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Return of Organization Exempt From Income Tax

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

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

Open to Public Inspection

A F	or th	e 201	2 calendar year, or tax year beginning , 2012,	, and end	ling			, 20						
ь.			C Name of organization			D Employer ide	entifica	ation number						
_	Check if ap		THE FUND FOR THEOLOGICAL EDUCATION, INC.			21-072	5643							
	Addre chang		Doing Business As											
	Name	change	Number and street (or P O box if mail is not delivered to street address)	Room/suite	•	E Telephone n	umber							
	Indial	l return	160 CLAIREMONT AVENUE	300		(678) 36	9-67	755						
	Term	ınated	City, town or post office, state, and ZIP code											
	Amen		DECATUR, GA 30030			G Gross receip	ts \$	11,024,276.						
		cation	F Name and address of principal officer STEPHEN LEWIS	•		H(a) Is this a grou	ıp returr	for Yes X No						
	_ ,		160 CLAIREMONT AVENUE, STE 300 DECATUR, GA	30030		affiliates? H(b) Are all affilia	tes ındu	ıded? Yes No						
ī	Tax-ex	empt st	atus X 501(c)(3) 501(c)() ◀ (insert no) 4947(a)(1) o	or 5	527	if "No," attac	:h a list	(see instructions)						
J	Websi	te 🕨	WWW.FTELEADERS.ORG			H(c) Group exemp	ption nu	mber >						
ĸ	Form (of organ	ization X Corporation Trust Association Other ▶	L Year	r of format	ion 1954 M	State c	of legal domicile NY						
Pa	rt l	Sur	mmary	·····										
	1	Briefly	describe the organization's mission or most significant activities		_									
	1		FUND FOR THEOLOGICAL EDUCATION ADVOCATES EXCE	LLENCE	AND	DIVERSITY								
ű		INE	N PASTORAL MINISTRY AND THEOLOGICAL SCHOLARSHIP.											
Ē														
Governance	2	Check	this box if the organization discontinued its operations or dispose	ed of more t	 than 25%	of its net assets	 s							
ජ	3		er of voting members of the governing body (Part VI, line 1a)				3	13.						
es	4		er of independent voting members of the governing body (Part VI, line 1b)				4	13.						
Activities &	5		number of individuals employed in calendar year 2012 (Part V, line 2a)				5	22.						
Act	6		number of volunteers (estimate if necessary)				6	50.						
_		Total i	unrelated business revenue from Part VIII, column (C), line 12				7a	(
			nrelated business taxable income from Form 990-T, line 34				7b	(
	i	_				Prior Year		Current Year						
a)	8	Contri	butions and grants (Part VIII, line 1h)		<u> </u>	596,41	6.	4,244,296.						
Ď	9	Progra	am service revenue (Part VIII, line 2g)											
Revenue	10		ment income (Part VIII, column (A), lines 3, 4, and 7d)			12,81 226,23		7,554. 687,593.						
œ			revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			•	0	(
	12		revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12).			835,46	0.	4,939,443.						
	13		s and similar amounts paid (Part IX, column (A), lines 1-3)			1,112,89	8.	1,141,829.						
	14		its paid to or for members (Part IX, column (A), line 4)				0							
Ś	3	Saları	es, other compensation, employee ben efits (Part IX-column (A), lines 5-10)		1,883,80	9.	1,707,966.							
nse	2 2000 2000	Profes	ssional fundraising fees (Part IX, column (A), line tective (E.IVED	mp (A), lure fer EIVED										
ç	Ь	Total f	fundraising expenses (Part IX column (D) line 251-			\neg								
ω W	1,7		1 1			2,371,20	2.	2,009,756.						
			expenses (Part IX, column (A), lines 1 and 1, 11f-24e) expenses Add lines 13-17 (must equal Part IX, column (A)) fline (25)			5,367,90	-	4,859,551.						
Ų	49		ue less expenses Subtract line 18 from line 12			-4,532,44	9.	79,892.						
Nat Assers or und Balanses	[_ 		Begin	ning of Current Y		End of Year						
S S	20	Total a	assets (Part X, line 16)		. 🗀	16,704,35	5.	17,105,342.						
	21	Total I	iabilities (Part X, line 26)			534,33	9.	536,588.						
\$	22	Net as	ssets or fund balances Subtract line 21 from line 20			16,170,01	6.	16,568,754.						
Pa	irt II	Sig	gnature Block											
D Un	der per	nalties o	of perjury, I declare that I have examined this return, including accompanying schedu complete. Declaration of preparer (other than officer) is based on all information of whice	iles and stat	tements, a	nd to the best of	my kr	nowledge and belief, it is						
-1101	e, corre	Ci, and	complete Declaration of preparer (other than officer) is based on all information of which	cii preparer	nas any kr	lowledge								
0:-		.	Hole			<i>-8</i> /	21/	2013						
Sig			Signature of office			Date								
He	ı e		Stephen Leuis											
		<u> </u>	Type or print name and title											
Paid	d	Print/	Type preparer's name Preparer's signature	- DateUC	3 1 3 21]13 Check	"	ПМ						
	parer	MAR	C AZAR WE-			self-employe	ed	P00746804						
	Only		name ► SMITH & HOWARD, P.C.			Firm's EIN	58-1	250486						
				30363		Phone no	404-	874-6244						
May	the li	RS dis	cuss this return with the preparer shown above? (see instructions)			<u> </u>		X Yes No						
For	Pape	rwork	Reduction Act Notice, see the separate instructions					Form 990 (2012)						

1	Check if Schedule O contains a response to any question in this Part III	X
	Briefly describe the organization's mission ATTACHMENT 1	
	ATTACHEMI I	
r	Did the organization undertake any significant program services during the year which were not listed on the	
		Yes X
	·····	Yes X
ļ	If "Yes," describe these changes on Schedule O Describe the organization's program service accomplishments for each of its three largest program services, as expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations the total expenses, and revenue, if any, for each program service reported.	
	(Code 813000) (Expenses \$, orange of a) (Revenue \$)
	FELLOWS' PROGRAMS: STIPENDS AND FELLOWSHIPS WERE AWARDED TO SEVERAL GROUPS OF CANDIDATES. FELLOWS PARTICIPATED IN MENTORING	
	CONFERENCES AND WERE GIVEN OPPORTUNITIES FOR PROFESSIONAL DEVELOPMENT.	
b	(Code 813000) (Expenses \$ 1,414,938 including grants of \$ 135,345) (Revenue \$ 7,4	554)
	CALLING CONGREGATIONS: THE CALLING CONGREGATIONS PROGRAM EQUIPS	554_)
	CALLING CONGREGATIONS: THE CALLING CONGREGATIONS PROGRAM EQUIPS CONGREGATIONS TO NURTURE CALLS TO MINISTRY THROUGH CONFERENCES AND	554_)
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3	CALLING CONGREGATIONS: THE CALLING CONGREGATIONS PROGRAM EQUIPS CONGREGATIONS TO NURTURE CALLS TO MINISTRY THROUGH CONFERENCES AND WORKSHOPS, A RESOURCE LIBRARY, MINI-GRANTS AND FELLOWSHIPS. (Code 813000) (Expenses \$ 663,142 including grants of \$ 202,836) (Revenue \$ 400))
5	CALLING CONGREGATIONS: THE CALLING CONGREGATIONS PROGRAM EQUIPS CONGREGATIONS TO NURTURE CALLS TO MINISTRY THROUGH CONFERENCES AND WORKSHOPS, A RESOURCE LIBRARY, MINI-GRANTS AND FELLOWSHIPS. (Code 813000) (Expenses \$ 663,142 including grants of \$ 202,836) (Revenue \$ 202,836))
	CALLING CONGREGATIONS: THE CALLING CONGREGATIONS PROGRAM EQUIPS CONGREGATIONS TO NURTURE CALLS TO MINISTRY THROUGH CONFERENCES AND WORKSHOPS, A RESOURCE LIBRARY, MINI-GRANTS AND FELLOWSHIPS. (Code 813000) (Expenses \$ 663,142 including grants of \$ 202,836) (Revenue \$ 200,836) (R)
	CALLING CONGREGATIONS: THE CALLING CONGREGATIONS PROGRAM EQUIPS CONGREGATIONS TO NURTURE CALLS TO MINISTRY THROUGH CONFERENCES AND WORKSHOPS, A RESOURCE LIBRARY, MINI-GRANTS AND FELLOWSHIPS. (Code 813000) (Expenses \$ 663,142 including grants of \$ 202,836) (Revenue \$ 202,836))
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c	COMMERCIATIONS: THE CALLING CONGREGATIONS PROGRAM EQUIPS CONGREGATIONS TO NURTURE CALLS TO MINISTRY THROUGH CONFERENCES AND MORKSHOPS, A RESOURCE LIBRARY, MINI-GRANTS AND FELLOWSHIPS. (Code 813000)(Expenses \$ 663,142 including grants of \$ 202,836)(Revenue \$ 200,000) (Code 813000)(Expenses \$ 663,142 including grants of \$ 202,836)(Revenue \$ 200,000) (Code 813000)(Expenses \$ 663,142 including grants of \$ 200,836)(Revenue \$ 200,000) (Code 813000)(Expenses \$ 663,142 including grants of \$ 200,836)(Revenue \$ 200,000) (Code 813000)(Expenses \$ 663,142 including grants of \$ 200,836)(Revenue \$ 200,836) (Code 813000)(Expenses \$ 663,142 including grants of \$ 200,836)(Revenue \$ 200,836) (Code 813000)(Expenses \$ 663,142 including grants of \$ 202,836)(Revenue \$ 200,836) (Code 813000)(Expenses \$ 663,142 including grants of \$ 202,836)(Revenue \$ 202,836) (Code 813000)(Expenses \$ 663,142 including grants of \$ 202,836)(Revenue \$ 202,836) (Code 813000)(Expenses \$ 663,142 including grants of \$ 202,836)(Revenue \$ 202,836) (Code 813000)(Expenses \$ 663,142 including grants of \$ 202,836)(Revenue \$ 202,836) (Code 813000)(Expenses \$ 663,142 including grants of \$ 202,836)(Revenue \$ 202,836) (Code 813000)(Expenses \$ 663,142 including grants of \$ 202,836)(Revenue \$ 202,836) (Code 813000)(Expenses \$ 663,142 including grants of \$ 202,836)(Revenue \$ 202,836) (Code 813000)(Expenses \$ 663,142 including grants of \$ 202,836)(Revenue \$ 202,836) (Code 813000)(Expenses \$ 663,142 including grants of \$ 202,836)(Revenue \$ 202,836) (Code 813000)(Expenses \$ 663,142 including grants of \$ 202,836)(Revenue \$ 202,836) (Code 813000)(Expenses \$ 663,142 including grants of \$ 202,836)(Revenue \$ 202,836) (Code 813000)(Expenses \$ 663,142 including grants of \$ 202,836)(Revenue \$ 202,836) (Code 813000)(Expenses \$ 663,142 including grants of \$ 202,836) (Code 813000)(Expenses \$ 663,142 including grants of \$ 202,836) (Code 813000)(Expenses \$ 663,142 including grants of \$ 202,836) (Code 8)
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Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues.			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C.			
	Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
-	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D. Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	٢		
•	the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	-		
Ü	complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a	⊢∸⊣		
3	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
10	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	10		
• •	VII, VIII, IX, or X as applicable			
2	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			لـــــا
а		11a	Х	
L	complete Schedule D, Part VI	Ha	^	
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
_	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more	110		
C	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
A		116		
u	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		Х
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
	•	116		Λ
'	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	11f	х	
120	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes,"	111	_^	
12 a	•	120	x	
.	complete Schedule D, Parts XI and XII	12a	^	
D	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		Х
12				X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13 14a		X
		144		
IJ	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	140		Λ
	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		Х
16		-13		
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	16		Х
17	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	10		
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services	17		Х
18	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	''		
10	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	4.0		v
19	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
13	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	10		Х
20 -	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	19		-
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a		Х
	ii res to inie zoa, dio trie organization attach a copy of its addited financial statements to this feturn /	20b		

Part	IV Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization			
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States			
	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Χ	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	Х	
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K If "No," go to line 25	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
_	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
LJa	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior	234		
ь	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
		25b		Х
00	If "Yes," complete Schedule L, Part I	250		Λ
26		26		х
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II.	_26		^
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			v
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	1		
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			.,
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than $$25,000$ in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34	Х	
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
		l		Х
	Part VI	37		41
38	Part VI	37		21

	Check if Schedule O contains a response to any question in this Part V	•••	Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1	7	·
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	ă	ŕ	-
	Did the organization comply with backup withholding rules for reportable payments to vendors and	L		
	reportable gaming (gambling) winnings to prize winners?	1c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 23	2		ω
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3а	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4 a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		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			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
Зa	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?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	.		İ
	gifts were not tax deductible?	6b		├
	Organizations that may receive deductible contributions under section 170(c).	113	u`	
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	7-		X
L	and services provided to the payor?	7a 7b		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	76		
U	required to file Form 8282?	7c		х
А	If "Yes," indicate the number of Forms 8282 filed during the year	76		
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		- 11
_	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8		Х
9	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		Х
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		Х
)	Section 501(c)(7) organizations. Enter			
а	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			
1	Section 501(c)(12) organizations. Enter			
а	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)	ļ		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		ļ
þ	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	.		
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O			
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			
	Enter the amount of reserves on hand			1.
	tive the proprietion receive and naturable for indeed forming a contract distance the forming.	14a		Х
4 a	Did the organization receive any payments for indoor tanning services during the tax year?	-		
14 a	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	990	

Form 990 (2012) THE FUND FOR THEOLOGICAL EDUCATION, INC. 21-0725643 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below and for a response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions хI Section A. Governing Body and Management Nο 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 Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with Χ 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? . . . Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets?.... 6 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) No Χ 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b Х 11a 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? . . b Describe in Schedule O the process, if any, used by the organization to review this Form 990 Х 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." 12c Х 13 13 Х 14 Did the organization have a written document retention and destruction policy?........... 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15a Χ 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement 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? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶_GA____ 17 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) 18 available for public inspection. Indicate how you made these available. Check all that apply Another's website X Upon request Other (explain in Schedule O) Own website

Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy,

State the name, physical address, and telephone number of the person who possesses the books and records of the

ZO JSA

19

Form 990 (2012)

and financial statements available to the public during the tax year

Organization ▶ JAN FISHBECK 160 CLAIREMONT AVENUE, STE 300 DECATUR, GA 30030

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any	box.	unle	Pos heck ss pe	erson	e than o is both tor/trust	an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	hours for related organizations below dotted line)	Individual trustee or director	Highest compensated employee Key employee Officer Institutional trustee Individual trustee or director		Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations		
(1) REVEREND SARA HAYDEN	1.00									**
BOARD MEMBER	†	х						0	o	0
(2) REV. DR. JONATHAN PAUL STRANDJ	1.00									
BOARD MEMBER		Х						0	0	0
(3) FLORIDA SMITH ELLIS	1.00									
BOARD MEMBER		Х						0	0	0
(4) REVEREND WENDY FLETCHER	1.00									
BOARD MEMBER		X		<u>.</u>				0	0	0
(5) REVEREND LEE HINSON-HASTY BOARD MEMBER	1.00	x						0	0	0
(6) REVEREND DR. SAM CANDLER	1.00									
BOARD MEMBER		Х	_		_		_	0	0	0
(7) DR. DAN ALESHIRE BOARD MEMBER	1.00	X						0	0	0
(8) DR. KITA MCVAY	1.00		l							-
BOARD MEMEBER		X	<u> </u>					0	0	
(9) REVEREND JERRY STREETS	1.00									
BOARD MEMBER		Х		<u> </u>				0	0	0
(10) REVEREND DONNA CLAYCOMB SOKOL BOARD MEMEBER	1.00	x						0	0	0
(11) DR. BYRON KLAUS	1.00			 						
BOARD MEMEBER	t	х						0	o	o
(12) DR. JUAN MARTINEZ	1.00									
BOARD MEMBER	T	х						0	0	0
(13) DR. EMILIE TOWNES BOARD MEMEBER	1.00	Х						0	0	0
(14) REVEREND STEPHEN LEWIS	40.00	- ^			\vdash		-			
PRESIDENT	†	1		x	1		1	91,684.	О	87,162.
	<u> </u>		_						<u>~</u>	50m 990 (2012)

Form 990 (2012)

Part VII Section A. Officers, Directors, Tr	ustees, Ke	y En	npio	ye	es,	<u>and I</u>	HIG	nest Compensat	ea Employ	<u>rees (c</u>	ontinue	<u>∌d)</u>	
(A)	(B)	}		(0	C)			(D)	(E)	-		(F)	
Name and title	Average				ition			Reportable	Reporta	ble	E:	stimated	d
	hours per					e than o		compensation	compensation			nount c	٥f
	week (list any hours for					ıs both or/trust		from	relate			other	tion
	related	9.5	$\overline{}$		T			the	organizat (W-2/1099-			pensat om the	
	organizations	흑호	State	Officer	y e	Highest employe	Former	organization (W-2/1099-MISC)	(00-2/1099-	WildC)		anızatı	
	below dotted	ect	l to	4	횰	yer c	먁	(44-271033-141130)			an-	d relate	∌d
•	line)	¬ =	na l		Key employee	ı öğ				İ	orga	anızatıo	ıns
		Individual trustee or director	Institutional trustee		, a) en							
			ee			st compensated yee							
15) PAUL BOIS	40.00	<u> </u>			-	<u> </u>		 					
VP OF HR & ADMIN	1-40.00	┨	1	Х				112,911.				10,	756
16) LORI ADAMS	40.00	 	-	Δ.		 		112, 911.		—— <u> </u>		10,	155.
	40.00	1		v	ŀ			66 204				CO .	046
VP OF PROGRAMS	1.5.00	 -		Х				66,384.		0		69,	246.
17) JANICE R. FISHBECK	16.00									1			
DIRECTOR		ļ		X	<u> </u>			47,197.		0			(
	ļ	-											
		-	\vdash							\longrightarrow			
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	L												
1b Sub-total							\blacktriangleright	91,684.		0		87,1	
c Total from continuation sheets to Part VII, S	ection A .							226,492.		0		80,0	
d Total (add lines 1b and 1c)								318,176.		o	1	67,1	163.
2 Total number of individuals (including but not				d al	DOVE	e) who	o re	ceived more than	\$100,000 c	of			
reportable compensation from the organization	n ▶	1	L										
												Yes	No
3 Did the organization list any former office	er, directo	or, or	tru	ıste	e, l	key e	emp	oloyee, or highes	t compens	ated	ļ		
employee on line 1a? If "Yes," complete Sched	ule J for su	ch ınd	ıvıdı	ual							3	<u> </u>	X
4 For any individual listed on line 1a, is the	sum of reg	ortab	le c	om	pen	satioi	n ai	nd other compens	sation from	the			
organization and related organizations gr	eater than	\$15	0,00	00?	lf	"Yes	5, "	complete Schedu	le J for s	such			ļ
ındıvıdual											4	Х	
5 Did any person listed on line 1a receive or	accrue co	mpen	satio	on f	from	any	un	related organization	on or individ	dual			
for services rendered to the organization? If "Y	es," comple	te Sch	nedu	le J	for	such	per	son	<u></u>		5		Х
Section B. Independent Contractors													
1 Complete this table for your five highest com	pensated i	ndepe	ende	ent o	con	tracto	rs t	hat received more	than \$100	,000 o	f		
compensation from the organization. Report of	compensati	on for	the	ca	lend	lar ye	ar e	ending with or with	nin the orga	nızatıor	n's tax		
year													
(A)								(B)			(C)		
Name and business ad	dress						<u> </u>	Description of se	rvices	C	ompens	sation	
							1_						
							1_						
							_						
							\perp						
					_								
2 Total number of independent contractors (i				nited			e li	isted above) who	received				
more than \$100,000 in compensation from th	ie organizai	tion 🕨	>			0							

Form	990 (2	2012) THE FUND F	OR THEOLOGI	CAL EDUCATION	N, INC.	21-0725	543 Page 9
Par	rt VIII	Statement of Revenue			_		
		Check if Schedule O contains a response	nse to any quest	tion in this Part VIII			X
	1			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
र इ	1a	Federated campaigns 1a		-			
Contributions, Gifts, Grants and Other Similar Amounts		Membership dues					
e E	b	Fundraising events 1c					1
ar /	C	, and a diving a contract of the contract of t					
S, E	ď						
อีร	e	grams (sommons) .					
but	'	All other contributions, gifts, grants,	4 244 206				
ĘÓ.		and similar amounts not included above . 1f	4,244,296				
g C	9	Noncash contributions included in lines 1a-1f \$					
_ <u>e</u>	<u> </u>	Total Add lines 1a-1f	Business Code	4,244,296			
ent	_						ļ
Re S	2 a	CONFERENCES	900099	7,554			7,554
8	b	· ··········· ·					
Ξ	C			<u>-</u> .			
Š	d						
Jrar	е						
Program Service Revenue	f	All other program service revenue					
	g	Total Add lines 2a-2f		7,554			
	3	Investment income (including dividends, inter		474 000			
		other similar amounts). ATTACHMENT 3		476,828			476,828
	4	Income from investment of tax-exempt bond		0			
	5	Royalties · · · · · · · · · · · · · · · · · · ·	(II) Personal	0			
	_	· · · · · · · · · · · · · · · · · · ·					
	6a	Gross rents					ł
	b	Less rental expenses					
	l d	Rental income or (loss)		0	······································		
	"	(i) Securities	(ii) Other				1
	7a	Gross amount from sales of assets other than inventory 6,295,598	, ,				
	Ь	Less cost or other basis					1
	"	and sales expenses 6,084,833					
	c	Gain or (loss)				_	
	I	Net gain or (loss)	, ▶	210,765			
<u> </u>		Gross income from fundraising					
ĵ.		events (not including \$					
ě		of contributions reported on line 1c)					
ĸ		See Part IV, line 18 a					
Other Revenue	ь	Less direct expenses b					
ŏ	С	Net income or (loss) from fundraising events		0			
	9a	Gross income from gaming activities					
		See Part IV, line 19 a					
	b	Less direct expenses b					
	C	Net income or (loss) from gaming activities .	. <u> </u>	0	· · · · · · · · · · · · · · · · · · ·		
	10a	Gross sales of inventory, less					
		returns and allowances a					
	р	Less cost of goods sold b. Net income or (loss) from sales of inventory.	·				
	٣	Miscellaneous Revenue	Business Code	0			
	110			-			1
	11a b				<u> </u>		
	ď	All other revenue					
	e	Total Add lines 11a-11d		0:			
	12	Total revenue See instructions		l			494,382

21-0725643

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)

	not include amounts reported on lines 6b, 7b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
8b,	9b, and 10b of Part VIII.	Total expenses	expenses	general expenses	expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21.	338,181.	338,181.		
2	Grants and other assistance to individuals in the United States See Part IV, line 22	803,648.	803,648.		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	487,616.	487,616.		
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	892,681.	883,477.	9,204.	
8	Pension plan accruals and contributions (include section				
	401(k) and 403(b) employer contributions)	95,447.	95,447.		· <u>·</u> ·
9	Other employee benefits	142,286.	142,286.		
0	Payroll taxes	89,936.	89,936.		
11	Fees for services (non-employees)				
	Management	0 554		0.554	
b	Legal	2,554.		2,554.	
	Accounting	30,200.	-	30,200.	
	Lobbying	0		-	
	Professional fundraising services See Part IV, line 17	50 740	-	E0 740	
	Investment management fees	58,749.		58,749.	
g	Other (If line 11g amount exceeds 10% of line 25, column	150 456	116 722	40 700	
2	(A) amount, list line 11g expenses on Schedule O)	159,456.	116,733.	42,723.	
2	Advertising and promotion	<u>0</u>			
3	Office expenses	83,092.	29,242.	53 050	
4 5	Information technology	03,032.	23,242.	53,850.	
5 6	Royalties	155,307.	152,195.	3,112.	
7	Occupancy	149,185.	138,309.	10,876.	
8	Payments of travel or entertainment expenses	110,100.		10,010.	
•	for any federal, state, or local public officials	٩			
9	Conferences, conventions, and meetings	1,058,436.	1,046,877.	11,559.	
20	Interest	0	_,	11,000.	
1	Payments to affiliates	ol			· · · ·
2	Depreciation, depletion, and amortization	21,809.		21,809.	
3	Insurance	16,028.		16,028.	
4	Other expenses Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e If	ľ			
	line 24e amount exceeds 10% of line 25, column		1		
	(A) amount, list line 24e expenses on Schedule O)				
а	ADMINISTRATIVE SERVICES	58,606.	48,940.	9,666.	
b	COMMITTEES	56,617.	56,617.		
С	CONTRACTED SERVICES	49,844.	38,454.	11,390.	
	INDIRECT_COSTS	10,199.	107,189.	-96,990.	
	All other expenses	99,674.	59,487.	40,187.	
25		4,859,551.	4,634,634.	224,917.	
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ▶ ☐ If				
	following SOP 98-2 (ASC 958-720)				

JSA 2E1052 1 000

Pa	rt X	Balance Sheet		
		Check if Schedule O contains a response to any question in this Part	X	x
			(A) Beginning of year	(B) End of year
	1	Cash - non-interest-bearing	8,737. 1	35,261.
	2	Savings and temporary cash investments	602,849. 2	11,371.
	3	Pledges and grants receivable, net	0 3	0
	4	Accounts receivable, net	10,223. 4	3,555.
	5	Loans and other receivables from current and former officers, directors,		
		trustees, key employees, and highest compensated employees		
	6	Complete Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L	C 5	0
şţs	7	Notes and loans receivable, net	0 7	
Assets	8	Inventories for sale or use	0 8	
⋖	9	Prepaid expenses and deferred charges	0 9	16,221.
		Land, buildings, and equipment cost or		10,221.
		other basis Complete Part VI of Schedule D 10a 407, 583.		
	b	Less accumulated depreciation	22,941. 10c	73,662.
	11	Investments - publicly traded securities ATCH 5	16,059,605. 11	16,965,272.
	12	Investments - other securities See Part IV, line 11	0 12	0
	13	Investments - program-related See Part IV, line 11	Q 13	0
	14	Intangible assets	0 14	0
	15	Other assets See Part IV, line 11	0 15	0
	16	Total assets. Add lines 1 through 15 (must equal line 34)	16,704,355. 16	17,105,342.
	17	Accounts payable and accrued expenses	36,551. 17	100,588.
	18	Grants payable	497,788. 18	436,000.
	19	Deferred revenue	0 19	0
	20	Tax-exempt bond liabilities	0 20	0
S	21	Escrow or custodial account liability Complete Part IV of Schedule D	0 21	0
Liabilities	22	Loans and other payables to current and former officers, directors,		
jab		trustees, key employees, highest compensated employees, and		
_		disqualified persons Complete Part II of Schedule L	0 22	0
	23	Secured mortgages and notes payable to unrelated third parties	0 23	0
	24	Unsecured notes and loans payable to unrelated third parties	0 24	0
	25	Other liabilities (including federal income tax, payables to related third		
		parties, and other liabilities not included on lines 17-24) Complete Part X		
		of Schedule D	0 25	0
_	26	Total liabilities. Add lines 17 through 25	534,339. 26	536,588.
ces		Organizations that follow SFAS 117 (ASC 958), check here ▶ X and complete lines 27 through 29, and lines 33 and 34.		
<u>a</u>	27	Unrestricted net assets	4,502,619. 27	5,145,843.
Ва	28	Temporarily restricted net assets	10,859,220. 28	10,611,734.
nd	29	Permanently restricted net assets	808,177. 29	811,177.
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34.		
ţs	30	Capital stock or trust principal, or current funds	30	
SSE	31	Paid-in or capital surplus, or land, building, or equipment fund	31	
ř.	32	Retained earnings, endowment, accumulated income, or other funds	32	
Š	33	Total net assets or fund balances	16,170,016. 33	16,568,754.
	34	Total liabilities and net assets/fund balances	16,704,355. 34	17,105,342.

Form **990** (2012)

Form **990** (2012)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

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

OMB No 1545-0047
2012
Open to Public

Inspection

Department of the Treasury Internal Revenue Service Name of the organization

THE FUND FOR THEOLOGICAL EDUCATION, INC.

See separate instructions.

Employer identification number 21-0725643

Pa	irt I	Reason for Pub	lic Charity Statu	s (All organizations mu	ist cor	nplete	this pa	art.) Se	e instr	uctions		
The	orga	inization is not a priv	ate foundation be	cause it is (For lines 1 th	rough	11, che	eck only	one bo	x)			
1		A church, convention	on of churches, or	association of churches	describ	ed in s	ection	170(b)(1)(A)(i)			
2	Ш	A school described	I in section 170(b)	(1)(A)(ii). (Attach Schedul	eE)							
3	\square			ervice organization descri								
4				erated in conjunction wi	ith a h	ospita	ıl descr	ıbed ın	sectio	n 170(l	o)(1)(A)(iii). Enter the	
		hospital's name, cit		·			- -					
5				nefit of a college or univ	ersity	owned	i or ope	erated I	oy a go	vernme	ental unit described in	
		section 170(b)(1)(/		•								
6	\square		•	or governmental unit des								
7				es a substantial part of it	s supp	ort fro	m a go	vernme	ental un	ut or fro	om the general public	
_				(Complete Part II)								
8	\vdash	-		on 170(b)(1)(A)(vi). (Com	•				_			
9				es (1) more than 331/3 %							•	
				exempt functions - subj								
				ome and unrelated busine 30, 1975 See section						n 511	tax) from businesses	
10				ted exclusively to test for			-		•			
11	Х	•	•	rated exclusively for the	•	•				•	or to carry out the	
• •												
	purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h.											
	a X Type I b Type II c Type III-Functionally integrated d Type III-Non-functionally integrated											
•	X			the organization is not	•	•						
				gers and other than one			-		-	-	•	
		509(a)(1) or section		-		·			Ū			
f		If the organization	received a writte	n determination from the	e IRS	that it	ıs a Ty	/pe I, 1	ype II,	or Type	e III supporting	
		organization, check	this box									
ç	3	Since August 17, 2	006, has the orga	nization accepted any gift	or co	ntributi	on from	any of	the			
		following persons?										
		(i) A person who	directly or indire	ectly controls, either alor	ne or t	ogethe	er with	person	s desc	ribed in	` -	
				dy of the supported organ	ızatıon	?						
		• •	·='	scribed in (i) above?							· · · 	
_				on described in (i) or (ii) a							[11g(iii)] X	
	1			ut the supported organiza	- · · ·					-		
	(i) N	ame of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9	(IV) organi	Is the zation in	(v) Did y the orga	ou notify inization		s the ation in	(vii) Amount of monetary support	
		v		above or IRC section		listed in overning	ın col	(ı) of	col (i) o	rganized		
				(see instructions))		nent?	your su Yes	No No	Yes	US? No		
					162	NO	162	INU	res	NO		
(A)	ል ጥጥ ል	CHMENT 1										
		- I I I I I I I I I I I I I I I I I I I	-			<u> </u>						
(B)												
(C)												
<u></u>											\	
(D)												
(E)												
(E)												
_												

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

Schedule A (Form 990 or 990-EZ) 2012

Pai	Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III I f the organization fails to qualify under the tests listed below, please complete Part III)										
Sec	tion A. Public Support				, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total				
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")										
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf										
3	The value of services or facilities furnished by a governmental unit to the organization without charge										
4	Total. Add lines 1 through 3										
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)										
6	Public support. Subtract line 5 from line 4		<u> </u>		<u> </u>	<u> </u>	[
	tion B. Total Support	1	41,0000		1 () 2244	1	I				
Cale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total				
7 8	Amounts from line 4										
9	Net income from unrelated business activities, whether or not the business is regularly carried on										
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)										
11	Total support. Add lines 7 through 10		<u> </u>		<u> </u>						
12	Gross receipts from related activities, etc. (•				12					
13	First five years If the Form 990 is f										
500	organization, check this box and stop here tion C. Computation of Public Sup					<u> </u>	▶ [
				44		Taal	- 0/				
	Public support percentage for 2012 (In Public support percentage from 2011)						<u>%</u>				
15	Public support percentage from 2011 33 1/3% support test - 2012. If the control of										
Iva	this box and stop here. The organizati										
b	331/3% support test - 2011. If the										
-	check this box and stop here. The org	_					. —				
17a	10%-facts-and-circumstances test -										
	10% or more, and if the organization										
	Part IV how the organization meets						-				
	organization			_	•	•					
b	10%-facts-and-circumstances test -						and line				
	15 is 10% or more, and if the org										
	Explain in Part IV how the organizate supported organization						▶ □				
18	Private foundation. If the organization	did not check a	a box on line 13	, 16a, 16b, 17a	a, or 17b, check	this box and see	•				

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)

<u></u> 2	Alam A. Dublia Command						
	tion A. Public Support	(-) 2000	1 41 2000	() 2010	1 0044	1 1 2 2 4 2	'D.T. ()
_	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received (Do not include any "unusual grants")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the]		
	organization without charge						
6	Total Add lines 1 through 5						
7 a	Amounts included on lines 1, 2, and 3				-		
	received from disqualified persons						
b	Amounts included on lines 2 and 3				7		
	received from other than disqualified						
	persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
_	· i					-	
8	Add lines 7a and 7b Public support (Subtract line 7c from				<u>-</u>		
٠	line 6)						
202	tion B. Total Support			<u></u>	1		
	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
		(4) 2000	(5) 2000	(0) 2010	(4) 2011	(6) 2012	(i) rotai
9 10 a	Amounts from line 6. 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						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or						
-	loss from the sale of capital assets				1		
	(Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12)						
14	First five years If the Form 990 is for	the organization	n's first, second.	third, fourth, or	fifth tax vear a	s a section 501	(c)(3)
	organization, check this box and stop here						
Sec	tion C. Computation of Public Sup						
15	Public support percentage for 2012 (line 8			nn (f))		15	%
16	Public support percentage from 2011 Sche					16	%
Sec	tion D. Computation of Investmen				_		
17	Investment income percentage for 2012 (In			3, column (fl)		17	
18	Investment income percentage from 2011					18	
	331/3% support tests - 2012. If the org						
	17 is not more than 331/3%, check th						
h	331/3% support tests - 2011. If the orga						
	line 18 is not more than 331/3%, check						
20	Private foundation. If the organization		-	-			
	roundadon. II the organization	ara mor criecy	a pox on line	i i i i i i i i i i i i i i i i i i i	, oneon una Du	A and ace mon	uctiviis -

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

		·		ATTACE	MENT 1	
SCHEDULE A, PART I - INFORMATION ABOUT SU	JPPORTED	ORGANIZATIO	NS			
(1) NAME OF SUPPORTED ORGANIZATION	(II) EIN	(III) TYPE OF ORGANIZATION	(IV) YES NO	(V) YES NO	(VI) YES NO	(VII) AMOUNT OF SUPPORT
THE 261 THEOLOGICAL SCHOOLS THAT ARE MEMBERS OF THE ASSOC		501 (C) (3)	x	х	x	1,141,829
OF THEOLOGICAL SCHOOLS (ATS) FOR A COMPLETE LIST OF ALL						0
261 SUPPORTED ORGANIZATIONS, PLEASE SEE THE ATS' WEBSITE						0
HTTP //WWW ATS EDU						0
TOTAL AMOUNT OF SUPPORT						1,141,829

SCHEDULE D (Form 990)

Supplemental Financial Statements

Complete if the organization answered "Yes," to Form 990,

Open to Public

OMB No 1545-0047

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

► Attach to Form 990. ► See separate instructions.

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

Sche	dule D (Form 990) 2012								Page 2
Pai	t Organizations Maintainin	g Collections of	of Art, Historical	Treasures	, or Oth	ner Simil	ar Ass	e ts (contii	nued)
3	Using the organization's acquisition collection items (check all that apply	, accession, and	other records, chec	k any of th	e followi	ng that ar	e a sigr	nificant use	of its
_		,	J 1000			_			
a	Public exhibition Scholarly research			or exchange					
b c	Preservation for future genera	ations	e Other						
4	Provide a description of the organia		e and ovnlain how	thou furthou	r the ora	anization's	04022	t purposo	n Dort
4	XIII	zation's collection	s and explain now	mey further	the org	anizations	exemp	i puipose i	III Fail
5	During the year, did the organization assets to be sold to raise funds rathe						_	Yes	□ No
Pai	t IV Escrow and Custodial Ar								
	line 9, or reported an amo								
1a	Is the organization an agent, trustee,	, custodian or othe	er intermediary for c	ontributions	or other	assets not			
	included on Form 990, Part X?						[Yes [No
b	If "Yes," explain the arrangement in F	Part XIII and comp	lete the following ta	ble					
						An	nount		
	Beginning balance								
	Additions during the year								
	Distributions during the year								
	Ending balance			1f					
	Did the organization include an amo						L	Yes	No
	If "Yes," explain the arrangement in F								
Pai	t V Endowment Funds. Comp		Y	1					
		(a) Current year	(b) Prior year	(c) Two yea		(d) Three ye		(e) Four yea	
1a	Beginning of year balance	16,113,966.				19,307		19,138	
	Contributions	4,251,850.	609,227.	3,535	,219.	5,520	<u>,267.</u>	6,608	8,630
C	Net investment earnings, gains,								
	and losses	947,689.			708.		,091.	-1,093	
	Grants or scholarships	1,141,829.	1,112,898.	1,324	,529.	1,251	,448.	1,13	6,540
е	Other expenditures for facilities							_	
	and programs								4,393
	Administrative expenses	3,602,922.				3,747			6,478
g	End of year balance		L			20,520	,680.	19,30	7,301
2	Provide the estimated percentage of	•	, ,	, column (a)	held as				
a	Board designated or quasi-endowme)_%						
b	Permanent endowment ▶ 5.00								
C	Temporarily restricted endowment		0004						
22	The percentages in lines 2a, 2b, and	•							
Ja	Are there endowment funds not in the	ie possession of t	ne organization that	are neid ar	ia aamini	sterea for t	ne	ſ .	
	organization by							Yes	
	(i) unrelated organizations(ii) related organizations							3a(i)	X
h	If "Yes" to 3a(ii), are the related orga							3a(ii) 3b	<u> </u>
4	Describe in Part XIII the intended use		•					L_30	ــــــــــــــــــــــــــــــــــــــ
_	t VI Land, Buildings, and Equi								
r eu	Description of property	· I							
	Description of property			or other basis other)	(c) Accu depre		(0	i) Book value	
1a	Land								
b	Buildings								
С	Leasehold improvements								
d	Equipment			252,029.	21	9,344.		32,	,685.
e	Other			155,554.		4,575.		40,	,979.
Tota	il. Add lines 1a through 1e (Column (d) must equal Fon	n 990, Part X, colum	n (B), line 10)(c))	▶		73,	,664.
	 _						Sched	ule D (Form 9	90) 2012

Part VII	Investments - Other Securities. See	Form 990, Part X, line	12
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financi	al derivatives		
	-held equity interests		
(3) Other_			
(A)		_	
(B)		-	
(C) (D)		-	
(E)		-	·
(F)			
(G)	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	_	
(H)			
(I)			
	(2)	<u> </u>	
Part VIII			13
	(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)			
(2)			
(3)			
(5)			
(6)			
(7)			-
(8)			
(9)			
(10)			
	(1)	<u> </u>	
Part IX	Other Assets. See Form 990, Part X	· · · _	
(1)		(a) Description	(b) Book value
(2)			
(3)			
(4)			
(5)		1.40	
(6)			
(7)			
(8)			
(9)	, ,		
(10)	umn (b) must equal Form 990, Part X, col (E	N / 45 \	
Part X	Other Liabilities. See Form 990, Part		
1.	(a) Description of liability	(b) Book value	
	ral income taxes	(b) book value	_
(2)			
(3)			
(4)			
(5)			
_(6)			
(7)			
(8)			
(9)			
(10)			
(11)	nn (b) must equal Form 990, Part X, col (B) line 2	5) ▶	
			Janization's financial statements that reports the organization
			otnote has been provided in Part XIII.

Schedule D (Form 990) 2012

Part XIII Supplemental Information (continued)

SCHEDULE D. PART V. OUESTION 4

TEMPORARILY RESTRICTED FUNDS CONSIST PRIMARILY OF GRANTS RECEIVED TO FUND VARIOUS PROGRAMS OVER MULTIPLE YEARS. PERMANENTLY RESTRICTED GIFTS ARE INVESTED IN PERPETUITY AND MUST BE EXPENDED IN ACCORDANCE WITH THE RESTRICTIONS PLACED BY THE DONORS. EARNINGS ON THE PERMANENTLY RESTRICTED GIFTS MAY BE USED FOR OPERATING EXPENSES AND CAPITAL EXPENDITURES IN ACCORDANCE WITH ITS SPENDING POLICY.

SCHEDULE D, PART X, OUESTION 2

THE INTERNAL REVENUE SERVICE HAS RECOGNIZED FTE AS BEING EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE SERVICE CODE. FTE IS CLASSIFIED BY THE INTERNAL REVENUE SERVICE AS BEING OTHER THAN PRIVATE FOUNDATION. FTE ANNUALLY EVALUATES ALL FEDERAL AND STATE INCOME TAX POSITIONS. THIS PROCESS INCLUDES AN ANALYSIS OF WHETHER THESE INCOME TAX POSITIONS FTE TAKES MEET THE DEFINITION OF AN UNCERTAIN TAX POSITION UNDER THE INCOME TAXES TOPIC OF THE FINANCIAL ACCOUNTING STANDARDS CODIFICATION. FTE DOES NOT HAVE ANY UNCERTAIN TAX POSITIONS AS OF DECEMBER 31, 2012. IN GENERAL, FTE IS NO LONGER SUBJECT TO TAX EXAMINATIONS FOR THE TAX YEARS ENDING BEFORE DECEMBER 31, 2009.

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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

OMB No 1545-0047	2012
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Open to Publ

lervice ► Attach to Form 990.

Employer identification number 21-0725643

Assistance	
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General Info	
Part (

THE FUND FOR THEOLOGICAL EDUCATION, INC.

- 2 T × ×es 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 criteria used to award the grants or assistance?
 - Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book FMV appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) brethren volunteer service							
ELGIN, IL 60120		501 (C) (3)	6,301		CASH		FELLOWSHIPS AND AWAR
(2) EPISCOPAL SERVICE CORPS							
CHAPEL HILL, NC 27514		501 (C) (3)	15,000		САЅН		FELLOWSHIPS AND AWAR
_(3) <u>poor</u>							
DENVER, CO 80204		501 (C) (3)	13,000		САЅН		FELLOWSHIPS AND AWAR
(4) JESUIT VOLUNTEER CORPS.	ļ 						
PORTLAND, OR 97208		501 (C) (3)	12,250		CASH		FELLOWSHIPS AND AWAR
(5) COMMUNITY CHRISTIAN CHURCH							
KANSAS CITY, MO 64112		501 (C) (3)	10,000		саѕн		FELLOWSHIPS AND AWAR
(6) GRANTS_PAID <55,000							
		501 (C) (3)	87,205		CASH		FELLOWSHIPS AND AWAR
(7) MISSION YEAR							
ATLANTA, GA 30316		501 (C) (3)	14,500		CASH		FELLOWSHIPS AND AWAR
(8) PC USA							
		501 (C) (3)	9,000		CASH		FELLOWSHIPS AND AWAR
(9) MILSHIRE BAPTIST CHURCH							
DALLAS, TX 75214		501 (C) (3)	10,000		САЅН		FELLOWSHIPS AND AWAR
(10) CENTER FOR CLERGY EXCELLENCE							
WILLIAMSBURG, VA 23185		501 (C) (3)	12,500		САЅН		FELLOWSHIPS AND AWAR
(11) CHRISTIAN BROTHERS CONFERENCE							
WASHINGTON, DC 20017		501 (C) (3)	7,500		CASH		FELLOWSHIPS AND AWAR
(12) DOOR SAN ANTONIO							
SAN ANTONIO, TX 78210		501 (C) (3)	12,500		CASH		FELLOWSHIPS AND AWAR
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	overnment or	ganizations liste	ed in the line 1 table			•	
3 Enter total number of other organizations listed in the line	d in the line 1	1 table					
For Paperwork Reduction Act Notice, see the Instructions for Form 990.	tructions for	· Form 990.				Schedu	Schedule I (Form 990) (2012)

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SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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

Open to Public

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

Employer Identification number 21-0725643

THE FUND

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ıızatı	riteria used to award the grants or assist
oes the organization maintain records to subs	0
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1 (a) Name and address of organization or government	(a)	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) EMBRACE RICHMOND							
RICHMOND, VA 23260		501 (C) (3)	22,000		САЅН		FELLOWSHIPS AND AWAR
(2) HOPE PARTNERSHIP FOR MISSIONAL TRANSFORMATI			,				
INDIANAPOLIS, IN 46204		501 (C) (3)	22,000		САЅН		FELLOWSHIPS AND AWAR
(3) LATINO LEADERSHIP CIRCLE	-						
BROOKLYN, NY 11217		501 (C) (3)	22,000		саѕн		FELLOWSHIPS AND AWAR
(4) LIFE TOGETHER/ EPISCOPAL DIOCESE							
BROOKLINE, MA 02446		501 (C) (3)	22,000		CASH		FELLOWSHIPS AND AWAR
(5) MISSIONAL WISDOM FOUNDATION			***				
SOUTHLAKE, TX 76093		501 (C) (3)	5,425		CASH		FELLOWSHIPS AND AWAR
(6) REDEEMER LUTHERAN CHURCH							
MINNEAPOLIS, MN 55405		501 (C) (3)	12,500		САЅН		FELLOWSHIPS AND AWAR
(7) ST MARK'S CHURCH							
PHILADELPHIA, PA 19103		501 (C) (3)	12,500		САЅН		FELLOWSHIPS AND AWAR
(8) TRINITY LUTERAN CHURCH							
MOORHEAD, MN 56561		501 (C) (3)	10,000		CASH		FELLOWSHIPS AND AWAR
(6)							
(1 <u>0</u>)				:			
(11)							
(12)							
2 Enter total number of section 501(c)(3) and government o	overnment or	ganizations list	rganizations listed in the line 1 table				62.
3 Enter total number of other organizations listed in the line		1 table					
For Paperwork Reduction Act Notice, see the Instructions for Form 990.	tructions for	. Form 990.				Schedu	Schedule I (Form 990) (2012)

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THE FUND FOR THEOLOGICAL EDUCATION, INC.

Schedule I (Form 990) (2012)

Page 2 Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed Part III

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 FELLOW	1 FELLOWSHIPS AND AWARDS	138	803, 648		CASH	
2						
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5						
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7						
Part IV	Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information	s part to prov	nde the informati	ion required in	Part I, line 2, Part III,	column (b), and any other additional

SCHEDULE I, PART I, QUESTION 2

FIE PROVIDES FELLOWSHIPS TO PROMOTE AND SUPPORT PASTORAL MINISTRY AS A

VOCATIONAL CHOICE AMONG GIFTED YOUNG PEOPLE FROM DIVERSE BACKGROUNDS.

THEY ALSO PROVIDE FELLOWSHIPS TO YOUNG SCHOLARS FROM UNDERREPRESENTED

RACIAL/ETHNIC GROUPS WHO HAVE INTEREST IN DOCTORAL STUDY IN RELIGION,

THEOLOGY OR BIBLICAL STUDIES.

SCHEDULE J (Form 990)

Department of the Treasury

Internal Revenue Service Name of the organization

Compensation Information

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

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

► Attach to Form 990 ► See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Employer identification number

THE FUND FOR THEOLOGICAL EDUCATION, INC. 21-0725643 **Questions Regarding Compensation** Yes No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to Х 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? Х 2 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 Compensation committee Written employment contract Independent compensation consultant Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee 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? Х b Participate in, or receive payment from, a supplemental nonqualified retirement plan? Х 4b c Participate in, or receive payment from, an equity-based compensation arrangement? Х 4c 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 a The organization? Χ 5b Х 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 a The organization? Χ 6a Х 6b 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 not described in lines 5 and 6? If "Yes," describe in Part III 7 Х Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe Χ If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in

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

Schedule J (Form 990) 2012 Page 2

Schedule J (Form 990) 2012

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 from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VIII

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

		Mr. So. much look d. Co.	24 3 00 4 00 4 00 VAIS					
		(a) Dieakuowii	ol vv-z aliu/ol 1099-ivilo Conipensation	Compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(I) Base compensation	(ii) Bonus & incentive compensation	(III) Other reportable compensation	other deferred compensation	benefils	(B)(t)-(D)	reported as deferred in prior Form 990
REVEREND STEPHEN LEWIS	Ξ				18,850.	69,015.	179,549.	
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Schedule J (Form 990) 2012

Page 3

Part III Supplemental Information

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

SCHEDULE J, PART I, QUESTION 1A

STEPHEN LEWIS, PRESIDENT, AND LORI ADAMS, VP OF PROGRAMS RECEIVED HOUSING

ALLOWANCES OF \$45,250 AND \$39,500, RESPECTIVELY DURING 2012.

Schedule J (Form 990) 2012

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2012

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

THE FUND FOR THEOLOGICAL EDUCATION, INC.

Employer identification number 21-0725643

PART III, QUESTION 4D

TRANSITION INTO MINISTRY: THIS PROGRAM PLAYS A KEY ROLE IN GATHERING PROJECT LEADERS ON A REGULAR BASIS FOR MUTUAL SHARING OF DISCOVERIES, STRUGGLES, SURPRISES AND WISDOM. THE GATHERINGS AND RESULTING COMMUNITY OF COLLABORATION HAVE SIGNIFICANTLY IMPROVED THE QUALITY OF INDIVIDUAL PROJECTS AS WELL AS THE OVERALL IMPACT OF THE TIM PROGRAM.

GROWING ECOLOGIES OF CALL: THIS PROGRAM IS DESIGNED TO DEEPEN AND EXPAND
THE NASCENT ECOLOGY OF CONGREGATIONS, CHURCH-RELATED COLLEGES AND
ORGANIZATIONS, THEOLOGICAL EDUCATION INSTITUTIONS, AND INDIVIDUALS
COMMITTED TO VOCATIONAL DISCERNMENT FOR YOUNG CHRISTIANS AND THE
DEVELOPMENT OF LEADERSHIP FOR THE CHURCH.

THE ASSOCIATION OF THEOLOGICAL SCHOOLS (ATS) IS THE SOLE MEMBER OF THE FUND FOR THEOLOGICAL EDUCATION, INC. (FTE). HOWEVER, 261 THEOLOGICAL SCHOOLS ARE CURRENT ACTIVE MEMBERS OF ATS, AND IN EFFECT, ARE MEMBERS OF FTE. SEE ATS' WEBSITE FOR A COMPLETE LIST OF 501(C)(3) SCHOOL MEMBERS.

HTTP://WWW.ATS.EDU

PART VI, QUESTION 6

PART VI, QUESTION 7A

CURRENTLY 261 THEOLOGICAL SCHOOLS CONTROL THE ASSOCIATION OF THEOLOGICAL SCHOOLS (ATS) DIRECTLY BY ELECTING THE MEMBERS OF THE BOARD OF TRUSTEES

Employer identification number

21-0725643

OF ATS. THE 261 SCHOOLS ALSO CONTROL THE FUND FOR THEOLOGICAL EDUCATION (FTE) INDIRECTLY THROUGH THEIR CONTROL OF ATS, THE SOLE MEMBER OF FTE, WHICH ELECTS FTE'S BOARD OF TRUSTEE.

PART VI, QUESTION 11

ELECTRONIC COPIES OF THE 2012 FORM 990 WERE DISTRIBUTED TO ALL BOARD MEMBERS PRIOR TO FILING WITH THE IRS. A DRAFT OF THE RETURN WAS REVIEWED BY THE DIRECTOR OF BUSINESS AFFAIRS AND THE PRESIDENT. UPON APPROVAL A FINAL COPY WAS FILED WITH THE IRS.

PART VI, QUESTION 12C

THE NATURE OF THE ORGANIZATION DOES NOT LEND ITSELF TO CONFLICTS OF

INTEREST. BOARD MEMBERS CANDIDATES WOULD NOT BE CONSIDERED IF THERE WERE

A POTENTIAL CONFLICT OF INTEREST AS DISALLOWED BY POLICY.

PART VI, QUESTION 15

BOARDWALK, AN INDEPENDENT CONSULTANT, PERFORMED A COMPARABILITY STUDY FOR ALL EMPLOYEES FOR DETERMINATION OF SALARIES FOR 2008 AND 2009. THE RESULTS OF THE STUDY WERE PRESENTED TO THE BOARD FOR THEIR CONSIDERATION IN DETERMINING COMPENSATION FOR ALL EMPLOYEES, INCLUDING THE PRESIDENT AND OTHER PAID OFFICERS. IN 2010, THERE WERE NO SALARY INCREASES. IN 2011 AND 2012, UPON REVIEW OF SALARIES BY THE BOARD OF DIRECTORS, THERE WAS A 3% COST OF LIVING INCREASE FOR ALL EMPLOYEES.

PART VI, QUESTION 19

FORM 990 CAN BE ACCESSED ON THE WEBSITE OF GUIDESTAR.ORG AND CHARITY

Employer identification number

21-0725643

NAVIGATOR.ORG. LINKS TO THESE WEBSITES ARE INCLUDED ON THE FUND'S WEBSITE. COPIES OF THE CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS WILL BE PROVIDED UPON WRITTEN REQUEST SUBMITTED TO THE PRESIDENT.

ATTACHMENT 1

FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

THE FUND FOR THEOLOGICAL EDUCATION ADVOCATES EXCELLENCE AND DIVERSITY IN PASTORAL MINISTRY AND THEOLOGICAL SCHOLARSHIP. THROUGH OUR INITIATIVES, WE ENABLE GIFTED YOUNG PEOPLE THROUGHOUT THE CHRISTIAN COMMUNITY TO EXPLORE AND RESPOND TO GOD'S CALLING IN THEIR LIVES. WE SEEK TO BE A CREATIVE, INFORMED CATALYST FOR EDUCATIONAL AND FAITH COMMUNITIES IN DEVELOPING THEIR OWN CAPACITIES TO NURTURE MEN AND WOMEN FOR VOCATIONS IN MINISTRY AND TEACHING. WE ALSO AIM TO AWAKEN THE LARGER COMMUNITY TO THE CONTRIBUTIONS OF PASTORAL LEADERS AND EDUCATORS WHO ACT WITH FAITH, IMAGINATION AND COURAGE TO SERVE THE COMMON GOOD.

FORM 990, PART III, LINE 4D - OTHER PROGRAM SERV	ICES	ATTACHMEN	Γ 2
DESCRIPTION	GRANTS	EXPENSES	REVENUE
TRANSITION INTO MINISTRY	73,150.	275,005.	
GROWING ECOLOGIES OF CALL		205,244.	
TOTALS	73,150.	480,249.	

Schedule O (Form 990 or 990-EZ) 2012	·			Page 2
Name of the organization			Employer identification	number
THE FUND FOR THEOLOGICAL EDUCATION, INC.	_		21-0725643	
			ATTACHMENT 3	
FORM 990, PART VIII - INVESTMENT INCOME				
	(A)	(B)	(C)	(D)
	TOTAL	RELATED OR	UNRELATED	EXCLUDED
DESCRIPTION	REVENUE	EXEMPT REVENUE	BUSINESS REV.	REVENUE
INTEREST	300,25	0.		300,250.
DIVIDENDS	176,57	8.		176,578.
TOTALS =	476,82	8.		476,828.

ATTACHMENT 4

FORM 990, PART X - PREPAID EXPENSES AND DEFERRED CHARGES DESCRIPTION

PREPAID EXPENSES

TOTALS

ATTACHMENT 5

FORM 990, PART X - INVESTMENTS - PUBLICLY TRADED SECURITIES

DESCRIPTION	ENDING BOOK VALUE	COST OR FMV
COMMON STOCKS	202,199.	FMV
MONEY MARKET FUNDS	1,257,847.	FMV
MUTUAL FUNDS	3,363,312.	FMV
FIXED INCOME	12,141,914.	FMV
TOTALS	16,965,272.	

21-0725643

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

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

Employer Identification number 21-0725643 ► See separate instructions ▶ Attach to Form 990. THE FUND FOR THEOLOGICAL EDUCATION, INC. Department of the Treasury Internal Revonue Service Name of the organization

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

Part

Name, address, and EIN (if applicable) of disregarded entity	Primary activity	Legal domicile (state or foreign country)	e Total income	(v) End-of-year assets	(1) Direct controlling entity	<u>Bul</u>
(1)						
(3)						
(b)						
(9)						
(9)						
Part II Identification of Related Tax-Exempt Organizations (Comple one or more related tax-exempt organizations during the tax ye	tions (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had uring the tax year.)	answered "Yes" to	Form 990, Part IV	, line 34 because	it had	
(a) Name, address, and EiN of related organization Prima	(c) (c) (c) Primary activity cor foreign country)	(d) (a) (b) (state Exempt Code section ountry)	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	b)(13)
					Yes	٩
(1) 261 THEOLOGICAL SCHOOLS THAT ARE MEMBERS 10 SUMMIT PARK DRIVE PITTSBURGH, PA 15275 FIN. 9	SUPPORT PA	501(C)(3)	509(A) (3)	CAATS	×	 ×
(2) OF ATS & INDIVIDUAL RECIPIENTS				N/A		
(3)						
(4)						
(5)						
(9)						
(1)						
For Paperwork Reduction Act Notice, see the Instructions for Form 990				Schedule F	Schedule R (Form 990) 2012	2012

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Page 2

Schedule R (Form 990) 2012

(k) Percentage ownership (j) General or managing partner? Yes No Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) Yes No Ê (g) Share of end-of-year assets (f) Share of total income (e)
Predominant
income (related,
unrelated,
excluded from
tax under
sections 512-514) (d)
Direct controlling
entity (c) Legal domicile (state or foreign country) (b) Primary activity (a)
Name, address, and EIN of related organization Part III

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp., S corp. or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percen- 511 tage co	(I) Section 512(b)(13) controlled entity?
								Yes No
(1)			-					
(2)								
(3)								
(4)								
<u></u>								
(9)								
(7)		·						
						Schedule R (Form 990) 2012	Form 990	2012

34, 35b, or 36)
t IV, line ;
า 990, Par
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Organizations
th Related
Transactions Wit
Part V

Note Com	Note Complete line 1 if any entity is listed in Daris II III or Not this schedule				Vec	2
1 During		forganizations listed	1 in Parts II-IV?	L.	→	: [
a Receip	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity			1a		×
b Gift, g	Gift, grant, or capital contribution to related organization(s)			1p	×	
c Gift, g	Gift, grant, or capital contribution from related organization(s)		•	10		×
d Loans	Loans or loan guarantees to or for related organization(s)			14		×
e Loans				9		×
				1		
f Divide	Dividends from related organization(s)		•	:		
g Saleo	Sale of assets to related organization(s)			19		×
h Purcha	Purchase of assets from related organization(s)			1 1		×
i Excha	Exchange of assets with related organization(s),			=		×
j Lease	Lease of facilities, equipment, or other assets to related organization(s)			1,		×
						\Box
k Lease	Lease of facilities, equipment, or other assets from related organization(s)	•		<u>+</u>		×
I Perfor	Performance of services or membership or fundraising solicitations for related organization(s)			1		×
m Perfor	Performance of services or membership or fundraising solicitations by related organization(s)			-		×
	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)			=		×
Sharin	Sharing of paid employees with related organization(s)					۱×
	יפ כו לימוס כוולוסלככס אונו וכומוכם כופמות מולים ביים ביים ביים ביים ביים ביים ביים ב			<u>의</u> : :		٦
p Reimb	Reimbursement paid to related organization(s) for expenses			<u></u>		٦×
	Reimbursement paid by related ordanization(s) for expenses			-		×
	Other transfer of cash or property to related organization(s)			+		7 >
s Other	Other transfer of cash or property from related organization(s).			:	_	<ا×
	If the answer to any of the above is "Yes" see the institutions for information on who must complete this line including consistent thresholds	יייים בתיטווכתו ב	4 relationships and francac	Story throshold	1	:
	answer to any of the above is lest, see the mistinguistics for information of who most complete this in	e, including covere	d relationships and transact	CIOLI (TIESTIOIC	2	1
	(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved	termining volved	
(1) MEMBER	BER SCHOOLS OF ATS		1,141,829.			1
(2)						
(3)						
(4)						
(5)						
(9)						
٧			S	Schedule R (Form 990) 2012	т 990) 20	12

Schedule R (Form 990) 2012

Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 37) Part VI Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a) (b) (c) (d) (d) (f) (f) (f) (g) (g) (g) (g) (g) (g) (g) (g) (g) (g	(b) Primary activity	(c) Legal domicile	(d) Predominant	(e) Are all partners	(f) Share of	(g) Share of	(h) Disproportionate	(ı) Code V-UBI	(J) General or	(k) Percentage
		(state or foreign country)		section 501(c)(3) organizations?	-	end-of-year assets	allocations?		managing partner?	
			section 512-514)	Yes No			Yes	Н	Yes No	
(1)	•									
(2)										
(3)										
(4)										
(5)										
(7)										
(8)										
(6)										
(10)										
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(12)				-						
(13)										
(14)										
(15)										
(16)										
								Sch	adule R (Fc	Schedule R (Form 990) 2012

Schedule R (Form 990) 2012

Page 5

Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Form **8868**

(Rev January 2013)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545-1709

III III III III III III III III III II	inde dervice							
-	re filing for an Automatic 3-Month Extension, o		-				🕨 🛭	
-	re filing for an Additional (Not Automatic) 3-Mo omplete Part II unless you have already been g		•	- · · · -			n 8868 .	
a corpora 8868 to r Return fo	ic filing (e-file). You can electronically file Form ation required to file Form 990-T), or an addition request an extension of time to file any of the for Transfers Associated With Certain Personal ns). For more details on the electronic filing of the	al (not auto orms listed Benefit C	omatic) 3-month extendin Part II Contracts, which mi	ension of time. You ca with the exception o ust be sent to the II	an ele f Fori RS in	ectronica m 8870, n paper	Ily file Form Information format (see	
Part I	Automatic 3-Month Extension of Time	. Only sub	omit original (no co	opies needed).				
A corpor	ation required to file Form 990-T and reques	sting an a	utomatic 6-month				•	
All other	, corporations (including 1120-C filers), partnersh							
	ome tax returns.	,,	,	,				
				Enter filer's identifyin	g nun	nber, see	instructions	
Type or	Name of exempt organization or other filer, see in	structions.		Employer identification	numb	oer (EIN) o	or	
print	The Fund for Theological Education, Inc.			21-0	07256	43		
-	Number, street, and room or suite no. If a P O bo	x, see instru	uctions	Social security number			_	
File by the due date for	the land the							
filing your	Gity, town or post office, state, and ZIP code, For a foreign address, see instructions.							
return See instructions	Decatur, GA 30030							
Instructions Decatur, GA 30030								
Enter the Return code for the return that this application is for (file a separate application for each return)								
Application Return Application							Return	
Is For Code Is For							Code	
Form 99	Form 990 or Form 990-EZ 01 Form 990-T (corporation) 07							
Form 99	0-BL	02	Form 1041-A			_	08	
Form 47	20 (ındividual)	03	Form 4720				09	
Form 99	0-PF	04	Form 5227				10	
Form 99	0-T (sec. 401(a) or 408(a) trust)	05	Form 6069				11	
Form 99	0-T (trust other than above)	06	Form 8870				12	
• The boo	oks are in the care of ► Janice R Fishbeck					-		
• If the or	one No. ► 678-369-6755 rganization does not have an office or place of be	usiness in 1	AX No. ► the United States, ct	neck this box		-	▶□	
	for a Group Return, enter the organization's fou					If th	IS IS	
	hole group, check this box ▶ □ . If I I the names and EINs of all members the extensi	•	t of the group, check	this box	▶ [] and at	tach	
	equest an automatic 3-month (6 months for a co		required to file Form	990-T) extension of to	me			
	ntil 8/15 , 20 13 , to file the exer	•	•	•		. The ext	ension is	
fo	r the organization's return for:							
	☑ calendar year 20 12 or							
								
>	tax year beginning	, 20	, and ending			, 20		
2 If	the tax year entered in line 1 is for less than 12 n	nonths, ch	eck reason: Initia	ıl return 🔲 Final ret	urn			
	Change in accounting period							
	this application is for Form 990-BL, 990-PF, 990 prefundable credits. See instructions.	D-T, 4720,	or 6069, enter the te	entative tax, less any	3a	\$		
b lf	this application is for Form 990-PF, 990-T, 4	4720, or 6	069, enter any refu	indable credits and				
	stimated tax payments made. Include any prior y				3b	\$		
	alance due. Subtract line 3b from line 3a. Includ			if required, by using				
	TPS (Electronic Federal Tax Payment System).				3с	\$		
Courties	f you are going to make an electronic fund withdrawal	with this Fo	0000 Farm 040	2 FO and Farm 0070 F	0 6		note intions	

• If you	are filing for an Additional (Not Automatic) 3-M	Month Exter	scion, complete en	ly Part II and check th	ie boy	▶ \sqcap			
	Only complete Part II if you have already been gr								
	are filing for an Automatic 3-Month Extension				mod romino	,00.			
Part					es needed)				
, GIV	Additional (Not Adtomato) o Monar	Exteriolon	or rance oray and	Enter filer's identifyin					
	_ Name of exempt organization or other filer, see	instructions.		Employer identification number (EIN) or					
Type o	The Fund for Theological Education, Inc.			21-0725643					
print File by th	Number, street, and room or suite no. If a P.O. box, see instructions.			Social security number (SSN)					
	6	Social Sociality Harrison	(00.1)						
due date filing you									
return. Se									
instructio	ins. Decardi, OA 30030			·					
Enter th	he Return code for the return that this application	n is for (file a	separate applicatio	on for each return) .		. 01			
Applic	nation	Return	Application			Return			
Is For		Code	Is For			Code			
Form 990 or Form 990-EZ			DECEMBER 667	J					
		01	Form 1041-A	est in the stand of the stand out of the	08				
	990-BL 5; 4720 (individual)	03	Form 4720		09				
	990-PF	03	Form 5227		10				
	990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	 	11				
	990-T (sec. 401(a) of 400(a) flust)	06	Form 8870						
						12			
STOP	Do not complete Part II if you were not already g	granted an a	utomatic 3-month e	xtension on a previous	ly filed Form	8868.			
- Th - h	and and in the court of the leader D. Flobback								
	ooks are in the care of ▶ Janice R Flshbeck	FAV	No. ►						
	phone No. ► 678-369-6755 organization does not have an office or place of			hook thin how	-	L [
	is for a Group Return, enter the organization's for whole group, check this box	_	•	ck this box					
	the names and EINs of all members the extensi		t of the group, chec	Kunsuux	and a	lacii a			
iist witi	The hames and cins of all members the extensi	ion is ior.			··· · · · · · · · · · · · · · · · · ·				
4	I request an additional 3-month extension of tim	e until	November 1	5 , 20 13	1 .				
	I request an additional 3-month extension of tim				•	20			
	Change in accounting period	inomins, ci	ieck reasonm	ilitar return rina	Hetum				
	State in detail why you need the extension Tax	rnavar naade	additional time to de	ather the information to	nranara a com	mioto and			
•	accurate return.	kpayer needs	additional time to ge	the mornation to	prepare a com	piete and			
	accurate return.								
- Ra	If this application is for Form 990-BL 990-PF 9	90-T 4720	or 6069, enter the t	rentative tax less any					
	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.								
	if this application is for Form 990-PF, 990-1, 4720, or 6009, enter any refundable credits and [4535]								
	Balance due. Subtract line 8b from line 8a. Include	8b \$							
	(Electronic Federal Tax Payment System). See instru		it with this 10/111, if 160	quirou, by using EFTFO	8c \$				
					8c \$				
	Signature and Verific	cation mus	it be completed f	or Part II only.					
- معلما ا	nonchion of mations I dealers that I have an in the	Aluin do							
	penalties of perjury, I declare that I have examined				mis, and to th	e pest of my			

Signature Director of Finance Date 8/14/13
Form 8868 (Rev. 1-2013)

SCHEDULE D (Form 1041)

Department of the Treasury

Capital Gains and Losses

► Attach to Form 1041, Form 5227, or Form 990-T. ▶ Information about Schedule D (Form 1041) and its separate instructions is at OMB No 1545-0092

2012

www.irs.gov/form1041. Internal Revenue Service Employer identification number Name of estate or trust THE FUND FOR THEOLOGICAL EDUCATION, INC. 21-0725643 Note: Form 5227 filers need to complete only Parts I and II Short-Term Capital Gains and Losses - Assets Held One Year or Less (f) Gain or (loss) for (b) Date acquired (c) Date sold (e) Cost or other basis (a) Description of property (d) Sales price the entire year Subtract (e) from (d) (Example 100 shares 7% preferred of "Z" Co) (mo , day, yr) (mo, day, yr) 1a b Enter the short-term gain or (loss), if any, from Schedule D-1, line 1b 1b Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts 3 Short-term capital loss carryover Enter the amount, if any, from line 9 of the 2011 Capital Loss Net short-term gain or (loss). Combine lines 1a through 4 in column (f) Enter here and on line 13, column (3) on the back . Long-Term Capital Gains and Losses - Assets Held More Than One Year (f) Gain or (loss) for (a) Description of property (Example 100 shares 7% preferred of "Z" Co) (b) Date acquired (c) Date sold (e) Cost or other basis the entire year Subtract (e) from (d) (d) Sales price (mo, day, yr) (mo, day, yr) (see instructions) 6a **b** Enter the long-term gain or (loss), if any, from Schedule D-1, line 6b 210,765. Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts 8 Capital gain distributions Gain from Form 4797, Part I 10 10 Long-term capital loss carryover Enter the amount, if any, from line 14 of the 2011 Capital Loss Net long-term gain or (loss). Combine lines 6a through 11 in column (f) Enter here and on line 14a, column (3) on the back. 210,765. For Paperwork Reduction Act Notice, see the Instructions for Form 1041

Schedule D (Form 1041) 2012

Schedule D (Form 1041) 2012				Page 4
Part III Summary of Parts I and II Caution: Read the instructions before completing this		(1) Beneficiaries' (see instr.)	(2) Estate's or trust's	(3) Total
13 Net short-term gain or (loss)	13	(See ilisti)	Of trust's	
14 Net long-term gain or (loss):	13			
a Total for year	14a			210,765.
b Unrecaptured section 1250 gain (see line 18 of the wrksht)				
c 28% rate gain				
5 Total net gain or (loss). Combine lines 13 and 14a	15			210,765.
Note: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4	(or For	rm 990-T, Part I, line	4a) If lines 14a a	and 15, column (2), are net
gains, go to Part V, and do not complete Part IV. If line 15, column (3), is a n necessary	et loss	s, complete Part IV a	nd the Capital Los	is Carryover Worksheet, as
Part IV Capital Loss Limitation				
Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, F	Part I, III	ne 4c, if a trust), the s	maller of	
a The loss on line 15, column (3) or b \$3,000			16	()
Note: If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, Loss Carryover Worksheet in the instructions to figure your capital loss carryover	page 1	1, line 22 (or Form 99	90-T, line 34), is a	loss, complete the Capital
Part V Tax Computation Using Maximum Capital Gains Rate	 es			
Form 1041 filers. Complete this part only if both lines 14a and 15 in col		2) are gains, or an	amount is entere	ed in Part I or Part II and
here is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is mor				
Caution: Skip this part and complete the Schedule D Tax Worksheet in the i	ınstruc	ctions if		
• Either line 14b, col. (2) or line 14c, col. (2) is more than zero, or				
Both Form 1041, line 2b(1), and Form 4952, line 4g are more than zero				
Form 990-T trusts. Complete this part only if both lines 14a and 15 a of Form 990-T, and Form 990-T, line 34, is more than zero. Skip this part				
f either line 14b, col (2) or line 14c, col (2) is more than zero	and c	omplete the Scheu	ule D Tax Work	sileet iii tile iiistructions
17 Enter taxable income from Form 1041, line 22 (or Form 990-T, line 3	34)	17		T
18 Enter the smaller of line 14a or 15 in column (2)) -1) .	• • • • • • • • • • • • • • • • • • • •		
but not less than zero				
19 Enter the estate's or trust's qualified dividends				
from Form 1041, line 2b(2) (or enter the qualified				
dividends included in income in Part I of Form 990-T) . 19				
20 Add lines 18 and 19				
21 If the estate or trust is filing Form 4952, enter the			İ	
amount from line 4g, otherwise, enter -0 21				
Subtract line 21 from line 20 If zero or less, enter -0		22		
Subtract line 22 from line 17 If zero or less, enter -0		. 23		
Enter the smaller of the amount on line 17 or \$2,400		24		
25 Is the amount on line 23 equal to or more than the amount on line 24	17			
Yes. Skip lines 25 and 26, go to line 27 and check the "No" box	(
No. Enter the amount from line 23		25		
Subtract line 25 from line 24		26		
Are the amounts on lines 22 and 26 the same?		_		
Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or lin	ne 22	27		
Enter the amount from line 26 (If line 26 in blank onter 0.)				
Enter the amount from line 26 (If line 26 is blank, enter -0-)	• • •	28		
Subtract line 28 from line 27		29		
M. H. J. L. 200 by 4507 (445)		• • • • • • • • • • • • • • • • • • • •	30	
30 Multiply line 29 by 15% (15)				
(see the Schedule Ginstructions in the instructions for Form 1041)				
(me concesse e mondente in the mondente for roll 1041).			31	
32 Add lines 30 and 31			32	
33 Figure the tax on the amount on line 17 Use the 2012 Tax Rate		 		
(see the Schedule Ginstructions in the instructions for Form 1041)				
Tax on all taxable income. Enter the smaller of line 32 or line 33 i	 here a	and on Form 1041,	Schedule	
G, line 1a (or Form 990-T, line 36)			1	_
				edule D (Form 1041) 2012

Name of estate or trust as shown on Form 1041 Do not enter name and employer identification number if shown on the other side Employer identification number										
THE FUND FOR THEOLOGICAL ED	21-072564	13								
Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year										
(a) Description of property (Example 100 sh 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price	(e) Cost or other basis (see instructions)	(f) Gain or (loss) Subtract (e) from (d)					
6a LONG TERM SALE OF VARIOUS										
SECURITIES	VAR	VAR	6,295,598.	6,084,833.	210,765.					
					+					
					<u> </u>					
				-						
6b Total Combine the amounts in column	(f) Enter here and	l on Schedule D, lir	ne 6b		210,765.					
Schedule D-1 (Form 1041) 2012										