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# Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements.

		t of the Treasury venue Service Note. The foundation may	l reated as a Privat be able to use a copy of this	return to satis	<b>ition</b> sfy state repo	rting requirements.	Open to public Inspection
		dar year 2012 or tax year beginning		, and er			
Name of foundation A Employer identification number						number	
E	NV:	ISIONEXCELLENCE IN S	TEM				
E	DU	CATION, INC.				20-8622102	
Num	ber a	nd street (or P O box number if mail is not delivered to street	address)		Room/suite	B Telephone number	
2108 LAMBERTON ROAD 443-421-107				76			
-		own, state, and ZIP code				C If exemption application is per	nding, check here
		VELAND HEIGHTS, OH 441					
G C	heck	all that apply: Initial return	Initial return of a fo	ormer public c	harity	D 1. Foreign organizations,	check here
		Final return	Amended return			2. Foreign organizations meet	ting the 85% test
_	<del>.</del>	X Address change	Name change			Foreign organizations meet check here and attach com	putation
H_C	_	type of organization: X Section 501(c)(3) ex				E If private foundation statu	
<u> </u>			Other taxable private founda			under section 507(b)(1)(i	A), check here
		arket value of all assets at end of year J Account	•	Accr	uai	F If the foundation is in a 60	
•	от <i>г</i> :\$	Part II, col. (c), line 16)	her (specify)	hasis )		under section 507(b)(1)(l	B), check here $\blacktriangleright$ X
	rt I	Analysis of Revenue and Expenses			voctment	(a) Adjusted not	(d) Disbursements
1 0		(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net ind		(c) Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	260,500.				(odd) Dabio diny)
	2	Check if the foundation is not required to attach Sch B	200,000.				
	3	Interest on savings and temporary cash investments					
	4	Dividends and interest from securities					
	5a	Gross rents					
	b	Net rental income or (loss)					
40	6a	Net gain or (loss) from sale of assets not on line 10					
ň	b	Gross sales price for all assets on line 6a					
Revenue	7	Capital gain net income (from Part IV, line 2)			0.		
<b>Œ</b>	8	Net short-term capital gain				0.	
	9	Income modifications					
	10a	Gross sales less returns and allowances	WED				
		Less Cost of goods sold	18				
		Gross profit or (loss)	1 9 2013   0				
	11	Other income  Total, Add lines 1 through 11	260,500.		0.	0.	
	12				0.	0.	22,686.
	13 14	Other employee salaries and wages	UEN 22,686.				22,000.
	15	Pension plans, employee benefits			<del>-</del>		
es		Legal fees					
ens		Accounting fees STMT 1	9,500.		0.	0.	9,500.
ន្ត		Other professional fees					
ě	17	Interest					
rati	18	Taxes					
nist	19	Depreciation and depletion					
Ē	20	Occupancy					<del>-</del>
ĕ	21	Travel, conferences, and meetings	33,824.		0.	0.	33,824.
and	22	Printing and publications .					<del></del>
Operating and Administrative Expenses	23	Other expenses STMT 2	170,185.		0.	0.	170,185.
rati	24	Total operating and administrative	006 40-		•		006 405
Dee		expenses. Add lines 13 through 23	236,195.	<u> </u>	0.	0.	236,195.
	25	Contributions, gifts, grants paid	0.			<del> </del> -	0.
;	26	Total expenses and disbursements.	226 105		0.	0.	236,195.
:	07	Add lines 24 and 25 Subtract line 26 from line 12:	236,195.		<u> </u>	- 0.	430,133.
· }			24,305.				
		Excess of revenue over expenses and disbursements  Net investment income (if negative, enter -0-)	24,303.		0.	<del>                                     </del>	
		Adjusted net income (if negative, enter -0-)				0.	
22350	)1 -12	LHA For Paperwork Reduction Act Notice, see	instructions.		<del></del>	·	Form <b>990-PF</b> (2012)

## **Analysis of Changes in Net Assets or Fund Balances**

29 Retained earnings, accumulated income, endowment, or other funds

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 3	0	
(must agree with end-of-year figure reported on prior year's return)	1	25,818.
2 Enter amount from Part I, line 27a	2	24,305.
3 Other increases not included in line 2 (itemize)	3	0.
4 Add lines 1, 2, and 3	. 4	50,123.
5 Decreases not included in line 2 (itemize) ▶	5	0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, col	ımn (b), line 30	50,123

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25,818.

25,818.

25,818.

30 Total net assets or fund balances

31 Total liabilities and net assets/fund balances

50,123

50,123

50,123

(a) List and des	and Losses for Tax on cribe the kind(s) of property sold (e varehouse; or common stock, 200 s	.g., real estate,	Income	(b) How acquired P - Purchase D - Donation	(c) Date ac (mo., day	quired , yr.)	(d) Date sold (mo., day, yr.)	
1a	<del></del>							
	ONE							
d d			<del></del>					
e								
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale		(h) Gain (e) plus (f	or (loss) f) minus (		
<u>a</u>								
<u>b</u>			<u> </u>	<del></del> -			<u> </u>	
d								
<u>e</u>	<u> </u>							
Complete only for assets show	ing gain in column (h) and owned b	1	<del></del>		(I) Gains (Col. col. (k), but not	. (h) gain i	minus	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (1) col. (1), if any	Ì	Losses (fr	om col. (t	1))	
<u>a</u>			<i>(,,,</i> - 3		•			
b								
<u>c</u>	<u> </u>							
<u>d</u>			<del>-</del>	<del></del>				
<u>e</u>	C If goin plan and	tor in Dort I line	<del></del>	<del></del>			<del></del>	
2 Capital gain net income or (net o	$\{f \text{ gain, also ent} \ \{f \text{ (loss), enter} \}$	er in Part I, line -0- in Part I, line	<i>i</i> 7	) 2				
3 Net short-term capital gain or (lo	•			7				
If gain, also enter in Part I, line 8	, column (c).	(-/-		}				
If (loss), enter -0- in Part I, line 8  Part V Qualification I	<sub>}</sub> Jnder Section 4940(e) fo	r Reduced	Tay on Net	3     Investment Ir	ncome			
If section 4940(d)(2) applies, leave  Was the foundation liable for the se  If "Yes," the foundation does not qual  Enter the appropriate amount in	ction 4942 tax on the distributable a	complete this pa	rt.				Yes X No	
(a) Base period years	(b)			(c)		Distribi	(d) ution ratio	
Calendar year (or tax year beginn			Net value of no	oncharitable-use asse	100	(col. (b) divided by col. (c))		
2011		58,866.	<del></del>	56,24			4.602717	
2010		69,194. 67,125.		8,03 89,49			21.064990 6.337300	
2008		24,443.		132,52			3.957373	
2007		0.			0.		.000000	
2 Total of line 1, column (d)					2		35.962380	
3 Average distribution ratio for the the foundation has been in exist.	•	al on line 2 by 5,	or by the number	of years	3		7.192476	
4 Enter the net value of noncharita	ble-use assets for 2012 from Part >	(, line 5			4		65,038.	
5 Multiply line 4 by line 3					5		467,784.	
6 Enter 1% of net investment inco	me (1% of Part I, line 27b)				6	<del></del>	0.	
7 Add lines 5 and 6					7		467,784.	
8 Enter qualifying distributions fro		4b3	lata dhek ee s		8		236,195.	
See the Part VI instructions.	In line 7, check the box in Part VI, lir	ie iu, and comp	nete that part usin	ıy a 1% tax rate.				

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Form	990-PF (2012) EDUCATION, INC.	20-	8622	102		Page 4
	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4					
	Exempt operating foundations described in section 4940(d)(2), check here  and enter "N/A" on line 1.		,			
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	1				0.
	of Part I, line 27b	•				
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).					
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				0.
3	Add lines 1 and 2	3				0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5				0.
6	Credits/Payments:					
a	2012 estimated tax payments and 2011 overpayment credited to 2012 6a					
b	Exempt foreign organizations - tax withheld at source 6b					
C	Tax paid with application for extension of time to file (Form 8868)  6c					
d	Backup withholding erroneously withheld 6d					
	Total credits and payments. Add lines 6a through 6d	7	ļ			0.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9				0.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10_				
	Enter the amount of line 10 to be: Credited to 2013 estimated tax					
	rt VII-A Statements Regarding Activities				Yes	No
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	ın		4.	163	$\overline{}$
L	any political campaign?			1a 1b		X
D	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?  If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published.	dor		10		
	distributed by the foundation in connection with the activities.	u oi				
	Did the foundation file Form 1120-POL for this year?			1c		х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			-10		
u	(1) On the foundation. > \$ 0. (2) On foundation managers. > \$ 0.					
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
·	managers. ►\$ 0.					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		х
	If "Yes," attach a detailed description of the activities.					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, o	r				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N	/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X
	If "Yes," attach the statement required by General Instruction T.					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
	By language in the governing instrument, or					
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state	law			v	
_	remain in the governing instrument?			6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year?			7	Λ	
0-	If "Yes," complete Part II, col. (c), and Part XV.					
ъ	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	OH, MD  If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			'		
D	of each state as required by General Instruction G? If "No," attach explanation			8b	х	!
a	Is the foundation claiming status as a private operating foundation within the meaning of section $4942(j)(3)$ or $4942(j)(5)$ for cale	ndar				<u> </u>
•	year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," complete Part XIV			9	X	
10		TMT	3_	10	Х	
				n <b>99</b> 0	-PF	2012)

4a

X

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

had not been removed from jeopardy before the first day of the tax year beginning in 2012?

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

_		_			i
<del>_</del> 2	Compensation of five highest-paid employees (other than those in	 ncluded on line 1). If none	enter "NONE."		L
_	(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, othe allowances
_	NONE	_			
		-			
_					-
_					
_	000 000	<u> </u>	1		
- 10	otal number of other employees paid over \$50,000				

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All other program-related investments. See instructions.

Total. Add lines 1 through 3

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P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations, s	ee instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	0.
	Average of monthly cash balances	1b	66,028.
	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	66,028.
	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	66,028.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	990.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	65,038.
6	Minimum investment return. Enter 5% of line 5	6	3,252.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here X and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	
2a	Tax on investment income for 2012 from Part VI, line 5		
b	Income tax for 2012. (This does not include the tax from Part VI.)		
c	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	, , , , , , , , , , , , , , , , , , , ,	1a	<u>236,195.</u>
b	Program-related investments - total from Part IX-B	1b	<u> </u>
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	<del> </del>
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	236,195.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	236,195.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	qualifies for t	he section
	4940(e) reduction of tax in those years.		

Part XIII Undistributed Income (se	ee instructions)	N/A		
	(a)	(b)	(c)	(d)
	Corpus	Years prior to 2011	2011	2012
1 Distributable amount for 2012 from Part XI,			· ·	
line 7				
2 Undistributed income, if any, as of the end of 2012				
a Enter amount for 2011 only				
ь Total for prior years:				
3 Excess distributions carryover, if any, to 2012:				
a From 2007				
<b>b</b> From 2008				
c From 2009				
d From 2010		i		
e From 2011				
f Total of lines 3a through e  4 Qualifying distributions for 2012 from				
Part XII, line 4: ► \$				
b Applied to undistributed income of prior				<del></del>
years (Election required - see instructions)				
c Treated as distributions out of corpus				
(Election required - see instructions)				
d Applied to 2012 distributable amount				
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2012			-	
(If an amount appears in column (d), the same amount	<del></del>			
must be shown in column (a) )				
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5				
<b>b</b> Prior years' undistributed income. Subtract				-
line 4b from line 2b				
c Enter the amount of prior years'				
undistributed income for which a notice of				
deficiency has been issued, or on which the section 4942(a) tax has been previously				
assessed				
d Subtract line 6c from line 6b. Taxable				
amount - see instructions				
e Undistributed income for 2011. Subtract line				
4a from line 2a. Taxable amount - see instr.				
f Undistributed income for 2012. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2013				
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by		1		
section 170(b)(1)(F) or 4942(g)(3)		<u> </u>		
8 Excess distributions carryover from 2007				
not applied on line 5 or line 7				
9 Excess distributions carryover to 2013.		]		
Subtract lines 7 and 8 from line 6a				<del> </del>
10 Analysis of line 9:				
a Excess from 2008		1		
b Excess from 2009				
c Excess from 2010 d Excess from 2011				
e Excess from 2012				
E LAUGSS HUITI ZU IZ				5 000 PE (2010)

Pa	art XIV Private Opera	ating Fo	<b>oundations</b> (see ins	tructions and Part VII-	A, question 9)						
1 8	1 a If the foundation has received a ruling or determination letter that it is a private operating										
	foundation, and the ruling is effective for 2012, enter the date of the ruling										
ı	b Check box to indicate whether the foundation is a private operating foundation described in section X 4942(j)(3) or 4942(j)(5)										
2 8	a Enter the lesser of the adjusted	i net [	Tax year		Prior 3 years						
	income from Part I or the minir	mum [	(a) 2012	(b) 2011	(c) 2010	(d) 2009	(e) Total				
	investment return from Part X	for									
	each year listed		0.	0.	0.	0.	0.				
ł	<b>b</b> 85% of line 2a	[	0.	0.	0.	0.	0.				
(	c Qualifying distributions from Pa	art XII,									
	line 4 for each year listed	ļ	236,195.	258,866.	169,194.	567,125.	1,231,380.				
(	d Amounts included in line 2c no	ot									
	used directly for active conduc	ct of									
	exempt activities .	ļ	0.	0.	0.	0.	0.				
(	e Qualifying distributions made of	directly									
	for active conduct of exempt a	ctivities.									
_	Subtract line 2d from line 2c	ļ	236,195.	258,866.	169,194.	567,125.	1,231,380.				
3	Complete 3a, b, or c for the alternative test relied upon:										
	a "Assets" alternative test - enter:	:									
	(1) Value of all assets	ļ					0.				
	(2) Value of assets qualifying						_				
	under section 4942(j)(3)(E						0.				
١	b "Endowment" alternative test - 0 2/3 of minimum investment ret										
	shown in Part X, line 6 for each		0 160	1 075	200	2 002	7 204				
	listed		2,168.	1,875.	268.	2,983.	7,294.				
•	c "Support" alternative test - ente	i i									
	(1) Total support other than g investment income (intere										
	dividends, rents, payment										
	securities loans (section						0.				
	512(a)(5)), or royalties) (2) Support from general pub	امار					0.				
	and 5 or more exempt										
	organizations as provided section 4942(j)(3)(B)(iii)	l in					0.				
	(3) Largest amount of suppor	rt from	.=								
	an exempt organization						0.				
	(4) Gross investment income						0.				
Pi	art XV   Supplementa	ry Info	rmation (Complet	te this part only i	f the foundation	had \$5,000 or mo					
	at any time di	uring tl	he year-see instr	uctions.)		-					
1	Information Regarding Fo	oundation	n Managers:			<u> </u>					
;	a List any managers of the found		_	han 2% of the total contr	butions received by the f	oundation before the clos	se of any tax				
	year (but only if they have cont	tributed m	iore than \$5,000). (See se	ection 507(d)(2).)							
NC	ONE				· · · · · · · · · · · · · · · · · · ·						
1	b List any managers of the found				or an equally large portion	of the ownership of a pa	artnership or				
	other entity) of which the found	dation has	s a 10% or greater interes	t.							
<u>NC</u>	ONE										
2	Information Regarding Co			•	_						
	Check here ► X if the fou										
	the foundation makes gifts, gra		<u> </u>	· <del></del>	· · · · · · · · · · · · · · · · · · ·	npiete items 2a, b, c, and	1 0.				
	a The name, address, and teleph	none numb	per or e-mail of the persor	n to whom applications sl	hould be addressed:						
ا	<b>b</b> The form in which applications	s should b	e submitted and informati	ion and materials they sh	ould include:						
	A			<del></del>							
(	c Any submission deadlines:										
	d Any restrictions or limitations (	on awards	s, such as by geographical	l areas, charitable fields. I	kınds of institutions, or ot	ther factors:					
,	a range realitions of minimatorio		,	,	, 9. 9.	•					

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation status of recipient Purpose of grant or contribution show any relationship to **Amount** any foundation manager or substantial contributor Name and address (home or business) a Paid during the year NONE ➤ 3a Total **b** Approved for future payment NONE Total

# Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated b	usiness income		fed by section 512, 513, or 514	(e)
	(a) Business	(b) Amount	(C) Exclu- sion	(d)	Related or exempt function income
1 Program service revenue:	code	Amount	code	Amount	- Iulicuoli ilicolne
a					
b	l l		<del> </del>		
C			<del>                                     </del>		
d	-		<del>  -  </del>		
e	-	·-··	├		
	-	<del> </del>	+		
g Fees and contracts from government agencies	<u> </u>		<del></del>	··· · · · · · · · · · · · · · · · · ·	
2 Membership dues and assessments	-		+ +		
3 Interest on savings and temporary cash					
investments	-		1		
4 Dividends and interest from securities	<del> </del>		+		
5 Net rental income or (loss) from real estate:			<del>  </del>	····	
a Debt-financed property	<del>       </del>	······································	+		
b Not debt-financed property	<u> </u>		+		
6 Net rental income or (loss) from personal	1				
property			<del>                                     </del>		
7 Other investment income	<del> </del> -		1 -		<del></del>
8 Gain or (loss) from sales of assets other	1		1		
than inventory			+		<del> </del>
9 Net income or (loss) from special events			1		
10 Gross profit or (loss) from sales of inventory			+ +		
11 Other revenue:					
a	-				
b	-		++		
C			1 1		
d			1 1		
e	-				
12 Subtotal. Add columns (b), (d), and (e)		0.		0.	
13 Total. Add line 12, columns (b), (d), and (e)				13	0.
(See worksheet in line 13 instructions to verify calculations.)					<del> </del>
Part XVI-B Relationship of Activities	to the Accom	plishment of E	kempt	t Purposes	
Line No. Explain below how each activity for which inc	come is reported in c	olumn (e) of Part XVI-A	contrib	uted importantly to the accord	nnlishment of
the foundation's exempt purposes (other tha			CONTINU	ated importantly to the accord	ipiisiinieit oi
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223621 22 05 10	-			• •	Form <b>990-PF</b> (2012)
12-05-12					(2012)

Par	Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable										
	D. J. M	Exempt Organ			41.	al .		504(-) -5		Yes	No
		ganization directly or indir other than section 501(c)			-			on 501(c) of		162	INO
		from the reporting founda	•			_	mzanons:				
	(1) Cash	non the reporting loane	Allon to a noncharitat	ole exempt of §	gamzanon o	''•			1a(1)		X
	(2) Other	assets							1a(2)		X
	Other trans						•		1		
(	(1) Sales	of assets to a noncharital	ble exempt organizat	ion					16(1)		х
(	(2) Purch	ases of assets from a no	ncharitable exempt o	rganization					1b(2)		Х
(	( <b>3)</b> Renta	l of facilities, equipment,	or other assets						1b(3)		X
(4) Reimbursement arrangements											X
(	( <b>5)</b> Loans	or loan guarantees							16(5)		X
(	(6) Perfor	rmance of services or me	mbership or fundrais	sing solicitatio	ns				1b(6)		X
c :	Sharing of	facilities, equipment, ma	iling lists, other asset	ts, or paid em	ployees				1c		_X_
		ver to any of the above is	•	-			•			ets,	
		s given by the reporting fo			ed less than	fair market val	ue in any transaction	or sharing arrangement,	show in		
		) the value of the goods,	· · · · · · · · · · · · · · · · · · ·			an nation	(4)				
(a) Lin	e no	(b) Amount involved	(c) Name of	noncharitable	exempt or	yanızanıyıı	(u) Description	of transfers, transactions, and	snaring ar	angeme	nts
				N/A							
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22	is the four	ndation directly or indirect	thy affiliated with or r	elated to one	or more tax	r-evemot organ	l l l l l l l l l l l l l l l l l l l		<del></del>		
		501(c) of the Code (other	•	-		Coxompt organ	iizations acacribed	ſ	Yes	X	] No
		mplete the following sch		(0)) 01 111 0001				•			
		(a) Name of org			(b) Type o	of organization		(c) Description of relation:	ship		
		N/A									
									_		
	1		N. A.I.b.				<u>                                     </u>	hant of multipourlander			
e:~	and be	penalties of perjury, I declare blief, it is true, correct, and cor	that I have examined this fipreter-Doolsration of pre	s return, includin eparer (other thai	ng accompany n taxpayer) is	ing schedules and based on all infori	mation of which preparer	has any knowledge M	ay the IRS of	discuss e prepar	this er
Sig Her		Alleco			u l	114/13	DIRECT		own below	(see ins	<u>tr</u> )?
		ature of officer or trustee			Date	<u>רון דון</u>	Title	LOK L	X Yes		J No
	T OIBI	Print/Type preparer's na		Prepager's si			Date	Check   If PTIN			
		The type property of the		1 1 0	1, 1, 1	۸ ۸ ۵	I did a	self- employed			
Pai	d	JOEL B CHA	ZEN	Wel	( Val	CYA	11114113	P0	0644	282	
	parer	Firm's name ► HER		COMPAN	Y, P.	A.	·····	Firm's EIN ► 52-1			
Use	Only				1						
		Firm's address ▶ 80				D, SUIT	TE 300				
		OW	TNICS MIT.I.	.CIMIT D.	21117			Phone no 410-	363-	320	n

### Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury

Internal Revenue Service

Name of the organization

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No 1545-0047

2012

**Employer identification number** 

ENVISION...EXCELLENCE IN STEM EDUCATION, INC. 20-8622102 Organization type (check one): Filers of: Section: Form 990 or 990-EZ 501(c)( ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, chantable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on Part I, line 2 of its Form 990-PF, to

certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization
ENVISION...EXCELLENCE IN STEM
EDUCATION, INC.

Employer identification number

20-8622102

Part I	Contributors (see instructions). Use duplicate copies of Part I if addit	tional space is needed.
(a)	(b)	(c) (d)
1	Name, address, and ZIP + 4  NOYCE FOUNDATION  2500 EL CAMINO REAL, SUITE 110  PALO ALTO, CA 94306-1723	\$ 25,000. Type of contribution  Person X Payroll  Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
2	THE CLEVELAND FOUNDATION  1422 EUCLID AVE # 1300  CLEVELAND, OH 44115-2063	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
3	GREATER CLEVELAND PARTNERSHIP  1240 HURON RD E, SUITE 300  CLEVELAND, OH 44115-1722	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) / (d) Total contributions Type of contribution
4	SAMUELI FOUNDATION  2101 W. COAST HIGHWAY  CORONA DEL MAR, CA 92625-1900	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
5	TIES - TEACHING INSTITUTE FOR ESSENTIAL SCIENCE, LLC  2108 LAMBERTON ROAD  CLEVELAND HEIGHTS, OH 44118-2717	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
(a) No.	(b) Name, address, and ZIP + 4  CHARLES & LYNN SCHUSTERMAN FAMILY FOUNDATION  1250 EYE STREET, NW  WASHINGTON, DC 20005	

Name of organization

ENVISION...EXCELLENCE IN STEM

EDUCATION, INC.

Employer identification number

20-8622102

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	Il space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	KEYBANK NATIONAL ASSOCIATION  127 PUBLIC SQUARE  CLEVELAND, OH 44114	\$10,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8	THE NORD FAMILY FOUNDATION  747 MILAN AVENUE  AMHERST, OH 44001	\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9	BURROUGHS WELLCOME FUND  21 T.W. ALEXANDER DRIVE  RESEARCH TRIANGLE PARK, NC 27709	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10	MERCK INSTITUTE FOR SCIENCE EDUCATION  126 E. LINCOLN AVE  RAHWAY, NJ 07065	\$\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person

Payroll Noncash

(Complete Part II if there is a noncash contribution)

Name of organization

ENVISION...EXCELLENCE IN STEM

EDUCATION, INC.

Employer identification number

20-8622102

Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed

art II Nonc	ash Property (see instructions) Use duplicate copies of P	art II if additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
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(a) No. rom art I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
453 12-21-12		Schedule B (Form S	 990, 990-EZ, or 990-PF) (2

Name of orga ENVISI EDUCAT	ONEXCELLENCE IN STE		Employer identification number $20-8622102$			
Part III	Exclusively religious, charitable, etc., indiverse. Complete columns (a) through (e) and the total of exclusively religious, charitable, etc. Use duplicate copies of Part III if addition	he following line entry. For organizations, contributions of <b>\$1,000 or less</b> for	)(7), (8), or (10) organizations that total more than \$1,000 for the ons completing Part III, enter the year. (Enter this information once)			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
-		(e) Transfer of gif	t			
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
-	(e) Transfer of gift  Transferee's name, address, and ZIP + 4  Relationship of transferor to transferee					
-						
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
_	(e) Transfer of gift					
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
	(e) Transfer of gift					
-	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee			

FORM 990-PF	ACCOUNTI	NG FEES	STATEMENT 1		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
ACCOUNTING, BOOKKEEPING AND TAX PREP FEES	9,500.	0.	0.	9,500.	
TO FORM 990-PF, PG 1, LN 16B	9,500.	0.	0.	9,500.	
FORM 990-PF	OTHER E	XPENSES	ST	'ATEMENT 2	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
BANK FEES OFFICE SUPPLIES AND EXPENSE EDUCATIONAL MATERIALS TECHNICAL ASSISTANCE AND	263. 2,492. 11,073.	0. 0. 0.	0. 0. 0.	263. 2,492. 11,073.	
CONSULTING STEM PROJECT MANAGEMENT FEES SEMINARS, MEETINGS,	99,412. 36,216.	0.	0.	99,412. 36,216.	
CONFERENCES TELEPHONE AND INTERNET MATERIALS DESIGN COMPUTER AUTO	13,709. 1,431. 660. 4,708. 221.	0. 0. 0.	0. 0. 0.	13,709. 1,431. 660. 4,708. 221.	
AUIO					

3

FORM 990-PF LIST OF SUBSTANTIAL CONTRIBUTORS STATEMENT PART VII-A, LINE 10 NAME OF CONTRIBUTOR ADDRESS GREATER CLEVELAND PARTNERSHIP 1240 HURON ROAD, EAST STE 300 CLEVELAND, OH 44115 SAMUELI FOUNDATION 2101 W. COASTAL HIGHWAY CORONA DEL MAR, CA 92625 747 MILAN AVE THE NORD FAMILY FOUNDATION AMHERST, OH 44001

FORM 990-PF SUMMARY OF DIRECT CHARITABLE ACTIVITIES

STATEMENT

### ACTIVITY ONE

AS A STEM SCHOOL DESIGN ORGANIZATION, ENVISION IS THE LEAD DESIGNER ON THE CLEVELAND STEM K-8 SCHOOL DESIGN AND IMPLEMENTATION PLAN. ENVISION'S SENIOR STEM CONSULTANT IS DEEPLY ENGAGED WITH ADMINISTRATORS AND SCHOOL LEADERSHIP AS WELL AS TEACHER PROFESSIONAL DEVELOPMENT. ENVISION CONSULTANTS UTILIZE EFFECTIVE PRACTICES IN THE DESIGN MODEL TO LEVERAGE THE GROWING DEMAND FOR IMPROVED EDUCATIONAL PERFORMANCE IN THE UNITED STATES' K-16 SCHOOL SYSTEM.

**EXPENSES** 

TO FORM 990-PF, PART IX-A, LINE 1

22,581.

FORM 990-PF

SUMMARY OF DIRECT CHARITABLE ACTIVITIES

STATEMENT

#### ACTIVITY TWO

ENVISION...EXCELLENCE IN STEM EDUCATION, INC. IS THE FISCAL AGENT FOR THE DESIGN AND MANAGEMENT OF THE STEM FUNDERS NETWORK. THIS IS A NETWORK DESIGNED AND DEVELOPED TO ALLOW STEM FUNDERS TO WORK TOGETHER AND FUND INNOVATIVE STEM EDUCATION FOR THE NATION. IN 2012, WE HELD TWO FACE-TO-FACE MEMBERSHIP MEETINGS AND ACCUMULATED 300(+) HOURS OF PREPARATION FOR THOSE MEETINGS. AND AN ADDITIONAL 600 HOURS OF PREPARATION FOR CONFERENCE CALLS, NEWS LETTER DEVELOPMENT/DISTRIBUTION, WEBSITE AND E-COMMUNICATIONS, AND CONTENT SUPPORT. 12 ORGANIZATIONS OR APPROXIMATELY 24 REPRESENTATIVES WERE MEMBERS.

EXPENSES

TO FORM 990-PF, PART IX-A, LINE 2

213,614.

Form 8868 (Rev. 1-2013)					Page 2
If you are filing for an Additional (Not Automatic) 3-Mont	h Extension, o	complete only Part II and check this	box		▶ X
Note. Only complete Part II if you have already been granted If you are filing for an Automatic 3-Month Extension, cor	l an automatic	3-month extension on a previously fi		8868	
Part II Additional (Not Automatic) 3-Mont			al (no c	opies ne	eded).
		<del></del>		•	, see instructions
Type or Name of exempt organization or other filer, see in	nstructions	2.7.0.			ion number (EIN) oi
ent ENVISIONEXCELLENCE IN STEM			,		
File by the EDUCATION, INC.				20-8622102	
due date for Number, street, and room or suite no. If a P O. b			Social se	Social security number (SSN)	
filing your 2108 LAMBERTON ROAD	JY I				JO: (OO. 1)
City, town or post office, state, and ZIP code. For	r a foreign add	Iress, see instructions.			
	118				
					<del></del>
Enter the Return code for the return that this application is fo	or (file a senara	te application for each return)			0 4
Enter the result begons to the result that the application is to	or time a copara	is application to capiticianly		•	(V)
Application	Return	Application	-		Return
ls For	Code	Is For			Code
Form 990 or Form 990-EZ	01				
Form 990-BL	02	Form 1041-A			08
Form 4720 (individual)	03	Form 4720			09
Form 990-PF	04	Form 5227			10
Form 990-T (sec. 401(a) or 408(a) trust)		Form 6069			11
Form 990-T (trust other than above)	Form 8870			12	
STOP! Do not complete Part II if you were not already gra	nted an autor	natic 3-month extension on a previ	ously file	d Form 88	68.
HERTZBACH &					
<ul> <li>The books are in the care of ► 800 RED BROO</li> </ul>			SS MI	LLS, N	4D 21117
Telephone No. ► (410)363-3200		FAX No. ► (410)356-0			
If the organization does not have an office or place of bus	— iness in the Ur				ightharpoons
If this is for a Group Return, enter the organization's four	digit Group Exe	emption Number (GEN) If	this is fo	r the whole	group, check this
box lf it is for part of the group, check this box	and atta	ch a list with the names and EINs of	all memb	ers the exte	ension is for.
4 I request an additional 3-month extension of time until	NOVEM	BER 15, 2013.			
5 For calendar year 2012, or other tax year beginning		, and ending	J		
6 If the tax year entered in line 5 is for less than 12 mont	hs, check reas	on: Initial return	Final r	eturn	
Change in accounting period					
7 State in detail why you need the extension					
ADDITIONAL TIME IS NECESSAR	Y TO PR	EPARE A COMPLETE AL	ND AC	CURATE	E RETURN.
8a If this application is for Form 990-BL, 990-PF, 990-T, 47	720, or 6069, e	nter the tentative tax, less any			
nonrefundable credits. See instructions.			8a	\$	0.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated					
tax payments made. Include any prior year overpayme	nt allowed as a	a credit and any amount paid	<u> </u>		
previously with Form 8868.			8b	\$	0.
c Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using					
EFTPS (Electronic Federal Tax Payment System). See			8c	\$	0.
Signature and Verif	ication mus	st be completed for Part II o	nly.		
Under penalties of perjury, I declare that I have examined this form, it is true, correct, and complete, and the transfer of the property of the correct and complete.	ncluding accomp	panying schedules and statements, and to	the best o	f my knowled	dge and belief,
Signature > Title	► CPA		Date		

Form 8868 (Rev. 1-2013)