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Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Department of the Treasury Internal Revenue Service

▶ Do not enter Social Security numbers on this form as it may be made public.

▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

A	For the	2013 calendar year, or tax year beginning ar	nd ending				
В	Check if applicable	C Name of organization		D Employer identification	n number		
	Addre	CARROLL EDUCATION FOUNDATION INC					
	Name chang	Doing Business As		75-2638	3646		
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number			
	Termir	PO BOX 93041		817-949	9-5982		
	Amen	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	332,403.		
	Applic	1 DOUTHDAKE, IA /0032-1041		H(a) Is this a group return	•		
	pendu	F Name and address of principal officer: DANNY GILPIN		for subordinates?	Yes X No		
		SAME AS C ABOVE		H(b) Are all subordinates include	d? Yes No		
L	Tax-ex	empt status X 501(c)(3) 501(c) () ((insert no.) 4947(a)(1) or 521	If "No," attach a list. ((see instructions)		
J	<u>W</u> ebsi	te: WWW.SOUTHLAKECEF.ORG		H(c) Group exemption nur	mber 🕨		
		organization: X Corporation	L Year	of formation: 1996 M Stat	te of legal domicile: TX		
P	art I	Summary					
ø	1	Briefly describe the organization's mission or most significant activities $\ \underline{ extbf{TO}}$					
Activities & Governance		TO TEACHERS AND STUDENTS OF THE CARROLL					
ern	2	Check this box 🕨 📖 if the organization discontinued its operations or disp	oosed of mor	e than 25% of its net assets			
Š	3	Number of voting members of the governing body (Part VI, line 1a)		3	39		
অ	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	39		
ies	5	Total number of individuals employed in calendar year 2013 (Part V, line 2a)		5			
Ĭ	6	Total number of volunteers (estimate if necessary)	· · · ·	6	0		
٩	7 a	Total unrelated business revenue from Part VIII, column (C), line 12	, !	7a	0.		
	b	Net unrelated business taxable income from Form 990 T, line 34	121	7b	0.		
	1_			Prior Year	Current Year		
e	8	Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g)	1071	104,880.	91,843.		
Revenue	9	Program service revenue (Part VIII, line 2g)	그뜨! -	0.	0.		
Bè	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		52,403.	66,184.		
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e, 7, 0		37,173.	107,670.		
_		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	194,456.	<u>265,697.</u>		
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		112,093.	112,006.		
	1	Benefits paid to or for members (Part IX, column (A), line 4)	<u>,</u> –	0. 52,804.	59,826.		
Expenses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10	^{U)} -	0.	39,820.		
, E	10a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.			
Ä	1,0	Total fundraising expenses (Part IX, column (D), line 25)	- 0. -	38,260.	32,417.		
}		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	-	203,157.	204,249.		
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 18 from line 12		<8,701.>	61,448.		
<u> </u>	3	nevenue less expenses. Subtract line 18 from line 12		eginning of Current Year	End of Year		
ets (200	Total assets (Part X, line 16)	18	1,015,058.	1,156,256.		
Net Assets or Ralances	20 21	Total liabilities (Part X, line 16)		500.	500.		
, <u>e</u>	22	Net assets or fund balances. Subtract line 21 from line 20		1,014,558.	1,155,756.		
P	art II	Signature Block	ļ.	1,014,5500	1,133,1301		
		lities of perjury, I declare that I have examined this return, including accompanying sched	ules and stater	nents, and to the best of my kno	wledge and belief, it is		
~ ``		t, and complete. Declaration of preparer (other than officer) is based on all information of			,		
13			10				
Sig	ın	Signature of officer		Date			
He		DANNY GILPIN, TREASURER ()	Han	11/18/14	1		
		Type or print name and title	کو				
		Print/Type preparer's name Preparer's signature		Date / Check X	PTIN		
Pai	d	EDWARD MAHONEY	201		P01054511		
Pre	parer	Firm's name MAHONEY & MAHONEY, CPA'S, P.A.	-7	Firm's EIN ▶ 2	0-0134357		
Use	Only		TE/3J				
		PALM BEACH GARDENS, FL 33410	/	Phone no. (310			
Ма	y the II	RS discuss this return with the preparer shown above? (see instructions)	<u>′ </u>		X Yes No		
		THE R R A ROLL OF A SAME OF THE CONTROL OF THE CONT			Earm 990 (2012)		

	990 (2013) CARROLL EDUCATION FOUNDATION INC 75-2638646 Page 2
Pa	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	TO PROVIDE FINANCIAL ASSISTANCE TO TEACHERS AND STUDENTS OF THE
	CARROLL INDEPENDENT SCHOOL DISTRICT THROUGH EDUCATION GRANTS AND
	SCHOLARSHIPS.
2	Did the organization undertake any significant program services during the year which were not listed on
	the pnor Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	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 \$ 94,506 • Including grants of \$ 94,506 •) (Revenue \$)
-10	FUNDED GRANTS TO CARROLL INDEPENDENT SCHOOL DISTRICT IN SOUTHLAKE,
	TEXAS FOR TEACHERS TO CONDUCT INNOVATIVE AND CLASSROOM PROJECTS &
	PROGRAMS
4b	(Code) (Expenses \$17,500. including grants of \$17,500.) (Revenue \$)
	FUNDED SCHOLARSHIPS TO CARROLL INDEPENDENT SCHOOL DISTRICT STUDENTS AS
	SELECTED THROUGH APPLICATION, NOMINATION AND COMMITTEE REVIEW PROCESS.
	DEED IMMOOCH MIDICATION, NOMINATION AND COMMITTED REVIEW INCOME.
	1
	· · · · · · · · · · · · · · · · · · ·
4c	(Code) (Expenses \$ including grants of \$) (Revenue \$)
4d	Other program services (Describe in Schedule O.)
4d	
4d 4e	

			Yes	No
1	is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	<u> </u>
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			İ
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			1
	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?			1
	If "Yes," complete Schedule D, Part IV	9		<u>X</u>
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			1
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			1
	as applicable.			l
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a		X
D	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	446	v	
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	11b	X	
·	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in	110		
-	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	_	X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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	 		
4-	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
46	foreign organization? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15		X
16	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	10		
••	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	'''		<u> </u>
	1c and 8a? If "Yes," complete Schedule G, Part II	18	x	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"		 -	
	complete Schedule G, Part III	19		_x_
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
<u>b</u>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
		Form	990	(2013)

	·		Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX,			
	column (A), tine 2? If "Yes," complete Schedule I, Parts I and III	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J .	23		<u>X</u>
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		_X_
b	is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so,			
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		<u> </u>
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30_	Х	
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		<u>X</u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		<u>X</u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			٠,
0	Part V, line 1	34		<u>X</u>
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		<u> X</u>
D	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
26	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			77
	If "Yes," complete Schedule R, Part V, line 2	36		<u>X</u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			v
20	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		_ <u>X</u> _
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		v	
	Note. All Form 990 filers are required to complete Schedule O	38	X 000	

Form **990** (2013)

Page 4

Pai	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V	•	••	
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b	0		
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	g		ļ
	(gambling) winnings to prize winners?	. <u>1c</u>	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a	1		
Ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	<u>2b</u>	X	├
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	} _	}	
3a	3	3a	 	X
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	<u>3b</u>		+
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			v
L	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	<u>4a</u>	 	X
Đ	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.		Ì	
5a		50		x
b		<u>5a</u> 5b	+	X
_		5c	+-	 ^
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization s		+	
•	any contributions that were not tax deductible as charitable contributions?	6a		x
h	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts		+	
_	were not tax deductible?	6ь		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to	the payor? 7a		X
b	The state of the s	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<u>7e</u>		┷
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	<u>7f</u>		₩
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as req	uired? 7g		₩
h	g.,	1098-C? 7h	ļ	—
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting	_		
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the	ne year? 8		╁
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a	+-	+
_ b		9b	+-	\vdash
10	Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12			
a b	5 1 1 1 5 000 B 1300 L 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b				
_	amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	.	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	is the organization licensed to issue qualified health plans in more than one state?	13a	ı	
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand			\perp
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		<u> </u>
ь	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	.	1

332005 10-29-13 Form **990** (2013)

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

	Check if Schedule O contains a response or note to any line in this Part VI			\mathbf{x}
<u>Sec</u>	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 39			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 39			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
, а	The governing body?	8a	X]
ь	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	ın Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			1
	exempt status with respect to such arrangements?	16b		
<u>Sec</u>	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶TX			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	avaılab	le	
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website X Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and	d finar	ncial	
	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 of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person of	tion: 🕨	-	
	DANNY GILPIN - 817-949-5982			
	1340 BENT CREEK DRIVE, SOUTHLAKE, TX 76092			

Form 990 (2013) Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

Check if Schedule O contains a response or note to any line in this Part VII

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

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

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

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

Officer this box if ficitive the organizat		l	111120			прсі	isat			(E)
(A)	(B)			ر Pos	C) rtion	1		(D)	(E)	(F)
Name and Title	Average		not c	heck	more	than		Reportable	Reportable	Estimated
	hours per					is bot. ir/trus		compensation from	compensation from related	amount of other
	l week (list any	-	<u> </u>	Γ.	ļ .			the	organizations	compensation
	hours for	direct				_		organization	(W-2/1099-MISC)	from the
	related	5e 0r	stee	ŀ		usate		(W-2/1099-MISC)	(** 2, 1000 *********************************	organization
	organizations	trust	al tru) de	mpe		(* = : : : : : : : : : : : : : : : : : :		and related
	below	Individual trustee or director	Institutional trustee		Key employee	Highest compensated employee	<u>=</u>			organizations
	line)	ig i	Instit	Officer	Ęę.	Hgh	Former			-
(1) DANNY GILPIN	5.00									
TREASURER		X		Х				0.	0.	0.
(2) SHEILA HALLIMAN	5.00									
IMMEDIATE PAST CHAIR		X		X				0.	0.	0.
(3) MIMI TRAN	5.00					_			`	
INCOMING CHAIR		X		X				0.	0.	0.
(4) AYN LAHERTY	5.00									
SECRETARY		X		X				0.	0.	0.
(5) KELLI HENDERSON	5.00									
EXECUTIVE_BOARD CHAIR		X		X				0.	0.	0.
(6) DAVID FALTYS	5.00				Į					
CISD SUPERINTENDENT		X		X				0.	0.	0.
(7) READ BALLEW	5.00									
TRUSTEES PRESIDENT		X		X				0.	0.	0.
(8) BRAD BRADLEY	5.00									
FOUNDING CHAIRMAN		X	L		_			0.	0.	0.
(9) ED ADAMS	5.00									
BOARD MEMBER		X						0.	0.	0.
(10) JAMES AUGHENBAUGH, II	5.00		i				}			
BOARD MEMBER		X					<u></u>	0.	0.	0.
(11) RICH CHAMBERLAIN	5.00		1							
BOARD MEMBER		X					<u> </u>	0.	0.	0.
(12) DAVID PARRISH	5.00	ļ								
BOARD MEMBER		X		<u> </u>				0.	0.	0.
(13) FRANK BLISS	5.00	Į								
BOARD MEMBER		X					<u> </u>	0.	0.	0.
(14) ANTHONY BRUSTER	5.00	Į			ļ					
BOARD_MEMBER		X		L_				0.	0.	0.
(15) ANTHONY ERICKSON	5.00									
BOARD MEMBER		X		<u> </u>				0.	0.	0.
(16) TODD CARLTON	5.00									
BOARD MEMBER		X	<u> </u>	_	<u></u>	<u>L</u>		0.	0.	0.
(17) VANESSA HORNYAK	5.00									
BOARD MEMBER		X						<u> </u>	0.	0.
332007 10-29-13										Form 990 (2013)

Section A. Officers, Directors, Tr		ploy	ees			ghe	st C	ompensated Employe	es (continued)		
· (A)	(B)	1	(C)					(D)	(E)		(F)
Name and title	Average		not c		more	than		Reportable	Reportable	_	imated
•	hours per week					is bot or/trus		compensation	compensation		ount of
	(list any	į			Г		Ė	from the	from related organizations		other pensation
	hours for	Ę			1	25		organization	(W-2/1099-MISC)		
	related	tee o	ustee			ensat		(W-2/1099-MISC)	,	orga	ınızatıon
	organizations	al trus	ag t		Oyee	E CO					related
	below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			orga	nizations
/10\		트	Ĕ	5	5	主旨	윤	ļ	-		
(18) BARBARA MILHIZER	5.00	x						0.	0.		٥
BOARD MEMBER (19) SHERI MILLS	5.00	^	 	-			┢	1 0.	0.	<u> </u>	0.
BOARD MEMBER	3.00	X]			0.	0.		0.
(20) SHANNON GUTHRIE	5.00	Λ	\vdash		\vdash	 	-				<u> </u>
BOARD MEMBER	3.00	X						0.	0.		0.
(21) MIKE HUTCHISON	5.00	21				t	\vdash				
BOARD MEMBER	3.00	x						0.	0.		0.
(22) CHUCK KOSKOVICH	5.00	-	1	 	 	t			•		
BOARD MEMBER	3.00	x						0.	0.		0.
(23) NOLAN OGDEN	5.00										
BOARD MEMBER		X						0.	0.		0.
(24) STEPHANIE PENNINGTON	5.00							•			
BOARD MEMBER		X						0.	0.		0.
(25) SARAH MASON	5.00										
BOARD MEMBER		X						0.	0.		0.
(26) JOHNATHAN PIKE	5.00										
BOARD MEMBER		x	,					0.	0.		0.
1b Sub-total								0.	0.		0.
c Total from continuation sheets to Part	VII, Section A						ightharpoons	56,000.	0.		0.
d Total (add lines 1b and 1c)							ightharpoonup	56,000.	0.	<u></u>	0.
2 Total number of individuals (including but	t not limited to th	nose	liste	ed a	bov	e) wl	no r	eceived more than \$100	0,000 of reportable		
compensation from the organization									<u> </u>		0
_											Yes No
3 Did the organization list any former office			e, ke	ey er	mplo	oyee	, or	highest compensated e	mployee on		
line 1a? If "Yes," complete Schedule J fo										3	X
4 For any individual listed on line 1a, is the									the organization		,,
and related organizations greater than \$			-							4	<u> </u>
5 Did any person listed on line 1a receive o							eiai	ted organization or indiv	idual for services	_	
rendered to the organization? If "Yes," co Section B. Independent Contractors	отріете оспеаці	e J i	or s	ucn	per	son				5	X
Complete this table for your five highest		don	and.	nt c	ant	root	1	that recovered more than	\$100,000 of company	otion fi	
the organization Report compensation f										auonn	Oill
(A)	or the calendar	cai	CINC	ng v	WILL I	O1 VI		(B)	yeai	(C	<u> </u>
Name and busine	ss address	N	ON	R				Description of s	services (Comper	
			<u> </u>								
	_	_									
								-			
			_								
2 Total number of independent contractors	•	not l	mıte	d to	tho	se lı	stec	d above) who received n	nore than		
\$100,000 of compensation from the orga						0					
SEE PART VII, SECTION	ON A CON	TI	NU	AT:	IO:	N S	SH	EETS		Form 9	990 (2013)

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173,854.

Form 990 (2013)

CARROLL EDUCATION FOUNDATION INC 75-2638646 Form 990 (2013) Page 9 Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (D)
Revenue excluded from tax under sections 512 - 514 (B) (C) Unrelated Related or Total revenue exempt function business revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a b Membership dues 1b 58,140. c Fundraising events 10 d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and 33,703. similar amounts not included above 19,454. 9 Noncash contributions included in lines 1a-1f \$ 91,843 h Total. Add lines 1a-1f Business Code Program Service 2 a f All other program service revenue g Total. Add lines 2a-2f investment income (including dividends, interest, and 63,057. 63,057. other similar amounts) Income from investment of tax-exempt bond proceeds 4 5 Royalties (ı) Real (ii) Personal 6 a Gross rents b Less. rental expenses c Rental income or (loss) d Net rental income or (loss) (ii) Other 7 a Gross amount from sales of (i) Securities 7,519. assets other than inventory b Less: cost or other basis 4,392 and sales expenses c Gain or (loss) 3,127 3,127. d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue 58,140. of including \$ contributions reported on line 1c) See a 169,984 Part IV, line 18 ы 62,314. b Less: direct expenses 107,670. c Net income or (loss) from fundraising events 107,670 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 11 a d All other revenue e Total. Add lines 11a-11d

265,697.

Total revenue. See instructions.

332009 10-29-13

Sect	ion 501(c)(3) and 501(c)(4) organizations must com	plete all columns. All oth	er organizations must co	omplete column (A)	
	Check if Schedule O contains a respon	se or note to any line in			
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in	-			
	the United States. See Part IV, line 22	112,006.	112,006.		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	56,000.		56,000.	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				•
10	Payroll taxes	3,826.		3,826.	
11	Fees for services (non-employees):				
а	Management				
b	Legal _				
С	Accounting	1,400.		1,400.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	7,783.		7,783.	
9	Other. (If line 11g amount exceeds 10% of line 25,		-		
	column (A) amount, list line 11g expenses on Sch O.)				
12	Advertising and promotion	705.		705.	
13	Office expenses	18,848.		18,848.	
14	Information technology	434.		434.	
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	2,003.		2,003.	
20	Interest				<u>-</u>
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	966.		966.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
а	FOREIGN TAX ON DIVIDEND	278.		278.	
b					
С					
d		<u> </u>			
е	All other expenses	<u></u> .		_	
25	Total functional expenses. Add lines 1 through 24e	204,249.	112,006.	92,243.	0.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here I if following SOP 98-2 (ASC 958-720)			1	

Pai	rt X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	14,946.	1	22,302.
	2	Savings and temporary cash investments	4,189.	2	159.
	3	Pledges and grants receivable, net		3_	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees. Complete			
		Part II of Schedule L		5	
	6	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			
ţ		employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		7	
Ä	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment cost or other			
		basis. Complete Part VI of Schedule D 10a			
	b	Less: accumulated depreciation 10b		10c	
	11	Investments - publicly traded securities .		11	
	12	Investments - other securities See Part IV, line 11	995,923.	12	1,133,795.
	13	Investments · program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	1,015,058.	16	1,156,256.
	17	Accounts payable and accrued expenses	500.	17	500.
	18	Grants payable		18	· · · · · · · · · · · · · · · · · · ·
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
es	22	Loans and other payables to current and former officers, directors, trustees,			
Ħ		key employees, highest compensated employees, and disqualified persons			
Liabilities		Complete Part II of Schedule L		22	
_	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third		}	
		parties, and other liabilities not included on lines 17-24) Complete Part X of			
		Schedule D	F00	25	F00
	26	Total liabilities. Add lines 17 through 25	500.	26	500.
		Organizations that follow SFAS 117 (ASC 958), check here ▶ and			
ces		complete lines 27 through 29, and lines 33 and 34.			
<u>a</u>	27	Unrestricted net assets		27	
Ba	28	Temporarily restricted net assets		28	
Net Assets or Fund Balances	29	Permanently restricted net assets		29	
Ę		Organizations that do not follow SFAS 117 (ASC 958), check here			
Ō		and complete lines 30 through 34.			^
set	30	Capital stock or trust principal, or current funds	0.		0.
As	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net	32	Retained earnings, endowment, accumulated income, or other funds	1,014,558.	32	1,155,756.
_	33	Total net assets or fund balances	1,014,558.	33	1,155,756. 1,156,256.
	34_	Total liabilities and net assets/fund balances	1,015,058.	34	1,156,256.

Form **990** (2013)

	990 (2013) CARROLL EDUCATION FOUNDATION INC	75-26	38646	Pag	₁₀ 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI	<u> </u>			X
				_	
1	Total revenue (must equal Part VIII, column (A), line 12)	1	265	, 6	<u>97.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	204	, 2	<u>49.</u>
3	Revenue less expenses. Subtract line 2 from line 1	3	61	. , 4	48.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,014	. , 5	58.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Pnor period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9	79	7, 7	50.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	1,155	7	56.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990. X Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	О.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			
	separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis,			
	consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audıt			
	Act and OMB Circular A-133?		3a		<u>X</u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

Form **990** (2013)

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

2013

Open to Public Inspection

Department of the Treasury Internal Revenue Service Attach to Form 990 or Form 990-EZ.

Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Inspection

Name of the organization Employer identification number

CARROLL EDUCATION FOUNDATION INC 75-2638646 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). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 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), An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h c ____ Type III - Functionally integrated d ____ Type III - Non-functionally integrated __ Type II By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, Yes No the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s) h (vi) Is the (iii) Type of organization (iv) Is the organization (v) Did you notify the (i) Name of supported (ii) EIN (vii) Amount of monetary organizátion in col. in col. (i) listed in your organization in col. (described on lines 1-9 organization support (i) organized in the governing document? (i) of your support? above or IRC section (see instructions)) Yes No Yes Yes No

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

Schedule A (Form 990 or 990-EZ) 2013

332021 09-25-13

75-2638646 Page 2

Schedule A (Form 990 or 990-EZ) 2013 CARROLL EDUCATION FOUNDATION INC 75-26380

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.)

<u>Se</u>	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual grants.")	203,879.	184,249.	252,198.	212,348.	261,183.	1,113,857,
2	Tax revenues levied for the organ-						
	ızatıon's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to	:					
	the organization without charge			:			
4	Total. Add lines 1 through 3	203,879.	184,249.	252,198.	212,348.	261,183.	1,113,857,
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
	Public support. Subtract line 5 from line 4		·-···]	1,113,857,
	ction B. Total Support	1			-	ı	
	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	Amounts from line 4	203,879.	184,249.	252,198.	212,348.	261,183.	1,113,857.
8	Gross income from interest,					·	
	dividends, payments received on						
	securities loans, rents, royalties	00.760	00 000	20 546	26 652	42 224	164 050
_	and income from similar sources	22,762.	22,023.	39,546.	36,653.	43,994.	164,978.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV)						
	Total support. Add lines 7 through 10	ata /aca instruction		<u>.</u>	<u> </u>	12	1,278,835.
	Gross receipts from related activities, First five years. If the Form 990 is for	•	•	d fourth or fifth to	av voor op a goetie	L	
13	organization, check this box and stop	~	s mst, second, triii	u, iourtii, or iiitii ta	ax year as a sectio	11 50 1(0)(3)	ightharpoonup
Se	ction C. Computation of Publ	ic Support Pe	rcentage				
	Public support percentage for 2013 (•	column (fl)		14	87.10 %
	Public support percentage from 2012		•			15	88.52 %
	33 1/3% support test - 2013. If the	•	•	n line 13, and line	14 ıs 33 1/3% or n	·	
	stop here. The organization qualifies	=				,	▶ X
t	33 1/3% support test - 2012. If the		•		line 15 is 33 1/3%	or more, check th	
	and stop here. The organization qual	ifies as a publicly s	supported organization	ation		•	
17a	10% -facts-and-circumstances tes	•	•		e 13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the "fac	cts-and-circumstan	ces" test, check tl	nis box and stop h	ere. Explain in Pa	rt IV how the organ	ization
	meets the "facts-and-circumstances"	test The organiza	tion qualifies as a	publicly supported	d organization	_	ightharpoons
t	10% -facts-and-circumstances tes	t - 2012. If the org	anization did not o	check a box on line	e 13, 16a, 16b, or	17a, and line 15 is	10% or
	more, and if the organization meets the	he "facts-and-circu	mstances" test, cl	neck this box and	stop here. Explair	n in Part IV how the	•
	organization meets the "facts-and-circ	cumstances" test.	The organization of	qualifies as a publi	cly supported orga	anization	ightharpoons
18	Private foundation. If the organization	on did not check a	box on line 13, 16	<u>a, 16b, 17a, or 17t</u>	o, check this box a	and see instruction	s
					Sche	edule A (Form 990	or 990-EZ) 2013

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.)

Se	ction A. Public Support			<u> </u>			
Cale	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						_
	merchandise sold or services per-						
	formed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
Ū	are not an unrelated trade or bus-						
	iness under section 513						
	_				 		
4	Tax revenues levied for the organ-	·					
	ization's benefit and either paid to						
_	or expended on its behalf				ļ. <u></u>		
5	The value of services or facilities	,]				
	furnished by a governmental unit to						
	the organization without charge					ļ	
6	Total. Add lines 1 through 5						
78	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
ŀ	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						
	Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6)						
	ction B. Total Support						
	endar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	Amounts from line 6	X -7		\-\-\		1	
-	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and income from similar sources						
	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975			ì			
	· ·					_	<u> </u>
	Add lines 10a and 10b			ļ	 	 	-
11	Net income from unrelated business activities not included in line 10b,						
	whether or not the business is						
	regularly carned on						ļ
12	Other income. Do not include gain or loss from the sale of capital			1			
	assets (Explain in Part IV.)		ļ <u>.</u>				
13	Total support. (Add tines 9, 10c, 11, and 12)		<u></u> _				
14	First five years. If the Form 990 is for	r the organization's	s first, second, thu	rd, fourth, or fifth t	ax year as a section	on 501(c)(3) organi	zation,
	check this box and stop here						▶□
Se	ction C. Computation of Publ	ic Support Pe	rcentage				
15	Public support percentage for 2013 (line 8, column (f) d	livided by line 13,	column (f))		15	%
16	Public support percentage from 2012	Schedule A, Part	III, line 15			16	%
	ction D. Computation of Inve						
17	Investment income percentage for 20)13 (line 10c, colur	mn (f) divided by li	ne 13. column (fl)		17	<u>~~~~</u>
18	Investment income percentage from			,	••	18	%
	a 33 1/3% support tests - 2013. If the			on line 14 and lin	e 15 is more than		
150	more than 33 1/3%, check this box a	-					
				<u>-</u>			. ~
t	33 1/3% support tests - 2012. If the						
	line 18 is not more than 33 1/3%, che		-				
<u>20</u>	Private foundation. If the organization	<u>in did not check a</u>	DOX ON line 14, 19	a, or 190, check t	nis box and see in	structions	

chedule A	(Form 990 or 990-EZ) 20 Supplemental info	13 CARROLL	EDUCATION	N FOUNDATI	ON INC	75-2638646 Pag
Part IV			•		, line 10; Part II, line	17a or 17b; and Part III, line 12.
	Also complete this part	for any additional	information (See in	structions)		
						· · · · · · · · · · · · · · · · · · ·
						
						· · · · · · · · · · · · · · · · · · ·
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	-		_			
						

SCHEDULE D

Department of the Treasury

Internal Revenue Service

(Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

OMB No 1545-0047

Name of the organization

Employer identification number

Pai	CARROLL EDUCATION		/5-2638646
Pai			s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		<u> </u>
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor advis	sed funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a	advisors in writing that grant funds can be	used only
	for chantable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose	conferring
	impermissible private benefit?		Yes No
Pai	t II Conservation Easements. Complete if the org	ganization answered "Yes" to Form 990, F	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization	ion (check all that apply)	
	Preservation of land for public use (e.g., recreation or e	education) Preservation of an his	storically important land area
	Protection of natural habitat	Preservation of a cert	tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	fied conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic str	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired a	after 8/17/06, and not on a historic struct	ure
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rel	leased, extinguished, or terminated by the	e organization during the tax
	year >		
4	Number of states where property subject to conservation eas	sement is located >	
5	Does the organization have a written policy regarding the per	riodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements if	t holds?	L Yes L No
6	Staff and volunteer hours devoted to monitoring, inspecting,	and enforcing conservation easements d	luring the year ▶
7	Amount of expenses incurred in monitoring, inspecting, and	enforcing conservation easements during	the year ▶ \$
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170	0(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		└── Yes └── No
9	In Part XIII, describe how the organization reports conservati	ion easements in its revenue and expense	e statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organization	tion's financial statements that describes	the organization's accounting for
	conservation easements.		
Pai	t III Organizations Maintaining Collections o	•	ther Similar Assets.
	Complete if the organization answered "Yes" to Form	990, Part IV, line 8	
1a	If the organization elected, as permitted under SFAS 116 (AS		
	historical treasures, or other similar assets held for public exh	hibition, education, or research in furthera	ince of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descri	ibes these items	
b	If the organization elected, as permitted under SFAS 116 (AS		
	treasures, or other similar assets held for public exhibition, ed	ducation, or research in furtherance of pu	blic service, provide the following amounts
	relating to these items		
	(i) Revenues included in Form 990, Part VIII, line 1	•	. • \$
	(ii) Assets included in Form 990, Part X	•	. > \$
2	If the organization received or held works of art, historical tre-	asures, or other similar assets for financia	
	the following amounts required to be reported under SFAS 1 $$	16 (ASC 958) relating to these items:	
а	Revenues included in Form 990, Part VIII, line 1		> \$
b	Assets included in Form 990, Part X		> \$

Sche Pa r	dule D (Form 990) 2013 CARROLL t III Organizations Maintaining C	EDUCATION				er Sir		38646	
3	Using the organization's acquisition, accessi								
3	(check all that apply):	on, and other record	is, check any o	i trie io	nowing that are a	signilica	ini use oi iis	COHECTION	ILEITIS
а	Public exhibition	ď	ı 🗀 Loan o	r avcha	nge programs				
b	Scholarly research			OXCIIA	inge programs				
c	Preservation for future generations	•	, Carea	_				_	
4	Provide a description of the organization's co	ollections and explai	in how they fur	har tha	organization's ev	emnt ni	ironea in Par	+ XIII	
5	During the year, did the organization solicit of							· Am	
•	to be sold to raise funds rather than to be ma				•	ai asset	•	Yes	☐ No
Par	t IV Escrow and Custodial Arran					. Form 9	UN Part IV	_	
	reported an amount on Form 990, Pa		oto ii tilo organ	Zation	answered res to	J 1 OIIII .	300,1 41114,		
1a	Is the organization an agent, trustee, custod		diary for contrib	utions	or other assets no	t includ	led	-	
	on Form 990, Part X?		andry for contine	dilons.	or other assets ne	i ii ioidd		Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing table:			•	_	00	
_	and an analysis of the second		g .a.s.e					Amount	
С	Beginning balance					1	c		
d	Additions during the year						d		
e	Distributions during the year						e		
f	Ending balance						ıf		
2a	Did the organization include an amount on F	orm 990. Part X. line	212					Yes	No
	If "Yes," explain the arrangement in Part XIII.			been pi	rovided in Part XII	I			
Par									
		(a) Current year	(b) Prior yea		(c) Two years back	1	ee years back	(e) Four y	ears back
1a	Beginning of year balance							' '	
b	Contributions Net investment earnings, gains, and losses								
С									
d	Grants or scholarships								
е	Other expenditures for facilities								
	and programs								
f	Administrative expenses								
g	End of year balance								
2	Provide the estimated percentage of the cur	rent year end baland	ce (line 1g, colu	mn (a))	held as:				
а	Board designated or quasi-endowment		%						
b	Permanent endowment	%							
c	Temporarily restricted endowment ▶	%							
	The percentages in lines 2a, 2b, and 2c should	uld equal 100%							
3a	Are there endowment funds not in the posse	ession of the organiz	ation that are h	eld and	dadministered for	the org	anızatıon	_	
	by.							\	res No
	(i) unrelated organizations							3a(i)	
	(ii) related organizations							3a(ii)	
b	If "Yes" to 3a(ii), are the related organization:	s listed as required o	on Schedule R?)				3b	
4	Describe in Part XIII the intended uses of the		owment funds			_			
Par	t VI Land, Buildings, and Equipm								
	Complete if the organization answere	d "Yes" to Form 990	·			(, line 10)		
	Description of property	(a) Cost or o		Cost o		Accumu		(d) Book	value
		basis (invest	ment) t	asis (o	ther) de	eprecia	tion		
	Land								
	Buildings .								
С	Leasehold improvements .								
d	Equipment							 .	
	Other			 					
Intal	. Add lines 1a through 1e (Column (d) must e	qual Form 990 Pari	t X. column (R)	line 10i	(c))				0.

Schedule D (Form 990) 2013

	organization answered "Yes" t					of year madest web:-
	ategory (including name of security)	(b) Book value	(c) Method o	T Valuation	n Cost or end	-of-year market value
Financial derivatives Classiv hald accept sectors						
2) Closely-held equity intere 3) Other	isis				 .	
(A) MUTUAL FUNI	ns -	1,128,08	6 END-OF-	VEAR	MARKET	WALITE
	ONS AND ETF'S	5,70			MARKET	
(C)	<u> </u>	3,10	DIND OI	1 11111	IIIIIIII I	VIIIOD
(D)						
(E)						
(F)						
(G)						
(H)		<u> </u>				
	990, Part X, col. (B) line 12.)	1,133,79	5.			
Part VIII Investments	=					
Complete if the	organization answered "Yes" f					
	of investment	(b) Book value	(c) Method o	of valuatio	n: Cost or end	l-of-year market value
(1)						
(2)		·				
(3)	·					
(4)						
(5)			+			
(6)	· · · · · · · · · · · · · · · · · · ·					
(8)						
(9)		· · · · ·				
	990, Part X, col. (B) line 13.)			·		
Part IX Other Asset	S.					***************************************
	organization answered "Yes"	to Form 990, Part IV,	ine 11d. See Form 99	0, Part X,	line 15	
· ·		Description		<u></u>		(b) Book value
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						<u>-</u>
(9)	15 200 5 . 1/ . /21/					
Part X Other Liabil	al Form 990, Part X, col (B) line	9 15.)			<u> </u>	
	organization answered "Yes"	to Form 000 Port IV	ino 11a or 11f Coa E	· 000 F	Dort V. Iron DE	
- 10) Description of liability	to Form 990, Part IV,	(b) Book value) 1111 990, F	Part A, line 25	
(1) Federal income taxes			(b) DOOK Value			
(2)	<u> </u>	· -	· · · · · · · · · · · · · · · · · · ·			
(3)				_		
(4)		-				
(5)						
(6)		-				
(7)						
(8)			·			
(9)						
	al Form 990, Part X, col. (B) line	e 25.)				
	positions In Part XIII, provide		te to the organization	's financia	al statements	that reports the
	uncertain tax positions under		_			_
						edule D (Form 990) 20

332053 09-25-13

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

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

OMB No 1545-0047

Department of the Treasury

▶ Attach to Form 990 or Form 990-EZ.

Open To Public

Schedule G (Form 990 or 990-EZ) 2013

Information a	bout Schedule G (Form 990 or 990-EZ)	and its	instru	ctions is at www.irs.g	<u>gov/form 9</u> 90.	Inspection
Name of the organization					Employe	r identification number
CARROLL	EDUCATION FOUNDAT	ION	IN	IC_	75-26	38646
Part I Fundraising Activities required to complete this par	 Complete if the organization answer 	ered "Y	es" to	Form 990, Part IV, I	ine 17 Form 99	0-EZ filers are not
1 Indicate whether the organization rais	sed funds through any of the follows	ng acti	vities.	Check all that apply		
a Mail solicitations		_		overnment grants		
b Internet and email solicitations			_	nment grants		
c Phone solicitations	g Special		_	_		
d In-person solicitations	3 === 1					
2 a Did the organization have a written of	or oral agreement with any individual	l (includ	dina o	fficers directors true	stees or	
key employees listed in Form 990, P						Yes No
b If "Yes," list the ten highest paid ind						
compensated at least \$5,000 by the		uant to	agie	ements under which	the folialiser	s to be
		(iii)	Did	_	(v) Amount pa	aid () A
(i) Name and address of individual	(ii) Activity	(iii) fundr	aiser	(iv) Gross receipts	to (or retained	by) to (or retained by)
or entity (fundraiser)	(,	or con	trol of utions?	from activity	fundraiser listed in col.	organization
				-		
		Yes	No			
					<u> </u>	
				-		
		<u> </u>				
List all states in which the organization or licensing.	on is registered or licensed to solicit	contrib	utions	l s or has been notified	d it is exempt fr	om registration
T. Hoorionig.					-	
		-				
		-				
				· · · · · · · · · · · · · · · · · · ·		
			_	-		
			_	<u></u>		
LHA For Paperwork Reduction Act Not	ice, see the Instructions for Form	990 or	990-1	EZ. S	Schedule G (Fo	rm 990 or 990-EZ) 2013

Sch Pa	edu ert l	le G (Form 990 or 990-EZ) 2013 CARROLI Fundraising Events. Complete if the of fundraising event contributions and great contributions.	e organization answered	"Yes" to Form 990, Par	t IV, line 18, or reported							
			(a) Event #1 CULINARY CELEBRATION	(b) Event #2	(c) Other events NONE	(d) Total events (add col (a) through col. (c))						
Revenue	1	Gross receipts	(event type) 228,124.	(event type)	(total number)	228,124.						
ш	2	Less Contributions	58,140.			58,140.						
	3	Gross income (line 1 minus line 2)	169,984.			169,984.						
	4	Cash prizes										
တ္	5	Noncash prizes										
Direct Expenses	6	Rent/facility costs	30,579.			30,579.						
rect E	7	Food and beverages	1,398.			1,398.						
Δ	8	Entertainment	2,400.			2,400.						
	9	Other direct expenses	27,937.	<u> </u>		27,937.						
	10	Direct expense summary Add lines 4 through			P	62,314.						
Pa	11 Net income summary. Subtract line 10 from line 3, column (d)											
	Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.											
_		, , , , , , , , , , , , , , , , , , , ,	4.15	(b) Pull tabs/instant		(d) Total gaming (add						
nue			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))						
Revenue												
<u> </u>	1	Gross revenue										
ses	2	Cash prizes										
Expenses	3	Noncash prizes			1							
Direct	4	Rent/facility costs										
	5	Other direct expenses			,							
	6	Volunteer labor	Yes %	Yes % No	Yes% No							
	7	Direct expense summary Add lines 2 through	n 5 ın column (d)		•							
	8	Net gaming income summary Subtract line 7	from line 1, column (d)		•							
			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			<u> </u>						
		ter the state(s) in which the organization opera	_									
		he organization licensed to operate gaming ac		states?		└── Yes └── No						
	ır "	No," explain.			. <u>-</u>							
		re any of the organization's gaming licenses re	•	_	year?	Yes No						
				_ -								
	_											

Schedule G (Form 990 or 990 EZ) 2013 CARROLL EDUCATION FOUNDATION INC 7	5-2638646 Page 3
11 Does the organization operate gaming activities with nonmembers?	Yes No
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed	
to administer charitable gaming?	Yes No
13 Indicate the percentage of gaming activity operated in:	
a The organization's facility	13a %
b An outside facility	13b %
14 Enter the name and address of the person who prepares the organization's gaming/special events books and records	
Name	
Address	
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes No
b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amoun	t
of gaming revenue retained by the third party > \$	
c If "Yes," enter name and address of the third party:	
Name	
Address ▶	
16 Gaming manager information:	
Name	
Gaming manager compensation > \$	
Description of services provided	
Description of Services provided	
Director/officer Employee Independent contractor	
17 Mandatory distributions:	
a is the organization required under state law to make charitable distributions from the gaming proceeds to	
retain the state gaming license?	Yes No
b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in	
organization's own exempt activities during the tax year > \$	
Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part IV	
15c, 16, and 17b, as applicable Also complete this part to provide any additional information (see instruction	15)
	· · · · · · · · · · · · · · · · · · ·

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

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

► Attach to Form 990.

Open to Public Inspection

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Name of the organization	MOTHER	CARROLI. EDIICATION EOIRDATION	TNI				Employer identification number
Part I General Information on Grants and Assistance	and Assistance	T COMPATIBLE	TINC				0700007-C/
1 Does the organization maintain records to substantiate the amount of the grants or assistance, and the selection	to substantiate the	amount of the grants	or assistance, the	grantees' eligibilit	y for the grants or ass	sistance, and the selec	tion
criteria used to award the grants or assistance?	ıstance?						X Yes No
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	rocedures for monit	oring the use of grant	funds in the United	d 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	Governments and	d Organizations in the	United States. C	complete if the orga	anization answered "	res" to Form 990, Part	IV, line 21, for any
recipient that received more than \$5,000. Part II can be duplicated	\$5,000. Part II can	be duplicated if additi	if additional space is needed	Jed.			
1 (a) Name and address of organization or government	(p)	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
	and government org	ganizations listed in the	e line 1 table				
Enter total number of otner organizations listed in the line I table Ext Description Act Notice and the Instructions for Extensions	Is listed in the line	table					(1) 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1
	, see me insuucu	ONS TOF PORTER SECT.					Schedule I (Form 990) (2013)

CARROLL EDUCATION FOUNDATION INC Schedule I (Form 990) (2013) 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.

Page 2

75-2638646

(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
SEE SCHEDULES ATTACHED	0	0	0		
Part IV Supplemental Information. Provide the information required in	uired in Part I, lin	e 2, Part III, column	Part I, line 2, Part III, column (b), and any other additional information.	iditional information.	
PART I, LINE 2:					
EXPLANATION: TO MONITOR THE USE OF GRANTS AND SCHOLARSHIPS PROVIDED TO	GRANTS	AND SCHOLA	RSHIPS PRO	VIDED TO	
INDIVIDUALS, THE CARROLL EDUCATION FOUNDATION HAS CREATED TWO COMMITTEES.	FOUNDAT	ION HAS CR	EATED TWO	COMMITTEES.	
THE TWO COMMITTEES ARE THE GRANT COMMITTEE AND	OMMITTEE	THE	SCHOLARSHIP COMMITTEE	COMMITTEE.	
DETAILS ON EACH COMMITTEE IS LISTED	D BELOW.				
			,		

THE CEF GRANT COMMITTEE COMES TOGETHER ONCE A YEAR TO SELECT RECIPIENTS OF

CISD TEACHERS COMPLETE APPLICATIONS TO CEF. EACH YEAR, CEF TEACHERS GRANTS.

AS THE CEF EXECUTIVE DIRECTOR, FORMED BY CEF BOARD MEMBERS, THE COMMITTEE,

332102 10-29-13

SCHEDULE M (Form 990)

• 4•

Noncash Contributions

OMB No 1545-0047

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Department of the Treasury Internal Revenue Service

Attach to Form 990. ► Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990. Open to Public Inspection

Name of the organization

Employer identification number

	CARROLL EDUC	ATION	FOUNDATIO	N INC		75-26	<u> </u>	46	
Pai	t I Types of Property								
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	nonc	(d) Method of det cash contribut		_	S
1	Art - Works of art				ļ				
2	Art - Historical treasures								
3	Art - Fractional interests								
4	Books and publications	ļ	<u> </u>		ļ		-		
5	Clothing and household goods	X		58.	FAIR	MARKET	VAI	<u>UE</u>	
6	Cars and other vehicles								
7	Boats and planes								
8	Intellectual property								
9	Securities - Publicly traded								
10	Securities - Closely held stock								
11	Securities - Partnership, LLC, or								
	trust interests								
12	Securities - Miscellaneous								
13	Qualified conservation contribution -								
	Historic structures								
14	Qualified conservation contribution - Other				ļ				
15	Real estate - Residential	<u></u>	<u> </u>		-				
16	Real estate - Commercial	L			ļ				
17	Real estate - Other		ļ		ļ				
18	Collectibles	X	11	1,505.	FAIR	MARKET	VAI	<u>UE</u>	
19	Food inventory								
20	Drugs and medical supplies								
21	Taxidermy								
22	Historical artifacts				-				
23	Scientific specimens				ļ				
24	Archeological artifacts				ļ				
25	Other (GIFT CERTIFIC)	X	65			MARKET			
26	Other (SERVICE)	X	21			MARKET			
27	Other (FOOD AND BEVE)	X	7			MARKET			
<u> 28</u> _	Other (TICKETS)	X	13		FAIR	MARKET	VAI	JUE	
29	Number of Forms 8283 received by the organ		-						
	for which the organization completed Form 82	283, Part IV,	Donee Acknowled	gement 29					
						г		Yes	No
30a	During the year, did the organization receive b					li i			l
	at least three years from the date of the initial	contribution	, and which is not	required to be used for exe	mpt purpo	ses for			
	the entire holding period?					1	30a		X
b	If "Yes," describe the arrangement in Part II								l
31	Does the organization have a gift acceptance	policy that i	equires the review	of any non-standard contri	outions?	1	31		X
32a	Does the organization hire or use third parties	or related o	rganizations to sol	icit, process, or sell noncas	า				l _
	contributions?]	32a		X
þ	If "Yes," describe in Part II								
33	If the organization did not report an amount in	column (c)	for a type of prope	rty for which column (a) is o	hecked,				
	describe in Part II								
ιшΔ	For Danaguark Reduction Act Notice see	the lactric	stions for Earm 00	ν Λ		Schodula M (Earm (2001	2012

332141 09-03-13

Schedule M	(Form 990) (2013)	CARROLL	EDUCATION	FOUNDATION	INC	75-263864 <u>6</u>	Page 2
Part II	Supplemental is reporting in Part this part for any ac	Information I, column (b), the	1. Provide the inform	nation required by Part outlons, the number of	I, lines 30b, 32b, and 3 items received, or a con	3, and whether the organization of both. Also con	ation nplete
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Schedule M (Form 990) (2013)

332142 09-03-13

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

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

Attach to Form 990 or 990-EZ.

OMB No 1545-0047 Open to Public

Internal Revenue Service Name of the organization Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Inspection

Employer identification number

CARROLL EDUCATION FOUNDATION INC	<u> 75-2638646 </u>
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MIS	SION:
THROUGH EDUCATION GRANTS AND SCHOLARSHIPS.	
FORM 990, PART VI, SECTION B, LINE 11:	
EXPLANATION: THE PROCESS THE ORGANIZATION USES TO REVIEW	FORM 990 IS AS
FOLLOWS: FORM 990 IS DELIVERED TO THE TREASURER AND THEN	IS AVAILABLE TO
THE ENTIRE BOARD FOR THEIR REVIEW (UPON REQUEST).	
FORM 990, PART VI, SECTION B, LINE 12C:	
EXPLANATION: REVIEWED AT BOARD MEETINGS.	
FORM 990, PART VI, SECTION C, LINE 19:	
EXPLANATION: UPON WRITTEN REQUEST.	
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
CHANGE IN VALUE OF INVESTMENTS	79,750.

	EDUCATIO								<u> 75-263</u>	8646
Part VII Section A. Officers, Directors,	Trustees, Key Er	mplo	yee	s, a	nd F	ligh	est	Compensated Employ	ees (continued)	
Name and title	(B) Average hours	Average			C) ition that		ly)	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	per week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(27) KIMBERLY OROSCO	5.00	ļ								-
BOARD MEMBER		X						0.	0.	0
(28) SHELLY POWELL	5.00	ļ								
BOARD MEMBER		X	_					0.	0.	0
(29) LISA QUINN	5.00	1								
BOARD MEMBER		X	_				_	0.	0.	0
(30) RON TEER	5.00									
BOARD MEMBER		X		<u> </u>				0.	0.	0
(31) GINA UHTENWOLDT	5.00	-					ļ			
BOARD MEMBER		X			<u> </u>	_	<u> </u>	0.	0.	0
(32) NATHAN TAYLOR	5.00	ļ					ŀ	_	_	_
BOARD MEMBER		X	ļ					0.	0.	0
(33) JOHN TERRELL	5.00	ļ		'			ŀ			
BOARD MEMBER	<u> </u>	X			-			0.	0.	0
(34) NICOLE TESORIERO	5.00	.,							_	_
BOARD MEMBER	5.00	X	-	 	-			0.	0.	0
(35) KEN THOMPSON	3.00	x		'				0.	0.	0
BOARD MEMBER	5.00	^		\vdash			\vdash		<u> </u>	
(36) KIM VILLANUEVA BOARD MEMBER	3.00	X					İ	0.	0.	0
(37) SHERRI WILLIAMS	5.00	^		\vdash					0.	<u> </u>
BOARD MEMBER	3,00	x		'				0.	0.	0
(38) DANIELLE VAUGHN	5.00								<u> </u>	
BOARD MEMBER	-	X						0.	0.	0
(39) KACY HANKINS	40.00									
EXECUTIVE DIRECTOR				X				56,000.	0.	0
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			<u> </u>			L				
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Total to Part VII, Section A, line 1c								56,000.		
TOTAL TO LATE VIII, OCCUPITA, IIIIC TO	_							70,000.		