMOTE
STUDENT-CENTERED APPROACHES TO TEACHING, LEARNING AND ASSESSMENT AS
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2012)

Name of the organization **Employer identification number** NELLIE MAE EDUCATION FOUNDATION, INC. 04-2755323 CORE COMPONENTS OF PUBLIC EDUCATION AT THE DISTRICT LEVEL ACROSS THE REGION. WE WORK TO REDUCE POLICY BARRIERS TO INTEGRATING AND TESTING RIGOROUS, STUDENT-CENTERED LEARNING APPROACHES. WE SUPPORT ADVOCACY: TO GROW THE CAPACITY OF STUDENTS, PARENTS, EDUCATORS AND OTHER STAKEHOLDERS WITHIN DISTRICTS AND COMMUNITIES TO WORK TOGETHER TO DEMAND, IMPLEMENT, AND SUSTAIN STUDENT-CENTERED LEARNING APPROACHES AT THE DISTRICT LEVEL ACROSS THE REGION. STATE LEVEL SYSTEMS CHANGE - FOCUSES ON PROMOTING STATE AND FEDERAL EDUCATION POLICIES THAT SUPPORT STUDENT-CENTERED LEARNING AT SCALE. BUILD AND STRENGTHEN STATE AND REGIONAL COALITIONS AND THEIR CAPACITY TO ADVOCATE FOR POLICY CHANGES PROMOTING STUDENT-CENTERED LEARNING, INCREASING EQUITY, AND REMOVING BARRIERS TO INNOVATION AND BUILD CAPACITY OF GROUPS TO PROMOTE THESE CHANGES ON THE FEDERAL LEVEL. RESEARCH AND DEVELOPMENT - REFLECTS OUR COMMITMENT TO BUILDING AND DEEPENING KNOWLEDGE REGARDING THE WORK OF TRANSFORMING EDUCATION. SUPPORT PROJECTS THAT GATHER AND SYNTHESIZE KNOWLEDGE REGARDING STUDENT-CENTERED APPROACHES, DEVELOP NEW KNOWLEDGE IN EMERGING AREAS_OF PRACTICE, SYSTEMS CHANGE, POLICY AND COMMUNITY ENGAGEMENT THROUGH RESEARCH AND EVALUATION, AND IDENTIFICATION OF NEEDED TOOLS. PUBLIC UNDERSTANDING - FOCUS ON INCREASED AWARENESS OF STUDENT-CENTERED LEARNING APPROACHES AND THE PUBLIC WILL TO IMPLEMENT THEM. PROVIDE SUPPORT TO EDUCATION COMMUNITIES, TRANSFORM PUBLIC PERCEPTIONS AND

FORM 990, PART VI, SECTION B, LINE 11: REVIEW OF FORM 990 - MANAGEMENT OF Schedule O (Form 990 or 990-EZ) (2012)

EXPECTATIONS OF SCHOOLING AND GROW DEMAND FOR CHANGES.

Name of the organization

NELLIE MAE EDUCATION FOUNDATION, INC.

Employer identification number 04-2755323

THE FOUNDATION PLAYED AN ACTIVE AND KEY ROLE IN THE PREPARATION AND REVIEW
OF FORM 990. MANAGEMENT DRAFTED THE FORM 990 AND FORWARDED TO THE
FOUNDATION'S INDEPENDENT CPA FIRM, WHICH REVIEWED THE FILING FOR
COMPLETENESS, ACCURACY, AND FINALIZATION BEFORE FILING. THE FORM 990 WAS
REVIEWED AND APPROVED BY THE AUDIT COMMITTEE AND WAS PROVIDED TO THE FULL
BOARD BEFORE IT WAS FILED.

FORM 990, PART VI, SECTION B, LINE 12C: THE FOUNDATION'S CONFLICT OF INTEREST POLICY REQUIRES AN ANNUAL CONFLICT OF INTEREST DISCLOSURE FORM FROM BOARD AND STAFF MEMBERS REGARDING OUTSIDE AFFILIATIONS AS A DIRECTOR, TRUSTEE OR OFFICER. THE POLICY REQUIRES DISCLOSURE OF ANY TRANSACTIONS, FINANCIAL ARRANGEMENT OR BUSINESS RELATIONSHIP EACH BOARD MEMBER, STAFF MEMBER AND OR FAMILY MEMBER MAY HAVE WITH THE FOUNDATION. ANY EMPLOYMENT, ENGAGEMENT, OR FINANCIAL ARRANGEMENT BY THE FOUNDATION WITH A DIRECTOR, STAFF, OFFICER OR MEMBER OF HIS/HER IMMEDIATE FAMILY IS PROHIBITED. UPON SUBMISSION OF THE CONFLICT DISCLOSURE FORM, A LISTING OF EACH BOARD AND STAFF MEMBER IS COMPILED ALONG WITH AFFILIATIONS. THE LIST IS MONITORED DURING THE YEAR FOR ANY UPDATES. BOARD MEMBERS ARE REQUIRED TO RECUSE THEMSELVES FROM VOTING ON TRANSACTIONS IN WHICH THE INDIVIDUAL OR A MEMBER OF HIS OR HER IMMEDIATE FAMILY OR AN AFFILIATED ENTITY OF ANY SUCH PERSON HAS A FINANCIAL INTEREST. STAFF MEMBERS ARE REQUIRED TO RECUSE THEMSELVES FROM THE GRANT MAKING PROCESS IF ANY SUCH AFFILIATION EXISTS. ANY POTENTIAL CONFLICTS ARE DETERMINED BY THE BOARD WHICH WILL IMPOSE RESTRICTIONS UPON AFFECTED PARTIES ACCORDINGLY.

FORM 990, PART VI, SECTION B, LINE 15: THE EXECUTIVE FINANCE COMMITTEE OF
THE BOARD OF DIRECTORS CONSIDERS COMPARABILITY DATA, PROVIDED BY AN

INDEPENDENT CONSULTANT, WHEN DETERMINING COMPENSATION FOR STAFF MEMBERS AND

232212
01-04-13
Schedule O (Form 990 or 990-EZ) (2012)

Schedule O (Form 990 or 990-EZ) (2012)	Page 2
Name of the organization NELLIE MAE EDUCATION FOUNDATION, INC.	Employer identification number 04-2755323
THE BOARD OF DIRECTORS. DOCUMENTATION INCLUDING THE RELIED UPON	
COMPARABILITY DATA, DELIBERATION PROCESS, AND DECISIONS A	RE INCLUDED IN
BOARD MATERIALS AND ARE RECORDED IN COMMITTEE AND BOARD MINUTES. IN ALL	
CASES, COMPENSATION IS DETERMINED BY INDEPENDENT PERSONS. THIS PROCESS WAS	
MOST RECENTLY UNDERTAKEN IN 2012.	
•	
FORM 990, PART VI, SECTION C, LINE 19: MANAGEMENT WILL PR	OVIDE UPON
REQUEST GOVERNING DOCUMENTS AND THE CONFLICT OF INTEREST POLICY TO THE	
PUBLIC. CURRENTLY THE FOUNDATION'S AUDITED FINANCIAL STAT	EMENTS AND TAX
RETURNS APPEAR ON THE ORGANIZATION'S WEBSITE AND ARE AVAI	LABLE UPON
REQUEST.	