

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



Department of the Treasury Internal Revenue Service

CHANGE OF ACCOUNTING PERIOD

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung

benefit trust or private foundation)

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

OMB No 1545-0047

Open to Public Inspection

Α	For the 2	012 calendar year, or tax year beginning APR 1, 2012 and endi	ing D	EC 31, 20:	12	
В	Check if applicable	C Name of organization		D Employer iden	tification nun	nber
Г	Address	EDUCATION FOR ALL CHILDREN	l			
F	Name change	Doing Business As		26.	-1979493	3
F	initial return		m/suite	E Telephone num		<u> </u>
F	Termin-	11 HEATHER DRIVE	III/Suite	•	3-436-34	127
F	—lated —lAmended		-	G Gross receipts \$		232,093.
F	⊥return Applica-	RYE, NH 03870	ŀ			232,093.
	tiòn pending	F Name and address of principal officer ROD VAN SCIVER		H(a) Is this a grou		Yes X No
		11 HEATHER DR., RYE, NH 03870	ŀ	for affiliates?		
_	Tov over			H(b) Are all affiliates		Yes \No
		pt status X 501(c)(3) 501(c)() (Insert no.) 4947(a)(1) or WWW.EDUCATIONFORALLCHILDREN.ORG	527		h a list. (see in	-
				H(c) Group exemp		
		Summary	L Tear o	f formation: 2008	of M State of leg	gai domicile: 1 y F
ت ا			22 00 5	INDEPDDT	III BOBD	
S	1	refly describe the organization's mission or most significant activities: TO EDUC			TTEGED	
Activities & Governance		ENYAN CHILDREN THROUGH SCHOLARSHIPS AND ME			 -	
err		neck this box Inf the organization discontinued its operations or disposed of	of more	than 25% of its ne I	t assets	
õ		umber of voting members of the governing body (Part VI, line 1a)		-	3	10
∘ఠ		umber of independent voting members of the governing body (Part VI, line 1b)		L	4	10
ies	1	tal number of individuals employed in calendar year 2012 (Part V, line 2a)		L	5	1
Ξį	6 To	tal number of volunteers (estimate if necessary)		.	6	
Act	7 a To	tal unrelated business revenue from Part VIII, column (C), line 12		<u> </u>	7a	0.
	b Ne	et unrelated business taxable income from Form 990-T, line 34	,		7b	0.
				Prior Year		ent Year
<u>•</u>	8 Cc	ontributions and grants (Part VIII, line 1h)		146,644	1. 1	<u> 162,158.</u>
en	9 Pr	ogram service revenue (Part VIII, line 2g)).	0.
Revenue	10 Inv	vestment income (Part VIII, column (A), lines 3, 4, and 7d)		13		10.
ш	11 Ot	her revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	. L	34,331		41,927.
	12 To	tal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		180,988	3. 2	204,095.
	13 Gr	ants and similar amounts paid (Part IX, column (A), lines 1-3)		140,744		80,726.
	14 Be	enefits paid to or for members (Part IX, column (A), line 4)		Č).	0.
ģ	15 Sa	laries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		22,767	7.	20,279.
nse	16a Pr	ofessional-fundraising lees (Fair X, column (A), line 11e)		().	0.
Expenses	b To	tal fundaising expenses (Part IX, column (D), line 25)				
û	17 Ot	her expenses (Fart IX, colymn (A), lines 11a-11d, 11f-24e)		40,420) .	29,171.
		tal/expenses, Add lines 13-17 (must equal Part IX, column (A), line 25)		203,931		30,176.
	19 Re	venue less expenses. Subtract line 38 from line 12		-22,943		73,919.
or		SUPPLY STATES	Bea	inning of Current Ye		of Year
Assets or Balances	20 To	tal assets (Part X, line 16)		259,410		214,296.
Ass	21 To	tal liabilities (Part X, line 26)		9,523		3,893.
₹ĕ	- ' ' '	et assets or fund balances. Subtract line 21 from line 20		249,887		210,403.
P		Signature Block		247,007	· · · L	110,403
		s of perjury. I declare that I have examined this return, including accompanying schedules and	stateme	nts, and to the hest o	f my knowledge	and belief it is
		and complete. Jeclaration of preparer (other than officer) is based on all information of which p			riny knomicage	and belief, it is
000	, 0011001, 0	4 DO	ncparer r	A C	10/12	•
Sig	.	Signature of Officer		Date 8	 	
_		ROD VAN SCIVER, TREASURER		- 4		
Her	٠ 	Type or print name and title				
_			Da	nte Check	PTIN	-
Dai		rint/Type preparer's name Preparer's signature	ł	1	<u> </u>	
Paid		ARIE C. MCKAY WWW MYCH	U	5/24/13 self-em		294931
	_	rm's name BIGELOW & COMPANY, CPA, P.C.		Firm's EIN	02-03	394333
use	Only F	rm's address 500 COMMERCIAL STREET			C02C0E2	
		MANCHESTER, NH 03101		Phone no.	6036277	
Ma	<u>/ the IRS</u>	discuss this return with the preparer shown above? (see instructions)			X_Y	es No

232001 12-10-12 LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2012)

	rt III Statement of Program Service Accomplishments
га	
_	Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission. TO EDUCATE UNDERPRIVILEGED KENYAN CHILDREN THROUGH SCHOLARSHIPS AND
	MENTORING
	MENTORING
2	Did the organization undertake any conficent program conuces during the year which were not listed on
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
3	If "Yes," describe these changes on Schedule O
4	•
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported
4a	(Code) (Expenses \$100, 359. including grants of \$80, 726.) (Revenue \$)
44	THE PROGRAM PROVIDES FINANCIAL AID TO KENYAN SECONDARY AND POST
	SECONDARY STUDENTS FOR TUITION, MENTORING AND RELATED EDUCATION SUPPORT
	SERVICES.
	DEKATCED.
4b	(Code) (Expenses \$) (Revenue \$)
7.5	/cone \ /cxhelees a \ Illicingling & alice of a \ / Hevelore 2 \ / Hevelore 2
	.7749/-
4c	(Code) (Expenses \$
•	(code) /cxbelises 2 including drains or 2) /Hevelue 2)
ســــــــــــــــــــــــــــــــــــ	Other program conjuges (Decembe in Schodule O.)
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$) Total program service expenses \$ 1.00, 3.5.9.

Form **990** (2012)

Form 990 (2012) EDUCATION FOR ALL CHILDREN
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)?		163	140
•	If "Yes," complete Schedule A	1	х	ļ
•	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	\vdash
2	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for		_ <u>v</u>	<u> </u>
3		_		v
	public office? If "Yes," complete Schedule C, Part I	3_		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			7.7
_	during the tax year? If "Yes," complete Schedule C, Part II	4		<u> X</u>
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_		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u> X</u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		<u>X</u>
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV .	9		_X_
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11,	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X			
	as applicable		~	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a		X
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		_X_
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		_X_
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in	1		
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		_X_
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	<u> </u>		
	1c and 8a? If "Yes," complete Schedule G, Part II	18	x	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	_ <u></u>		
	complete Schedule G, Part III	19	ι	X
202	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a		
			990	(2012)
				· - /

			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		_X_
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			i
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			}
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K If "No", go to line 25	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	i		
	Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified	i l		
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			ٔ ۔۔ ا
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
þ	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,			v
~~	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			v
24	contributions? If "Yes," complete Schedule M	30		<u> </u>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I			X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	31		
32	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		
•	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
•	Part V, line 1	34		x
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	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		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	-		
	Note. All Form 990 filers are required to complete Schedule O	38	X	
		Form	990/	2012

Form 990 (2012) EDUCATION FOR ALL CHILDREN
Part V Statements Regarding Other IRS Filings and Tax Compliance

	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			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming] ,		
	(gambling) winnings to prize winners?	1c		
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			I
	filed for the calendar year ending with or within the year covered by this return			1
þ	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	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?	<u>3</u> a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b_		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	1	İ	
	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		1	
_	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	<u>5c</u>		
6a	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?	6-		х
h	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	6a		
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	x	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d	ļ l		
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		<u>X</u>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting		ł	
9	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
-	Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966?	0-		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9a		
10	Section 501(c)(7) organizations. Enter.	9b		
	Initiation fees and capital contributions included on Part VIII, line 12	.		
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:	.		
а	Gross income from members or shareholders 11a	.		
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	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 Start the amount of receives an head			
	Enter the amount of reserves on hand	44-		v
	Did the organization receive any payments for indoor tanning services during the tax year? If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14a		X
<u>u</u>	1 100, has a most a 1 offit (20 to report these payments: II NO, provide an explanation in schedule O	14b	990	

Form 990 (2012) EDUCATION FOR ALL CHILDREN 26-1979493 Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI X Section A. Governing Body and Management No Yes 10 1a Enter the number of voting members of the governing body at the end of the tax year 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. 10 b 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 any other X officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customanly performed by or under the direct supervision 3 X of officers, directors, or trustees, or key employees to a management company or other person? 3 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 R 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X The governing body? 8a X Each committee with authority to act on behalf of the governing body? 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 9 X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) No Yes 10a Did the organization have local chapters, branches, or affiliates? 10a X 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 X 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c X Did the organization have a written whistleblower policy? 13 13 Did the organization have a written document retention and destruction policy? 14 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official X <u>1</u>5b X Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a X taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the 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 ▶NH Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. X Upon request Another's website Own website

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

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

20

statements available to the public during the tax year.

RODMAN VAN SCIVER - 603-436-3437 11 HEATHER DRIVE, RYE, NH 03870

	(2012)	

च्या ।

EDUCATION FOR ALL CHILDREN

26-1979493

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid

 List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- 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.

X Check this box if neither the organization n	or any related	orga	anıza	tion	cor	npei	nsat	ed any current officer, o	director, or trustee.	
(A)	(B)	(C)						(D)	(E)	(F)
Name and Title	Average	Position (do not check more than one				one	Reportable	Reportable	Estimated	
	hours per	box	, unle	ss pe	rson	ıs bot	h an	compensation	compensation	amount of
	week	\vdash	ceran	dad	irecto	xr/trus	tee)	from	from related	other
	(list any	ecto						the	organizations	compensation
	hours for	5	9			zated		organization	(W-2/1099-MISC)	from the
	related organizations	trustee or director	trust		8	beu		(W-2/1099-MISC)		organization and related
	below	la p	tional		ge	ž si	_			organizations
	line)	Individual	Institutional trustee	Officer	Key employee	Highest compensated employee	Forme			Organizations
(1) NANCY VAN SCIVER	25.00									
PRESIDENT		X		X				0.	0.	0.
(2) ROD VAN SCIVER	10.00							_		_
TREASURER		X		Х				0.	0.	0.
(3) KARIN BARNDOLLAR	5.00									
SECRETARY		X		Х				0.	0.	0.
(4) PETER BURGER	5.00							_	_	_
DIRECTOR		X			_	ļ		0.	0.	0.
(5) JANET CROWDER	5.00									_
DIRECTOR		X						0.	0.	0.
(6) JOSEPHINE DEUPREE	5.00									
DIRECTOR		X				ļ		0.	0.	0.
(7) JOHN F. DINKEL JR.	5.00									•
DIRECTOR	F 00	X			_			0.	0.	0.
(8) DAVID LUDD	5.00									•
VICE PRESIDENT	F 00	X			_			0.	0.	0.
(9) DONNA RUDDY	5.00							0		•
DIRECTOR	F 00	X						0.	0.	0.
(10) LISA TEAGUE	5.00	X						•	_	0
DIRECTOR		A	\vdash		_	-		0.	0.	0.
		ł						,		
		-			-					
			\vdash				-	<u> </u>		
		ł								
		 -	-							
		1								
		1								
					L					
	<u></u>					\Box				

Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 of compensation from the organization

	-	Check if Schedule O contain	s a response to any question i	n this Part VIII			
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts ts	1 a	Federated campaigns	1a		_		
Contributions, Gifts, Grants and Other Similar Amounts	b		1b				
اڠ ي	С	- · · ·	1c				
ar it	d		1d				'
3, E	e						
Ö		All other contributions, gifts, grants,	· —				
돌	•	similar amounts not included above	1f 162,158.				
걸히	~		-				
SE S	g	Noncash contributions included in lines 1a- Total. Add lines 1a-1f	\$ 	162,158.			
		Total: Add lines 1a 11	Business Code	102,130.			
	2 a			•	•	-	-
Š	2 a b						
Je Se			i I				
E S	C			<u> </u>		<u> </u>	
Pega	d			 -			
Program Service Revenue	e 4	All other program service revenue					-
_		Total, Add lines 2a-2f	<u> </u>				
	3	Investment income (including div					
	3	other similar amounts)	lacinas, interest, and	10.			10.
	4	Income from investment of tax-ex	·· ·	100			
	5	Royalties					
	3	rioyanies	(i) Real (ii) Personal				
	6 a	Gross rents	(li) reisonal				
	b						
	C	_ , , ,					
		Net rental income or (loss)	•	-			
		· · · -	i) Securities (ii) Other				
	/ a	assets other than inventory	ij Securities (ii) Otries				
	h	Less: cost or other basis					
	D	and sales expenses	į				
	_	Gain or (loss)					
		• • • • • • •	•				
	d	Net gain or (loss) Gross income from fundraising e					 .
<u> </u>	0 4	including \$	` l				
Ş		contributions reported on line 1c					
Other Revenu		Part IV, line 18	a 69,820.				
je	h	Less: direct expenses	ь 26,976.				
δ		Net income or (loss) from fundral	****	42,844.		•	42,844.
		Gross income from gaming activi		12/011.			12,011.
	Ju	Part IV, line 19	a				
	h	Less: direct expenses	b				
		Net income or (loss) from gaming					
		Gross sales of inventory, less ret	· · · · · ·	-			
	10 a	and allowances	a105.				
	h	Less: cost of goods sold	ь 1,022.				
		Net income or (loss) from sales o		-917.	-917.		
- 1		Miscellaneous Revenue	Business Code	<u> </u>	717.		
1	11 a						
ļ	ıı a b						
- [C						
		All other revenue					
	_	Total. Add lines 11a-11d					
	12	Total revenue. See instructions.		204,095.	-917.	0.	42,854.
	- 4-		<u> </u>	<u> </u>	·		<u> </u>

Sec	tion 501(c)(3) and 501(c)(4) organizations must com	plete all columns All oth	er organizations must co	omplete column (A).	
	Check if Schedule O contains a respon	ise to any question in thi		·	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and			-	
	organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the United States See Part IV, line 22			*	
3	Grants and other assistance to governments,				, ^
	organizations, and individuals outside the			·	•
	United States. See Part IV, lines 15 and 16	80,726.	80,726.		
4	Benefits paid to or for members				· · · · · · · · · · · · · · · · · · ·
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	18,838.		18,838.	
8	Pension plan accruals and contributions (include				
_	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	1 441		1 441	
10	Payroll taxes	1,441.		1,441.	
11	Fees for services (non-employees):				
a		2,841.	~	2,841.	***
b		2,041.		2,041.	
d	· · · · · · · · · · · · · · · · ·				
e		***			-
f	Investment management fees		1000		
q					,
9	column (A) amount, list line 11g expenses on Sch O.)	3,997.	3,084.	913.	
12	Advertising and promotion	3,755,0			 .
13	Office expenses	1,382.		1,382.	··-
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel	51.	51.		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest .	,			
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	2,326.		2,326.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	MENTEROD / MITTEROD DIVERDING	9,846.	9,846.		
b		3,100.	3,100.		
c	ONLINE MAINTENANCE	2,114.	2,114.		
đ	STATIONARY & PRINTING	1,281.		1,281.	
е	All other expenses	2,233.	1,438.	795.	
25	Total functional expenses. Add lines 1 through 24e	130,176.	100,359.	29,817.	0.
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)				

Part X Balance Sheet

Check if Schedule O contains a response to any question in this Part X (A) (B) Beginning of year End of year 136,465. 187,281. 1 Cash - non-interest-bearing 1 2 Savings and temporary cash investments 2 115,762. 13,640. 3 Pledges and grants receivable, net 3 7,183. 8,595. Accounts receivable, net 4 4 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 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 instr). Complete Part II of Sch L 6 7 Notes and loans receivable, net 7 4,780. Inventories for sale or use 8 8 9 Prepaid expenses and deferred charges 9 Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D 10a b Less: accumulated depreciation 10b 10c 11 11 Investments - publicly traded securities 12 Investments - other securities. See Part IV, line 11 12 Investments - program-related. See Part IV, line 11 13 13 Intangible assets 14 14 15 Other assets. See Part IV, line 11 15 259,410. 214,296. 16 16 Total assets. Add lines 1 through 15 (must equal line 34) 9,523. 3,893. 17 Accounts payable and accrued expenses 17 18 18 Grants payable 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 3,893. 9,523 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here

X and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 197,687. 176,356. 27 27 Unrestricted net assets Temporarily restricted net assets ... 52,200. 28 34,047. 28 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 32 Retained earnings, endowment, accumulated income, or other funds ... 249,887. 210,403. Total net assets or fund balances ... 33 33 259,410. 214,296. Total liabilities and net assets/fund balances

Part XI Reconciliation of Net Assets	orm	990 (2012) EDUCATION FOR ALL CHILDREN 26-19	79493	Page 12
1 Total revenue (must equal Part VIII, column (A), line 12) 2 Total expenses (must equal Part IX, column (A), line 25) 3 Revenue less expenses Subtract line 2 from line 1 3 73, 919. 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4 249, 887. 5 Net unrealized gains (losses) on investments 5 Donated services and use of facilities 6 Donated services and use of facilities 7 Investment expenses 8 Pror period adjustments 9 Other changes in net assets or fund balances (explain in Schedule O) 9 -113, 403. Part XIII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII 1 Accounting method used to prepare the Form 990: Cash X Accual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 1 If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis C if "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both Separate basis C onsolidated basis Both consolidated and separate basis c If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, or both Separate basis C onsolidated basis Both consolidated and separate basis c If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, or both Separate basis C onsolidated basis Both consolidated and separate basis c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133	Pai	t XI Reconciliation of Net Assets		
2		Check if Schedule O contains a response to any question in this Part XI	<u></u>	X
2				
3 73,919. Netwanieless expenses Subtract line 2 from line 1 249,887. Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4 249,887. Net unrealized gains (losses) on investments 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	1			
4 249 887. Net unrealized gains (losses) on investments 5. Net unrealized gains (losses) on investments 5. Pontated services and use of facilities 6. Donated services and use of facilities 6. Prior period adjustments 7. Prior period adjustments 8. Other changes in net assets or fund balances (explain in Schedule O) 9 -113 ,403. Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 10 210 ,403. Part XII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII	2	Total expenses (must equal Part IX, column (A), line 25)		
5 Net unrealized gams (losses) on investments 6 Donated services and use of facilities 7 Investment expenses 8 Prior period adjustments 9 Other changes in net assets or fund balances (explain in Schedule O) 9 -113,403. 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 10 Tail XIII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XIII Check if Schedule O contains a response to any question in this Part XIII The organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a	3	Revenue less expenses Subtract line 2 from line 1		
6 Donated services and use of facilities 7 Investment expenses 7 7 8 Pror period adjustments 9 Other changes in net assets or fund balances (explain in Schedule O) 9 113,403. 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 10 210,403. Part XIII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII	4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	249	<u>,887.</u>
7 Investment expenses 7	5	Net unrealized gains (losses) on investments		
8 Pror period adjustments 9 Other changes in net assets or fund balances (explain in Schedule O) 9 -113,403. 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) Part XII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII 1 Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 16 Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis b Were the organization's financial statements audited by an independent accountant? 16 "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis Consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis c If "Yes," there is a possible of the consolidated and separate basis c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? 17 If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 18 As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? 18 If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits 18 If the organization why in Schedule O and describe any steps taken to undergo suc	6	Donated services and use of facilities 6		
9 Other changes in net assets or fund balances (explain in Schedule O) Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) Part XIII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII 1 Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O 2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis, consolidated basis or both Separate basis Consolidated basis Both consolidated and separate basis, consolidated basis or both Separate basis Consolidated basis Both consolidated and separate basis, consolidated basis or both Separate basis Consolidated basis Both consolidated and separate basis c if "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis c if "Yes" to line 2 a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to und	7	Investment expenses 7		
Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) Part XII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O 2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis, consolidated basis or both Separate basis Consolidated basis Both consolidated and separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis Color If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? b if "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	8	Prior period adjustments		
Column (B)) Cant XII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII Yes No	9	Other changes in net assets or fund balances (explain in Schedule O)	-113	3,403.
Column (B)) Cant XII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII Yes No	10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,		
Check if Schedule O contains a response to any question in this Part XII Yes No Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits 3b Texture Text			210	,403.
Accounting method used to prepare the Form 990:	Pai	t XII Financial Statements and Reporting		
Accounting method used to prepare the Form 990:		Check if Schedule O contains a response to any question in this Part XII .		
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? 3a X b if "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits 3b				Yes No
Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? 3a X b if "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	1	Accounting method used to prepare the Form 990: Cash X Accrual Other		
Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? 3a X b if "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? 3a X b if "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits 3b	2a		2a	X
Separate basis Consolidated basis Both consolidated and separate basis b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits 3b		If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a		
b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? 3a X b if "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits 3b		separate basis, consolidated basis, or both		
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? 3a X b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits 3b		Separate basis Consolidated basis Both consolidated and separate basis		
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? 3a X b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits 3b	b	Were the organization's financial statements audited by an independent accountant?	2b	X
consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits 3b		, , ,		
Separate basis Consolidated basis Both consolidated and separate basis c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits 3b		•		
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? 3a X b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits 3b				ľ
review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? 3a X b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits 3b	c			
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? 3a X b if "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits 3b	•		2c	
Act and OMB Circular A-133? b if "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits 3a X X			"	
Act and OMB Circular A-133? b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits 3b	За			
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits 3b			3 _a	X
or audits, explain why in Schedule O and describe any steps taken to undergo such audits	b	· · · · · · · · · · · · · · · · · · ·	-	-
	_		3b	
		1		990 (2012)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Employer identification number Name of the organization 26-1979493 EDUCATION FOR ALL CHILDREN Reason for Public Charity Status (All organizations must complete this part.) See instructions Part I The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. c Type III - Functionally integrated d ____ Type III - Non-functionally integrated a Type I **b** Type II By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? g A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, Yes the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s). h (vi) Is the (iv) Is the organization (v) Did you notify the (i) Name of supported (ii) EIN (iii) Type of organization (vii) Amount of monetary organizátion in col. in col. (i) listed in your organization in col. (described on lines 1-9 organization support organized in the U.S.? governing document? above or IRC section (i) of your support? (see instructions)) No Yes Yes No Yes

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

Schedule A (Form 990 or 990-EZ) 2012

Schedule .	\(\(\text{Form 990 or 990 EZ}\) 2012
Part II	Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

Page 2

	(Complete only if you checke fails to qualify under the tests				on failed to qualify	under Part I	III If the organization	on
<u></u>		s listed below, piez	ise complete rait	···· /		_		
	ction A. Public Support					T		
	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 20	12 (f) Tota	al
1	Gifts, grants, contributions, and							
	membership fees received (Do not							
	include any "unusual grants ")			ļ		ļ		
2	Tax revenues levied for the organ-							
	ization's benefit and either paid to					ł		
	or expended on its behalf							
3	The value of services or facilities							
	furnished by a governmental unit to				1	ł		
	the organization without charge				ļ	ļ		
4	Total. Add lines 1 through 3					ļ		
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							
Se	ction B. Total Support							
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 20°	12 (f) Tota	al
7	Amounts from line 4							
8	Gross income from interest,							
	dividends, payments received on							
	securities loans, rents, royalties							
	and income from similar sources							
9	Net income from unrelated business							
	activities, whether or not the					ŀ		
	business is regularly carried on							
10	Other income Do not include gain							
	or loss from the sale of capital							
	assets (Explain in Part IV)				1			
11	Total support. Add lines 7 through 10							
12	Gross receipts from related activities	, etc. (see instructi	ons)		<u> </u>	12		
13	First five years. If the Form 990 is for	r the organization's	s first, second, thi	rd, fourth, or fifth t	tax year as a secti	on 501(c)(3)		
	organization, check this box and stop	o here						-
Se	ction C. Computation of Publ	ic Support Pe	rcentage					
14	Public support percentage for 2012 (line 6, column (f) d	ivided by line 11,	column (f))		14		%
15	Public support percentage from 2011	Schedule A, Part	II, line 14			15		%
16a	33 1/3% support test - 2012. If the	organization did no	ot check the box o	n line 13, and line	14 is 33 1/3% or	more, check	this box and	
	stop here. The organization qualifies	as a publicly supp	orted organization	n			•	•
t	33 1/3% support test - 2011. If the	organization did no	ot check a box on	line 13 or 16a, and	d line 15 is 33 1/39	% or more, c	check this box	
	and stop here. The organization qual	-				•	•	
17a	10% -facts-and-circumstances tes				ne 13, 16a. or 16b.	and line 14	is 10% or more.	
	and if the organization meets the "fac	_						
	meets the "facts-and-circumstances"			-			<u> </u>	▶
F	10% -facts-and-circumstances tes	-				17a. and lin	e 15 is 10% or	
~	more, and if the organization meets the							
	organization meets the "facts and cir		· ·		• •			

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

Schedule A (Form 990 or 990 EZ) 2012 EDUCATION FOR ALL CHILDREN 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

50	qualify under the tests listed b	elow, please comp	olete Part II)		<u> </u>		
	· · · · · · · · · · · · · · · · · · ·	(-) 2009	(F) 3000	(~) 2010	(4) 2011	(-) 2012	(f) Total
	endar 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	140 010	107 700	172 010	145 000	01 500	740 104
_	include any "unusuał grants ")	149,012.	197,788.	1/3,812.	145,983.	81,599.	748,194.
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	5,122.	26,787.	34,061.	62,625.	37,181.	165,776.
3	Gross receipts from activities that						
	are not an unrelated trade or bus- iness under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	154,134.	224,575.	207,873.	208,608.	118,780.	913,970.
	Amounts included on lines 1, 2, and	201/1010	221/3/30	20170131	20070001	110//001	<u> </u>
•	3 received from disqualified persons						0.
t	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year			/ - 1			0.
,	Add lines 7a and 7b						0.
	Public support (Subtract line 7c from line 6)						913,970.
	ction B. Total Support						<u> </u>
Cale	ndar year (or fiscal year beginning in)	(a) 2008	(ь) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	Amounts from line 6	154,134.	224,575.	207,873.	208,608.		913,970.
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	52.	33.	19.	13.	10.	127.
t	Unrelated business taxable income						_
	(less section 511 taxes) from businesses acquired after June 30, 1975						
c	Add lines 10a and 10b	52.	33.	19.	13.	10.	127.
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 (Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11, and 12)	154,186.	224,608.	207,892.	208,621.	118,790.	914,097.
14	First five years. If the Form 990 is for	the organization's	first, second, thire	d, fourth, or fifth ta	x year as a sectio	n 501(c)(3) organiz	
	check this box and stop here						<u>.</u> ▶X
Sec	ction C. Computation of Publi	ic Support Per	rcentage				
15	Public support percentage for 2012 (I	ine 8, column (f) di	vided by line 13, c	olumn (f))		15	<u>~</u>
16	Public support percentage from 2011	Schedule A, Part	III, line 15			16	%
Sec	ction D. Computation of Inves	stment Income	e Percentage			- 1	
17	Investment income percentage for 20	12 (line 10c, colun	nn (f) divided by lin	e 13. column (f))		17	%
18		•	•		•••	18	%
	33 1/3% support tests - 2012. If the	•	•	on line 14. and line	15 is more than 3		
	more than 33 1/3%, check this box as 33 1/3% support tests - 2011. If the	nd stop here. The	organization quali	fies as a publicly s	supported organiza	ation	▶□
	line 18 is not more than 33 1/3%, che	~				· · · · · · · · · · · · · · · · · · ·	
20	Private foundation. If the organization						···

Dort IV													-	40-				
Part IV Suppand P	art III, Iır	ntal In ne 12 Al	formation so complete	1. Con this p	nplete that art for a	nis part i iny addi	to provide tional infoi	the e	explar on. (S	nations ee instr	required actions)	by Part I	I, line 1	10, Part 	II, line	17a o	r 17b	
EDUCATION	FOR	ALL	CHILD	REN	CHAI	NGED	FROM	Α	FI	SCAL	YEA	R_ENI	OF	MAI	RCH	31	то	Α
CALENDAR Y	YEAR	END	. THIS	CHA	NGE	WAS	MADE	FC	R !	THE	CONV	ENIE	ICE_	OF T	THE			
ORGANIZAT	ION.																	
								•••										
		- 						•			•			·				
	· · · · · · ·																	
																		
																	<u> </u>	
																		-
											 							
											_							
						_									_			
									_									
	-						_											
											-							

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

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

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Attach to Form 990. ► See separate instructions.

Name of the organization **Employer identification number** 26-1979493 EDUCATION FOR ALL CHILDREN Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, Yes X No the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed) (c) Number of (e) If activity listed in (d) (a) Region (b) Number of (d) Activities conducted in region (f) Total employees, agents, and expenditures offices (by type) (e.g., fundraising, program is a program service, for and in the region services, investments, grants to describe specific type independent contractors investments recipients located in the region) of service(s) in region ın region in region SCHOLARSHIPS TO RECIPIENTS SUB-SAHARAN AFRICA -80,726. IN THE REGION KENYA 80,726. 3 a Sub-total b Total from continuation sheets to Part I 0. c Totals (add lines 3a and 3b) 80.726.

26-1979493

EDUCATION FOR ALL CHILDREN

Schedule F (Form 990) 2012

Page 2

Ł

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000 Part II can be duplicated if additional space is needed

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FM) appraisal, other)
		AFRICAN NAZARENE UNIVERSITY (ANU)	TUITION ASSISTANCE AND SCHOLARSHIPS	80,726,	WIRE TRANSFER	0		МУ
						•		
							:	
	f recipient organization the grantee or counse	ns listed above that are	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	foreign country,	recognized as tax-e>	kempt by ▼		
3 Enter total number of	Enter total number of other organizations or entities	or entities				•		

Schedule F (Form 990) 2012

EDUCATION FOR ALL CHILDREN

Page 3

26-1979493

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16 Schedule F (Form 990) 2012

Part III can be duplicated if additional space is needed.

(h) Method of valuation (book, FMV, appraisal, other)					
(g) Description of non-cash assistance	,,				
(f) Amount of non-cash assistance					
(e) Manner of cash disbursement					
(d) Amount of cash grant					
(c) Number of (d) Amount of recipients cash grant					
(b) Region					
(a) Type of grant or assistance (b) Region					

Schedule F (Form 990) 2012

schedule F (Form 990) 2012 EDUCATION FOR ALL CHILDREN	26-1979493 Page 4
Part IV Foreign Forms	
Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	•
Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust	1
a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Yes X No
3 Did the organization have an ownership interest in a foreign corporation during the tax year? If "Y the organization may be required to file Form 5471, Information Return of U.S. Persons With Resp. Certain Foreign Corporations. (see Instructions for Form 5471)	•
Was the organization a direct or indirect shareholder of a passive foreign investment company or qualified electing fund during the tax year? If "Yes," the organization may be required to file Form Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Election (see Instructions for Form 8621)	8621,
Did the organization have an ownership interest in a foreign partnership during the tax year? If "Y the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certa Foreign Partnerships (see Instructions for Form 8865)	
Did the organization have any operations in or related to any boycotting countries during the tax "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instr for Form 5713)	•

Scriedule F (Form 990) 2012 EDUCATION FOR ALL CHILDREN	26-1979493	Page 5
Part, V Supplemental Information	_	
Complete this part to provide the information required by Part I, line 2 (monitoring of funds), Part I,		
amounts of investments vs. expenditures per region); Part II, line 1 (accounting method), Part III (accounting method), Part I		III, column
SCHEDULE F, PART I, LINE 2: GRANTS AND SCHOLARSHIPS ARE	GIVEN THROUGH	THE
AFRICAN NAZARENE UNIVERISTY WHO VETS BOTH SCHOLARHIP APE	LICATIONS AND	
SECONDARY SCHOOLS RECIPIENTS.		
SCHEDULE F, PART I, LINE 3: DIRECT COST OF SCHOLARSHIPS	GIVEN	
		•
		
		

SCHEDULE G

Department of the Treasury

Internal Revenue Service

(Form,990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

OMB No 1545-0047

Open To Public Inspection

Name of the organization

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

Employer identification number 26-1979493 EDUCATION FOR ALL CHILDREN Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17 Form 990-EZ filers are not Part I required to complete this part Indicate whether the organization raised funds through any of the following activities. Check all that apply Mail solicitations Solicitation of non-government grants а Internet and email solicitations Solicitation of government grants b Phone solicitations Special fundraising events C In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? __ No b if "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (iii) Did fundraiser have custody or control of contributions? (v) Amount paid (vi) Amount paid (i) Name and address of individual to (or retained by) (iv) Gross receipts (ii) Activity to (or retained by) fundraiser or entity (fundraiser) from activity organization listed in col. (i) Yes 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Sck Pa		le G (Form 990 or 990-EZ) 2012 EDUCAT: II Fundraising Events. Complete if the	ON FOR ALL O	CHILDREN	26 -	-1979493 Page 2				
Ľ.		of fundraising event contributions and g								
			(a) Event #1	(b) Event #2	(c) Other events					
				GOLF AND	NONE	(d) Total events				
			AUCTION	TENNIS EVENT	1,01,2	(add col (a) through				
_			(event type)	(event type)	(total number)	col (c))				
Revenue										
9.0	1	Gross receipts	20,456.	49,364.		69,820.				
œ	•		•							
	2	Less. Contributions								
	3	Gross income (line 1 minus line 2)	20,456.	49,364.		69,820.				
	4	Cash prizes				}				
		•								
Direct Expenses	5	Noncash prizes		400.		400.				
	6	Rent/facility costs		2,665.		2,665.				
						•				
	7	Food and beverages		3,477.		3,477.				
ă					-					
	8	Entertainment								
	9	Other direct expenses		20,434.		20,434.				
	10	Direct expense summary. Add lines 4 throug	h 9 ın column (d)		>	(26,976)				
		Net income summary Combine line 3, colum			<u> </u>	42,844.				
Pá	art I	III Gaming. Complete if the organization	answered "Yes" to Form	1 990, Part IV, line 19, or r	eported more than					
		\$15,000 on Form 990-EZ, line 6a.								
Ф			(a) Bingo	(b) Pull tabs/instant	(c) Other gaming	(d) Total gaming (add				
Revenue			(u) 5,go	bingo/progressive bingo	(c) Culor gaining	col. (a) through col. (c))				
ě										
	1	Gross revenue .				4—				
Se	2	Cash prizes								
Expenses										
×	3	Noncash prizes								
S E										
Direc	4	Rent/facility costs								
	5	Other direct expenses								
			Yes %	Yes %	Yes %					
	6	Volunteer labor	No No	No No	No					
	7 Direct expense summary. Add lines 2 through 5 in column (d)									
	8	Net gaming income summary Combine line	1, column d, and line 7	•	<u> </u>					
9		ter the state(s) in which the organization opera	-							
		the organization licensed to operate gaming a				Yes No				
b	If "	No," explain:								
	_									
		ere any of the organization's gaming licenses r	•		/ear?	Yes No				
b	lf "	Yes," explain:								

Sch	edule G (Form 990 or 990-EZ) 2012 EDUCATION FOR ALL CHILDREN 2	<u>5-1979493</u>	Page 3
11	Does the organization operate gaming activities with nonmembers?	Yes	☐ No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed		
	to administer charitable gaming?	Yes	☐ No
13	Indicate the percentage of gaming activity operated in:		
	The organization's facility	13a	%
	An outside facility	13b	
	Enter the name and address of the person who prepares the organization's gaming/special events books and records:	1007	
1-4	Title the hame and address of the person who prepares the organization's gaming special events books and resords		
	Alama 🏲		
	Name		
	Address		
•		<u></u>	—
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	∟ No
b	olf "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the amount		
	of gaming revenue retained by the third party > \$		
c	: If "Yes," enter name and address of the third party		
	Name		
	Address >		
	Address F		
46	Coming manager informations		
16	Gaming manager information:		
	No. 10 No		
	Name		
	Gaming manager compensation \$		
	Description of services provided		
	☐ Director/officer ☐ Employee ☐ Independent contractor		
17	Mandatory distributions:		
	solutions is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	Yes	No
	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in t	he	
Ľ	,	i i e	
D-	organization's own exempt activities during the tax year \$ \$		
Pa	Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, column		
	lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional inform	ation (see instruct	ions)
		·	
		· -	
		·	

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

Open to Public Inspection

EDUCATION FOR ALL CHILDREN	Employer identification number 26-1979493
FORM 990, PART VI, SECTION A, LINE 2: THE ORGANIZATION'S	PRESIDENT AND
TREASURER ARE MARRIED.	
FORM 990, PART VI, SECTION B, LINE 11: A COPY OF THE 990	IS EMAILED TO THE
ORGANIZATION'S GOVERNING BODY MEMBERS BEFORE IT IS FILED,	AND IT IS FILED
WITH THE IRS UPON THEIR APPROVAL.	
FORM 990, PART VI, SECTION C, LINE 19: THE GOVERNING DOCU	MENTS, CONFLICT
OF INTEREST POLICY, AND THE FINANCIAL STATEMENTS ARE AVAI	LABLE TO THE
PUBLIC UPON REQUEST.	
·	
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
PLEDGES RECEIVABLE ADJUSTMENT	-113,403.

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

• If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box $ightharpoons \overline{X}$ If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form). Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868 Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form. visit www irs gov/efile and click on e-file for Chanties & Nonprofits. Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns Type or Name of exempt organization or other filer, see instructions. Employer identification number (EIN) or print EDUCATION FOR ALL CHILDREN 26-1979493 File by the Number, street, and room or suite no. If a P.O. box, see instructions. Social security number (SSN) due date for filing your 11 HEATHER DRIVE City, town or post office, state, and ZIP code. For a foreign address, see instructions instructions RYE, NH 03870 Enter the Return code for the return that this application is for (file a separate application for each return) 0 1 **Application** Return **Application** Return Is For Code Is For Code Form 990 or Form 990-EZ 01 Form 990-T (corporation) 07 Form 990-BL Form 1041-A Form 4720 (individual) 03 Form 4720 Form 990-PF 04 Form 5227 10 Form 990-T (sec 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) 06 Form 8870 12 RODMAN VAN SCIVER The books are in the care of ▶ 11 HEATHER DRIVE - RYE, NH 03870 Telephone No. ► 603-436-3437 FAX No. If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for. I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until AUGUST 15, 2013 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: calendar year or ► X tax year beginning APR 1, 2012 , and ending DEC 31, 2012 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return X Change in accounting period 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. 0. If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made Include any prior year overpayment allowed as a credit. 0. Balance due. Subtract line 3b from line 3a Include your payment with this form, if required,

by using EFTPS (Electronic Federal Tax Payment System) See instructions