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Form **990**

Return of Organization Exempt From Income Tax

OMB No 1545-0047

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.

Open to Public

		ue Service		on about For	m 990 and	<u>its ins</u>	tructions	is at	www.irs.	gov/form99	Ю		Inspec	lion			
A	For the	2013 cale	ndar year, or tax year b	peginning	July '	1	, 20	13, aı	nd ending	g Ju	<u>ne 30</u>		, 20 14				
В	Check if	applicable	C Name of organization M	ontgomery Co	ounty Publi	ic Sch	ools Edu	catio	nal Foun	dation, Inc.	D Em	ıployer i	identification n	umber			
	Address	change	Doing Business As									5	52-1804509				
	Name ch	nange	Number and street (or P	O box if mail is	not delivered	to stre	et address)		Room/sur	te	E Tel	ephone	number				
	Initial ret	urn	850 Hungerford Drive						•	149	301-517-5099						
	Terminal	City or town, state or province, country, and ZIP or foreign postal code											_				
\checkmark	Amende	ded return Rockville MD 20850-1718											ıpts \$				
			F Name and address of pri							H(a) Is this a	group reti	um for sub	ordinates? Yes	I ✓ No			
	•••									I			cluded? Tes	_			
<u> </u>	Tax-exe	mpt status	✓ 501(c)(3)	501(c) () ◀ (insert	no)	4947(a)(1) or [527	`´ f "I	No," att	ach a lis	t (see instruction	ons)			
J	Website									H(c) Group	o exem	ption nu	mber ►				
ĸ	Form of	organization	✓ Corporation ☐ Trust	Association	☐ Other ►			L Year	r of formati	ion 1988	. м	State of	legal domicile	MD			
Р	art I	Summ	ary										_				
	1		escribe the organization	on's mission	or most si	anific	ant activ	ties:	The mi	ssion of the	Mont	gomer	y County Put	olic			
æ		•	Educational Foundation			_						······		·			
Activities & Governance			dents to maximize the														
E	2		is box ▶ 🗌 if the orga														
Š	3		of voting members of								.	3		23			
∞ ∞	4		of independent voting	-								4		23			
es	5		nber of individuals em		_	_			-		` ├	5		2			
Σ	6		nber of volunteers (es		=				_u, .		` ⊢	6					
Ş	7a		elated business rever			nn (C		-			·	7a					
•	'a		lated business taxable					•			· -	7b					
_	+ =	14Gt UIII G	ated business taxabit	S INCOMOSTION	<u> </u>	/ 4, 1	1110 0-1	• •	·	Pnor Y			Current Y	ear			
Revenue	8	Contribu	tions and grants (Part		951,	172		1,158,529									
	9 .		ontributions and grants (Part VIII, line 1h).											1,130,329			
	10		nvestment income (Part VIII, column (A), lines 3, 4, and 7d)											60 000			
æ	10		evenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)											68,998			
	12		enue—add lines 8 thro						· · · ·		270,			673,306			
								~y, III I		1,282,631 1,064,749			<u>1,900,833</u>				
	13		nd similar amounts pa	-			-		}		1,064	,749		<u>1,281,859</u>			
	14		paid to or for member	•					- 101					404.004			
Expenses	15		other compensation, e					mes a) ('''		92,	,963		101,321			
ë	16a		onal fundraising fees (· · · ⊦			-					
꿃	b		draising expenses (Pa						 								
_	17		penses (Part IX, colum		,				7 : F		19,576		31,872				
	18	•	penses. Add lines 13-				nru(A); iii	ie 25, 1	'l · ⊦		1,177			1,415,052			
	19_	Revenue	less expenses. Subtr	act line 16 if	om line 12	6	<u> </u>	<u>√</u> .	1 .	Beginning of C		,343	End of Ye	485,781			
sets or	<u> </u>	T				Ö	. Ä	スに		Beginning or C			Elia di Ti				
SSet	20		sets (Part X, line 16)				· · £	10	.; '∟		4,726			5,388,086			
Net Ass	21	lotal liar	oilities (Part X, line 26)		04 for any 15m	流	· .	1			1,195			1,371,389			
		Net asse	ts or fund balances. S	Subtract line	21 from ill	(-	.⊜	1 =	<u> </u>		3,530	,916		<u>4,016,697</u>			
F	art II	Signa	ture Block			-	20	l fi	1								
U	nder pena	alties of perju	iry, I declare that I have exallete Declaration of prepare	mined this retur	n, including a	ou-en in	tormation	edules of write	rand state	ments, and to r has any knov	tne be: vledae	st of my	knowledge and	d belief, it is			
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_			s this return with the				instructi	ons)	· · ·	<u>· · · · </u>			Ye				
Fo	r Paper	work Redu	iction Act Notice, see t	he separate i	nstructions	.			Cat N	lo 11282Y			Form	990 (2013)			





art	Checklist of Required Schedules		V 1	
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	No
2 3	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If</i> "Yes," <i>complete Schedule C, Part I</i>	3	✓	<u> </u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		<u>·</u> ✓
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		✓
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		✓
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		✓_
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		✓_
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		✓_
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	~	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	✓	
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	✓.	
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		✓
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d 11e		√
f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		✓
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	✓	
	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	✓	_
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13 14a		✓
14 a b	5 \$40.000 form months of the	14b		√
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	15		√
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.	16		1
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)	17		1
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	18		1
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		1
20 a		20a	├	-
<u>b</u>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b	000	10015
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eart i	Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		Yes	No
	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	✓_	
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? If "Yes," complete Schedule I, Parts I and III	22	1	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	√	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		/
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		√
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	24d 25a		1
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		1
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		1
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 b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		1
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> 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		√
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		∀
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		1
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		1
36	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	35b		/
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		✓
37	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,	37		/
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	1	
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Form **990** (2013)

Part				
	Check if Schedule O contains a response or note to any line in this Part V	• •	· · ·	
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 6		Yes	No
b	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	ł		
	Did the organization comply with backup withholding rules for reportable payments to vendors and	1		
	reportable gaming (gambling) winnings to prize winners?	1c	1	1
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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	<u> </u>	<u> </u>
2-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	0-		,
	Did the organization have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3a 3b	 	✓
b 4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	30		
70	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		✓
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		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		/
C So	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	- Oa	_	
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		✓
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	<u>.</u>	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		1
d	If "Yes," indicate the number of Forms 8282 filed during the year	10	 	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	1	1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		1
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	<u> </u>	✓
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	١,		
0	organization, have excess business holdings at any time during the year?	8	-	-
9 a	Did the organization make any taxable distributions under section 4966?	9a		1
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	 	7
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b	4		
11	Section 501(c)(12) organizations. Enter:			
a b	Gross income from members or shareholders	┨	1	
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		1
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			Ť
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	<u></u>		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	<u> </u>	1
۵.	Note. See the instructions for additional information the organization must report on Schedule O.		1	
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	1	1	
С	the organization is licensed to issue qualified health plans	1	1	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	\vdash	1
	If "Yes " has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O	14b	 	†

Part		and	for a	"No"
Fait	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S			
	Check if Schedule O contains a response or note to any line in this Part VI			
Section	on 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 23			
	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.			
ь 2	Enter the number of voting members included in line 1a, above, who are independent . 1b 23 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
2	any other officer, director, trustee, or key employee?	2		/
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other person? .	3		✓
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	✓	
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5	L	✓
6	Did the organization have members or stockholders?	6	ļ	✓
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?	7-		,
L	one or more members of the governing body?	7a		\ <u> </u>
b	stockholders, or persons other than the governing body?	7b		✓
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:		}	
а	The governing body?	8a	✓	
b	Each committee with authority to act on behalf of the governing body?	8b	✓	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	_		,
C4	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O on B. Policies (This Section B requests information about policies not required by the Internal Reven	9	ode	🗸
Secti	on B. Policies (This Section B requests information about policies not required by the internal never	ue C	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		1
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		1
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	V	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	1	1
13	Did the organization have a written whistleblower policy?	13	1	
14	Did the organization have a written document retention and destruction policy?	14	1	T
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	✓	
b	Other officers or key employees of the organization	15b	-	✓
16a	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	-		1
iva	with a taxable entity during the year?	16a		1
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	1	1	Ť
_	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?	16b		<u> </u>
	on C. Disclosure			_
17	List the states with which a copy of this Form 990 is required to be filed Maryland Section 6104 required to a copy of this Form 990 is required to be filed Maryland Section 6104 required to a copy of this Form 990 is required to be filed Maryland	o EΩ+	(0)(2)	o o o b s
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	11 00 1	(८)(७)१	only)
	☐ 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 int	erest	polic	y, 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	е	
	organization: ► Gary Buckley, 45 west Gude Drive, Sutie 3200, Rockville MD 20850 - 301-279-3652			

Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and
	Independent Contractors
	0. 1.701 1.40 0.7

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 r	nor any relate	d org	aniz			ompe	nsa	ted any currer	t officer, director	r, or trustee.
				•	C)					
(A)	(B)	Position (do not check more than one						(D)	(E)	(F)
Name and Title	Average					is both		Reportable	Reportable	Estimated
	hours per week (list any					or/trus	tee)	compensation	compensation from related	
	hours for	옥콩	Sul	₽	줎	유문	Former	the	organizations	other compensation
	related	e Maria	ŝ	Officer	eg		me	organization	(W-2/1099-MISC)	from the
	organizations below dotted	일필	ğ		Key employee	9 6	`	(W-2/1099-MISC)	1	organization and related
	line)	Individual trustee or director	# # # # # # # # # # # # # # # # # # #		yee] 를				organizations
		ē	Institutional trustee			Highest compensated employee				
			<u> </u>	 	_	2			<u>-</u>	**
(1) Joshua Starr										
Director		1						0	0	0
(2) Thomas Choate										
Director		1	_	_			<u> </u>	0	0	0
(3) Steven B Cohen										
Director		/	L_	L.			L	0	0	0
(4) Jeffery Gonyo										
Director		✓						0	_0	0
(5) Jeffery R Hearle										
Director		✓					ļ	0	0	0
(6) Gonzalo Laje, MD		_								
Director		<u> </u>	↓_	<u> </u>	ļ.,		┞	0	0	0
(7) The Honorable Aruna Miller										
Director		✓	<u> </u>	<u> </u>			<u> </u>	0	_0	0
(8) Emily Newlan										
Director		<u> </u>	<u> </u>	L.				0	_0	0
(9) Jennifer Nordheimer										
Director	_	✓	ļ	<u> </u>		1	┞	0	0	0
(10) Sheri Parker		_								
Director		<u> </u>	<u> </u>	-	<u> </u>	ļ	┞-	0	0	0
(11) Linda M Plummer						1				
Director		✓_	₩	_	_	<u> </u>	┞-	0	0	0
(12) Thomas Pumphrey				ł		1			:	
Director		/	<u> </u>	-		<u> </u>	<u> </u>	0	0	0
(13) Rod Smith		_								
Director		/	<u> </u>	ļ	<u> </u>	├	<u> </u>	0	0	0
(14) The Honorable Rebecca Smondrowski										
Director							Ц.	0	0	0

Part	VI Section A. Officers, Directors, Trust	ees, Key E	mploy	/ees	s, ar	nd H	lighes	st C	ompensated E	mployees (cor	ntınue	d)		
					- (0	•								
	(A)	(B)	l (do n		Pos eck		than c	ne	(D)	(E)	(F)			
	Name and title	Average	Ďοx, ι	unles	s pe	rson	is both	an	Reportable	Reportable			mated	
		hours per week (list any		r and		rect	or/trust		compensation from	compensation fro related	om		ount of ther	
		hours for	유료	Inst	Officer	Key	emr Higi	Former	the	organizations	.	comp	ensatio	חכ
		related	l ag vi	훜	cer	em	nest	폩	organization (W-2/1099-MISC)	(W-2/1099-MISC	²⁾		m the nizatioi	_
		organizations below dotted	헣	ona		Key employee	8 8		(VV-2/1099-IVIISC)				relatec	
		line)	Individual trustee or director	1		yee	npe					organ	uzation	IS
			ee	Institutional trustee			Highest compensated employee							
(45) 6	Deb Celebrati Dh D						8.	-			+			
Directo	Rob Sobhani, Ph.D.		1						0		0			Λ
	ck Southard										1			
Directo			1	1					0		0			0
	m Watson													
Directo			✓						0		0			0
(18) Pe	nnie Abramson													
Directo	or		✓	L.				ļ	0		0			0
(19) Yo	landa Pruitt, J.D.	24												
Directo	or		1	<u> </u>				ļ	0	93,7	56			0
	elvyn Leshinsky	3								i				
	Person and Treasurer		✓	<u> </u>	✓	_		<u> </u>	0		0			0
3	tricia O'Neill	3	1		1						0			
	hairperson	3			-	_			0	-	<u> </u>			
Secret	chael Humenik	ļ <u>-</u>	1		/				0		0			0
	e Honorable Esther P. Gelman	3	<u> </u>		Ė	_		-	 		┪			
	zing Chair	† -	1		/				0		0			0
(24)								•			·			
		<u> </u>												
(25)											ŀ			
			<u> </u>					<u> </u>						
1b	Sub-total			•	•		•	•		93,7	56	_		
c	Total from continuation sheets to Part			•	•		•			ļ	_			
d_							<u> </u>	<u> </u>	<u> </u>	93,5				
2	Total number of individuals (including but reportable compensation from the organic		to tr	iose	IIST	ea a	above	e) W	no receivea m	ore than \$100	,000 (OΤ		
	reportable compensation from the organi	Zation			-								Yes	No
3	Did the organization list any former of	ficer, direc	tor, c	or tr	uste	е,	key e	emp	oloyee, or high	nest compens	ated		1	
	employee on line 1a? If "Yes," complete											3		✓
4	For any individual listed on line 1a, is the	sum of re	portal	ble (con	nper	nsatio	n a	ind other comp	pensation from	the			
	organization and related organizations	greater that	an \$1	150,	000)? li	f "Ye	s, "	complete Sch	nedule J for s	such			
	individual								<i>.</i>		•	4		✓
5	Did any person listed on line 1a receive of											1		
	for services rendered to the organization	? If "Yes," c	ompi	ete	Scr	nedi	ile J f	or s	such person	<u></u>	•	5	✓	<u> </u>
	on B. Independent Contractors		1 7						46-4		1100	000 -4		
1	Complete this table for your five highest compensation from the organization. Repyear.													ax
	(A)							Γ	(B)	<u>-</u>		(C)		
	Name and business add	Iress				_		L	Description of s	services	c	ompens	ation	
						_		-						
								-						
								\vdash						
								\vdash						
2	Total number of independent contractor	ors (includir	ng bu	ıt n	ot l	ımit	ed to	th	nose listed ab	ove) who				
	received more than \$100,000 of compen-													i

Part	VIII	Statement of Revenue					
		Check if Schedule O contains a res	sponse or note to				
				(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	5,879				
is all	b	Membership dues 1b					
A F	С	Fundraising events <u>1c</u>					
ia i	d	Related organizations <u>1d</u>	+				
Si m	e	Government grants (contributions) 1e					
e Fi	f	All other contributions, gifts, grants, and similar amounts not included above				j	
ë g		and similar amounts not included above 1f Noncash contributions included in lines 1a-1f: \$	1,152,650				
ž E	g h	Total. Add lines 1a-1f		1 150 520			
_	- 11	Total. Add lines 1a-11	Business Code	1,158,529	-	 	
Program Service Revenue	2a						
ě	b						
<u>8</u>	C						_
Ş	d		1		-		
E	е						
gra	f	All other program service revenue .					
P.	g	Total. Add lines 2a-2f	▶				
	3	Investment income (including dividence					
		and other similar amounts)		68,998		ļ. <u> </u>	68,998
	4	Income from investment of tax-exempt i	'			ļ	
	5	Royalties				<u> </u>	
			(II) Personal				
	6a	Gross rents	 			1	
	b	Less: rental expenses Rental income or (loss)	-				_
	°C d		` ▶	ł			
	7a	Gross amount from sales of (i) Securities	(II) Other				
		assets other than inventory					
	ь	Less cost or other basis					
		and sales expenses .				1	
	С	Gain or (loss)					
	d	Net gain or (loss)	▶				
enne	8a	Gross income from fundraising		İ			
		events (not including \$					
Other Rev		of contributions reported on line 1c). See Part IV, line 18	_				
the	.		a				
Ö		Net income or (loss) from fundraising		· .			
		Gross income from gaming activities.				 	
	"	See Part IV, line 19		1			
	Ь	Less: direct expenses	b				
	С	Net income or (loss) from gaming ac	tivities ►				
	10a	Gross sales of inventory, less					
		returns and allowances	a				
	b		b				
	<u>c</u> _	Net income or (loss) from sales of in					
		Miscellaneous Revenue	Business Code				
	11a	Net Unrealized Gain	900099	673,306		 	673,306
	b		———				_
	ر د	All other revenue			_		
	d e	Total. Add lines 11a-11d		673,306			+
	12	Total revenue. See instructions		1,900,833		 	742,304

Form 99	0 (2013)				Page IU
Part	IX Statement of Functional Expenses				
Sectio	n 501(c)(3) and 501(c)(4) organizations must com	plete all columns. A	ll other organization	s must complete co	lumn (A).
	Check if Schedule O contains a respons				
Do no	t include amounts reported on lines 6b, 7b,	(A)	(B) Program service	(C)	(D)
	, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and		expenses	general expenses	ехрепаса
1					
	organizations in the United States. See Part IV, line 21	1,034,317	1,034,317		
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22	247,542	247,542		
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,				
5					
	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)	101,321		101,321	
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):				
а	Management				
b	Legal				
С	Accounting				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees		•		•
g	Other. (If line 11g amount exceeds 10% of line 25, column				
-	(A) amount, list line 11g expenses on Schedule O.)	4,780			
12	Advertising and promotion	144			
13	Office expenses	1,731			
	·				
14	Information technology	12,769			
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses		1		
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .	85			
20	Interest	529			
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	4,424			
23	Insurance	7,445			
24	Other expenses. Itemize expenses not covered	7,743			
24	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	State Charitable Registration	200			
b	Forfeited Grant Awards	-235			
С					
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	1,415,052	1,281,859	101,321	
26	Joint costs. Complete this line only if the				
	organization reported in column (B) joint costs				
	from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if		ļ		
	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 (B) (A) Beginning of year End of year 1 83,979 112,477 2 2 4,598,490 3 3 4 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary 6 Assets 7 7 R 8 9 Prepaid expenses and deferred charges Land, buildings, and equipment: cost or 10a other basis. Complete Part VI of Schedule D 10a 44,237 Less: accumulated depreciation 10b 10c 4,424 44,237 39,813 11 11 Investments—other securities. See Part IV, line 11 12 12 5,235,796 Investments—program-related. See Part IV, line 11 13 13 14 14 15 15 16 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . 4,726,706 5,388,086 17 17 18 18 1,195,790 1,350,499 19 19 20 20 Escrow or custodial account liability. Complete Part IV of Schedule D. 21 21 22 Loans and other payables to current and former officers, directors, Liabilities trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 23 Secured mortgages and notes payable to unrelated third parties . . . 20,890 Unsecured notes and loans payable to unrelated third parties . . . 24 Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24). Complete Part X 25 Total liabilities. Add lines 17 through 25 _ . . . 1,195,790 26 1,371,389 Organizations that follow SFAS 117 (ASC 958), check here ▶ ☐ and Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 27 27 2,892,813 2,485,693 28 28 302,022 223,361 29 821,862 29 821,862 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 31 31 Paid-in or capital surplus, or land, building, or equipment fund . . . 32 32 Retained earnings, endowment, accumulated income, or other funds. 33 33 4,016,697 3,530,916 34 Total liabilities and net assets/fund balances 34 4,726,706 5,388,086 Form **990** (2013)

Form 9	90 (2013)			Pa	ige 12
Par	XI Reconciliation of Net Assets				
	Check 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			00,833
2	Total expenses (must equal Part IX, column (A), line 25)	2			15,052
3	Revenue less expenses. Subtract line 2 from line 1	3		48	35,781
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		3,53	30,916
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			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B)) <u>.</u>	10		4,01	16,697
Part	Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII	<u></u> .	<u>.</u>	· ·	No
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," ex Schedule O.	plain in			
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 compreviewed on a separate basis, consolidated basis, or both:		2a	✓.	_
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	✓	
	If "Yes," check a box below to indicate whether the financial statements for the year were audite separate basis, consolidated basis, or both:	ed on a			
С	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for organization have a committee that assumes the committee of the com			_	
	of the audit, review, or compilation of its financial statements and selection of an independent accou		2c	✓	
	If the organization changed either its oversight process or selection process during the tax year, ex Schedule O.	plain in			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set the Single Audit Act and OMB Circular A-133?		3a		 ✓

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

3b

Form **990** (2013)