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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 private foundations)

▶ 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

OMB No 1545-0047

2013Open to Public
Inspection**A** For the 2013 calendar year, or tax year beginning

05/01, 2013, and ending

04/30, 2014

B Check if applicable:

- ☐ Address change
☐ Name change
☐ Initial return
☐ Terminated
☐ Amended return
☐ Application pending

C Name of organization

HENRY STRONG EDUCATIONAL FOUNDATION

Doing Business As HENRY STRONG EDUCATIONAL FUND

Number and street (or P.O. box if mail is not delivered to street address)

Room/suite

NORTHERN TRUST COMPANY

City or town, state or province, country, and ZIP or foreign postal code

PO BOX 803878, CHICAGO, IL 60680

F Name and address of principal officer:**D** Employer identification number

36-6075238

E Telephone number

312 630-6000

G Gross receipts \$ 1,852,952.**H(a)** Is this a group return for subordinates? ☐ Yes ☒ No**H(b)** Are all subordinates included? ☐ Yes ☐ No

If "No," attach a list (see instructions)

H(c) Group exemption number ▶**I** Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) () ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527**J** Website: ▶ N/A**K** Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶**L** Year of formation: 1919 **M** State of legal domicile: IL**Part I Summary****1** Briefly describe the organization's mission or most significant activities:

SEE SCHEDULE O

2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.**3** Number of voting members of the governing body (Part VI, line 1a)

3 5

4 Number of independent voting members of the governing body (Part VI, line 1b)

4 5

5 Total number of individuals employed in calendar year 2013 (Part V, line 2a)

5 NONE

6 Total number of volunteers (estimate if necessary)

6 NONE

7a Total unrelated business revenue from Part VIII, column (C), line 12

7a NONE

b Net unrelated business taxable income from Form 990-T, line 34

7b NONE

8 Contributions and grants (Part VIII, line 1h)

Prior Year	Current Year
34,740	149,949
110,100	100,525
311,143	490,064
455,983	740,538
700	800
140,449	130,225
141,149	131,025
314,834	609,513

9 Program service revenue (Part VIII, line 2g)

110,100 100,525

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)

311,143 490,064

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8g, 9c, and 3e)

455,983 740,538

12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)

700 800

13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)**14** Benefits paid to or for members (Part IX, column (A), line 4)**15** Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)**16a** Professional fundraising fees (Part IX, column (A), line 11e)**b** Total fundraising expenses (Part IX, column (D), line 25) ▶ NONE**17** Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)

140,449 130,225

18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)

141,149 131,025

19 Revenue less expenses. Subtract line 18 from line 12

314,834 609,513

20 Total assets (Part X, line 16)

Beginning of Current Year	End of Year
9,992,990	10,349,959
NONE	NONE
9,992,990	10,349,959

21 Total liabilities (Part X, line 26)

NONE NONE

22 Net assets or fund balances. Subtract line 21 from line 20.

9,992,990 10,349,959

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.

Sign Here

Signature of officer

3-6-15
DateEVA BERNACKI PRESIDENT
Type or print name and title**Paid Preparer Use Only**

Print/Type preparer's name

Meredith Glenn

Preparer's signature

Meredith Glenn

Date

3/5/15

Check ☐ if self-employed

PTIN

P01613620

Firm's name ▶ THE NORTHERN TRUST COMPANY

Firm's EIN ▶ 36-1561860

Firm's address ▶ P.O. BOX 803878; CHICAGO, IL 60680

Phone no.

May the IRS discuss this return with the preparer shown above? (see instructions)

Yes ☐ No ☒

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2013)

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☐**1** Briefly describe the organization's mission:

DEVOTED TO GIVING SCHOLARSHIPS AND MAKING LOANS TO QUALIFIED STUDENTS
ATTENDING ABOUT THIRTY ACCREDITED COLLEGES AND UNIVERSITIES LOCATED
MOSTLY IN THE MIDWEST.

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 \$ 33,448. including grants of \$ 33,448.) (Revenue \$)

MAKING LOANS TO QUALIFIED STUDENTS - ADMINISTRATIVE EXPENSES & LOAN
WRITE-OFFS

4b (Code:) (Expenses \$ 800. including grants of \$ 800.) (Revenue \$)

SCHOLARSHIPS PAID TO STUDENTS

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)**4d** Other program services (Describe in Schedule O.)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses **34,248.**

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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	<input type="checkbox"/>	<input type="checkbox"/>
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	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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	<input type="checkbox"/>	<input checked="" type="checkbox"/>
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	<input type="checkbox"/>	<input checked="" type="checkbox"/>
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	<input type="checkbox"/>	<input checked="" type="checkbox"/>
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	<input type="checkbox"/>	<input checked="" type="checkbox"/>
11 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.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	<input type="checkbox"/>	<input checked="" type="checkbox"/>
c Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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 Part X, line 16? If "Yes," complete Schedule D, Part IX	<input type="checkbox"/>	<input checked="" type="checkbox"/>
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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	<input type="checkbox"/>	<input checked="" type="checkbox"/>
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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	<input type="checkbox"/>	<input checked="" type="checkbox"/>
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	<input type="checkbox"/>	<input checked="" type="checkbox"/>
14a Did the organization maintain an office, employees, or agents outside of the United States?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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 foreign organization? If "Yes," complete Schedule F, Parts II and IV	<input type="checkbox"/>	<input checked="" type="checkbox"/>
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	<input type="checkbox"/>	<input checked="" type="checkbox"/>
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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	<input type="checkbox"/>	<input checked="" type="checkbox"/>
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	<input type="checkbox"/>	<input type="checkbox"/>

Part IV Checklist of Required Schedules (continued)

	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? <i>If "Yes," complete Schedule I, Parts I and II</i>	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), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	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? <i>If "Yes," complete Schedule J</i>	23	X
24 a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If No, go to line 25a</i>	24a	X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	X
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	X
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	X
25 a 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? <i>If "Yes," complete Schedule L, Part I</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? <i>If "Yes," complete Schedule L, Part I</i>	25b	X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payable to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If so, complete Schedule L, Part II</i>	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? <i>If "Yes," complete Schedule L, Part III</i>	27	X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a	X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b	X
c 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>	28c	X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31	X
32 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>	32	X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33	X
34 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>	34	X
35 a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X
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>	35b	X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36	X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37	X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	X

Form 990 (2013)

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck 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	1a 0		
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 (gambling) winnings to prize winners?	1c		
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 0		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b		
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b If Yes, enter the name of the foreign country: See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c 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	7d		
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		X
9 Sponsoring organizations maintaining donor advised funds.			
a Did the organization make any taxable distributions under section 4966?	9a		X
b Did the organization make a distribution to a donor, donor advisor, or related person?	9b		X
10 Section 501(c)(7) organizations. Enter:			
a Initiation fees and capital contributions included on Part VIII, line 12	10a		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		
11 Section 501(c)(12) organizations. Enter:			
a Gross income from members or shareholders	11a		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a		
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	13b		
c Enter the amount of reserves on hand	13c		
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

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 ☒ X

Section 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 5 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 5		
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?		X
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? . .		X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6 Did the organization have members or stockholders?	X	
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?	X	
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	X	
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body?	X	
b Each committee with authority to act on behalf of the governing body?	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	X	

Section 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?		X
b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? . . .		
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? .	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	X	
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	X	
13 Did the organization have a written whistleblower policy?	X	
14 Did the organization have a written document retention and destruction policy?	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?		
a The organization's CEO, Executive Director, or top management official		X
b Other officers or key employees of the organization		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?		X
b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ► Illinois

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) available for public inspection. Indicate how you made these available. Check all that apply.
☐ Own website ☐ Another's website ☒ 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: ► NORTHERN TRUST COMPANY TEL: (312)630-6000

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck 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.

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) EVA BERNACKI PRESIDENT		X		X				NONE	NONE	NONE
(2) BRUCE W. MACARTHUR VICE PRESIDENT		X		X				NONE	NONE	NONE
(3) THEODORE SHELTON BURNS VICE PRESIDENT		X		X				NONE	NONE	NONE
(4) R. HUGH MAGILL VICE PRESIDENT		X		X				NONE	NONE	NONE
(5) LAURENCE A. HANSEN DIRECTOR		X						NONE	NONE	NONE
(6) VIVIAN CHIN SECRETARY & TREASURER				X				NONE	NONE	NONE
(7)										
(8)										
(9)										
(10)										
(11)										
(12)										
(13)										
(14)										

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			
(15) -----										
(16) -----										
(17) -----										
(18) -----										
(19) -----										
(20) -----										
(21) -----										
(22) -----										
(23) -----										
(24) -----										
(25) -----										
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								NONE	NONE	NONE

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 **0**

- 3** Did the organization list any **former** officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual.
- 4** 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? If Yes, complete Schedule J for such individual.
- 5** Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If Yes, complete Schedule J for such person.

	Yes	No
3		X
4		X
5		X

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

- 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 **0**

Part VIII Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations	1d				
	e	Government grants (contributions)	1e				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	149,949			
	g	Noncash contributions included in lines 1a-1f \$					
	h	Total. Add lines 1a-1f		149,949.			
Program Service Revenue	2a	INTEREST FROM STUDENT LOAN	Business Code 611710	100,525.	100,525.		
	b						
	c						
	d						
	e						
	f	All other program service revenue					
	g	Total. Add lines 2a-2f		100,525.			
	Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		141,463.		
4		Income from investment of tax-exempt bond proceeds					
5		Royalties					
			(i) Real (ii) Personal				
6a		Gross rents					
b		Less: rental expenses					
c		Rental income or (loss)					
d		Net rental income or (loss)					
7a		Gross amount from sales of assets other than inventory	(i) Securities (ii) Other 1,461,015				
b		Less: cost or other basis and sales expenses	1,112,414				
c		Gain or (loss)	348,601				
d		Net gain or (loss)		348,601.		348,601.	
8a		Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	a				
b		Less: direct expenses	b				
c		Net income or (loss) from fundraising events					
9a		Gross income from gaming activities. See Part IV, line 19	a				
b		Less: direct expenses	b				
c		Net income or (loss) from gaming activities					
10a	Gross sales of inventory, less returns and allowances	a					
b	Less: cost of goods sold	b					
c	Net income or (loss) from sales of inventory						
Miscellaneous Revenue			Business Code				
11a							
b							
c							
d	All other revenue						
e	Total. Add lines 11a-11d						
12	Total revenue. See instructions		740,538.	100,525.		490,064.	

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 or note to any line in this Part IX

Do not include amounts reported on lines 6b, 7b, 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	800.	800.		
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				
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				
11 Fees for services (non-employees):				
a Management				
b Legal	242.		242.	
c Accounting	2,000.		2,000.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17.				
f Investment management fees	90,178.		90,178.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12 Advertising and promotion				
13 Office expenses				
14 Information technology				
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				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance				
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)				
a STUDENT LOAN WRITE-OFFS	24,409.	24,409.		
b STUDENT LOAN ADMINISTRATIVE EXPENSE	9,039.	9,039.		
c FOREIGN TAX ON INVESTMENT	4,332.		4,332.	
d				
e All other expenses	25.		25.	
25 Total functional expenses. Add lines 1 through 24e	131,025.	34,248.	96,777.	NONE
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part 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
Assets	1 Cash - non-interest-bearing		1	
	2 Savings and temporary cash investments	223,719.	2	213,329.
	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 employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	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	4,394,479.	11	4,779,293.
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11	5,374,792.	13	5,357,337.
	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)	9,992,990.	16	10,349,959.	
Liabilities	17 Accounts payable and accrued expenses		17	
	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	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	NONE	26	NONE
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets		27	
	28 Temporarily restricted net assets		28	
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds	9,992,990.	30	10,349,959.
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	9,992,990.	33	10,349,959.
	34 Total liabilities and net assets/fund balances	9,992,990.	34	10,349,959.

Form **990** (2013)

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI ☒

1	Total revenue (must equal Part VIII, column (A), line 12)	1	740,538.
2	Total expenses (must equal Part IX, column (A), line 25)	2	131,025.
3	Revenue less expenses. Subtract line 2 from line 1	3	609,513.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	9,992,990.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-252,544.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	10,349,959.

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☐

- 1** Accounting method used to prepare the Form 990: ☒ Cash ☐ Accrual ☐ Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:
☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis
- c** If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

	Yes	No
2a		X
2b		X
2c		
3a		X
3b		

Form **990** (2013)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

OMB No. 1545-0047

2013

Open to Public
Inspection

▶ 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

Name of the organization

HENRY STRONG EDUCATIONAL FOUNDATION

Employer identification number

36-6075238

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).

(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	
(A) N/A									
(B)									
(C)									
(D)									
(E)									
Total									

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

Schedule A (Form 990 or 990-EZ) 2013

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) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	N/A (f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f).						
6 Public support. Subtract line 5 from line 4.						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2012 Schedule A, Part II, line 14	15	%
16a 33 1/3% support test - 2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 33 1/3% support test - 2012. 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 stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10%-facts-and-circumstances test - 2013. 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 stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10%-facts-and-circumstances test - 2012. 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 stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

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) 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.")	84,489.	74,870.	85,257.	34,740.	149,949.	429,305.
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	109,612.	101,943.	108,672.	110,100.	100,525.	530,852.
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge	110,850.	114,666.	122,056.	124,907.	130,309.	602,788.
6 Total. Add lines 1 through 5	304,951.	291,479.	315,985.	269,747.	380,783.	1,562,945.
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	84,489.	74,870.	85,257.	34,740.	149,949.	429,305.
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	29,494.	25,522.	25,652.	25,058.	29,360.	135,086.
c Add lines 7a and 7b	113,983.	100,392.	110,909.	59,798.	179,309.	564,391.
8 Public support. (Subtract line 7c from line 6.)						998,554.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6	304,951.	291,479.	315,985.	269,747.	380,783.	1,562,945.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	103,381.	97,471.	120,404.	115,244.	133,463.	569,963.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	103,381.	97,471.	120,404.	115,244.	133,463.	569,963.
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)	408,332.	388,950.	436,389.	384,991.	514,246.	2,132,908.
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f))	15	46.82%
16 Public support percentage from 2012 Schedule A, Part III, line 15	16	49.30%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f))	17	26.72%
18 Investment income percentage from 2012 Schedule A, Part III, line 17	18	26.60%

- 19a 33 1/3% support tests - 2013.** 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 - 2012.** 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.** 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).

[illegible]

**SCHEDULE D
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

OMB No. 1545-0047

2013

**Open to Public
Inspection**

Name of the organization

HENRY STRONG EDUCATIONAL FOUNDATION

Employer identification number

36-6075238

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.

	(a) Donor advised funds	(b) Funds and other accounts
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 and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► _____

4 Number of states where property subject to conservation easement is located ► _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during 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 satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(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 treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenues included in Form 990, Part VIII, line 1 ► \$ _____

b Assets included in Form 990, Part X ► \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)	
1	2
3	4
5	6
7	8
9	10
11	12
13	14
15	16
17	18
19	20
21	22
23	24
25	26
27	28
29	30
31	32
33	34
35	36
37	38
39	40
41	42
43	44
45	46
47	48
49	50
51	52
53	54
55	56
57	58
59	60
61	62
63	64
65	66
67	68
69	70
71	72
73	74
75	76
77	78
79	80
81	82
83	84
85	86
87	88
89	90
91	92
93	94
95	96
97	98
99	100

- 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
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

- | | | | | | |
|-----------|---|--------------------------|-----|--------------------------|----|
| 2a | Did the organization include an amount on Form 990, Part X, line 21? | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| b | If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII. | | | | |

- 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
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

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

- a Board designated or quasi-endowment %
- b Permanent endowment %
- c Temporarily restricted endowment %

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:

- (i) unrelated organizations
- (ii) related organizations

	Yes	No
3a(i)		
3a(ii)		
3b		

- b** If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

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

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. 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
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other				

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11b. 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		
(3) Other -----		
(A) -----		
(B) -----		
(C) -----		
(D) -----		
(E) -----		
(F) -----		
(G) -----		
(H) -----		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ►		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) STUDENT LOANS	5,357,337.	COST
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ►	5,357,337.	

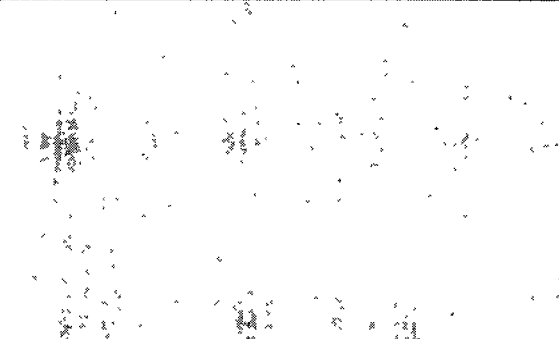
Part IX Other Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ►	

Part X Other Liabilities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value	
(1) Federal income taxes		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ►		

2. Liability for uncertain tax positions. 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.
---------	---

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

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

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

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

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

Part XIII Supplemental Information.

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.

[illegible]

Part XIII **Supplemental Information** *(continued)*[illegible]

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization

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.

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

OMB No 1545-0047

2013

**Open to Public
Inspection**

HENRY STRONG EDUCATIONAL FOUNDATION

Employer identification number

36-6075238

EXPLANATION FOR FORM 990, PAGE 6, PART VI, LINE 6

THE CORPORATION HAS MEMBERS

EXPLANATION FOR FORM 990, PAGE 6, PART VI, LINE 7a

THE BOARD OF DIRECTORS CONSISTS OF FIVE MEMBERS, WHO SHALL BE ELECTED

ANNUALLY BY THE MEMBERS OF THE CORPORATION AT ITS REGULAR

ANNUAL MEETING.

EXPLANATION FOR FORM 990, PAGE 6, PART VI, LINE 7b

THE BOARD OF DIRECTORS SHALL HAVE ALL THE POWERS CONFERRED UPON THEM

BY LAW AND SHALL HAVE THE AFFAIRS OF THE CORPORATION AND SHALL HAVE

AND EXERCISE SUCH OTHER POWERS AS MAY BE CONFERRED UPON THEM FROM

TIME TO TIME BY THE BYLAWS.

FORM 990, PAGE 6, PART VI, LINE 11-DESCRIPTION OF PROCESS FOR REVIEW

A COPY OF FORM 990 IS SENT TO ALL DIRECTORS FOR REVIEW AND COMMENTS

EXPLANATION FOR FORM 990, PAGE 6, PART VI, LINE 9

*THEODORE SHELDON BURNS

215 GRANDVIEW AVE.

GLEN ELLYN, IL 60137

*BRUCE W. MACARTHUR

680 N. LAKE SHORE DR., FLOOR 19

CHICAGO, IL 60611

Name of the organization

Employer identification number

HENRY STRONG EDUCATIONAL FOUNDATION

36-6075238

EXPLANATION FOR FORM 990, PAGE 6, PART VI, LINE 12c

EACH MEMBER, DIRECTOR AND OFFICER, IS REQUIRED TO SUBMIT AN
ANNUAL DISCLOSURE STATEMENT

DESCRIPTION FOR MAKING DOCUMENTS PUBLIC

FORM 990, PAGE 6, PART VI, LINE 19

AVAILABLE UPON REQUEST

EXPLANATION FOR FORM 990, PART XI, LINE 9

PRIOR PERIOD ADJUSTMENTS

Name of the organization

HENRY STRONG EDUCATIONAL FOUNDATION

Employer identification number

36-6075238

FORM 990, PART I - ORGANIZATION'S PRIMARY EXEMPT PURPOSE

=====

DEVOTED TO GIVING SCHOLARSHIPS AND MAKING LOANS TO QUALIFIED STUDENTS
ATTENDING ABOUT THIRTY ACCREDITED COLLEGES AND UNIVERSITIES LOCATED
MOSTLY IN THE MIDWEST.

**SCHEDULE D
(Form 1041)**

Department of the Treasury
Internal Revenue Service

Capital Gains and Losses

▶ Attach to Form 1041, Form 5227, or Form 990-T.

▶ Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9 and 10.

▶ Information about Schedule D and its separate instructions is at www.irs.gov/form1041

OMB No. 1545-0092

2013

Name of estate or trust

HENRY STRONG EDUCATIONAL FOUNDATION

Employer identification number

36-6075238

Note: Form 5227 filers need to complete **only** Parts I and II.

Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less

See instructions for how to figure the amounts to enter on the lines below.

This form may be easier to complete if you round off cents to whole dollars.

	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b				
1b Totals for all transactions reported on Form(s) 8949 with Box A checked				
2 Totals for all transactions reported on Form(s) 8949 with Box B checked				
3 Totals for all transactions reported on Form(s) 8949 with Box C checked	125,225.	114,915.		10,310.
4 Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824			4	
5 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts			5	
6 Short-term capital loss carryover. Enter the amount, if any, from line 9 of the 2012 Capital Loss Carryover Worksheet			6	()
7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). Enter here and on line 17, column (3) on the back ▶			7	10,310.

Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year

See instructions for how to figure the amounts to enter on the lines below.

This form may be easier to complete if you round off cents to whole dollars.

	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b				
8b Totals for all transactions reported on Form(s) 8949 with Box D checked				
9 Totals for all transactions reported on Form(s) 8949 with Box E checked				
10 Totals for all transactions reported on Form(s) 8949 with Box F checked	1,243,559.	997,499.		246,060.
11 Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824			11	
12 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts.			12	
13 Capital gain distributions. STMT 1.			13	92,231.
14 Gain from Form 4797, Part I.			14	
15 Long-term capital loss carryover. Enter the amount, if any, from line 14 of the 2012 Capital Loss Carryover Worksheet			15	()
16 Net long-term capital gain or (loss). Combine lines 8a through 15 in column (h). Enter here and on line 18a, column (3) on the back ▶			16	338,291.

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D (Form 1041) 2013

Part III Summary of Parts I and II**Caution:** Read the instructions before completing this part.

		(1) Beneficiaries' (see instr.)	(2) Estate's or trust's	(3) Total
17	Net short-term gain or (loss)	17		10,310.
18	Net long-term gain or (loss):			
a	Total for year	18a		338,291.
b	Unrecaptured section 1250 gain (see line 18 of the wrksht.)	18b		6.
c	28% rate gain	18c		
19	Total net gain or (loss). Combine lines 17 and 18a. ▶	19		348,601.

Note: If line 19, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Form 990-T, Part I, line 4a). If lines 18a and 19, column (2), are net gains, go to Part V, and do not complete Part IV. If line 19, column (3), is a net loss, complete Part IV and the **Capital Loss Carryover Worksheet**, as necessary.

Part IV Capital Loss Limitation

20 Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I, line 4c, if a trust), the **smaller** of:
a The loss on line 19, column (3) or **b** \$3,000 **20** ()

Note: If the loss on line 19, column (3), is more than \$3,000, or if Form 1041, page 1, line 22 (or Form 990-T, line 34), is a loss, complete the **Capital Loss Carryover Worksheet** in the instructions to figure your capital loss carryover.

Part V Tax Computation Using Maximum Capital Gains Rates

Form 1041 filers. Complete this part **only** if both lines 18a and 19 in column (2) are gains, or an amount is entered in Part I or Part II and there is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more than zero.

Caution: Skip this part and complete the **Schedule D Tax Worksheet** in the instructions if:

- Either line 18b, col. (2) or line 18c, col. (2) is more than zero, or
- Both Form 1041, line 2b(1), and Form 4952, line 4g are more than zero.

Form 990-T trusts. Complete this part **only** if both lines 18a and 19 are gains, or qualified dividends are included in income in Part I of Form 990-T, and Form 990-T, line 34, is more than zero. Skip this part and complete the **Schedule D Tax Worksheet** in the instructions if either line 18b, col. (2) or line 18c, col. (2) is more than zero.

21	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34). . .	21		
22	Enter the smaller of line 18a or 19 in column (2) but not less than zero	22		
23	Enter the estate's or trust's qualified dividends from Form 1041, line 2b(2) (or enter the qualified dividends included in income in Part I of Form 990-T) . .	23		
24	Add lines 22 and 23	24		
25	If the estate or trust is filing Form 4952, enter the amount from line 4g; otherwise, enter -0- . . . ▶	25		
26	Subtract line 25 from line 24. If zero or less, enter -0-	26		
27	Subtract line 26 from line 21. If zero or less, enter -0-	27		
28	Enter the smaller of the amount on line 21 or \$2,450	28		
29	Enter the smaller of the amount on line 27 or line 28	29		
30	Subtract line 29 from line 28. If zero or less, enter -0-. This amount is taxed at 0% ▶	30		
31	Enter the smaller of line 21 or line 26	31		
32	Subtract line 30 from line 26	32		
33	Enter the smaller of line 21 or \$11,950	33		
34	Add lines 27 and 30	34		
35	Subtract line 34 from line 33. If zero or less, enter -0-	35		
36	Enter the smaller of line 32 or line 35	36		
37	Multiply line 36 by 15%. ▶	37		
38	Enter the amount from line 31	38		
39	Add lines 30 and 36	39		
40	Subtract line 39 from line 38. If zero or less, enter -0-	40		
41	Multiply line 40 by 20% ▶	41		
42	Figure the tax on the amount on line 27. Use the 2013 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041)	42		
43	Add lines 37, 41, and 42	43		
44	Figure the tax on the amount on line 21. Use the 2013 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041)	44		
45	Tax on all taxable income. Enter the smaller of line 43 or line 44 here and on Form 1041, Schedule G, line 1a (or Form 990-T, line 36) ▶	45		

Schedule D (Form 1041) 2013

Sales and Other Dispositions of Capital Assets► Information about Form 8949 and its separate instructions is at www.irs.gov/form8949.

► File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

Name(s) shown on return

HENRY STRONG EDUCATIONAL FOUNDATION

Social security number or taxpayer identification number

36-6075238

Most brokers issue their own substitute statement instead of using Form 1099-B. They also may provide basis information (usually your cost) to you on the statement even if it is not reported to the IRS. Before you check Box A, B, or C below, determine whether you received any statement(s) and, if so, the transactions for which basis was reported to the IRS. Brokers are required to report basis to the IRS for most stock you bought in 2011 or later.

Part I Short-Term. Transactions involving capital assets you held one year or less are short-term. For long-term transactions, see page 2.

Note. You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the total directly on Schedule D, line 1a; you are not required to report these transactions on Form 8949 (see instructions).

You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

- ☐ (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)
- ☐ (B) Short-term transactions reported on Form(s) 1099-B showing basis was **not** reported to the IRS
- ☒ (C) Short-term transactions not reported to you on Form 1099-B

1	(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo, day, yr.)	(c) Date sold or disposed (Mo, day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis. See the Note below and see Column (e) in the separate instructions	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
						(f) Code(s) from instructions	(g) Amount of adjustment	
41.	AMERICAN TOWER CORP	06/25/2013	07/25/2013	3,005.00	2,968.00			37.00
31.	AMERICAN TOWER CORP	09/23/2013	12/05/2013	2,410.00	2,290.00			120.00
11.	AMERICAN TOWER CORP	12/24/2013	02/20/2014	918.00	854.00			64.00
32.	C R BARD INC	03/15/2013	07/25/2013	3,600.00	3,255.00			345.00
17.	C R BARD INC	03/15/2013	12/05/2013	2,322.00	1,729.00			593.00
7.	C R BARD INC	01/16/2014	02/20/2014	980.00	953.00			27.00
13.	BAXTER INTL INC	12/24/2013	02/20/2014	901.00	894.00			7.00
248.	CISCO SYS INC	03/14/2013	07/25/2013	6,306.00	5,365.00			941.00
156.	CISCO SYS INC	09/18/2013	12/05/2013	3,259.00	3,828.00			-569.00
65.	CITIGROUP INC COM NEW	10/23/2013	12/05/2013	3,318.00	3,262.00			56.00
22.	CITIGROUP INC COM NEW	12/24/2013	02/20/2014	1,055.00	1,142.00			-87.00
174.	E I DU PONT DE NEMOUR	12/12/2012	06/19/2013	9,356.00	7,759.00			1,597.00
12.	E I DU PONT DE NEMOURS	12/12/2012	06/20/2013	633.00	535.00			98.00
72.	EMERSON ELECTRIC CO	12/14/2012	07/25/2013	4,282.00	3,742.00			540.00
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B above is checked), or line 3 (if Box C above is checked) ►								

Note. If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

For Paperwork Reduction Act Notice, see your tax return instructions.

Sales and Other Dispositions of Capital Assets► Information about Form 8949 and its separate instructions is at www.irs.gov/form8949.

► File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

Name(s) shown on return

HENRY STRONG EDUCATIONAL FOUNDATION

Social security number or taxpayer identification number

36-6075238

Most brokers issue their own substitute statement instead of using Form 1099-B. They also may provide basis information (usually your cost) to you on the statement even if it is not reported to the IRS. Before you check Box A, B, or C below, determine whether you received any statement(s) and, if so, the transactions for which basis was reported to the IRS. Brokers are required to report basis to the IRS for most stock you bought in 2011 or later.

Part I **Short-Term.** Transactions involving capital assets you held one year or less are short-term. For long-term transactions, see page 2.

Note. You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the total directly on Schedule D, line 1a; you are not required to report these transactions on Form 8949 (see instructions).

You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

- ☐ (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)
- ☐ (B) Short-term transactions reported on Form(s) 1099-B showing basis was **not** reported to the IRS
- ☒ (C) Short-term transactions not reported to you on Form 1099-B

1	(a) Description of property (Example: 100 sh XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis. See the Note below and see Column (e) in the separate instructions	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
						(f) Code(s) from instructions	(g) Amount of adjustment	
38.	EMERSON ELECTRIC CO	12/14/2012	12/05/2013	2,524.00	1,975.00			549.00
112.	EXELON CORP	04/24/2013	07/25/2013	3,504.00	4,158.00			-654.00
61.	EXELON CORP	04/24/2013	12/05/2013	1,695.00	2,265.00			-570.00
65.	EXXON MOBIL CORP	04/01/2014	04/01/2014	6,336.00	6,358.00			-22.00
21.	MFC FLEXSHARES TR IBOX TARGET DURATION TIPS IN	01/24/2013	09/19/2013	528.00	551.00			-23.00
44.	GILEAD SCIENCES INC	05/06/2013	07/25/2013	2,613.00	2,411.00			202.00
24.	GILEAD SCIENCES INC	05/06/2013	12/05/2013	1,756.00	1,315.00			441.00
128.	MERCK & CO INC	03/14/2013	07/25/2013	6,067.00	5,677.00			390.00
70.	MERCK & CO INC	03/14/2013	12/05/2013	3,415.00	3,105.00			310.00
95.	METLIFE INC	02/22/2013	07/25/2013	4,620.00	3,388.00			1,232.00
65.	METLIFE INC	09/23/2013	12/05/2013	3,317.00	3,083.00			234.00
22.	METLIFE INC	12/24/2013	02/20/2014	1,115.00	1,148.00			-33.00
72.	MONDELEZ INTL INC COM	09/18/2013	12/05/2013	2,475.00	2,333.00			142.00
25.	MONDELEZ INTL INC COM	12/24/2013	02/20/2014	861.00	856.00			5.00
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B above is checked), or line 3 (if Box C above is checked) ►								

Note. If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

For Paperwork Reduction Act Notice, see your tax return instructions.

Sales and Other Dispositions of Capital Assets

OMB No 1545-0074

Department of the Treasury
Internal Revenue Service► Information about Form 8949 and its separate instructions is at www.irs.gov/form8949.**2013**Attachment
Sequence No **12A**

► File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

Name(s) shown on return

HENRY STRONG EDUCATIONAL FOUNDATION

Social security number or taxpayer identification number

36-6075238

Most brokers issue their own substitute statement instead of using Form 1099-B. They also may provide basis information (usually your cost) to you on the statement even if it is not reported to the IRS. Before you check Box A, B, or C below, determine whether you received any statement(s) and, if so, the transactions for which basis was reported to the IRS. Brokers are required to report basis to the IRS for most stock you bought in 2011 or later.

Part I **Short-Term.** Transactions involving capital assets you held one year or less are short-term. For long-term transactions, see page 2.

Note. You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the total directly on Schedule D, line 1a; you are not required to report these transactions on Form 8949 (see instructions).

You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

- ☐ (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)
- ☐ (B) Short-term transactions reported on Form(s) 1099-B showing basis was **not** reported to the IRS
- ☒ (C) Short-term transactions not reported to you on Form 1099-B

1	(a) Description of property (Example: 100 sh XYZ Co)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis. See the Note below and see Column (e) in the separate instructions	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
						(f) Code(s) from instructions	(g) Amount of adjustment	
41.	MONSANTO CO COM	06/19/2013	07/25/2013	4,161.00	4,343.00			-182.00
22.	MONSANTO CO COM	06/19/2013	12/05/2013	2,441.00	2,331.00			110.00
8.	MONSANTO CO COM	12/24/2013	02/20/2014	885.00	899.00			-14.00
236.	MFB NORTHN INTL BQTY	12/24/2013	02/20/2014	2,912.00	2,858.00			54.00
101.98	MFB NORTHERN FDS FI FD	07/25/2013	07/25/2013	1,038.00	1,082.00			-44.00
29.	PETSMART INC	11/18/2013	12/05/2013	2,115.00	2,165.00			-50.00
14.	PETSMART INC	11/18/2013	02/20/2014	906.00	1,045.00			-139.00
295.	PFIZER INC	12/05/2012	07/25/2013	8,493.00	7,499.00			994.00
76.	ST JUDE MEDICAL INC	09/24/2012	07/25/2013	3,944.00	3,270.00			674.00
80.	STARBUCKS CORP	08/13/2012	07/25/2013	5,352.00	3,677.00			1,675.00
31.	TWENTY-FIRST CENTY FOX A	01/15/2014	02/20/2014	1,012.00	1,016.00			-4.00
69.	EATON CORP PLC COM USD	12/03/2012	07/25/2013	4,646.00	3,546.00			1,100.00
105.	#REORG/NOBLE STOCK ME CO 2R1JA21 EFF 11-20-20	11/02/2012	07/25/2013	4,149.00	3,985.00			164.00
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B above is checked), or line 3 (if Box C above is checked) ►				125,225.	114,915.			10,310.

Note. If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

For Paperwork Reduction Act Notice, see your tax return instructions.

Form **8949** (2013)

Name(s) shown on return. (Name and SSN or taxpayer identification no. not required if shown on other side)

Social security number or taxpayer identification number

HENRY STRONG EDUCATIONAL FOUNDATION

36-6075238

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Part II Long-Term. Transactions involving capital assets you held more than one year are long term. For short-term transactions, see page 1.

Note. You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the total directly on Schedule D, line 8a; you are not required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

☐ (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)

☐ (E) Long-term transactions reported on Form(s) 1099-B showing basis was not reported to the IRS

☒ (F) Long-term transactions not reported to you on Form 1099-B

1	(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis. See the Note below and see Column (e) in the separate instructions	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
						(f) Code(s) from instructions	(g) Amount of adjustment	
90.	AMERICAN EXPRESS CO	07/06/2011	07/25/2013	6,795.00	4,730.00			2,065.00
47.	AMERICAN EXPRESS CO	09/01/2011	12/05/2013	3,972.00	2,431.00			1,541.00
16.	AMERICAN EXPRESS CO	09/01/2011	02/20/2014	1,414.00	796.00			618.00
52.	AMERICAN WTR WKS CO IN	01/30/2012	07/25/2013	2,223.00	1,738.00			485.00
28.	AMERICAN WTR WKS CO IN	01/30/2012	12/05/2013	1,149.00	936.00			213.00
47.	AMGEN INC	03/01/2012	07/25/2013	5,053.00	3,200.00			1,853.00
25.	AMGEN INC	03/01/2012	12/05/2013	2,833.00	1,692.00			1,141.00
8.	AMGEN INC	03/01/2012	02/20/2014	986.00	541.00			445.00
25.	APPLE COMPUTER INC	09/01/2011	07/25/2013	10,930.00	4,934.00			5,996.00
13.	APPLE COMPUTER INC	05/27/2009	12/05/2013	7,383.00	1,736.00			5,647.00
4.	APPLE COMPUTER INC	12/05/2012	02/20/2014	2,132.00	2,240.00			-108.00
38.	BHP LTD SPONSORED ADR	09/01/2011	07/25/2013	2,397.00	2,946.00			-549.00
108.	BHP LTD SPONSORED ADR	02/22/2010	10/23/2013	7,704.00	8,132.00			-428.00
67.	BHP LTD SPONSORED ADR	02/22/2010	10/24/2013	4,821.00	3,796.00			1,025.00
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked) ▶								

Note. If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

Name(s) shown on return. (Name and SSN or taxpayer identification no. not required if shown on other side.)

Social security number or taxpayer identification number

HENRY STRONG EDUCATIONAL FOUNDATION

36-6075238

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Part II Long-Term. Transactions involving capital assets you held more than one year are long term. For short-term transactions, see page 1.

Note. You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the total directly on Schedule D, line 8a; you are not required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

- ☐ (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)
- ☐ (E) Long-term transactions reported on Form(s) 1099-B showing basis was **not** reported to the IRS
- ☒ (F) Long-term transactions **not** reported to you on Form 1099-B

1	(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis. See the Note below and see Column (e) in the separate instructions	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
						(f) Code(s) from instructions	(g) Amount of adjustment	
41.	BHP LTD SPONSORED ADR	05/14/2009	10/25/2013	2,944.00	2,042.00			902.00
107.	CVS CORP	04/27/2012	07/25/2013	6,567.00	4,817.00			1,750.00
57.	CVS CORP	04/27/2012	12/05/2013	3,753.00	2,566.00			1,187.00
20.	CVS CORP	04/27/2012	02/20/2014	1,405.00	900.00			505.00
57.	CHEVRONTEXACO CORP	09/01/2011	07/25/2013	7,198.00	4,411.00			2,787.00
31.	CHEVRONTEXACO CORP	11/13/2008	12/05/2013	3,753.00	2,160.00			1,593.00
11.	CHEVRONTEXACO CORP	11/13/2008	02/20/2014	1,253.00	767.00			486.00
67.	CHEVRONTEXACO CORP	11/13/2008	04/01/2014	7,981.00	4,669.00			3,312.00
54.	CISCO SYS INC	01/16/2013	02/20/2014	1,198.00	1,139.00			59.00
35.	CITRIX SYS INC	09/01/2011	07/25/2013	2,437.00	1,865.00			572.00
18.	CITRIX SYS INC	07/22/2010	12/05/2013	1,058.00	838.00			220.00
145.	COCA COLA CO	08/30/2011	07/25/2013	5,893.00	5,067.00			826.00
77.	COCA COLA CO	08/30/2011	12/05/2013	3,065.00	2,682.00			383.00
26.	COCA COLA CO	08/29/2011	02/20/2014	969.00	903.00			66.00
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked) ►								

Note. If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

Name(s) shown on return. (Name and SSN or taxpayer identification no. not required if shown on other side)

Social security number or taxpayer identification number

HENRY STRONG EDUCATIONAL FOUNDATION

36-6075238

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Part II Long-Term. Transactions involving capital assets you held more than one year are long term. For short-term transactions, see page 1.

Note. You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the total directly on Schedule D, line 8a; you are not required to report these transactions on Form 8949 (see instructions).

You **must** check Box D, E, or F below. Check **only one** box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

☐ (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)

☐ (E) Long-term transactions reported on Form(s) 1099-B showing basis was **not** reported to the IRS

☒ (F) Long-term transactions **not** reported to you on Form 1099-B

1	(a) Description of property (Example 100 sh XYZ Co)	(b) Date acquired (Mo , day, yr)	(c) Date sold or disposed (Mo., day, yr)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis. See the Note below and see Column (e) in the separate instructions	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
						(f) Code(s) from instructions	(g) Amount of adjustment	
54.	COSTCO WHSL CORP NEW	09/01/2011	07/25/2013	6,313.00	3,940.00			2,373.00
103.	COSTCO WHSL CORP NEW	02/02/2011	09/18/2013	12,115.00	5,703.00			6,412.00
18.	COSTCO WHSL CORP NEW	04/21/2009	12/05/2013	2,177.00	824.00			1,353.00
125.	DANAHER CORP	09/01/2011	07/25/2013	8,377.00	4,437.00			3,940.00
66.	DANAHER CORP	10/17/2008	12/05/2013	4,859.00	1,894.00			2,965.00
23.	DANAHER CORP	10/17/2008	02/20/2014	1,750.00	660.00			1,090.00
73.	WALT DISNEY CO	09/01/2011	07/25/2013	4,706.00	2,590.00			2,116.00
40.	WALT DISNEY CO	09/01/2011	12/05/2013	2,808.00	1,307.00			1,501.00
14.	WALT DISNEY CO	08/28/2008	02/20/2014	1,108.00	457.00			651.00
347.	E I DU PONT DE NEMOUR	09/01/2011	06/19/2013	18,659.00	13,370.00			5,289.00
241.	E M C CORP MASS COM	09/01/2011	07/25/2013	6,363.00	5,042.00			1,321.00
128.	E M C CORP MASS COM	07/15/2010	12/05/2013	3,057.00	2,596.00			461.00
44.	E M C CORP MASS COM	12/05/2012	02/20/2014	1,119.00	1,101.00			18.00
13.	EMERSON ELECTRIC CO	12/14/2012	02/20/2014	826.00	675.00			151.00
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked) ►								

Note. If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

Name(s) shown on return (Name and SSN or taxpayer identification no. not required if shown on other side)

Social security number or taxpayer identification number

HENRY STRONG EDUCATIONAL FOUNDATION

36-6075238

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Part II Long-Term. Transactions involving capital assets you held more than one year are long term. For short-term transactions, see page 1.

Note. You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the total directly on Schedule D, line 8a; you are not required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

☐ (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)

☐ (E) Long-term transactions reported on Form(s) 1099-B showing basis was **not** reported to the IRS

☒ (F) Long-term transactions not reported to you on Form 1099-B

1	(a) Description of property (Example: 100 sh XYZ Co.)	(b) Date acquired (Mo, day, yr.)	(c) Date sold or disposed (Mo, day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis. See the Note below and see Column (e) in the separate instructions	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
						(f) Code(s) from instructions	(g) Amount of adjustment	
	88. EXPRESS SCRIPTS HLDG C	06/20/2012	07/25/2013	5,873.00	4,740.00			1,133.00
	57. EXPRESS SCRIPTS HLDG C	06/20/2012	12/05/2013	3,805.00	3,070.00			735.00
	19. EXPRESS SCRIPTS HLDG C	06/21/2012	02/20/2014	1,465.00	1,022.00			443.00
	90. EXXON MOBIL CORP	08/28/2008	07/25/2013	8,535.00	7,259.00			1,276.00
	48. EXXON MOBIL CORP	08/28/2008	12/05/2013	4,517.00	3,872.00			645.00
	16. EXXON MOBIL CORP	09/01/2011	02/20/2014	1,525.00	1,184.00			341.00
	56. EXXON MOBIL CORP	09/01/2011	04/01/2014	5,458.00	4,041.00			1,417.00
	7. MFC FLEXSHARES TR MORNI GLOBAL UPSTREAM NAT RES	11/04/2011	09/19/2013	243.00	245.00			-2.00
	1234. MFC FLEXSHARES TR MO GLOBAL UPSTREAM NAT RES	04/20/2012	12/05/2013	41,658.00	39,556.00			2,102.00
	427. MFC FLEXSHARES TR MOR GLOBAL UPSTREAM NAT RES	01/24/2013	02/20/2014	14,849.00	15,660.00			-811.00
	1701. MFC FLEXSHARES TR IB TARGET DURATION TIPS IN	04/20/2012	07/25/2013	42,626.00	42,604.00			22.00
	2185. MFC FLEXSHARES TR IB TARGET DURATION TIPS IN	09/29/2011	09/19/2013	54,905.00	54,360.00			545.00
	36. FRANKLIN RESOURCES INC	07/07/2011	07/25/2013	5,259.00	4,874.00			385.00
	157. FRANKLIN RESOURCES IN	09/01/2011	09/23/2013	8,010.00	6,229.00			1,781.00
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked) ►								

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Social security number or taxpayer identification number

HENRY STRONG EDUCATIONAL FOUNDATION

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☐ (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)

☐ (E) Long-term transactions reported on Form(s) 1099-B showing basis was **not** reported to the IRS

☒ (F) Long-term transactions not reported to you on Form 1099-B

1	(a) Description of property (Example 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis. See the Note below and see <i>Column (e)</i> in the separate instructions	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
						(f) Code(s) from instructions	(g) Amount of adjustment	
42.	FRANKLIN RESOURCES INC	01/12/2010	12/05/2013	2,271.00	1,547.00			724.00
15.	FRANKLIN RESOURCES INC	01/12/2010	02/20/2014	790.00	552.00			238.00
258.	GENERAL ELECTRIC CO	05/05/2010	07/25/2013	6,337.00	4,721.00			1,616.00
136.	GENERAL ELECTRIC CO	05/05/2010	12/05/2013	3,594.00	2,488.00			1,106.00
47.	GENERAL ELECTRIC CO	12/12/2012	02/20/2014	1,179.00	1,027.00			152.00
7.	GOOGLE INC CL A	01/13/2012	07/25/2013	6,251.00	4,373.00			1,878.00
4.	GOOGLE INC CL A	01/13/2012	12/05/2013	4,229.00	2,499.00			1,730.00
1.	GOOGLE INC CL A	01/13/2012	02/20/2014	1,204.00	625.00			579.00
167.	HOME DEPOT INC	02/06/2012	06/25/2013	12,411.00	7,553.00			4,858.00
96.	HOME DEPOT INC	02/06/2012	07/25/2013	7,637.00	4,342.00			3,295.00
51.	HOME DEPOT INC	02/06/2012	12/05/2013	4,004.00	2,275.00			1,729.00
71.	HOME DEPOT INC	01/23/2012	01/29/2014	5,494.00	3,159.00			2,335.00
15.	HOME DEPOT INC	01/23/2012	02/20/2014	1,162.00	667.00			495.00
133.	INTEL CORP COM	05/07/2012	07/25/2013	3,037.00	3,707.00			-670.00
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked) ►								

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HENRY STRONG EDUCATIONAL FOUNDATION

36-6075238

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- ☐ (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)
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1	(a) Description of property (Example: 100 sh XYZ Co.)	(b) Date acquired (Mo, day, yr.)	(c) Date sold or disposed (Mo, day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis. See the Note below and see Column (e) in the separate instructions	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
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71.	INTEL CORP COM	05/07/2012	12/05/2013	1,721.00	1,979.00			-258.00
24.	#REORG/INTERCONTINEN N INTERCONTI 2R1HAZ1 EFF	06/07/2012	07/25/2013	4,248.00	3,078.00			1,170.00
13.	INTERCONTINENTAL EXCHA COM	06/07/2012	12/05/2013	2,764.00	1,667.00			1,097.00
5.	INTERCONTINENTAL EXCHAN COM	06/07/2012	02/20/2014	1,051.00	641.00			410.00
21.	INTL BUSINESS MACHINES	05/08/2008	07/25/2013	4,130.00	2,605.00			1,525.00
11.	INTL BUSINESS MACHINES	05/08/2008	12/05/2013	1,937.00	1,365.00			572.00
159.	J P MORGAN CHASE & CO	03/13/2012	07/25/2013	8,905.00	6,504.00			2,401.00
84.	J P MORGAN CHASE & CO	03/12/2012	12/05/2013	4,687.00	3,406.00			1,281.00
29.	J P MORGAN CHASE & CO	03/12/2012	02/20/2014	1,669.00	1,134.00			535.00
59.	MCDONALDS CORP	09/22/2011	07/25/2013	5,710.00	5,064.00			646.00
32.	MCDONALDS CORP	08/01/2012	12/05/2013	3,053.00	2,867.00			186.00
11.	MCDONALDS CORP	08/01/2012	02/20/2014	1,053.00	986.00			67.00
24.	MERCK & CO INC	01/14/2013	02/20/2014	1,339.00	1,039.00			300.00
55.	NATIONAL-OILWELL INC	09/01/2011	07/25/2013	3,935.00	2,609.00			1,326.00
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked) ►								

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1	(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis. See the Note below and see Column (e) in the separate instructions	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f) See the separate instructions.		(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
						(f) Code(s) from instructions	(g) Amount of adjustment	
	29. NATIONAL-OILWELL INC	04/09/2007	12/05/2013	2,366.00	1,155.00			1,211.00
	54. NIKE INC CLASS B	09/01/2011	07/25/2013	3,369.00	2,268.00			1,101.00
	28. NIKE INC CLASS B	11/18/2010	12/05/2013	2,210.00	1,120.00			1,090.00
	57. NORFOLK SOUTHN CORP CO	08/10/2011	07/25/2013	4,229.00	3,848.00			381.00
	74. NORFOLK SOUTHN CORP CO	08/10/2011	09/18/2013	5,689.00	4,995.00			694.00
	24. NORFOLK SOUTHN CORP CO	08/10/2011	12/05/2013	2,116.00	1,620.00			496.00
	8. NORFOLK SOUTHN CORP COM	08/10/2011	02/20/2014	728.00	540.00			188.00
	32. MFB NORTHERN FUNDS MUL HIGH YIELD OPPORTUNITY	12/21/2010	09/19/2013	346.00	340.00			6.00
	282. MFB NORTHERN FUNDS MU HIGH YIELD OPPORTUNITY	12/19/2012	12/24/2013	2,967.00	3,046.00			-79.00
	15. MFB NORTHERN FUNDS MUL HIGH YIELD OPPORTUNITY	12/19/2012	02/20/2014	161.00	162.00			-1.00
	2036. MFB NORTHN FDS MULTI GLOBAL REALESTATE FD	04/20/2012	09/19/2013	38,745.00	35,357.00			3,388.00
	1626. MFB NORTHN FDS MULTI GLOBAL REALESTATE FD	12/19/2012	12/24/2013	26,292.00	28,716.00			-2,424.00
	14. MFB NORTHN FDS MULTI-M EMERGING MKTS BQTY FD	11/18/2010	09/19/2013	270.00	340.00			-70.00
	5181. MFB NORTHN FDS MULTI EMERGING MKTS BQTY FD	09/01/2011	02/20/2014	94,294.00	119,173.00			-24,879.00
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked) ►								

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1	(a) Description of property (Example: 100 sh XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis. See the Note below and see Column (e) in the separate instructions	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
						(f) Code(s) from instructions	(g) Amount of adjustment	
	904. MFB NORTHN MULTI-MANA EQTY FD FD	09/01/2011	12/05/2013	9,637.00	8,393.00			1,244.00
	1839. MFB NORTHN MULTI-MAN EQTY FD FD	09/01/2011	02/20/2014	19,935.00	16,845.00			3,090.00
	4995. MFB NORTHN MULTIMGR	12/19/2011	07/25/2013	59,890.00	46,221.00			13,669.00
	4. MFB NORTHN MULTIMGR SMA	12/19/2011	09/19/2013	50.00	34.00			16.00
	882. MFB NORTHN MULTIMGR S	12/19/2011	12/05/2013	11,510.00	6,035.00			5,475.00
	943. MFB NORTHN MULTIMGR S	12/19/2012	12/24/2013	10,797.00	6,746.00			4,051.00
	7. MFB NORTHN MULTIMGR MID	09/01/2011	09/19/2013	105.00	77.00			28.00
	1431. MFB NORTHN MULTIMGR	09/01/2011	12/05/2013	22,166.00	15,556.00			6,610.00
	2509. MFB NORTHN MULTIMGR	12/19/2012	12/24/2013	34,248.00	27,929.00			6,319.00
	3325. MFB NORTHN FDS SMALL	12/16/2010	07/25/2013	67,897.00	48,113.00			19,784.00
	2. MFB NORTHN FDS SMALL CA	12/16/2010	09/19/2013	42.00	29.00			13.00
	459. MFB NORTHN FDS SMALL	12/16/2010	12/05/2013	10,066.00	6,642.00			3,424.00
	193. MFB NORTHN FDS SMALL	12/19/2012	12/24/2013	4,038.00	2,818.00			1,220.00
	4691.03 MFB NORTHERN FDS F FD	12/19/2011	07/25/2013	47,755.00	49,456.00			-1,701.00
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked) ►								

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52.	NUCOR CORP	02/06/2012	07/25/2013	2,392.00	2,347.00			45.00
27.	NUCOR CORP	02/06/2012	12/05/2013	1,400.00	1,219.00			181.00
77.	OMNICOM GRP INC COM	12/20/2010	07/25/2013	4,955.00	3,574.00			1,381.00
118.	OMNICOM GRP INC COM	12/17/2010	11/14/2013	8,175.00	5,442.00			2,733.00
148.	OMNICOM GRP INC COM	11/22/2010	11/15/2013	10,388.00	6,764.00			3,624.00
132.	OMNICOM GRP INC COM	09/01/2011	11/18/2013	9,239.00	5,939.00			3,300.00
29.	OMNICOM GRP INC COM	09/01/2011	11/19/2013	2,028.00	1,161.00			867.00
130.	ORACLE CORPORATION	10/04/2010	07/25/2013	4,182.00	3,540.00			642.00
70.	ORACLE CORPORATION	10/04/2010	12/05/2013	2,438.00	1,906.00			532.00
25.	ORACLE CORPORATION	10/04/2010	02/20/2014	956.00	681.00			275.00
157.	PFIZER INC	11/16/2012	12/05/2013	4,903.00	3,732.00			1,171.00
54.	PFIZER INC	12/05/2012	02/20/2014	1,702.00	1,373.00			329.00
20.	PRECISION CASTPARTS CO	10/25/2011	07/25/2013	4,519.00	3,439.00			1,080.00
10.	PRECISION CASTPARTS CO	10/25/2011	12/05/2013	2,524.00	1,712.00			812.00
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	4. PRECISION CASTPARTS COR	10/21/2011	02/20/2014	1,034.00	673.00			361.00
	38. PROCTER & GAMBLE CO	10/02/2009	07/25/2013	3,037.00	2,156.00			881.00
	20. PROCTER & GAMBLE CO	10/02/2009	12/05/2013	1,653.00	1,135.00			518.00
	112. QUALCOMM INC	01/17/2012	07/25/2013	7,192.00	6,399.00			793.00
	59. QUALCOMM INC	01/13/2012	12/05/2013	4,319.00	3,277.00			1,042.00
	20. QUALCOMM INC	07/15/2011	02/20/2014	1,518.00	1,097.00			421.00
	40. ST JUDE MEDICAL INC	09/19/2012	12/05/2013	2,322.00	1,720.00			602.00
	63. ST JUDE MEDICAL INC	09/19/2012	12/11/2013	3,687.00	2,710.00			977.00
	41. ST JUDE MEDICAL INC	09/21/2012	12/12/2013	2,377.00	1,763.00			614.00
	229. ST JUDE MEDICAL INC	09/21/2012	01/14/2014	15,171.00	9,799.00			5,372.00
	6. ST JUDE MEDICAL INC	09/18/2012	01/15/2014	396.00	256.00			140.00
	43. ST JUDE MEDICAL INC	09/18/2012	01/15/2014	2,841.00	1,833.00			1,008.00
	50. SCHLUMBERGER LTD ISIN 6	02/28/2011	07/25/2013	4,149.00	4,634.00			-485.00
	26. SCHLUMBERGER LTD ISIN 6	02/28/2011	12/05/2013	2,258.00	2,410.00			-152.00
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked) ►								

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- ☐ (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)
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- ☒ (F) Long-term transactions not reported to you on Form 1099-B

1	(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo, day, yr.)	(c) Date sold or disposed (Mo, day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis. See the Note below and see Column (e) in the separate instructions	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
						(f) Code(s) from instructions	(g) Amount of adjustment	
	9. SCHLUMBERGER LTD ISIN #	02/28/2011	02/20/2014	819.00	834.00			-15.00
	29. SIMON PPTY GROUP INC N	11/02/2010	07/25/2013	4,729.00	2,888.00			1,841.00
	43. SIMON PPTY GROUP INC N	11/18/2010	09/23/2013	6,508.00	3,962.00			2,546.00
	59. SIMON PPTY GROUP INC N	07/23/2010	10/23/2013	9,356.00	5,065.00			4,291.00
	47. SIMON PPTY GROUP INC N	07/22/2010	10/24/2013	7,471.00	4,023.00			3,448.00
	13. SIMON PPTY GROUP INC N	07/22/2010	10/25/2013	2,067.00	1,113.00			954.00
	42. STARBUCKS CORP	08/13/2012	12/05/2013	3,347.00	1,911.00			1,436.00
	15. STARBUCKS CORP	08/10/2012	02/20/2014	1,103.00	682.00			421.00
	139. US BANCORP DEL NEW	08/28/2008	07/25/2013	5,199.00	4,435.00			764.00
	74. US BANCORP DEL NEW	08/28/2008	12/05/2013	2,856.00	2,361.00			495.00
	26. US BANCORP DEL NEW	08/28/2008	02/20/2014	1,048.00	830.00			218.00
	35. UNITED TECHNOLOGIES CO	09/01/2011	07/25/2013	3,656.00	1,556.00			2,100.00
	18. UNITED TECHNOLOGIES CO	08/22/2002	12/05/2013	1,963.00	561.00			1,402.00
	78. UNITEDHEALTH GROUP INC	09/01/2011	07/25/2013	5,625.00	3,169.00			2,456.00
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked) ►								

Note. If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

Name(s) shown on return (Name and SSN or taxpayer identification no. not required if shown on other side)

Social security number or taxpayer identification number

HENRY STRONG EDUCATIONAL FOUNDATION

36-6075238

Most brokers issue their own substitute statement instead of using Form 1099-B. They also may provide basis information (usually your cost) to you on the statement even if it is not reported to the IRS. Before you check Box D, E, or F below, determine whether you received any statement(s) and, if so, the transactions for which basis was reported to the IRS. Brokers are required to report basis to the IRS for most stock you bought in 2011 or later.

Part II Long-Term. Transactions involving capital assets you held more than one year are long term. For short-term transactions, see page 1.

Note. You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the total directly on Schedule D, line 8a; you are not required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

- ☐ (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)
- ☐ (E) Long-term transactions reported on Form(s) 1099-B showing basis was **not** reported to the IRS
- ☒ (F) Long-term transactions not reported to you on Form 1099-B

1	(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis. See the Note below and see Column (e) in the separate instructions	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
						(f) Code(s) from instructions	(g) Amount of adjustment	
	163. UNITEDHEALTH GROUP IN	12/15/2009	09/18/2013	11,875.00	5,089.00			6,786.00
	26. UNITEDHEALTH GROUP INC	11/16/2012	12/05/2013	1,891.00	1,347.00			544.00
	142. UNITEDHEALTH GROUP IN	11/16/2012	12/11/2013	10,288.00	7,026.00			3,262.00
	104. UNITEDHEALTH GROUP IN	12/15/2009	12/12/2013	7,424.00	3,247.00			4,177.00
	39. V F CORP	04/28/2011	06/25/2013	7,327.00	4,190.00			3,137.00
	33. V F CORP	04/27/2011	07/25/2013	6,482.00	3,508.00			2,974.00
	18. V F CORP	06/27/2011	12/05/2013	4,194.00	1,903.00			2,291.00
	40. V F CORP	06/27/2011	01/14/2014	2,425.00	1,055.00			1,370.00
	51. V F CORP	06/27/2011	01/15/2014	3,087.00	1,345.00			1,742.00
	43. V F CORP	06/27/2011	01/16/2014	2,553.00	1,131.00			1,422.00
	106. V F CORP	06/24/2011	01/29/2014	6,146.00	2,774.00			3,372.00
	16. V F CORP	06/24/2011	02/20/2014	928.00	419.00			509.00
	59. VERIZON COMMUNICATIONS	09/28/2011	07/25/2013	2,963.00	2,190.00			773.00
	32. VERIZON COMMUNICATIONS	09/28/2011	12/05/2013	1,564.00	1,188.00			376.00
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked) ►								

Note. If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

FEDERAL CAPITAL GAIN DISTRIBUTIONS
=====LONG-TERM CAPITAL GAIN DISTRIBUTIONS

15% RATE CAPITAL GAIN DISTRIBUTIONS

TOTAL 15% RATE CAPITAL GAIN DISTRIBUTIONS	-----	92,225.00

TOTAL LONG-TERM CAPITAL GAIN DISTRIBUTIONS		92,225.00
		=====

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◆ Asset Detail - Base Currency

Description / Asset ID		Exchange rate/ local market price	Accrued income/expense	Market Value	Cost	Unrealized gain/loss		Total
Investment Mgr ID	Shares/PAR value					Market	Translation	
Equity Securities								
Common stock								
United States - USD								
AMERICAN EXPRESS CO	CUSIP 025816109							
448 000	87.43	103.04	39,168.64	20,511.06	18,657.58	0.00	18,657.58	
AMERICAN WTR WKS CO INC NEW COM CUSIP 030420103								
263 000	45.53	0.00	11,974.39	8,775.01	3,199.38	0.00	3,199.38	
AMGEN INC COM CUSIP 031162100								
AMGN								
235 000	111.75	0.00	26,261.25	16,084.23	10,177.02	0.00	10,177.02	
APACHE CORP COM CUSIP 037411105								
APA								
238 000	86.80	59.50	20,658.40	19,884.16	774.24	0.00	774.24	774.24
APPLE INC COM STK CUSIP 037833100								
126 000	590.09	0.00	74,351.34	16,381.77	57,969.57	0.00	57,969.57	57,969.57
BAXTER INTL INC COM CUSIP 071813109								
360 000	72.79	0.00	26,204.40	24,145.79	2,058.61	0.00	2,058.61	2,058.61
C R BARD CUSIP 067383109								
203 000	137.33	42.63	27,877.99	21,851.89	6,026.10	0.00	6,026.10	6,026.10
CHEVRON CORP COM CUSIP 166764100								
CVX								
218 000	125.52	0.00	27,363.36	15,674.45	11,688.91	0.00	11,688.91	11,688.91
CISCO SYSTEMS INC CUSIP 17275R102								
CSCO								
1 475 000	23.11	0.00	34,087.25	31,512.62	2,574.63	0.00	2,574.63	2,574.63

Northern Trust

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◆ Asset Detail - Base Currency

Description / Asset ID		Exchange rate/ local market price	Accrued income/expense	Market Value	Cost	Unrealized gain/loss		Total
Investment Mgr ID	Shares/PAR value					Market	Translation	
Equity Securities								
Common stock								
United States - USD								
CITIGROUP INC COM NEW COM NEW CUSIP 172967424								
	611 000	47 91	0 00	29,273 01	30,636 69	-1,363 68	0 00	-1,363 68
CITRIX SYS INC COM CUSIP 177376100								
	176 000	59 31	0 00	10,438 56	8,189 09	2,249 47	0 00	2,249 47
COCA COLA CO COM CUSIP 191216100								
	724 000	40 79	0 00	29,531 96	25,113 78	4,418 18	0 00	4,418 18
COSTCO WHOLESALE CORP NEW COM CUSIP 22160K105								
	176 000	115 68	0 00	20,359 68	8,052 00	12,307 68	0 00	12,307 68
CVS HEALTH CORP COM CUSIP 126650100								
CVS	536 000	72 72	147 40	38,977 92	24,349 61	14,628 31	0 00	14,628 31
DANAHER CORP COM CUSIP 235851102								
	624 000	73 38	0 00	45,789 12	18,724 50	27,064 62	0 00	27,064 62
EATON CORP PLC COM USD0 50 CUSIP G29183103								
	347 000	72 64	0 00	25,206 08	17,956 10	7,249 98	0 00	7,249 98
EMC CORP COM CUSIP 268648102								
EMC	1,204 000	25 80	0 00	31,063 20	25,137 42	5,925 78	0 00	5,925 78
EMERSON ELECTRIC CO COM CUSIP 291011104								
	361 000	68 18	0 00	24,612 98	18,880 30	5,732 68	0 00	5,732 68

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◆ Asset Detail - Base Currency

Description / Asset ID		Exchange rate/ local market price	Accrued income/expense	Market Value	Cost	Unrealized gain/loss	
Investment Mgr ID	Shares/PAR value					Market	Translation
Equity Securities							
Common stock							
United States - USD							
EXELON CORP COM	CUSIP 30161N101						
578 000	35 03	0 00	20,247 34	21,266 62	-1,019 28	0 00	-1,019 28
EXPRESS SCRIPTS HLDG CO COM CUSIP 30219G108							
536 000	66 58	0 00	35,686 88	29,499 49	6,187 39	0 00	6,187 39
EXXON MOBIL CORP COM CUSIP 30231G102							
332 000	102 41	0 00	34,000 12	16,127 29	17,872 83	0 00	17,872 83
FRKLN RES INC COM CUSIP 354613101							
395 000	52 35	0 00	20,678 25	14,783 48	5,894 77	0 00	5,894 77
GENERAL ELECTRIC CO CUSIP 369604103							
GE	26 89	0 00	34,607 43	23,323 93	11,283 50	0 00	11,283 50
GILEAD SCIENCES INC CUSIP 375558103							
GILD	78 49	0 00	17,660 25	12,327 43	5,332 82	0 00	5,332 82
GOOGLE INC CL A CUSIP 38259P508							
GOOG	534 88	0 00	19,255 68	8,175 03	11,080 65	0 00	11,080 65
GOOGLE INC COM USD0 001 CLC CUSIP 38259P706							
36 000	526 66	0 00	18,959 76	8,148 91	10,810 85	0 00	10,810 85
HOME DEPOT INC COM CUSIP 437076102							
414 000	79 51	0 00	32,917 14	18,931 17	13,985 97	0 00	13,985 97

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◆ Asset Detail - Base Currency

Description / Asset ID	Exchange rate/ local market price	Accrued income/expense	Market Value	Cost	Market	Unrealized gain/loss Translation	Total
Investment Mgr ID							
Shares/PAR value							
Equity Securities							
Common stock							
United States - USD							
INTEL CORP COM CUSIP 458140100							
INTC	26 69	0 00	17,908 99	18,579 27	-670 28	0 00	-670 28
INTERCONTINENTAL EXCHANGE INC COM CUSIP 45866F104							
	204 44	0 00	24,328 36	15,386 52	8,941 84	0 00	8,941 84
INTERNATIONAL BUSINESS MACHS CORP COM CUSIP 459200101							
IBM	196 47	0 00	20,432 88	12,903 41	7,529 47	0 00	7,529 47
JPMORGAN CHASE & CO COM CUSIP 46625H100							
JPM	55 98	0 00	44,448 12	26,958 02	17,490 10	0 00	17,490 10
MC DONALDS CORP COM CUSIP 580135101							
	101 38	0 00	30,008 48	25,762 58	4,245 90	0 00	4,245 90
MERCK & CO INC NEW COM CUSIP 58833Y105							
	58 56	0 00	38,239 68	28,306 86	9,932 82	0 00	9,932 82
METLIFE INC COM STK USD0 01 CUSIP 59156R108							
	52 35	0 00	32,090 55	22,888 28	9,202 27	0 00	9,202 27
MONDELEZ INTL INC COM CUSIP 609207105							
	35 65	0 00	24,242 00	22,038 32	2,203 68	0 00	2,203 68
MONSANTO CO NEW COM CUSIP 61166W101							
	110 70	0 00	22,914 90	21,901 12	1,013 78	0 00	1,013 78

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◆ Asset Detail - Base Currency

Description / Asset ID		Exchange rate/ local market price	Accrued income/expense	Market Value	Cost	Unrealized gain/loss		Total
Investment Mgr ID	Shares/PAR value					Market	Translation	
Equity Securities								
Common stock								
United States - USD								
NATIONAL OILWELL VARCO COM STK CUSIP 637071101	NOV							
279 000		78 53	0 00	21,909 87	9,641 43	12,268 44	0 00	12,268 44
NIKE INC CL B CUSIP 654106103								
270 000		72 95	0 00	19,696 50	8,615 67	11,080 83	0 00	11,080 83
NOBLE CORP PLC COMMON STOCK CUSIP G65431101								
532 000		30 81	0 00	16,390 92	19,334 78	-2,943 86	0 00	-2,943 86
NORFOLK SOUTHN CORP COM CUSIP 655844108								
NSC								
221 000		94 53	119 34	20,891 13	15,085 42	5,805 71	0 00	5,805 71
NUCOR CORP COM CUSIP 670346105								
258 000		51 75	95 46	13,351 50	11,646 22	1,705 28	0 00	1,705 28
ORACLE CORP COM CUSIP 68389X105								
ORCL								
662 000		40 88	0 00	27 062 56	18,218 51	8,844 05	0 00	8,844 05
PETSMART INC COM CUSIP 716768106								
PETM								
362 000		67 68	70 59	24,500 16	25,763 26	-1,263 10	0 00	-1,263 10
PFIZER INC COM CUSIP 717081103								
1,476 000		31 28	0 00	46,169 28	35,839 48	10,329 80	0 00	10,329 80
PRECISION CASTPARTS CORP COM CUSIP 740189105								
PCP								
97 000		253 09	0 00	24,549 73	16,198 93	8,350 80	0 00	8,350 80

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◆ Asset Detail - Base Currency

Description / Asset ID Investment Mgr ID Shares/PAR value	Exchange rate/ local market price	Accrued income/expense	Market Value	Cost	Unrealized gain/loss	
					Market	Translation

Total

Equity Securities

Common stock

United States - USD

PROCTER & GAMBLE COM NPV CUSIP 742718109

191 000	82 55	122 92	15,767 05	10,835 43	4,931 62	0 00	4,931 62
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QUALCOMM INC COM CUSIP 747525103
QCOM

561 000	78 71	0 00	44,156 31	29,482 27	14,674 04	0 00	14,674 04
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SCHLUMBERGER LTD COM COM CUSIP 806857108
SLB

249 000	101 55	0 00	25,285 95	21,666 07	3,619 88	0 00	3,619 88
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STARBUCKS CORP COM CUSIP 855244109

400 000	70 62	0 00	28,248 00	18,455 11	9,792 89	0 00	9,792 89
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TWENTY-FIRST CENTY FOX INC CL A CL A CUSIP 90130A101
FOXA

840 000	32 02	0 00	26,896 80	26,830 98	65 82	0 00	65 82
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UNITED TECHNOLOGIES CORP COM CUSIP 913017109

173 000	118 33	0 00	20,471 09	5,388 95	15,082 14	0 00	15,082 14
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US BANCORP CUSIP 902973304
USB

695 000	40 78	0 00	28,342 10	18,720 45	9,621 65	0 00	9,621 65
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V F CORP COM CUSIP 918204108

443 000	61 09	0 00	27,062 87	12,247 06	14,815 81	0 00	14,815 81
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VERIZON COMMUNICATIONS COM CUSIP 92343V104
VZ

301 000	46 73	159 53	14,065 73	11,155 98	2,909 75	0 00	2,909 75
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◆ Asset Detail - Base Currency

Description / Asset ID		Exchange rate/ local market price	Accrued income/expense	Market Value	Cost	Unrealized gain/loss		
Investment Mgr ID	Shares/PAR value					Market	Translation	Total
Equity Securities								
Common stock								
United States - USD								
WALT DISNEY CO CUSIP 254687106								
DIS	368 000	79 34	0 00	29,197 12	12,469 44	16,727 68	0 00	16,727 68
WELLS FARGO & CO NEW COM STK CUSIP 949746101								
WFC	990 000	49 64	0 00	49,143 60	26,934 54	22,209 06	0 00	22,209 06
Total USD			920 41	1,554,984 61	1,053,698 18	501,286 43	0 00	501,286 43
Total United States			920 41	1,554,984 61	1,053,698 18	501,286 43	0 00	501,286 43
Total Common Stock								
25,669,000			920.41	1,554,984.61	1,053,698.18	501,286.43	0.00	501,286.43

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◆ Asset Detail - Base Currency

Description / Asset ID		Exchange rate/ local market price	Accrued income/expense	Market Value	Cost	Unrealized gain/loss	
Investment Mgr ID	Shares/PAR value					Market	Translation
Equity Securities							
Equity funds							
International Region - USD							
MFB NORTHN INTL EQTY INDEX FD	CUSIP 665130209						
14,497,300	12.60	0.00	182,665.98	174,842.18	7,823.80	0.00	7,823.80
MFB NORTHN MULTI-MANAGER INTL EQTY FD CUSIP 665162558							
137,380,870	11.00	0.00	1,511,189.57	1,139,491.14	371,698.43	0.00	371,698.43
Total USD		0.00	1,693,855.55	1,314,333.32	379,522.23	0.00	379,522.23
Total International Region							
		0.00	1,693,855.55	1,314,333.32	379,522.23	0.00	379,522.23
United States - USD							
MFB NORTHERN FUNDS SMALL CAP CORE FUND	CUSIP 665162665						
3,944,190	20.51	0.00	80,895.33	59,722.06	21,173.27	0.00	21,173.27
MFB NORTHERN MULTI MANAGER GLOBAL LISTED INFRASTRUCTURE FUND CUSIP 665162384							
9,493,030	13.00	0.00	123,409.39	118,188.21	5,221.18	0.00	5,221.18
MFB NORTHN MULTI-MANAGER MID CAP FD CUSIP 665162574							
20,683,280	13.78	0.00	285,015.59	183,899.38	101,116.21	0.00	101,116.21
MFB NORTHN MULTI-MANAGER SMALL CAP FD CUSIP 665162566							
7,195,470	11.15	0.00	80,229.49	55,347.76	24,881.73	0.00	24,881.73
Total USD		0.00	569,549.80	417,157.41	152,392.39	0.00	152,392.39
Total United States		0.00	569,549.80	417,157.41	152,392.39	0.00	152,392.39
Total Equity Funds							
247,162,730		0.00	3,493,434.62	2,853,948.37	639,486.25	0.00	639,486.25

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◆ Asset Detail - Base Currency

Description / Asset ID

Investment Mgr ID	Exchange rate/ local market price	Accrued income/expense	Market Value	Cost	Market	Unrealized gain/loss Translation	Total
Shares/PAV value							

Equity Securities

Other equity

United States - USD

AMERICAN TOWER CORP CUSIP 03027X100

286 000	83.52	0.00	23,886.72	20,784.46	3,102.26	0.00	3,102.26
Total USD		0.00	23,886.72	20,784.46	3,102.26	0.00	3,102.26
Total United States		0.00	23,886.72	20,784.46	3,102.26	0.00	3,102.26
Total Other Equity		0.00	23,886.72	20,784.46	3,102.26	0.00	3,102.26
Total Equity Securities							
273,117.730		920.41	5,072,305.95	3,928,431.01	1,143,874.94	0.00	1,143,874.94

Fixed Income Securities

Corporate/government

United States - USD

MFB NORTHERN FUNDS MULTI MANAGER HIGH YIELD OPPORTUNITY FUND CUSIP 665162442

50,014.410	10.74	0.00	537,154.76	513,454.18	23,700.58	0.00	23,700.58
Total USD		0.00	537,154.76	513,454.18	23,700.58	0.00	23,700.58
Total United States		0.00	537,154.76	513,454.18	23,700.58	0.00	23,700.58
Total Corporate/Government							
50,014.410		0.00	537,154.76	513,454.18	23,700.58	0.00	23,700.58
Total Fixed Income Securities		0.00	537,154.76	513,454.18	23,700.58	0.00	23,700.58

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◆ Asset Detail - Base Currency

Description / Asset ID		Exchange rate/ local market price	Accrued income/expense	Market Value	Cost	Unrealized gain/loss		Total
Investment Mgr ID	Shares/PAR value					Market	Translation	

Real Estate

Real estate funds

Global Region - USD

MFB NORTHN FDS MULTI-MANAGER GLOBAL REALESTATE FD CUSIP 665162475

21,360.850	17.18	0.00	366,979.40	337,376.78	29,602.62	0.00		29,602.62
Total USD		0.00	366,979.40	337,376.78	29,602.62	0.00		29,602.62
Total Global Region		0.00	366,979.40	337,376.78	29,602.62	0.00		29,602.62
Total Real Estate Funds		0.00	366,979.40	337,376.78	29,602.62	0.00		29,602.62
21,360.850		0.00	366,979.40	337,376.78	29,602.62	0.00		29,602.62
Total Real Estate		0.00	366,979.40	337,376.78	29,602.62	0.00		29,602.62

Other Assets

Other assets

United States - USD

&& BELOIT COLLEGE CUSIP 000676700

1.000	1.00	0.00	1.00	1.00	0.00	0.00		0.00
&& BERE COLLEGE CUSIP 000676718								

1.000	1.00	0.00	1.00	1.00	0.00	0.00		0.00
&& CARLETON COLLEGE CUSIP 000676726								

1.000	1.00	0.00	1.00	1.00	0.00	0.00		0.00
* Market value based on prices received from an external manager or other client-directed pricing source								

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◆ Asset Detail - Base Currency

Description / Asset ID		Exchange rate/ local market price	Accrued income/expense	Market Value	Cost	Unrealized gain/loss		Total
Investment Mgr ID	Shares/PAR value					Market	Translation	
Other Assets								
Other assets								
United States - USD								
&&& CASE WESTERN RESERVE UNIVERSITY CUSIP 000676981								
1 000		1 00	0 00	1 00	1 00	0 00	0 00	0 00
&&& CENTRAL COLLEGE CUSIP 000676734								
1 000		1 00	0 00	1 00	1 00	0 00	0 00	0 00
&&& CUMBERLAND COLLEGE CUSIP 000676759								
1 000		1 00	0 00	1 00	1 00	0 00	0 00	0 00
&&& DRAKE UNIVERSITY CUSIP 000676767								
1 000		1 00	0 00	1 00	1 00	0 00	0 00	0 00
&&& GRINNELL COLLEGE CUSIP 000676783								
1 000		1 00	0 00	1 00	1 00	0 00	0 00	0 00
&&& HILLSDALE COLLEGE CUSIP 000676791								
1 000		1 00	0 00	1 00	1 00	0 00	0 00	0 00
&&& HOPE COLLEGE CUSIP 000676809								
1 000		1 00	0 00	1 00	1 00	0 00	0 00	0 00
&&& ILLINOIS INST OF TECHNOLOGY CUSIP 000677013								
1 000		1 00	0 00	1 00	1 00	0 00	0 00	0 00
&&& INDIANA UNIVERSITY CUSIP 000676825								
1 000		1 00	0 00	1 00	1 00	0 00	0 00	0 00

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◆ Asset Detail - Base Currency

Description / Asset ID Investment Mgr ID Shares/PAZ value	Exchange rate/ local market price	Accrued income/expense	Market Value	Cost	Unrealized gain/loss		Total
					Market	Translation	

Other Assets

Other assets

United States - USD

&&& KNOX COLLEGE CUSIP 000676841

1 000	1 00	0 00	1 00	1 00	0 00	0 00	0 00
-------	------	------	------	------	------	------	------

&&& LAKE FOREST COLLEGE CUSIP 000676858

1 000	1 00	0 00	1 00	1 00	0 00	0 00	0 00
-------	------	------	------	------	------	------	------

&&& MACALASTER COLLEGE CUSIP 000676866

1 000	1 00	0 00	1 00	1 00	0 00	0 00	0 00
-------	------	------	------	------	------	------	------

* Market value based on prices received from an external manager or other client-directed pricing source

&&& MONMOUTH COLLEGE CUSIP 000677005

1 000	1 00	0 00	1 00	1 00	0 00	0 00	0 00
-------	------	------	------	------	------	------	------

&&& MUSKINGUM COLLEGE CUSIP 000676882

1 000	1 00	0 00	1 00	1 00	0 00	0 00	0 00
-------	------	------	------	------	------	------	------

&&& NORTHWESTERN UNIVERSITY CUSIP 000676890

1 000	1 00	0 00	1 00	1 00	0 00	0 00	0 00
-------	------	------	------	------	------	------	------

&&& OHIO UNIVERSITY CUSIP 000676908

1 000	1 00	0 00	1 00	1 00	0 00	0 00	0 00
-------	------	------	------	------	------	------	------

&&& OTTERBEIN COLLEGE CUSIP 000676916

1 000	1 00	0 00	1 00	1 00	0 00	0 00	0 00
-------	------	------	------	------	------	------	------

&&& PURDUE UNIVERSITY CUSIP 000676924

1 000	1 00	0 00	1 00	1 00	0 00	0 00	0 00
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◆ Asset Detail - Base Currency

Description / Asset ID Investment Mgr ID	Exchange rate/ local market price	Accrued income/expense	Market Value	Cost	Unrealized gain/loss	
					Market	Translation
Shares/PAR value						Total
Other Assets						
Other assets						
United States - USD						
88& SOUTHERN ILLIONIS UNIVERSITY CUSIP 000676940						
1 000	1 00	0 00	1 00	1 00	0 00	0 00
88& ST OLAF COLLEGE CUSIP 000676932						
1 000	1 00	0 00	1 00	1 00	0 00	0 00
88& TRUMAN STATE UNIVERSITY CUSIP 000696716						
1 000	1 00	0 00	1 00	0 00	1 00	1 00
88& UNIVERSITY OF CHICAGO CUSIP 000676742						
1 000	1 00	0 00	1 00	1 00	0 00	0 00
88& UNIVERSITY OF COLORADO CUSIP 000676999						
1 000	1 00	0 00	1 00	1 00	0 00	0 00
88& UNIVERSITY OF ILLINOIS CUSIP 000676817						
1 000	1 00	0 00	1 00	1 00	0 00	0 00
88& UNIVERSITY OF IOWA CUSIP 000676833						
1 000	1 00	0 00	1 00	1 00	0 00	0 00
88& UNIVERSITY OF MONTANA CUSIP 000676874						
1 000	1 00	0 00	1 00	1 00	0 00	0 00
88& UNIVERSITY OF WISCONSIN CUSIP 000676973						
1 000	1 00	0 00	1 00	1 00	0 00	0 00

* Market value based on prices received from an external manager or other client-directed pricing source

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Description / Asset ID		Exchange rate/ local market price	Accrued income/expense	Market Value	Cost	Unrealized gain/loss		Total
Investment Mgr ID	Shares/PAR value					Market	Translation	
Other Assets								
Other assets								
United States - USD								
&&& VALPARAISO UNIVERSITY	CUSIP 000676957							
1 000	1 00	0 00	1 00	1 00	0 00	0 00	0 00	0 00
&&& WHEATON COLLEGE CUSIP 000676965								
1 000	1 00	0 00	1 00	1 00	0 00	0 00	0 00	0 00
Total USD		0 00	32 00	31 00	1 00	0 00	0 00	1 00
Total United States		0 00	32 00	31 00	1 00	0 00	0 00	1 00
Total Other Assets								
32.000		0 00	32 00	31 00	1 00	0 00	0 00	1 00
Total Other Assets								
32.000		0 00	32 00	31 00	1 00	0 00	0 00	1 00

Cash and Short Term Investments

Short term

USD - United States dollar								
1.00	1.68	213,329.22	213,329.22	213,329.22	0.00	0.00	0.00	0.00
Total short term - all currencies	1.68	213,329.22	213,329.22	213,329.22	0.00	0.00	0.00	0.00
Total short term - all countries	1.68	213,329.22	213,329.22	213,329.22	0.00	0.00	0.00	0.00
Total Short Term	1.68	213,329.22	213,329.22	213,329.22	0.00	0.00	0.00	0.00
213,329.220								

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◆ Asset Detail - Base Currency

Description / Asset ID

Investment Mgr ID

Exchange rate/
local market price

Accrued
income/expense

Market Value

Cost

Market

Unrealized gain/loss
Translation

Total

Total Cash and Short Term Investments

213,329,220	1.68	213,329,22	213,329,22	0.00	0.00	0.00
Total						
557,854,210	922.09	6,189,801.33	4,992,622.19	1,197,179.14	0.00	1,197,179.14

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