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

**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  
**2012**  
**Open to Public Inspection**

**A For the 2012 calendar year, or tax year beginning 01-01-2012, 2012, and ending 12-31-2012**

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization EDUCAUSE		<b>D</b> Employer identification number 84-1455437
	Doing Business As		<b>E</b> Telephone number (303) 449-4430
	Number and street (or P O box if mail is not delivered to street address) 282 CENTURY PLACE NO 5000	Room/suite	
	City or town, state or country, and ZIP + 4 LOUISVILLE, CO 80027		<b>G</b> Gross receipts \$ 41,065,015
<b>F</b> Name and address of principal officer DIANA OBLINGER 1150 18TH ST NW SUITE 900 WASHINGTON, DC 20036		<b>H(a)</b> Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions) <b>H(c)</b> Group exemption number	
<b>I</b> Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) (Insert no ) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
<b>J</b> Website: WWW EDUCAUSE EDU			
<b>K</b> Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other			<b>L</b> Year of formation 1998
			<b>M</b> State of legal domicile CO

**Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities ADVANCE HIGHER EDUCATION BY PROMOTING THE USE OF INFORMATION TECHNOLOGY		
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	13
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	12
	<b>5</b> Total number of individuals employed in calendar year 2012 (Part V, line 2a)	<b>5</b>	94
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	350
	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	358,164
<b>b</b> Net unrelated business taxable income from Form 990-T, line 34	<b>7b</b>	0	
<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h)	<b>Prior Year</b>	<b>Current Year</b>
	<b>9</b> Program service revenue (Part VIII, line 2g)	0	28,238
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	36,501,018	34,423,801
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	484,074	540,243
	<b>12</b> Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	5,006	4,770
<b>Expenses</b>	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)	36,990,098	34,997,052
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)	17,753,048	14,370,482
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0	0
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)	8,258,215	9,717,633
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) $\rightarrow$ 0	0	0
	<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	8,914,636	9,277,345
	<b>18</b> Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	34,925,899	33,365,460
<b>19</b> Revenue less expenses Subtract line 18 from line 12	2,064,199	1,631,592	
<b>Net Assets or Fund Balances</b>	<b>20</b> Total assets (Part X, line 16)	<b>Beginning of Current Year</b>	<b>End of Year</b>
	<b>21</b> Total liabilities (Part X, line 26)	29,544,096	36,898,620
	<b>22</b> Net assets or fund balances Subtract line 21 from line 20	11,904,496	16,898,161
		17,639,600	20,000,459

**Part II Signature Block**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

<b>Sign Here</b>	*****	2013-06-21	
	Signature of officer	Date	
<b>Paid Preparer Use Only</b>	DIANA OBLINGER PRESIDENT & CEO Type or print name and title		
	Pnnt/Type preparer's name MARY BETH WIDEGREN CPA	Preparer's signature	Date
	Firm's name $\rightarrow$ CBIZ MHM LLC	Check <input type="checkbox"/> if self-employed PTIN P00538655 Firm's EIN $\rightarrow$ 34-1854260	
	Firm's address $\rightarrow$ 8181 E TUFTS AVENUE SUITE 600 DENVER, CO 80237	Phone no (720) 200-7000	
May the IRS discuss this return with the preparer shown above? (see instructions) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

**Part III Statement of Program Service Accomplishments**

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

**1** Briefly describe the organization's mission

ADVANCE HIGHER EDUCATION BY PROMOTING THE USE OF INFORMATION TECHNOLOGY

**2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?  Yes  No

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?  Yes  No

If "Yes," describe these changes on Schedule O

**4** Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

**4a** (Code ) (Expenses \$ 16,645,217 including grants of \$ 14,370,482 ) (Revenue \$ 16,642,298 )

NEXT GENERATION LEARNING CHALLENGES - PROVIDES GRANT FUNDING TO SUPPORT IDENTIFYING AND SCALING TECHNOLOGY-ENABLED APPROACHES TO DRAMATICALLY IMPROVE COLLEGE READINESS AND COMPLETION (FUNDING PROVIDED BY THE BILL & MELINDA GATES FOUNDATION AND THE WILLIAM AND FLORA HEWLETT FOUNDATION )

**4b** (Code ) (Expenses \$ 3,231,908 including grants of \$ ) (Revenue \$ 6,837,277 )

ANNUAL CONFERENCE - THE ORGANIZATION'S PREMIER PROFESSIONAL DEVELOPMENT INITIATIVE PROVIDES LEARNING AND NETWORKING OPPORTUNITIES TO ALL LEVELS OF INFORMATION TECHNOLOGY PROFESSIONALS

**4c** (Code ) (Expenses \$ 1,999,209 including grants of \$ ) (Revenue \$ 1,479,975 )

PROFESSIONAL DEVELOPMENT - PROVIDES A VARIETY OF SPECIAL-TOPIC, REGIONAL CONFERENCES AND OTHER MEMBER-DRIVEN PROFESSIONAL DEVELOPMENT ACTIVITIES

See Additional Data Table

**4d** Other program services (Describe in Schedule O )

(Expenses \$ 7,419,116 including grants of \$ ) (Revenue \$ 9,464,251 )

**4e Total program service expenses** 29,295,450

**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i> <input checked="" type="checkbox"/>	Yes	
<b>2</b> Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)? <input checked="" type="checkbox"/>	Yes	
<b>3</b> Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		No
<b>4 Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		No
<b>5</b> 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? <i>If "Yes," complete Schedule C, Part III</i>		No
<b>6</b> 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? <i>If "Yes," complete Schedule D, Part I</i> <input checked="" type="checkbox"/>		No
<b>7</b> Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i> <input checked="" type="checkbox"/>		No
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> <input checked="" type="checkbox"/>		No
<b>9</b> 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? <i>If "Yes," complete Schedule D, Part IV</i> <input checked="" type="checkbox"/>		No
<b>10</b> Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> <input checked="" type="checkbox"/>	Yes	
<b>11</b> If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
<b>a</b> Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i> <input checked="" type="checkbox"/>	Yes	
<b>b</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? <i>If "Yes," complete Schedule D, Part VII</i> <input checked="" type="checkbox"/>		No
<b>c</b> 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? <i>If "Yes," complete Schedule D, Part VIII</i> <input checked="" type="checkbox"/>		No
<b>d</b> Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i> <input checked="" type="checkbox"/>		No
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> <input checked="" type="checkbox"/>		No
<b>f</b> 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)? <i>If "Yes," complete Schedule D, Part X</i> <input checked="" type="checkbox"/>		No
<b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i> <input checked="" type="checkbox"/>	Yes	
<b>b</b> Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i> <input checked="" type="checkbox"/>		No
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		No
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States?		No
<b>b</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? <i>If "Yes," complete Schedule F, Parts I and IV</i>		No
<b>15</b> 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? <i>If "Yes," complete Schedule F, Parts II and IV</i>		No
<b>16</b> 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? <i>If "Yes," complete Schedule F, Parts III and IV</i>		No
<b>17</b> 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? <i>If "Yes," complete Schedule G, Part I (see instructions)</i>		No
<b>18</b> Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		No
<b>19</b> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		No
<b>20a</b> Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		No
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		

**Part IV Checklist of Required Schedules** (continued)

<b>21</b>	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? <i>If "Yes," complete Schedule I, Parts I and II</i> . . . . .	<b>21</b>	Yes	
<b>22</b>	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> . . . . .	<b>22</b>		No
<b>23</b>	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? <i>If "Yes," complete Schedule J</i> . . . . .	<b>23</b>	Yes	
<b>24a</b>	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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25</i> . . . . .	<b>24a</b>		No
<b>b</b>	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . . .	<b>24b</b>		
<b>c</b>	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? . . . . .	<b>24c</b>		
<b>d</b>	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . . .	<b>24d</b>		
<b>25a</b>	<b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> . . . . .	<b>25a</b>		No
<b>b</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? <i>If "Yes," complete Schedule L, Part I</i> . . . . .	<b>25b</b>		No
<b>26</b>	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i> . . . . .	<b>26</b>		No
<b>27</b>	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? <i>If "Yes," complete Schedule L, Part III</i> . . . . .	<b>27</b>		No
<b>28</b>	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)			
<b>a</b>	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	<b>28a</b>		No
<b>b</b>	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	<b>28b</b>		No
<b>c</b>	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	<b>28c</b>		No
<b>29</b>	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> . . . . .	<b>29</b>		No
<b>30</b>	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> . . . . .	<b>30</b>		No
<b>31</b>	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> . . . . .	<b>31</b>		No
<b>32</b>	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> . . . . .	<b>32</b>		No
<b>33</b>	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> . . . . .	<b>33</b>		No
<b>34</b>	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> . . . . .	<b>34</b>		No
<b>35a</b>	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	<b>35a</b>		No
<b>b</b>	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .	<b>35b</b>		
<b>36</b>	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .	<b>36</b>		No
<b>37</b>	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? <i>If "Yes," complete Schedule R, Part VI</i>	<b>37</b>		No
<b>38</b>	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O . . . . .	<b>38</b>	Yes	

**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
<b>1a</b>	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable . . . . . <b>1a</b> 139		
<b>1b</b>	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . . . . . <b>1b</b> 0		
<b>1c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? . . . . . <b>1c</b>		
<b>2a</b>	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return . . . . . <b>2a</b> 94		
<b>2b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) . . . . . <b>2b</b> Yes	Yes	
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year? . . . . . <b>3a</b>	Yes	
<b>3b</b>	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O . . . . . <b>3b</b>	Yes	
<b>4a</b>	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? . . . . . <b>4a</b>		No
<b>b</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 . . . . .		
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . . . . <b>5a</b>		No
<b>5b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? . . . . . <b>5b</b>		No
<b>5c</b>	If "Yes," to line 5a or 5b, did the organization file Form 8886-T? . . . . . <b>5c</b>		
<b>6a</b>	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? . . . . . <b>6a</b>		No
<b>6b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? . . . . . <b>6b</b>		
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
<b>a</b>	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? . . . . . <b>7a</b>		No
<b>7b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided? . . . . . <b>7b</b>		
<b>7c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? . . . . . <b>7c</b>		No
<b>7d</b>	If "Yes," indicate the number of Forms 8282 filed during the year . . . . . <b>7d</b>		
<b>7e</b>	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . . . . . <b>7e</b>		No
<b>7f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . . <b>7f</b>		No
<b>7g</b>	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? . . . . . <b>7g</b>		
<b>7h</b>	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? . . . . . <b>7h</b>		
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? . . . . . <b>8</b>		
<b>9</b>	<b>Sponsoring organizations maintaining donor advised funds.</b>		
<b>9a</b>	Did the organization make any taxable distributions under section 4966? . . . . . <b>9a</b>		
<b>9b</b>	Did the organization make a distribution to a donor, donor advisor, or related person? . . . . . <b>9b</b>		
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter		
<b>10a</b>	Initiation fees and capital contributions included on Part VIII, line 12 . . . . . <b>10a</b>		
<b>10b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . . . . . <b>10b</b>		
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter		
<b>11a</b>	Gross income from members or shareholders . . . . . <b>11a</b>		
<b>11b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) . . . . . <b>11b</b>		
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041? . . . . . <b>12a</b>		
<b>12b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year . . . . . <b>12b</b>		
<b>13</b>	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>		
<b>13a</b>	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O . . . . . <b>13a</b>		
<b>13b</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 . . . . . <b>13b</b>		
<b>13c</b>	Enter the amount of reserves on hand . . . . . <b>13c</b>		
<b>14a</b>	Did the organization receive any payments for indoor tanning services during the tax year? . . . . . <b>14a</b>		No
<b>14b</b>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O . . . . . <b>14b</b>		

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 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

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year (13); 1b Enter the number of voting members included in line 1a, above, who are independent (12); 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? (No); 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? (No); 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? (No); 5 Did the organization become aware during the year of a significant diversion of the organization's assets? (No); 6 Did the organization have members or stockholders? (Yes); 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? (Yes); 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? (No); 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a The governing body? (Yes); 8b Each committee with authority to act on behalf of the governing body? (Yes); 9 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 (No).

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? (No); 10b 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?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? (Yes); 11b 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 (Yes); 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? (Yes); 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done (Yes); 13 Did the organization have a written whistleblower policy? (Yes); 14 Did the organization have a written document retention and destruction policy? (Yes); 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15a The organization's CEO, Executive Director, or top management official (Yes); 15b Other officers or key employees of the organization (Yes); If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions); 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? (No); 16b 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

- 17 List the States with which a copy of this Form 990 is required to be filed [X] CO
18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply: [ ] Own website [ ] Another's website [X] Upon request [ ] Other (explain in Schedule O)
19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: [X] MICHELLE MCIRVIN 282 CENTURY PLACE STE 5000 LOUISVILLE, CO (303) 449-4430

**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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) DIANA G OBLINGER PRESIDENT AND CEO	65 00	X		X				395,827	0	53,043
(2) DEBRA H ALLISON CHAIR	1 30	X		X				200	0	0
(3) BRIAN VOSS VICE CHAIR	1 30	X		X				0	0	0
(4) BRUCE MAAS TREASURER	1 30	X		X				0	0	0
(5) SUSAN METROS SECRETARY	1 30	X		X				4,000	0	0
(6) KARA FREEMAN DIRECTOR	1 30	X						0	0	0
(7) JOY HATCH DIRECTOR	1 30	X						0	0	0
(8) DAVID LASSNER DIRECTOR	1 30	X						0	0	0
(9) RICHARD NORTHAM DIRECTOR	1 30	X						0	0	0
(10) PATTIE ORR DIRECTOR	1 30	X						200	0	0
(11) JUSTIN SIPHER DIRECTOR	1 30	X						0	0	0
(12) VERNON C SMITH DIRECTOR	1 30	X						4,200	0	0
(13) RANDALL J STILES DIRECTOR	1 30	X						10,100	0	0
(14) JOEL P COOPER DIRECTOR	1 30	X						0	0	0
(15) TED DODDS DIRECTOR	1 30	X						0	0	0
(16) BRAD WHEELER VICE CHAIR	1 30	X		X				0	0	0
(17) ANDY CALKINS DEPUTY DIRECTOR	45 00					X		183,193	0	38,407

**Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** (continued)

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(18) SUSAN GRAJEK VICE PRESIDENT	50 00				X			234,995	0	35,860
(19) GREG JACKSON VICE PRESIDENT	50 00				X			343,264	0	42,652
(20) GARTH JORDAN VICE PRESIDENT	50 00				X			230,205	0	45,974
(21) JULIE LITTLE VICE PRESIDENT	50 00				X			171,524	0	26,142
(22) MATTHEW MILLIRON CIO	40 00					X		156,913	0	31,716
(23) JOANNE DEHONEY CHIEF OF STAFF	40 00					X		150,273	0	24,173
(24) RODNEY PETERSON SENIOR GOVT RELATIONS	45 00					X		147,355	0	35,043
(25) CATHERINE YANG SENIOR DIRECTOR - CONTENT	40 00					X		164,310	0	30,088
<b>1b Sub-Total</b>										
<b>c Total from continuation sheets to Part VII, Section A</b>										
<b>d Total (add lines 1b and 1c)</b>								2,196,559	0	363,098

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **20**

	Yes	No
<b>3</b> Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		No
<b>4</b> For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	Yes	
<b>5</b> Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		No

**Section B. Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation
IRONWORKS CONSULTING LLC PO BOX 7777 PHILADELPHIA PA 191750501	WEBSITE REDESIGN	1,640,083
FREEMAN DECORATING 1600 VICEROY SUITE 100 DALLAS TX 75235	CONF MGMT, SIGNAGE, DECOR	266,455
SAS INSTITUTE SAS CAMPUS DRIVE CARY NC 27513	LICENSING/SDS SUBCONTRACT	239,386
THE MAGAZINE GROUP 1129 20TH STREET NW SUITE 700 WASHINGTON DC DC 20036	ER DESIGN/PROD	217,582
LIPMAN HEARNE 200 S MICHIGAN AVENUE SUITE 1600 CHICAGO IL 60604	PUB RELATIONS/COMMUNICATIONS	215,411

**2** Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **7**

**Part VIII Statement of Revenue**

Check if Schedule O contains a response to any question in 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	
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1a</b> Federated campaigns . . . . . <b>1a</b> _____					
	<b>b</b> Membership dues . . . . . <b>1b</b> _____					
	<b>c</b> Fundraising events . . . . . <b>1c</b> _____					
	<b>d</b> Related organizations . . . . . <b>1d</b> _____					
	<b>e</b> Government grants (contributions) <b>1e</b> _____					
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above <b>1f</b> _____ 28,238					
	<b>g</b> Noncash contributions included in lines 1a-1f \$ _____					
	<b>h Total.</b> Add lines 1a-1f . . . . . <b>▶</b>		28,238			
<b>Program Service Revenue</b>		<b>Business Code</b>				
	<b>2a</b> GRANT ADMIN & SUBAWARD _____	900099	16,997,499	16,997,499		
	<b>b</b> MEMBERSHIP DUES _____	900099	5,376,352	5,376,352		
	<b>c</b> REGISTRATIONS _____	900099	5,042,744	5,042,744		
	<b>d</b> BOOTH RENTALS _____	532000	3,398,153	3,398,153		
	<b>e</b> SUBSCRIPTION INCOME _____	511120	1,917,347	1,917,347		
	<b>f</b> All other program service revenue _____		1,691,706	513,826	358,164	819,716
<b>g Total.</b> Add lines 2a-2f . . . . . <b>▶</b>		34,423,801				
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts) . . . . . <b>▶</b>		531,419		531,419	
	<b>4</b> Income from investment of tax-exempt bond proceeds . . . . . <b>▶</b>					
	<b>5</b> Royalties . . . . . <b>▶</b>		4,770		4,770	
	<b>6a</b> Gross rents	(i) Real				
		(ii) Personal				
		<b>b</b> Less rental expenses				
		<b>c</b> Rental income or (loss)				
	<b>d</b> Net rental income or (loss) . . . . . <b>▶</b>					
	<b>7a</b> Gross amount from sales of assets other than inventory	(i) Securities	6,072,727			
		(ii) Other		4,060		
		<b>b</b> Less cost or other basis and sales expenses	6,066,417		1,546	
		<b>c</b> Gain or (loss)	6,310		2,514	
	<b>d</b> Net gain or (loss) . . . . . <b>▶</b>		8,824			8,824
	<b>8a</b> Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 . . . . . <b>a</b>					
		<b>b</b> Less direct expenses . . . . . <b>b</b>				
<b>c</b> Net income or (loss) from fundraising events . . . . . <b>▶</b>						
<b>9a</b> Gross income from gaming activities See Part IV, line 19 . . . . . <b>a</b>						
	<b>b</b> Less direct expenses . . . . . <b>b</b>					
	<b>c</b> Net income or (loss) from gaming activities . . . . . <b>▶</b>					
<b>10a</b> Gross sales of inventory, less returns and allowances . . . . . <b>a</b>						
	<b>b</b> Less cost of goods sold . . . . . <b>b</b>					
	<b>c</b> Net income or (loss) from sales of inventory . . . . . <b>▶</b>					
Miscellaneous Revenue	<b>Business Code</b>					
<b>11a</b> _____						
<b>b</b> _____						
<b>c</b> _____						
<b>d</b> All other revenue . . . . .						
<b>e Total.</b> Add lines 11a-11d . . . . . <b>▶</b>						
<b>12 Total revenue.</b> See Instructions . . . . . <b>▶</b>		34,997,052	33,245,921	358,164	1,364,729	

**Part IX Statement of Functional Expenses**

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

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

<b>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</b>		<b>(A)</b> Total expenses	<b>(B)</b> Program service expenses	<b>(C)</b> Management and general expenses	<b>(D)</b> Fundraising expenses
<b>1</b>	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	14,370,482	14,370,482		
<b>2</b>	Grants and other assistance to individuals in the United States. See Part IV, line 22				
<b>3</b>	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
<b>4</b>	Benefits paid to or for members				
<b>5</b>	Compensation of current officers, directors, trustees, and key employees	1,598,186	1,484,953	113,233	
<b>6</b>	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
<b>7</b>	Other salaries and wages	6,320,007	4,278,713	2,041,294	
<b>8</b>	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	524,238	312,775	211,463	
<b>9</b>	Other employee benefits	751,547	591,458	160,089	
<b>10</b>	Payroll taxes	523,655	322,048	201,607	
<b>11</b>	Fees for services (non-employees)				
<b>a</b>	Management				
<b>b</b>	Legal	72,155	12,568	59,587	
<b>c</b>	Accounting	52,550		52,550	
<b>d</b>	Lobbying				
<b>e</b>	Professional fundraising services. See Part IV, line 17				
<b>f</b>	Investment management fees				
<b>g</b>	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	1,915,122	1,445,154	469,968	
<b>12</b>	Advertising and promotion				
<b>13</b>	Office expenses	669,866	516,263	153,603	
<b>14</b>	Information technology	9,969		9,969	
<b>15</b>	Royalties				
<b>16</b>	Occupancy	434,083	300,765	133,318	
<b>17</b>	Travel	794,417	685,485	108,932	
<b>18</b>	Payments of travel or entertainment expenses for any federal, state, or local public officials				
<b>19</b>	Conferences, conventions, and meetings	3,885,195	3,885,195		
<b>20</b>	Interest				
<b>21</b>	Payments to affiliates				
<b>22</b>	Depreciation, depletion, and amortization	593,280	415,842	177,438	
<b>23</b>	Insurance	21,676	15,018	6,658	
<b>24</b>	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
<b>a</b>	MISCELLANEOUS	170,986	134,222	36,764	
<b>b</b>	REPAIRS & MAINTENANCE	159,364	114,234	45,130	
<b>c</b>	FOOD & BEVERAGE	138,133	121,055	17,078	
<b>d</b>	PROFESSIONAL DEVELOPMEN	125,442	96,638	28,804	
<b>e</b>	All other expenses	235,107	192,582	42,525	
<b>25</b>	<b>Total functional expenses.</b> Add lines 1 through 24e	33,365,460	29,295,450	4,070,010	0
<b>26</b>	<b>Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> 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
<b>Assets</b>	<b>1</b> Cash—non-interest-bearing . . . . .	400,058	<b>1</b>	813,748
	<b>2</b> Savings and temporary cash investments . . . . .	6,906,862	<b>2</b>	11,086,991
	<b>3</b> Pledges and grants receivable, net . . . . .		<b>3</b>	
	<b>4</b> Accounts receivable, net . . . . .	362,840	<b>4</b>	193,062
	<b>5</b> Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L . . . . .			<b>5</b>
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L . . . . .			<b>6</b>
	<b>7</b> Notes and loans receivable, net . . . . .		<b>7</b>	
	<b>8</b> Inventories for sale or use . . . . .		<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges . . . . .	382,562	<b>9</b>	496,301
	<b>10a</b> Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D . . . . .	5,004,162		
	<b>b</b> Less accumulated depreciation . . . . .	1,451,172	1,973,634	<b>10c</b>
	<b>11</b> Investments—publicly traded securities . . . . .	19,228,125	<b>11</b>	20,618,720
	<b>12</b> Investments—other securities See Part IV, line 11 . . . . .		<b>12</b>	
	<b>13</b> Investments—program-related See Part IV, line 11 . . . . .		<b>13</b>	
	<b>14</b> Intangible assets . . . . .		<b>14</b>	
	<b>15</b> Other assets See Part IV, line 11 . . . . .	290,015	<b>15</b>	136,808
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 34) . . . . .	29,544,096	<b>16</b>	36,898,620	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .	2,171,067	<b>17</b>	2,394,638
	<b>18</b> Grants payable . . . . .		<b>18</b>	
	<b>19</b> Deferred revenue . . . . .	9,733,429	<b>19</b>	14,503,523
	<b>20</b> Tax-exempt bond liabilities . . . . .		<b>20</b>	
	<b>21</b> Escrow or custodial account liability Complete Part IV of Schedule D . . . . .		<b>21</b>	
	<b>22</b> 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 . . . . .		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties . . . . .		<b>23</b>	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties . . . . .		<b>24</b>	
	<b>25</b> 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 . . . . .		<b>25</b>	
	<b>26 Total liabilities.</b> Add lines 17 through 25 . . . . .	11,904,496	<b>26</b>	16,898,161
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>			
	<b>27</b> Unrestricted net assets . . . . .	17,429,954	<b>27</b>	19,742,356
	<b>28</b> Temporarily restricted net assets . . . . .	109,646	<b>28</b>	158,103
	<b>29</b> Permanently restricted net assets . . . . .	100,000	<b>29</b>	100,000
	<b>Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.</b>			
	<b>30</b> Capital stock or trust principal, or current funds . . . . .		<b>30</b>	
	<b>31</b> Paid-in or capital surplus, or land, building or equipment fund . . . . .		<b>31</b>	
	<b>32</b> Retained earnings, endowment, accumulated income, or other funds . . . . .		<b>32</b>	
	<b>33</b> Total net assets or fund balances . . . . .	17,639,600	<b>33</b>	20,000,459
<b>34</b> Total liabilities and net assets/fund balances . . . . .	29,544,096	<b>34</b>	36,898,620	

**Part XI Reconciliation of Net Assets**

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

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	34,997,052
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	33,365,460
<b>3</b>	Revenue less expenses Subtract line 2 from line 1	<b>3</b>	1,631,592
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	<b>4</b>	17,639,600
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	729,268
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<b>7</b>	Investment expenses	<b>7</b>	
<b>8</b>	Prior period adjustments	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain in Schedule O)	<b>9</b>	0
<b>10</b>	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	<b>10</b>	20,000,459

**Part XII Financial Statements and Reporting**

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

	Yes	No
<b>1</b> Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
<b>2a</b> 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 <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		No
<b>2b</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 <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	Yes	
<b>2c</b> 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	Yes	
<b>3a</b> 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?		No
<b>3b</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		

**SCHEDULE A**  
(Form 990 or 990EZ)

**Public Charity Status and Public Support**

OMB No 1545-0047

**2012**

**Open to Public Inspection**

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.

Name of the organization  
EDUCAUSE

Employer identification number  
84-1455437

**Part I Reason for Public Charity Status** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is (For lines 1 through 11, check only one box )

- 1  A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 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)**.
- 4  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 \_\_\_\_\_
- 5  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 )
- 6  A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7  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 )
- 8  A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II )
- 9  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 )
- 10  An organization organized and operated exclusively to test for public safety See **section 509(a)(4)**.
- 11  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  
 a  Type I b  Type II c  Type III - Functionally integrated d  Type III - Non-functionally integrated
- e  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)
- f  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
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?  
 (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?  
 (ii) A family member of a person described in (i) above?  
 (iii) A 35% controlled entity of a person described in (i) or (ii) above?
- h Provide the following information about the supported organization(s)

	Yes	No
<b>11g(i)</b>		
<b>11g(ii)</b>		
<b>11g(iii)</b>		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
<b>Total</b>									

**Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>4 Total.</b> Add lines 1 through 3						
<b>5</b> 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)						
<b>6 Public support.</b> Subtract line 5 from line 4						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
<b>7</b> Amounts from line 4						
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on						
<b>10</b> Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV )						
<b>11 Total support</b> (Add lines 7 through 10)						
<b>12</b> Gross receipts from related activities, etc (see instructions)					<b>12</b>	
<b>13 First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and <b>stop here</b> . . . . . ▶						

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f))	<b>14</b>	
<b>15</b> Public support percentage for 2011 Schedule A, Part II, line 14	<b>15</b>	
<b>16a 33 1/3% support test—2012.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization ▶		
<b>b 33 1/3% support test—2011.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization ▶		
<b>17a 10%-facts-and-circumstances test—2012.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶		
<b>b 10%-facts-and-circumstances test—2011.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶		
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶		

**Part III Support Schedule for Organizations Described in Section 509(a)(2)**

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	96,664	116,478	10,601		28,238	251,981
<b>2</b> 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	15,102,378	14,659,481	14,860,964	36,086,438	34,065,637	114,774,898
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>6 Total.</b> Add lines 1 through 5	15,199,042	14,775,959	14,871,565	36,086,438	34,093,875	115,026,879
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons						0
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year			282,670	16,286,414	16,651,199	33,220,283
<b>c</b> Add lines 7a and 7b			282,670	16,286,414	16,651,199	33,220,283
<b>8 Public support</b> (Subtract line 7c from line 6 )						81,806,596

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
<b>9</b> Amounts from line 6	15,199,042	14,775,959	14,871,565	36,086,438	34,093,875	115,026,879
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	598,685	491,913	491,439	558,058	536,189	2,676,284
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
<b>c</b> Add lines 10a and 10b	598,685	491,913	491,439	558,058	536,189	2,676,284
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	44,986	33,313	93,679			171,978
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV )		15,289	21,135			36,424
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12 )	15,842,713	15,316,474	15,477,818	36,644,496	34,630,064	117,911,565
<b>14 First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and <b>stop here</b> <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f))	<b>15</b>	69 380 %
<b>16</b> Public support percentage from 2011 Schedule A, Part III, line 15	<b>16</b>	79 760 %

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for <b>2012</b> (line 10c, column (f) divided by line 13, column (f))	<b>17</b>	2 270 %
<b>18</b> Investment income percentage from <b>2011</b> Schedule A, Part III, line 17	<b>18</b>	3 000 %

- 19a 33 1/3% support tests—2012.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization
- b 33 1/3% support tests—2011.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization
- 20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

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

<b>Facts And Circumstances Test</b>

<b>Explanation</b>

SCHEDULE D (Form 990)

OMB No 1545-0047

Supplemental Financial Statements

2012

Open to Public Inspection

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

Department of the Treasury Internal Revenue Service

Name of the organization EDUCAUSE

Employer identification number 84-1455437

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

Table with 3 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1 Total number at end of year, 2 Aggregate contributions to (during year), 3 Aggregate grants from (during year), 4 Aggregate value at end of year, 5 Did the organization inform all donors...?, 6 Did the organization inform all grantees...?

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

Table with 2 columns: Description, Held at the End of the Year. Rows include: 1 Purpose(s) of conservation easements..., 2 Complete lines 2a through 2d..., 3 Number of conservation easements..., 4 Number of states..., 5 Does the organization have a written policy..., 6 Staff and volunteer hours..., 7 Amount of expenses..., 8 Does each conservation easement..., 9 In Part XIII, describe how the organization reports...

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

Table with 2 columns: Description, Amount. Rows include: 1a If the organization elected, as permitted under SFAS 116..., 1b If the organization elected, as permitted under SFAS 116..., 2 If the organization received or held works of art..., 2a Revenues included..., 2b Assets included...

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** *(continued)*

**3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

- a**  Public exhibition
- b**  Scholarly research
- c**  Preservation for future generations
- d**  Loan or exchange programs
- e**  Other

**4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

**5** During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

**Part IV Escrow and Custodial Arrangements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

**1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No

**b** If "Yes," explain the arrangement in Part XIII and complete the following table

	Amount
<b>1c</b>	
<b>1d</b>	
<b>1e</b>	
<b>1f</b>	

**2a** Did the organization include an amount on Form 990, Part X, line 21?  Yes  No

**b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

**Part V Endowment Funds.** Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
<b>1a</b> Beginning of year balance . . . . .	163,762	156,658	138,599	112,851	
<b>b</b> Contributions . . . . .					
<b>c</b> Net investment earnings, gains, and losses	22,815	7,104	18,059	25,748	
<b>d</b> Grants or scholarships . . . . .					
<b>e</b> Other expenditures for facilities and programs . . . . .					
<b>f</b> Administrative expenses . . . . .	-1,591				
<b>g</b> End of year balance . . . . .	188,168	163,762	156,658	138,599	

**2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

- a** Board designated or quasi-endowment 0 %
  - b** Permanent endowment 53.000 %
  - c** Temporarily restricted endowment 47.000 %
- The percentages in lines 2a, 2b, and 2c should equal 100%

**3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by

	Yes	No
<b>(i)</b> unrelated organizations . . . . .	<b>3a(i)</b>	No
<b>(ii)</b> related organizations . . . . .	<b>3a(ii)</b>	No
<b>b</b> If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? . . . . .	<b>3b</b>	

**4** Describe in Part XIII the intended uses of the organization's endowment funds

**Part VI Land, Buildings, and Equipment.** See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
<b>1a</b> Land . . . . .				
<b>b</b> Buildings . . . . .				
<b>c</b> Leasehold improvements . . . . .		1,411,436	190,340	1,221,096
<b>d</b> Equipment . . . . .		3,549,756	1,260,832	2,288,924
<b>e</b> Other . . . . .		42,970		42,970
<b>Total.</b> Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				3,552,990

**Part VII Investments—Other Securities.** See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
Other		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col (B) line 12.)		

**Part VIII Investments—Program Related.** See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
<b>Total.</b> (Column (b) must equal Form 990, Part X, col (B) line 13.)		

**Part IX Other Assets.** See Form 990, Part X, line 15.

(a) Description	(b) Book value
<b>Total.</b> (Column (b) must equal Form 990, Part X, col.(B) line 15.)	

**Part X Other Liabilities.** See Form 990, Part X, line 25.

1 (a) Description of liability	(b) Book value
Federal income taxes	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col (B) line 25.)	

2. Fin 48 (ASC 740) Footnote In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

<b>1</b>	Total revenue, gains, and other support per audited financial statements . . . . .		<b>1</b>	35,726,320
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
<b>a</b>	Net unrealized gains on investments . . . . .	<b>2a</b>	729,268	
<b>b</b>	Donated services and use of facilities . . . . .	<b>2b</b>		
<b>c</b>	Recoveries of prior year grants . . . . .	<b>2c</b>		
<b>d</b>	Other (Describe in Part XIII ) . . . . .	<b>2d</b>		
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .		<b>2e</b>	729,268
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .		<b>3</b>	34,997,052
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line <b>1</b>			
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>		
<b>b</b>	Other (Describe in Part XIII ) . . . . .	<b>4b</b>		
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .		<b>4c</b>	0
<b>5</b>	Total revenue Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12 ) . . . . .		<b>5</b>	34,997,052

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

<b>1</b>	Total expenses and losses per audited financial statements . . . . .		<b>1</b>	33,365,460
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25			
<b>a</b>	Donated services and use of facilities . . . . .	<b>2a</b>		
<b>b</b>	Prior year adjustments . . . . .	<b>2b</b>		
<b>c</b>	Other losses . . . . .	<b>2c</b>		
<b>d</b>	Other (Describe in Part XIII ) . . . . .	<b>2d</b>		
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .		<b>2e</b>	0
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .		<b>3</b>	33,365,460
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line <b>1</b> :			
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>		
<b>b</b>	Other (Describe in Part XIII ) . . . . .	<b>4b</b>		
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .		<b>4c</b>	0
<b>5</b>	Total expenses Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18 ) . . . . .		<b>5</b>	33,365,460

**Part XIII Supplemental Information**

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Identifier	Return Reference	Explanation
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	PART V, LINE 4	THE FUNDS ARE USED TO PAY FOR AN EVENT IN HONOR OF THE WINNER OF THE PAUL EVAN PETERS AWARD THE AWARD RECOGNIZES THE MOST NOTABLE AND LASTING INTERNATIONAL ACHIEVEMENTS RELATED TO HIGH PERFORMANCE NETWORKS AND THE CREATION AND USE OF INFORMATION RESOURCES AND SERVICES THAT ADVANCE SCHOLARSHIP AND INTELLECTUAL PRODUCTIVITY

Schedule I (Form 990)

OMB No 1545-0047

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

2012

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

Attach to Form 990

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization EDUCAUSE

Employer identification number

84-1455437

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . .

Yes No

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

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

(a) Name and address of organization or government (b) EIN (c) IRC Code section if applicable (d) Amount of cash grant (e) Amount of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) (g) Description of non-cash assistance (h) Purpose of grant or assistance

See Additional Data Table

Table with 8 columns: (a) Name and address of organization or government, (b) EIN, (c) IRC Code section if applicable, (d) Amount of cash grant, (e) Amount of non-cash assistance, (f) Method of valuation, (g) Description of non-cash assistance, (h) Purpose of grant or assistance. The table is currently empty.

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . 30
3 Enter total number of other organizations listed in the line 1 table . . . . . 5

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

Part III can be duplicated if additional space is needed.

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

**Part IV Supplemental Information.**

Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 GRANT SUB AWARDEES ARE REQUIRED TO PROVIDE FINANCIAL AND PROGRAM REPORTS NO LATER THAN 90 DAYS SUBSEQUENT TO THE END OF THE GRANT PERIOD ONE SIX-MONTH, NO-COST EXTENSION REQUEST IS ALLOWED IN ADDITION TO THESE FORMAL REPORTING REQUIREMENTS, GRANTEEES ARE REQUIRED TO ACTIVELY AND PUBLICLY SHARE INFORMATION ON THE NEXT GENERATION LEARNING CHALLENGES (NGLC) WEBSITE, PARTICIPATE IN COMMUNITY ENGAGEMENT, AND PARTICIPATE IN THE ANNUAL NGLC MEETING EACH GRANT RECIPIENT MUST PARTICIPATE IN AN EVALUATION CONDUCTED BY AN INDEPENDENT THIRD PARTY PARTICIPATION INCLUDES INTERVIEWS, SITE VISITS, AND REPORTING OTHER THAN THE FINANCIAL AND PROGRAM REPORTS MENTIONED ABOVE

**Software ID:**  
**Software Version:**  
**EIN:** 84-1455437  
**Name:** EDUCAUSE

**Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States**

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SINCLAIR COMMUNITY COLLEGE 444 WEST THIRD ST DAYTON, OH 45402	31-0723444	501(C)(3)	984,823	0			COLLEGE READINESS AND COMPLETION
CALIFORNIA STATE UNIVERSITY NORTHRIDGE 18111 NORDHOFF ST NORTHRIDGE, CA 91330	95-6187206	501(C)(3)	1,498,895	0			COLLEGE READINESS AND COMPLETION
CERRITOS COLLEGE FOUNDATION 11110 ALONDRA BLVD NORWALK, CA 90650	95-3387108	501(C)(3)	608,215	0			COLLEGE READINESS AND COMPLETION
INDIANA UNIVERSITY 420 UNIVERSITY BOULEVARD INDIANAPOLIS, IN 46202	35-6001673	501(C)(3)	166,179	0			COLLEGE READINESS AND COMPLETION
ALPHA PUBLIC SCHOOLS PO BOX 21366 SAN JOSE, CA 95151	27-1881962	501(C)(3)	81,830	0			COLLEGE READINESS AND COMPLETION
ALTIUS EDUCATION 6056 DEER PARK COURT TOLEDO, OH 43614	27-0935611		206,730	0			COLLEGE READINESS AND COMPLETION
AMERITUS COLLEGE EDUCATIONAL SE 16355 LAGUNA CANYON ROAD IRVINE, CA 92618	35-2430608		166,667	0			COLLEGE READINESS AND COMPLETION
ASPIRE PUBLIC SCHOOLS 1001 22ND AVENUE NO 100 OAKLAND, CA 94606	94-3310834	501(C)(3)	150,000	0			COLLEGE READINESS AND COMPLETION
COALITION FOR BETTER PUBLIC SCHOOL PO BOX 21366 SAN JOSE, CA 95151	27-1881962	501(C)(3)	368,170	0			COLLEGE READINESS AND COMPLETION
COLLEGE FOR ALL TEXANS FOUNDATION 1200 E ANDERSON LANE AUSTIN, TX 78752	74-3017895	501(C)(3)	1,000,000	0			COLLEGE READINESS AND COMPLETION
CORNERSTONE CHARTER SCHOOL 306 E 4TH STREET ROYAL OAK, MI 48067	27-0634528	PENDING 501(C)(3)	250,000	0			COLLEGE READINESS AND COMPLETION
EDUCATION ACHIEVEMENT AUTHORITY OF MICHIGAN DEPUTY CHANCELLOR FOR FISCAL AFFAIRS DETROIT, MI 48202	45-3549646	501(C)(3)	450,000	0			COLLEGE READINESS AND COMPLETION
FAYETTE COUNTY PUBLIC SCHOOLS 701 E MAIN LEXINGTON, KY 40514	61-6001059	501(C)(3)	150,000	0			COLLEGE READINESS AND COMPLETION
FOUNDATIONS COLLEGE PREP 1038 N PAULINA CHICAGO, IL 60622	45-4546417	PENDING 501(C)(3)	150,000	0			COLLEGE READINESS AND COMPLETION
FRANKLIN CENTRAL SUPERVISORY UNION 28 CATHERINE STREET ST ALBANS, VT 05478	55-0874133	501(C)(3)	205,000	0			COLLEGE READINESS AND COMPLETION
GENERATION SCHOOLS NETWORK 455 SHERMAN STREET DENVER, CO 80203	76-0783006	501(C)(3)	150,000	0			COLLEGE READINESS AND COMPLETION
UNIVERSITY SYSTEM OF GEORGIA REGENTS 270 WASHINGTON ST SW ATLANTA, GA 30334	58-6002348	501(C)(3)	436,918	0			COLLEGE READINESS AND COMPLETION
HORRY COUNTY SCHOOLS WHITTEMORE PARK MIDDLE SCHOOL CONWAY, SC 29527	57-6000364	501(C)(3)	150,000	0			COLLEGE READINESS AND COMPLETION
INTRINSIC SCHOOLS 4517 N ARTESIAN CHICAGO, IL 60625	45-5454261		150,000	0			COLLEGE READINESS AND COMPLETION
KENTUCKY COMMUNITY & TECHNICAL INSTITUTIONAL ADVANCEMENT VERSAILLES, KY 40383	61-1320380	501(C)(3)	287,909	0			COLLEGE READINESS AND COMPLETION
KIPP CHICAGO 1945 S HALSTED STREET STE 101 CHICAGO, IL 60608	30-0075271	501(C)(3)	450,000	0			COLLEGE READINESS AND COMPLETION
LEADERSHIP PUBLIC SCHOOLS 344 THOMAS L BERKLEY WAY STE 340 OAKLAND, CA 94612	73-1643646	501(C)(3)	450,000	0			COLLEGE READINESS AND COMPLETION
MARICOPA COMMUNITY COLLEGE 2419 W 14TH STREET TEMPE, AZ 85281	86-0327449	501(C)(3)	618,367	0			COLLEGE READINESS AND COMPLETION
MATCH SCHOOL FOUNDATION 1001 COMMONWEALTH AVENUE BOSTON, MA 02215	04-3476160	501(C)(3)	450,000	0			COLLEGE READINESS AND COMPLETION
NORTHERN ARIZONA UNIVERSITY 1298 S KNOLES FLAGSTAFF, AZ 86011	74-2579628	501(C)(3)	1,000,000	0			COLLEGE READINESS AND COMPLETION
SCHOOLS FOR THE FUTURE DEVELOPEMENT 14165 N FENTON ROAD FENTON, MI 48430	45-5087903		150,000	0			COLLEGE READINESS AND COMPLETION
SOUTHERN NEW HAMPSHIRE UNIVERSITY 2500 NORTH RIVER ROAD MANCHESTER, NH 031061045	02-0274509	501(C)(3)	1,000,000	0			COLLEGE READINESS AND COMPLETION
SOCIETY FOR THE TEACHING OF PSYCHOLOGY 181 WHITE STREET DANBURY, CT 06810	52-1563991	501(C)(3)	284,144	0			COLLEGE READINESS AND COMPLETION
THE SUMMIT INSTITUTE 455 FIFTH AVENUE REDWOOD CITY, CA 94063	26-2034843	501(C)(3)	450,000	0			COLLEGE READINESS AND COMPLETION
TOUCHSTONE EDUCATION INC 896 ANDORRA ROAD LAFAYETTE HILL, PA 19444	45-2690252	PENDING 501(C)(3)	450,000	0			COLLEGE READINESS AND COMPLETION
UNIVERSITY OF WASHINGTON GRANTS SUW GRANTS AND CONTRACTS SEATTLE, WA 981056692	91-6001537	501(C)(3)	356,004	0			COLLEGE READINESS AND COMPLETION
UNIVERSITY OF SOUTHERN CALIFORNIA 3500 S FIGUEROA ST STE 102 LOS ANGELES, CA 900898001	95-1642394	501(C)(3)	315,000	0			COLLEGE READINESS AND COMPLETION
UNIVERSITY NOW INC 543 HOWARD STREET 5TH FLOOR SAN FRANCISCO, CA 94105	27-3996368		300,000	0			COLLEGE READINESS AND COMPLETION
VENTURE ACADEMIES 5033 43RD AVENUE SOUTH MINNEAPOLIS, MN 55417	61-1677994	501(C)(3)	150,000	0			COLLEGE READINESS AND COMPLETION
WISEBURN 21ST CENTURY SCHOOLS 13500 AVIATION BLVD HAWTHORNE, CA 90250	26-3405843	501(C)(3)	377,000	0			COLLEGE READINESS AND COMPLETION
PRIOR YEAR GRANT RETURNS VARIOUS VARIOUS, MO 99999	000000000		-41,369	0			COLLEGE READINESS AND COMPLETION

**Schedule J**  
(Form 990)

**Compensation Information**

OMB No 1545-0047

**2012**

**Open to Public Inspection**

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

▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

▶ Attach to Form 990. ▶ See separate instructions.

Department of the Treasury  
Internal Revenue Service

Name of the organization  
EDUCAUSE

Employer identification number

84-1455437

**Part I Questions Regarding Compensation**

- 1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.
- |  |  |
|--|--|
| <input type="checkbox"/> First-class or charter travel             | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions                     | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees   |
| <input type="checkbox"/> Discretionary spending account            | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) |

**b** If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

**2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?

**3** Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III

- |   |   |
|---|---|
| <input type="checkbox"/> Compensation committee                         | <input checked="" type="checkbox"/> Written employment contract                     |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study                    |
| <input type="checkbox"/> Form 990 of other organizations                | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

**4** During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization

- a** Receive a severance payment or change-of-control payment?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?  
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III

**Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.**

**5** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of

- a** The organization?
- b** Any related organization?

If "Yes," to line 5a or 5b, describe in Part III

**6** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of

- a** The organization?
- b** Any related organization?

If "Yes," to line 6a or 6b, describe in Part III

**7** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III

**8** Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

**9** If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
<b>1b</b>		
<b>2</b>		
<b>4a</b>		No
<b>4b</b>		No
<b>4c</b>		No
<b>5a</b>		No
<b>5b</b>		No
<b>6a</b>		No
<b>6b</b>		No
<b>7</b>		No
<b>8</b>		No
<b>9</b>		

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

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

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

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
See Additional Data Table							

**Part III Supplemental Information**

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

Identifier	Return Reference	Explanation
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**Software ID:**  
**Software Version:**  
**EIN:** 84-1455437  
**Name:** EDUCAUSE

**Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
DIANA GOBLINGER	(i)	395,827	0	0	39,586	13,457	448,870	0
	(ii)	0	0	0	0	0	0	0
ANDY CALKINS	(i)	183,193	0	0	18,849	19,558	221,600	0
	(ii)	0	0	0	0	0	0	0
SUSAN GRAJEK	(i)	234,995	0	0	22,360	13,500	270,855	0
	(ii)	0	0	0	0	0	0	0
GREG JACKSON	(i)	343,264	0	0	31,917	10,735	385,916	0
	(ii)	0	0	0	0	0	0	0
GARTH JORDAN	(i)	230,205	0	0	23,670	22,304	276,179	0
	(ii)	0	0	0	0	0	0	0
JULIE LITTLE	(i)	171,524	0	0	17,227	8,915	197,666	0
	(ii)	0	0	0	0	0	0	0
MATTHEW MILLIRON	(i)	156,913	0	0	12,375	19,341	188,629	0
	(ii)	0	0	0	0	0	0	0
JOANNE DEHONEY	(i)	150,273	0	0	15,250	8,923	174,446	0
	(ii)	0	0	0	0	0	0	0
RODNEY PETERSON	(i)	147,355	0	0	15,793	19,250	182,398	0
	(ii)	0	0	0	0	0	0	0
CATHERINE YANG	(i)	164,310	0	0	17,129	12,959	194,398	0
	(ii)	0	0	0	0	0	0	0

**SCHEDULE O**  
(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990 or 990-EZ**

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

OMB No 1545-0047

**2012**

**Open to Public  
Inspection**

Name of the organization  
EDUCAUSE

**Employer identification number**

84-1455437

Identifier	Return Reference	Explanation
VOLUNTEERS	PART I (SUMMARY - ACTIVITIES AND GOVERNANCE) QUESTION 6	EDUCAUSE VOLUNTEERS SERVE AS COMMITTEE MEMBERS IN ONE OF TWO WAYS: INFORMAL OPPORTUNITIES: VOLUNTEERS ENGAGE THROUGHOUT THE YEAR ON A PROJECT-BY-PROJECT BASIS IN VARIOUS ACTIVITIES, SUCH AS CONTRIBUTING CONTENT, SHARING OPINIONS, IDENTIFYING HOT TOPICS, PARTICIPATING IN TASK FORCES AND VIRTUAL COMMUNITIES, CONVENING CONFERENCE SESSIONS, AND MIRCOBLOGGING. FORMAL OPPORTUNITIES: ADVISORY COMMITTEE MEMBER - (SERVE 1 TO 3 YEAR TERMS) VOLUNTEERS CONTRIBUTE TO SPECIAL ACTIVITIES AND GUIDE ASSOCIATION DIRECTIONS IN SELECTED AREAS OF PROFESSIONAL PRACTICE AND POLICY. PROGRAM COMMITTEE MEMBER - (SERVE 1 YEAR TERM) VOLUNTEERS DEVELOP THEMES, ORGANIZATION, AND CONTENT FOR SPECIFIC CONFERENCES.

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 6	THE ORGANIZATION HAS MEMBERS WITH THE AUTHORITY TO ELECT THE BOARD OF DIRECTORS

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 7A	EACH EDUCATIONAL INSTITUTION MEMBER ASSIGNS A PRIMARY REPRESENTATIVE WHO IS ENTITLED TO VOTE IN THE ELECTION OF ELECTED BOARD MEMBERS

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 11	THE BOARD PERFORMS AN ANNUAL REVIEW OF THE FORM 990 PRIOR TO FILING WITH THE IRS. SEVERAL DAYS PRIOR TO THE SUMMER BOARD MEETING, A DRAFT OF THE FORM 990 IS SENT TO EACH MEMBER OF THE GOVERNING BODY. BOARD MEMBERS ARE REQUESTED TO BRING COMMENTS, QUESTIONS, AND CONCERNS TO THE MEETING FOR DISCUSSION. SEVERAL ADDITIONAL DAYS, BEYOND THE DATE OF THE BOARD MEETING, ARE OPEN FOR FURTHER DISCUSSION. THE REVIEW DEADLINE IS CLEARLY STATED. ANY NECESSARY CHANGES ARE MADE THROUGH THE THIRD-PARTY TAX PREPARER SUBSEQUENT TO THE MEETING. THE FINAL COPY OF THE FORM 990 IS SIGNED BY THE PRESIDENT OF THE ASSOCIATION AND FILED WITH THE IRS.

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 12C	ALL STAFF AND BOARD MEMBERS MUST ANNUALLY READ AND SIGN THE CONFLICT OF INTEREST POLICY AND THE CODE OF ETHICS POLICY THE PRESIDENT DETERMINES CORRECTIVE MEASURES FOR STAFF IN VIOLATION OF THE POLICY THE BOARD DETERMINES CORRECTIVE MEASURES FOR THE PRESIDENT OR OTHER BOARD MEMBERS

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15	AN INDEPENDENT THIRD PARTY IS ENGAGED TO PROVIDE COMPETITIVE COMPENSATION INFORMATION TO THE AUDIT COMMITTEE OF THE GOVERNING BODY. THE SUBCOMMITTEE USES THAT INFORMATION TO REVIEW THE COMPENSATIONS OF THE PRESIDENT AND VICE-PRESIDENTS. THE AUDIT COMMITTEE MEETS TO EVALUATE THE RELIABILITY OF THE BENCHMARKING DATA AND THOROUGHLY REVIEWS THE REASONABLENESS OF THE COMPENSATION OF EXECUTIVE STAFF. THE SUBCOMMITTEE THEN REPORTS ITS FINDINGS TO THE ENTIRE GOVERNING BODY. MINUTES OF ALL DISCUSSIONS ARE RECORDED BY A MEMBER OF THE AUDIT COMMITTEE.

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE ALL AVAILABLE UPON REQUEST

Identifier	Return Reference	Explanation
	FORM 990, PART VII, PAGE 7	SERVICES PROVIDED BY BOARD MEMBERS INCLUDE CONFERENCE HONRARIUMS, REVIEW PANELIST FEE FOR SUBAWARDS, AND COMPOSITION OF AN ANALYTICS RISK GUIDE

# Additional Data

**Software ID:**  
**Software Version:**  
**EIN:** 84-1455437  
**Name:** EDUCAUSE

## Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

(Code	) (Expenses \$	156,127	including grants of \$	) (Revenue \$	142,119 )
ADVANCED CORE TECHNOLOGIES INITIATIVE (ACTI)- PROVIDES A VENUE WHERE INFORMATION TECHNOLOGY PROFESSIONALS FROM DIVERSE INSTITUTIONS COME TOGETHER TO ADDRESS CORE TECHNOLOGY CHALLENGES					

(Code	) (Expenses \$	322,048	including grants of \$	) (Revenue \$	0 )
LIAISON AND OUTREACH - DEVELOPS ALLIANCES AND NETWORKS WITH RELATED PEERS, ORGANIZATIONS, AND MEMBERS WHO FURTHER EDUCATIONAL SUPPORT FOR INFORMATION RESOURCE PROFESSIONALS IN SUCH AREAS AS TECHNOLOGY PLANNING AND LEADERSHIP					

**Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)**

**Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.**

(Code ) (Expenses \$ 1,549,228 including grants of \$ ) (Revenue \$ 285,705 )  
POLICY AND SECURITY - WORKS WITH MEMBERS TO INFORM PUBLIC AND CAMPUS POLICY DEVELOPMENT ALSO AIMS TO IMPROVE INFORMATION SECURITY, DATA PROTECTION, AND PRIVACY PROGRAMS ACROSS HIGHER EDUCATION

(Code ) (Expenses \$ 301,354 including grants of \$ ) (Revenue \$ 4,543,847 )  
MEMBERSHIP - PROCESSES MEMBERSHIP RENEWALS, ENROLLS NEW MEMBERS, AND TRACKS MEMBER RETENTION PROVIDES CUSTOMER SERVICE TO MEMBERS AND CONFERENCE REGISTRANTS AND MAINTAINS COMMITTEE, CONSTITUENT GROUP, AND MEMBER DATA BASES

**Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)**

**Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.**

(Code ) (Expenses \$ 60,181 including grants of \$ ) (Revenue \$ 289,635 )

EDU DOMAIN ADMINISTRATION - REGISTERS AND MANAGES THE EDU TOP LEVEL DOMAIN NAMES VIA A COOPERATIVE AGREEMENT WITH THE U S DEPARTMENT OF COMMERCE

(Code ) (Expenses \$ 803,014 including grants of \$ ) (Revenue \$ 1,164,605 )

EDUCAUSE LEARNING INITIATIVE (ELI) - PROVIDES VARIETY OF RESOURCES, TOOLS, AND PROFESSIONAL DEVELOPMENT ACTIVITIES TO ADVANCE LEARNING THROUGH THE INNOVATIVE APPLICATION OF TECHNOLOGY

**Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)**

**Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.**

(Code ) (Expenses \$ 1,306,382 including grants of \$ ) (Revenue \$ 405,968 )  
PUBLISHING AND CONTENT - INCLUDES THE ORGANIZATION'S OPEN-ACCESS DIGITAL AND PRINT FLAGSHIP PUBLICATIONS WHICH ADDRESS CURRENT DEVELOPMENTS AND TRENDS IN IT, HOW THEY MAY AFFECT MEMBERS AND WHAT THESE TRENDS MEAN FOR HIGHER EDUCATION AND SOCIETY

(Code ) (Expenses \$ 237,354 including grants of \$ ) (Revenue \$ 355,021 )  
MEMBER PROGRAMS - PROVIDES A VARIETY OF RECOGNITION PROGRAMS AND SPECIALIZED SERVICES FOR THE ORGANIZATION'S MEMBERS

**Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)**

**Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.**

(Code ) (Expenses \$ 1,534,432 including grants of \$ ) (Revenue \$ 355,202 )  
ANALYTICS - PROVIDES THOUGHT LEADERSHIP AND EDUCATION, DEVELOPING INSTITUTIONAL CAPACITY AND DEMAND FOR ANALYTICS INCLUDES THE CORE DATA BENCHMARKING SERVICE PROVIDING COMPARATIVE DATA TO INFORM MEMBERS OF THEIR IT STRATEGIC PLANNING AND MANAGEMENT (PARTIALLY FUNDED BY THE BILL AND MELINDA GATES FOUNDATION )

(Code ) (Expenses \$ 970,341 including grants of \$ ) (Revenue \$ 1,804,714 )  
EDUCAUSE CENTER FOR APPLIED RESEARCH (ECAR) - PROVIDES RESEARCH AND ANALYSIS ABOUT INFORMATION TECHNOLOGY IN HIGHER EDUCATION FOR IT PROFESSIONALS AND HIGHER EDUCATION LEADERS

**Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)**

**Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.**

(Code ) (Expenses \$ 178,655 including grants of \$ ) (Revenue \$ 117,435 )  
ENTERPRISE INFORMATION TECHNOLOGY - FOCUSES ON THE CAMPUS-WIDE USES OF INFORMATION TECHNOLOGY THAT  
PROVIDE UNDERLYING FRAMEWORKS FOR ACADEMIC, ADMINISTRATIVE, RESEARCH, AND BUSINESS PURPOSES