efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493307001324

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 By law, the IRS generally cannot redact the information on the form

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

OMB No 1545-0047

2013

Open to Public Inspection

A For the 2013 calendar year, or tax year beginning 07-01-2013 , 2013, and ending 06-30-2014

B Check if applicable
- [ ] Address change
- [ ] Name change
- [ ] Initial return
- [ ] Terminated
- [ ] Amended return
- [ ] Application pending

C Name of organization
BOARD OF CONTROL FOR SOUTHERN REGIONAL EDUCATION

Doing Business As

Number and street (or P O box if mail is not delivered to street address) | Room/suite
592 TENTH STREET NW

City or town, state or province, country, and ZIP or foreign postal code
ATLANTA, GA 303185776

D Employer identification number
58-0566141

E Telephone number
(404)875-9211

G Gross receipts $ 27,039,194

F Name and address of principal officer
DAVID SPENCE
592 TENTH STREET NW
ATLANTA, GA 303185776

H(a) Is this a group return for subordinates? [ ] Yes [x] 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 [x] 501(c)(3) [ ] 501(c) ( ) ◀ (insert no) [ ] 4947(a)(1) or [ ] 527

J Website: ▶ WWW SREB ORG

K Form of organization [ ] Corporation [ ] Trust [ ] Association [x] Other ▶ COMPACT

L Year of formation 1948 **M** State of legal domicile GA

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities
THE BOARD OF CONTROL FOR SOUTHERN REGIONAL EDUCATION SHALL BE DEVOTED TO THE TASK OF ASSISTING STATES, INSTITUTIONS AND AGENCIES CONCERNED WITH HIGHER EDUCATION IN THEIR EFFORTS TO ADVANCE KNOWLEDGE AND TO IMPROVE THE SOCIAL AND ECONOMIC LEVEL OF THE SOUTHERN REGION IN AIDING SUCH STATES, INSTITUTIONS AND AGENCIES, THE BOARD SHALL EXPLORE FULLY, RECOMMEND WHERE DESIRABLE, AND DEVELOP WHERE NEEDED, INTERSTATE COLLABORATION IN THE SUPPORT, EXPANSION OR ESTABLISHMENT OF REGIONAL SERVICES OR SCHOOLS FOR GRADUATE, PROFESSIONAL AND TECHNICAL EDUCATION

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	79
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	79
5	Total number of individuals employed in calendar year 2013 (Part V, line 2a)	5	145
6	Total number of volunteers (estimate if necessary)	6	79
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0

		Prior Year	Current Year
Revenue			
8	Contributions and grants (Part VIII, line 1h)	37,251	19,219
9	Program service revenue (Part VIII, line 2g)	23,685,110	26,870,955
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	128,514	149,020
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0	0
12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	23,850,875	27,039,194
Expenses			
13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	0	0
14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	11,533,374	11,461,887
16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
b	Total fundraising expenses (Part IX, column (D), line 25) ▶0		
17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	12,888,158	15,131,445
18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	24,421,532	26,593,332
19	Revenue less expenses Subtract line 18 from line 12	-570,657	445,862

Net Assets or Fund Balances		Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)	39,544,339	40,833,829
21	Total liabilities (Part X, line 26)	9,637,743	10,443,932
22	Net assets or fund balances Subtract line 21 from line 20	29,906,596	30,389,897

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

****** | 2014-10-31
Signature of officer | Date

BARBARA CHANNELL DIRECTOR FINANCE & FACILITIES
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check [ ] if self-employed	PTIN
RACHEL M SKYPEK		2014-10-31		P00966186
Firm's name ▶ WARREN AVERETT LLC			Firm's EIN ▶ 45-4084437	
Firm's address ▶ SIX CONCOURSE PARKWAY STE 600 ATLANTA, GA 30328			Phone no (770) 396-1100	

May the IRS discuss this return with the preparer shown above? (see instructions) [x] Yes [ ] No

Part III **Statement of Program Service Accomplishments**

Check if Schedule O contains a response or note to any line in this Part III . . . . ☑

1 Briefly describe the organization's mission

THE BOARD OF CONTROL FOR SOUTHERN REGIONAL EDUCATION SHALL BE DEVOTED TO THE TASK OF ASSISTING STATES, INSTITUTIONS AND AGENCIES CONCERNED WITH HIGHER EDUCATION IN THEIR EFFORTS TO ADVANCE KNOWLEDGE AND TO IMPROVE THE SOCIAL AND ECONOMIC LEVEL OF THE SOUTHERN REGION IN AIDING SUCH STATES, INSTITUTIONS AND AGENCIES, THE BOARD SHALL EXPLORE FULLY, RECOMMEND WHERE DESIRABLE, AND DEVELOP WHERE NEEDED, INTERSTATE COLLABORATION IN THE SUPPORT, EXPANSION OR ESTABLISHMENT OF REGIONAL SERVICES OR SCHOOLS FOR GRADUATE, PROFESSIONAL AND TECHNICAL EDUCATION

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 $ 2,911,295 including grants of $) (Revenue $ 2,911,295)

SREB MADE SIGNIFICANT PROGRESS ON EACH COMPONENT OF THIS GATES GRANT THE BENCHMARKING COMPONENT PRODUCED A CROSS-STATE SUMMARY REPORT COVERING 15 STATES ON FIVE PRIMARY AREAS OF PRACTICE WITH INDIVIDUAL STATE PROFILES, STAFF ALSO MADE SEVERAL PRESENTATIONS TO LEGISLATORS AND LEGISLATIVE STAFF IN THE LDC/MDC COMPONENT, WORK IN ARKANSAS EXPANDED TO ACTIVITY IN LOUISIANA, PARTS OF THE ARKANSAS DELTA, KENTUCKY, AND WEST VIRGINIA MAJOR ACTIVITIES INCLUDED TRAINING DISTRICT LEADERS AS LDC/MDC TRAINERS, RECRUITING SCHOOLS TO PARTICIPATE IN THE COHORT 3 ROLLOUT DURING THE 2014-15 SCHOOL YEAR, CONDUCTING SITE VISITS, PROVIDING COACHING AND PROFESSIONAL DEVELOPMENT FOR SCHOOLS, AND DEVELOPING SCHOOL-LEVEL ACTION PLANS TO GROW AND SUSTAIN LDC/MDC FOR THE 2014-15 SCHOOL YEAR THE TRANSITIONAL/READINESS COURSES COMPONENT NOW SERVES 18 STATESUP FROM 14 LAST YEAR WORK BEGAN TO IDENTIFY FIELD-TESTING SITES FOR THE 2014-15 SCHOOL YEAR NORTH CAROLINA AGREED TO FIELD TEST THE MATH COURSE STATEWIDE AND HAS ONE SITE FOR LITERACY, AND SCHOOLS WERE IDENTIFIED TO PARTICIPATE IN DATA COLLECTION AND EXTENSIVE SURVEYING TO BE USED FOR AN EVALUATION STUDY THE CTE INITIATIVE SHIFTED TO KENTUCKY AND WORK WAS BEGUN TO DEVELOP FOUR COURSES WITH KENTUCKY STAKEHOLDERS SREB DEVELOPED 12 PROJECTS FOR THE KENTUCKY INTEGRATED PRODUCTION TECHNOLOGIES CURRICULUM, SREB WILL BEGIN THE EDITORIAL PROCESS ON THIS WORK AT LEAST ONE DRAFT OF ALL SIX PROJECTS FOR COURSE 3 HAS BEEN COMPLETED AND THE FIVE PROJECTS FOR COURSE 4 ARE IN VARIOUS STAGES OF DEVELOPMENT EDUCATOR EFFECTIVENESS HAS FOCUSED ON BUILDING AWARENESS OF THE MET FINDINGS AMONG KEY CONSTITUENCIES IN THE REGION, DEVELOPING ALIGNED STATE POLICIES, INCLUDING USE OF MULTIPLE MEASURES AND THE ROLE OF STUDENT ACHIEVEMENT IN TEACHER EVALUATION, ASSISTING SEAS ON DEVELOPING VALID AND RELIABLE EVALUATION INSTRUMENTS AND SYSTEMS, AND ALIGNING DATA SYSTEMS, TRAINING PRINCIPALS AND DISTRICT-LEVEL LEADERS TO USE EVALUATION TOOLS AND LEAD EDUCATOR DEVELOPMENT, AND CALIBRATING THE SEALEA RELATIONSHIP ON EDUCATOR EFFECTIVENESS SREB ADDED FOUR PROJECTS WITH NEW SUPPORT FROM THE FOUNDATION THE COLLEGE COMPLETION COMPONENT DRAFTED POLICY BRIEFS ON ADULT LEARNERS AND PRIOR LEARNING ASSESSMENT AND CONTINUED TO DISSEMINATE PAPERS PRODUCED PREVIOUSLY EACH PAPER IS DEVELOPED THROUGH A WORKING GROUP PROCESS THAT INCLUDES STATE LEGISLATORS SREB ALSO LAUNCHED A COMMUNITY COLLEGE COMMISSION AND PRODUCED A REPORT IN JUNE WITH RECOMMENDATIONS ON COMPLETION, FUNDING, READINESS, PLACEMENT, STRUCTURED PATHWAYS, AND STUDENT SUPPORT AMONG OTHERS SREB LAUNCHED ALSO INITIATED A NEW STUDY ON COLLEGE AFFORDABILITY IN THE SOUTH AND PRODUCED INDIVIDUAL STATE AFFORDABILITY DATA PROFILES

4b (Code) (Expenses $ 2,166,072 including grants of $) (Revenue $ 2,701,775)

SREBS LEARNING-CENTERED LEADERSHIP PROGRAM (LCLP) HAS BEEN CONTRACTED BY THE FLORIDA DEPARTMENT OF EDUCATION (FDOE) TO DESIGN AND DELIVER A TURNAROUND LEADERSHIP TRAINING PROGRAM THAT WILL PREPARE AT LEAST 80 SCHOOL TURNAROUND LEADERS ACROSS THAT STATE THIS JOB-EMBEDDED TRAINING PROGRAM HAS INCLUDED QUARTERLY SEMINARS DELIVERED BY NATIONAL EXPERTS, ONLINE COURSES AND WEBINARS, MENTORING PROVIDED BY CURRENT PRINCIPALS, COACHING PROVIDED BY SUCCESSFUL FORMER PRINCIPALS, AND MULTIPLE CRITICAL ASSIGNMENTS COMPLETED IN THE PARTICIPANTS SCHOOLS AND SCORED BY MENTORS OR COACHES USING CAREFULLY PREPARED RUBRICS NINETY-TWO PARTICIPANTS WERE IN THE PROGRAM AT THE BEGINNING OF THE 2013-14 STATE FISCAL YEAR, AND 82 PARTICIPANTS COMPLETED THE PROGRAM IN JUNE OF 2014 THE PROGRAM INCLUDED PARTICIPANTS FROM MIAMI-DADE COUNTY PUBLIC SCHOOLS, DUVAL COUNTY PUBLIC SCHOOLS, PINELLAS COUNTY SCHOOLS, ORANGE COUNTY PUBLIC SCHOOLS, ALACHUA COUNTY PUBLIC SCHOOLS, AND FROM CHARTER SCHOOLS ACROSS THE STATE DURING THE FALL OF 2013 ALL PARTICIPANTS COMPLETED A FULL-TIME SIX-MONTH LONG INTERNSHIP IN A SCHOOL OTHER THAN THEIR OWN, WITH FUNDING FROM THIS CONTRACT COVERING SALARY COSTS TO SUPPORT THE FULL-TIME INTERNSHIP EXPERIENCE FIFTY-THREE PARTICIPANTS HAVE RECEIVED SIGNIFICANT PROMOTIONS, INCLUDING 14 WHO HAVE BEEN PROMOTED TO PRINCIPAL POSITIONS

4c (Code) (Expenses $ 1,287,966 including grants of $) (Revenue $ 1,117,484)

SREB'S SCHOOL IMPROVEMENT INITIATIVES, HIGH SCHOOLS THAT WORK (HSTW) AND TECHNOLOGY CENTERS THAT WORK (TCTW) UTILIZE NATIONAL ASSESSMENT EDUCATIONAL PROGRAM-LIKE ASSESSMENTS TO INFORM SCHOOL IMPROVEMENT EFFORTS IN EVEN-NUMBERED YEARS, ALL HSTW AND TCTW SITES PARTICIPATE IN THE HSTW ASSESSMENT, WHICH INCLUDE SUBJECT TESTS IN READING, MATHEMATICS AND SCIENCE, AND A STUDENT AND TEACHER SURVEY PARTICIPATING SITES RECEIVE A COMPREHENSIVE SCHOOL-LEVEL REPORT THAT DISAGGREGATES STUDENT ACHIEVEMENT BY THEIR PERCEPTIONS OF SCHOOL AND CLASSROOM PRACTICES IN FY2013-14 OVER 26,000 TWELFTH-GRADE STUDENTS PARTICIPATED IN THE HSTW ASSESSMENT FROM 500 HIGH SCHOOLS IN 30 STATES ADDITIONALLY OVER 6,000 SENIORS QUALIFIED FOR AND RECEIVED THE HSTW AWARD OF EDUCATIONAL ACHIEVEMENT SREBS MIDDLE GRADES INITIATIVE, MAKING MIDDLE GRADES WORK (MMGW) UTILIZES AN ONLINE SURVEY FOR STUDENTS AND TEACHERS IN FY2013-14, OVER 32,000 EIGHTH-GRADE STUDENTS AND 5,000 TEACHERS FROM 250 SCHOOLS PARTICIPATED IN THE SURVEYS SCHOOLS RECEIVED SEPARATE REPORTS OF THEIR RESULTS FOR STUDENTS AND TEACHERS

(Code) (Expenses $ 18,708,395 including grants of $) (Revenue $ 20,140,401)

ADVANCED CAREERS ALABAMA 10,416 ADVANCED CAREERS ARKANSAS 23,269 ARKANSAS DEPT OF CAREER EDUCATION 41,000 ALTERNATIVE CERTIFICATION FOR CTE TEACHERS 75,884 ADVANCED CAREERS GENERAL 952,988 ADVANCED CAREERS KENTUCKY 40,746 ADVANCED CAREERS NEW JERSEY 63,537 ADVANCED CAREERS OHIO 226,047 SOUTH CAROLINA DEPARTMENT OF CAREER EDUCATION 64,377 ADVANCED CAREER - INCOME STREAM PRO DEVEL 19,018 SREB-AGEP DOCTORAL SCHOLARS PROGRAM 201,290 HUTCHISON HIGH SCHOOL, FAIRBANKS ALASKA 8,326 ALAMOGORDO PUBLIC SCHOOLS, NM 192,427 ALABAMA STATE DEPARTMENT OF EDUCATION 10,824 ATLANTA PUBLIC SCHOOLS CAREER TECHNICAL OFFIC 10,221 LITTLE ROCK SCHOOL DISTRICT 22,502 SOUTH CONWAY COUNTY SCHOOL DISTRICT 7,612 BALTIMORE CITY PUBLIC SCHOOL SYSTEM 1,114 BLADEN COUNTY SCHOOL DISTRICT, NORTH CAROLINA 48,726 BALDWIN COUNTY SCHOOLS OF ALABAMA 15,995 COUNCIL FOR COLLEGIATE NURSING 196,061 COMPACT FACULTY INSTITUTE 866,565 COMPACT FOR FACULTY DIVERSITY 285,842 MUNICIPAL SCHOOLS OF CLOVIS, NEW MEXICO 53,288 CLEVELAND METROPOLITAN SCHOOL DISTRICT, OHIO (7)LDC/MDC OPEN-INVITATION CONFERENCE 194,009 COVINGTON INDEPENDENT PUBLIC SCHOOLS, KY 1,150 CONTRACTED PROFESSIONAL DEVELOPMENT SERVICES 179,902 DIRECT2DEGREE KENTUCKY 20,172 DOUGLAS COUNTY SCHOOLS GA 5,892 DEKALB COUNTY SCHOOL REFORM 22,585 DOVER HIGH SCHOOL 13,280 DAWSON EDUCATION SERVICE COOPERATIVE, AR 12,463 DALTON PUBLIC SCHOOLS GA 76,048 DISTANCE LEARNING POLICY LABORATORY 25,058 DOTHAN CITY SCHOOLS, ALABAMA 162,495 DOCTORAL SCHOLARS PROFESSIONAL DEV 40,664 EDUCATOR EFFECTIVNESS GATES 196,465 ENGLEWOOD PUBLIC SCHOOL DISTRICT (8)FULTON COUNTY SCHOOL DISTRICT SMALL LEARNING 54,341 FLORIDA ATLANTIC UNIVERSITY 34,099 STATE OF FLORIDA DEPARTMENT OF EDUCATION 261,424 HILLSBOROUGH COUNTY PUBLIC SCHOOLS, FLORIDA 20,687 ORANGE COUNTY PUBLIC SCHOOLS, FLORIDA 1,685 FLORIDA DEPARTMENT OF EDUCATION 50,948 GREENE COUNTY SCHOOL GA 92,315 GWINNETT COUNTY SCHOOLS, GA 400,592 GO ALLIANCE 129,680 COLLABORATIVE COUNSELOR TRAINING INITIATIVE 147,498 GATES STRATEGY BUSINESS PLANNING 988,539 HENRY COUNTY SCHOOL DISTRICT, GEORGIA 68,817 STATE OF PENNSYLVANIA 29,683 HSTW SPECIAL PUBLICATION GRANT 8,213 CHICAGO PUBLIC SCHOOL SIG GRANT 155,085 IT TECHNOLOGY FUND 6,336 JEFFERSON COUNTY PUBLIC SCHOOKS, KENTUCKY 218,698 KENTUCKY DEPTARTMENT OF EDUCATION 229,568 HENDERSON COUNTY, KY SCHOOL DISTRICT 20,262 KENTUCKY MIDDLE GRADES 207,394 KENTUCKY VOC TECH STUDY 82,390 LOUISIANA HIGH SCHOOL REDESIGN INITIATIVE 37,164 LOUISIANA VOC TECH 53,434 LOWNDES COUNTY ALABAMA 123,304 LEXINGTON CITY SCHOOL DISTRICT, NC 8,005 LUMINA FOUNDATION - BREAKING THROUGH 184,335 LEADERSHIP MEMPHIS RESIDENCY MENTOR PRINCIPAL 11,398 LEADERSHIP STATE INITIATIVES 123,570 LUMINA FOUNDATION FOR EDUCATION 128,967 THE SPRINGFIELD PUBLIC SCHOOLS 333,896 MERIWETHER COUNTY PUBLIC SCHOOLS GA 132,584 MUSCOGEE COUNTY SCHOOLS, GEORGIA 226,628 PRINCE GEORGE COUNTY PUBLIC SCHOOLS 67,689 DOCTORAL SCHOLARS PROGRAM 16,676 MEMPHIS CITY SCHOOLS, TENNESSEE 159,319 MIDDLE GRADES CONSORTIUM 102,249 BD OF SCH COMMISSIONERS OF MOBILE COUNTY, AL 210,311 MISSISSIPPI CONTRACTED SITES 43,796 NATIONAL BOARD FOR PROFESSIONAL TEACHING STAN 65,980 CHARLOTTE-MECKLENBURG BOARD OF EDUCATION, NC 41,528 HOKE COUNTY SCHOOLS, NC 54,072 TURTLE MOUNTAIN HIGH SCHOOL ND 32,212 NORTH EAST FLORIDA CONSORTIUM OF SCHOOLS 207,535 CAPE MAY TECHNICAL HIGH SCHOOL, NEW JERSEY 934 NEW JERSEY CAREER & TECHNICAL EDUCATION 36,038 NEW JERSEY EAST ORANGE SCHOOL DISTRICT 65,380 ALBUQUERQUE PUBLIC SCHOOLS, NEW MEXICO 48,751 NEW MEXICO COOPERATIVE EDUCATIONAL SERVICES 24,241 NEW MEXICO PUBLIC EDUCATION DEPARTMENT 692,226 NATIONAL ONLINE TEACHER OF THE YEAR 4,332 NEW ORLEANS URBAN INITATIVE 75,483 LUMINA FOR EDUCATION NATIONAL STATE AUTHORIZA 161,652 NATIONAL-STAFF DEVEL PROJECT 140,553 NURSING SPECIAL INITIATIVE 1,000 NEW YORK CITY SMALL LEARNING COMMUNITIES 435,315 GREAT OAKS CAREER CENTERS 9,443 WHITEHALL SCHOOL DISTRICT, OHIO 63,079 PAULDING COUNTY SCHOOLS, GA 89,598 PULASKI HEIGHTS MIDDLE GRADES, LITTLE ROCK AR 18,046 POLK COUNTY SCHOOLS, ARKANSAS 35,632 PASSAIC PUBLIC SCHOOLS, PASSAIC, NJ 62,955 QUITMAN COUNTY SCHOOL DISTRICT 49,594 RICHLAND COUNTY SCHOOL DISTRICT ONE, SC 184,033 ROBESON COUNTY PUBLIC SCHOOLS, NC 224,880 RANDOLPH COUNTY SCHOOLS, GA 158,411 SHARABLE CONTENT OBJECT REPOSITORIES FOR ED 17,003 SOUTH CAROLINA PREPARATION FOR TOMORROW 3 14,292 STEWART COUNTY SCHOOL DISTRICT LUMPKIN GA 27,066 SOUTH CAROLINA DEPARTMENT OF EDUCATION 4,783 STATE EDUCA-TECH CO-OPERATIVE 226,379 TECHNOLOGY CENTERS THAT WORK 611,671 TECHNOLOGY CENTERS ALABAMA 3,472 STATE OF PENNSYLVANIA 301,730 TENNESSEE FIRST TO THE TOP SCHOOLS 235,330 METROPOLITAN GOVERNMENT OF NASHVILLE 309,276 DALEWOOD MIDDLE SCHOOL 82,346 TRENTON PUBLIC SCHOOL SYSTEM 28,750 TEXAS TITLE I PRIORITY SCHOOLS 208,917 TEXAS ENHANCED NETWORK 132,070 TEXAS EDUCATION AGENCY 179,603 U S DEPARTMENT OF EDUCATION FLORIDA 600,058 VIRGINIA PROJECT BASED LEARNING 24,277 VOCATIONAL EDUCATION CONSORTIUM 211,996 VOC ED SUMMER CONFERENCE PROJ 920,039 WASHINGTON STATE DEPARTMENT OF EDUCATION 111,967 WV HIGH SCHOOLS, TECH CENTERS & ADVANCED CAR 301,108 WEST VIRGINIA CENTER FOR PROFESSIONAL DEVELOP 22,119 WV LITERACY/MATH DESIGN COLLABORATIVE 99,559 GENERAL PROGRAM FUND 1,491,859TOTAL PROGRAM EXPENSES 18,708,395

4d Other program services (Describe in Schedule O)

(Expenses $ 18,708,395 including grants of $) (Revenue $ 20,140,401)

4e **Total program service expenses ▶** 25,073,728

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*	1	Yes	
2	Is the organization required to complete *Schedule B, Schedule of Contributors* (see instructions)?	2		No
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		No
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		No
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		No
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		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		No
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		No
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	Yes	
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.*	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII*	11b		No
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*	11c		No
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*	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional*	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Parts I and IV*	14b		No
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		No
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		No
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		No
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		No
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		No
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Part IV Checklist of Required Schedules *(continued)*

21	Did the organization report more than $5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21		No
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		No
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	Yes	
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		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3) and 501(c)(4) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		No
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		No
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		No
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		No
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? *If "Yes," complete Schedule L, Part IV*	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b	Yes	
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? *If "Yes," complete Schedule L, Part IV*	28c		No
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		No
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		No
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		No
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		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
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)? *If "Yes," complete Schedule R, Part V, line 2*	35b		
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		No
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	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V . . . . ☐

					Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable . .	**1a**	339			
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**	145			
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**	Yes	
3a	Did the organization have unrelated business gross income of $1,000 or more during the year? . . .			**3a**		No
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**		No
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**		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			**5b**		No
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**		No
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**		No
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**		No
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**		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . .			**7f**		No
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**		
9	**Sponsoring organizations maintaining donor advised funds.**					
a	Did the organization make any taxable distributions under section 4966?			**9a**		
b	Did the organization make a distribution to a donor, donor advisor, or related person?			**9b**		
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**		No
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 lines 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 . . . ☑

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	79		
	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	79		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? . . .	2			No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3			No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? . . .	4			No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5			No
6	Did the organization have members or stockholders? . . .	6		Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? . . .	7a		Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? . . .	7b			No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
a	The governing body? . . .	8a		Yes	
b	Each committee with authority to act on behalf of the governing body? . . .	8b		Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O* . . .	9			No

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? . . .	10a		No
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	Yes	
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	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . . .	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this was done* . . .	12c	Yes	
13	Did the organization have a written whistleblower policy? . . .	13	Yes	
14	Did the organization have a written document retention and destruction policy? . . .	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official . . .	15a	Yes	
b	Other officers or key employees of the organization . . .	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? . . .	16a		No
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? . . .	16b		

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed ▶GA

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection Indicate how you made these available Check all that apply

☐ Own website ☐ Another's website ☑ 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

▶BARBARA CHANNELL 592 TENTH STREET NW
ATLANTA, GA 30318 (404) 875-9211

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

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee) Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(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

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: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(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

		(D)	(E)	(F)
1b	**Sub-Total** . . . . ▶			
c	**Total from continuation sheets to Part VII, Section A** . . . . ▶			
d	**Total (add lines 1b and 1c)** . . . . ▶	1,874,699	0	286,518

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 ▶13

			Yes	No
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*	**3**		No
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*	**4**	Yes	
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*	**5**		No

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
EDUCATION FIRST CONSULTING PO BOX 22871 SEATTLE WA 981220871	CONSULTING	201,850
UNIVERSITY OF VIRGINIA CURRY SCHOOL OF EDUCATION CHARLOTTESVILLE VA 229044260	CONSULTING	184,997
LESLIE TEXAS CONSULTING 2430 TRADITION CIRCLE LOUISVILLE KY 40245	CONSULTING	136,650
JDK ASSOCIATES PO BOX 48 PYLESVILLE MD 21132	CONSULTING	122,500
DAVE LEAVITT 8 BRINKER CIRCLE GLENMONT NY 12077	CONSULTING	119,500

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 ▶9

Part VIII Statement of Revenue

Check 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	19,219				
	g	Noncash contributions included in lines 1a-1f $						
	h	**Total.** Add lines 1a-1f . . . . ▶			19,219			
Program Service Revenue			Business Code					
	2a	CONTRACT REVENUE	900099		20,292,129	20,292,129		
	b	APPROPRIATIONS BY STATES	900099		2,969,769	2,969,769		
	c	REGISTRATION FEES	900099		1,680,675	1,680,675		
	d	ASSESSMENTS	900099		1,074,496	1,074,496		
	e	MEMBERSHIP DUES	900099		836,101	836,101		
	f	All other program service revenue			17,785	17,785		
	g	**Total.** Add lines 2a–2f . . . . ▶			26,870,955			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts) . . . . ▶			149,020			149,020
	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) . . . . ▶						
			(i) Securities	(ii) Other				
	7a	Gross amount from sales of assets other than inventory						
	b	Less cost or other basis and sales expenses						
	c	Gain or (loss)						
	d	Net gain or (loss) . . . . ▶						
	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 . . . . . ▶			27,039,194	26,870,955	0	149,020

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				
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	1,453,243	723,248	729,995	
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	8,129,388	7,737,903	391,485	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	689,394	657,901	31,493	
9 Other employee benefits	492,778	444,348	48,430	
10 Payroll taxes	697,084	621,557	75,527	
11 Fees for services (non-employees)				
a Management				
b Legal	39,037	39,037		
c Accounting	49,118	49,118		
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees	47,049		47,049	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	7,833,248	7,601,639	231,609	
12 Advertising and promotion				
13 Office expenses	523,708	440,739	82,969	
14 Information technology	358,421	217,555	140,866	
15 Royalties . .				
16 Occupancy	334,646	139,104	195,542	
17 Travel	2,405,142	2,131,310	273,832	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	3,181,689	3,181,689		
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	105,048		105,048	
23 Insurance	79,989	79,989		
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 OTHER ADMIN EXPENSES	73,065		73,065	
b DUES AND SUBSCRIPTIONS	62,623	62,623		
c TUITION/STAFF DEVELOPME	30,990	30,990		
d F&E EXPENSE FOR PROGRAM	7,672	7,672		
e All other expenses		907,306	-907,306	
25 **Total functional expenses.** Add lines 1 through 24e	26,593,332	25,073,728	1,519,604	0
26 **Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X . . . . ☐

				(A) Beginning of year		(B) End of year
Assets	1	Cash–non-interest-bearing		3,187,383	1	3,725,345
	2	Savings and temporary cash investments		16,883,725	2	18,540,246
	3	Pledges and grants receivable, net		1,730,571	3	2,609,086
	4	Accounts receivable, net		182,381	4	966
	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		661,397	9	667,882
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 3,166,425			
	b	Less accumulated depreciation	10b 2,079,652	1,127,951	10c	1,086,773
	11	Investments—publicly traded securities		15,770,931	11	14,203,531
	12	Investments—other securities See Part IV, line 11			12	
	13	Investments—program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11			15	
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		39,544,339	16	40,833,829
Liabilities	17	Accounts payable and accrued expenses		2,389,435	17	3,243,863
	18	Grants payable		2,756,534	18	2,529,669
	19	Deferred revenue		4,491,774	19	4,670,400
	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		9,637,743	26	10,443,932
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**				
	27	Unrestricted net assets		6,948,193	27	7,026,434
	28	Temporarily restricted net assets		22,937,403	28	23,342,463
	29	Permanently restricted net assets		21,000	29	21,000
		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	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		29,906,596	33	30,389,897
	34	Total liabilities and net assets/fund balances		39,544,339	34	40,833,829

Part XI **Reconcilliation 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	27,039,194
2	Total expenses (must equal Part IX, column (A), line 25)	2	26,593,332
3	Revenue less expenses Subtract line 2 from line 1	3	445,862
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	29,906,596
5	Net unrealized gains (losses) on investments	5	37,439
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	0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	30,389,897

Part XII **Financial Statements and Reporting**

Check if Schedule O contains a response or note to any line in this Part XII . . . . ☐

			Yes	No
1	Accounting method used to prepare the Form 990 ☐ 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?	2a		No
	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?	2b	Yes	
	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?	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b	Yes	

Additional Data

Software ID:
Software Version:
EIN: 58-0566141
Name: BOARD OF CONTROL FOR SOUTHERN REGIONAL EDUCATION

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(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) Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(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
ALAN BAKER BOARD MEMBER	2 00	X						0	0	0
ALVIN WILLIAMSON BOARD MEMBER	2 00	X						0	0	0
BETH GORIN COX BOARD MEMBER	2 00	X						0	0	0
TOMMY BICE BOARD MEMBER	2 00	X						0	0	0
CAROLINE NOVAK BOARD MEMBER	2 00	X						0	0	0
CHARLES L HARRISON BOARD MEMBER	2 00	X						0	0	0
CHRIS SAXMAN BOARD MEMBER	2 00	X						0	0	0
DAN FOREST BOARD MEMBER	2 00	X						0	0	0
RANDY WILLISON BOARD MEMBER	2 00	X						0	0	0
DANIEL BRANCH BOARD MEMBER	2 00	X						0	0	0
DAVID P SOKOLA BOARD MEMBER	2 00	X						0	0	0
DERRICK GRAHAM BOARD MEMBER	2 00	X						0	0	0
EARL RAY TOMBLIN BOARD MEMBER	2 00	X						0	0	0
ERIK FRESEN BOARD MEMBER	2 00	X						0	0	0
DARRYL M SCOTT BOARD MEMBER	2 00	X						0	0	0
FRANCIS C THOMPSON BOARD MEMBER	2 00	X						0	0	0
GLENDA SCALES BOARD MEMBER	2 00	X						0	0	0
HANK M BOUNDS BOARD MEMBER	2 00	X						0	0	0
HENRY M HUCKABY BOARD MEMBER	2 00	X						0	0	0
HERMAN STRICKLAND BOARD MEMBER	2 00	X						0	0	0
HOWARD N LEE BOARD MEMBER	2 00	X						0	0	0
JACK MARKELL BOARD MEMBER	2 00	X						0	0	0
JACKIE KINNEY BOARD MEMBER	2 00	X						0	0	0
MARY ANN BLANKENSHIP BOARD MEMBER	2 00	X						0	0	0
CATHERINE M SHULTZ BOARD MEMBER	2 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(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
JOE H PICKENS VICE CHAIR	2 00	X		X				0	0	0
JOHN C WHITE BOARD MEMBER	2 00	X						0	0	0
JOHN LEGG BOARD MEMBER	2 00	X						0	0	0
JOHNNIE ROEBUCK BOARD MEMBER	2 00	X						0	0	0
JOSEPH U MEYER BOARD MEMBER	2 00	X						0	0	0
JOYCE ELLIOTT BOARD MEMBER	2 00	X						0	0	0
KARA GAE NEAL BOARD MEMBER	2 00	X						0	0	0
KRISSY DEALEJANDRO BOARD MEMBER	2 00	X						0	0	0
LILLIAN LOWERY BOARD MEMBER	2 00	X						0	0	0
LINDA P JOHNSON BOARD MEMBER	2 00	X						0	0	0
DR ADENIYI OJUTIKU BOARD MEMBER	2 00	X						0	0	0
MARK MURPHY BOARD MEMBER	2 00	X						0	0	0
MARTIN O'MALLEY BOARD MEMBER	2 00	X						0	0	0
BILL HASLAM BOARD MEMBER	2 00	X						0	0	0
MARY FALLIN BOARD MEMBER	2 00	X						0	0	0
MATT ARTHUR BOARD MEMBER	2 00	X						0	0	0
MELANIE BARTON BOARD MEMBER	2 00	X						0	0	0
MICHAEL WILLIAMS BOARD MEMBER	2 00	X						0	0	0
MIKE BEEBE BOARD MEMBER	2 00	X						0	0	0
MITCHELL ZAIS BOARD MEMBER	2 00	X						0	0	0
NANCY C DETERT BOARD MEMBER	2 00	X						0	0	0
NATHAN DEAL BOARD MEMBER	2 00	X						0	0	0
NIKKI G SETZLER BOARD MEMBER	2 00	X						0	0	0
NIKKI HALEY BOARD MEMBER	2 00	X						0	0	0
NORMAN H CONWAY BOARD MEMBER	2 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(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
PAT MCCRORY BOARD MEMBER	2 00	X						0	0	0
PAUL HILL BOARD MEMBER	2 00	X						0	0	0
PHIL BRYANT BOARD MEMBER	2 00	X						0	0	0
PHILLIP D OWENS BOARD MEMBER	2 00	X						0	0	0
RICK PERRY BOARD MEMBER	2 00	X						0	0	0
RICK SCOTT BOARD MEMBER	2 00	X						0	0	0
ROB EISSLER BOARD MEMBER	2 00	X						0	0	0
ROBERT BENTLEY BOARD MEMBER	2 00	X						0	0	0
HARRY RAY BROOKS BOARD MEMBER	2 00	X						0	0	0
ROBERT H PLYMALE TREASURER	2 00	X		X				0	0	0
ROBERT SOMMERS BOARD MEMBER	2 00	X						0	0	0
ROBERT W RESCIGNO BOARD MEMBER	2 00	X						0	0	0
ROMAN W PREZIOSO JR BOARD MEMBER	2 00	X						0	0	0
SANDRA WOODLEY BOARD MEMBER	2 00	X						0	0	0
STEVE BESHEAR CHAIR	2 00	X		X				0	0	0
SUSAN PADDACK BOARD MEMBER	2 00	X						0	0	0
TERRY BURTON BOARD MEMBER	2 00	X						0	0	0
TERRY ENGLAND BOARD MEMBER	2 00	X						0	0	0
JIMMIE DON AYCOCK BOARD MEMBER	2 00	X						0	0	0
THOMAS W CAMPBELL BOARD MEMBER	2 00	X						0	0	0
TERRY MCAULIFFE BOARD MEMBER	2 00	X						0	0	0
VIDET CARMICHAEL BOARD MEMBER	2 00	X						0	0	0
JANET D HOWELL BOARD MEMBER	2 00	X						0	0	0
WAYNE D ANDREWS BOARD MEMBER	2 00	X						0	0	0
WILLIAM E KIRWAN BOARD MEMBER	2 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(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) Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(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
YVONNE WOOD BOARD MEMBER	2 00	X						0	0	0
BOBBY JINDAL BOARD MEMBER	2 00	X						0	0	0
JACK HILL BOARD MEMBER	2 00	X						0	0	0
GLEN JOHNSON BOARD MEMBER	2 00	X						0	0	0
DAVID SPENCE PRESIDENT	36 30			X				229,661	0	32,629
JAMES E BOTTOMS SENIOR VICE PRESIDENT	36 30			X				186,278	0	29,084
ANDY BAXTER VP-EDUCATOR EFFECT	36 30			X				142,817	0	28,089
JOAN LORD VP-EDUCATION POLICY	36 30			X				140,219	0	15,148
CHERYL BLANCO VP SPECIAL PROJECTS	36 30			X				120,000	0	11,400
GALE GAINES VP - STATE SERVICES	36 30			X				118,448	0	14,019
EULA AIKEN DIRECTOR - CCN	36 30			X				108,816	0	16,685
TRICIA AVERY HR DIRECTOR	36 30			X				100,814	0	22,972
BARBARA CHANNELL CFO	36 30			X				98,974	0	14,480
ROBERT SCOTT WARREN DIR-STATE INITIATIVES	36 30					X		140,138	0	15,114
STEVE BROOME DIR-STATE DEVELOPMENT	36 30					X		135,698	0	35,780
WENDY GONZALES SCHOOL IMPROVEMENT CONSULTANT	36 30					X		125,774	0	13,446
KATHY O'NEILL DIR-SPECIAL LEAD PROJECTS	36 30					X		120,819	0	13,207
ANSLEY A ABRAHAM JR DIRECTOR, SREB-STATE DOCTORAL SCHOLARS PROGRAM	36 30					X		106,243	0	24,465

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493307001324

SCHEDULE A
(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.
▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
BOARD OF CONTROL FOR SOUTHERN REGIONAL EDUCATION

Employer identification number
58-0566141

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?

		Yes	No
(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?	**11g(i)**		
(ii) A family member of a person described in (i) above?	**11g(ii)**		
(iii) A 35% controlled entity of a person described in (i) or (ii) above?	**11g(iii)**		

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? Yes	No	**(v)** Did you notify the organization in col **(i)** of your support? Yes	No	**(vi)** Is the organization in col **(i)** organized in the U S ? Yes	No	**(vii)** Amount of monetary support
Total									

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	(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 501(c)(3) organization, check this box and **stop here** . . . . . . ▶☐

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 for 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 ▶☐

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 ▶☐

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 ▶☐

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 ▶☐

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 ▶☐

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 ")	6,714,820	4,172,591	5,350,471	4,100,491	4,899,585	25,237,958
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	16,555,560	16,783,611	20,470,103	19,621,870	21,990,589	95,421,733
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						
6	**Total.** Add lines 1 through 5	23,270,380	20,956,202	25,820,574	23,722,361	26,890,174	120,659,691
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						0
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	5,650,011	6,142,646	7,019,176	7,732,132	10,717,000	37,260,965
c	Add lines 7a and 7b	5,650,011	6,142,646	7,019,176	7,732,132	10,717,000	37,260,965
8	**Public support** (Subtract line 7c from line 6)						83,398,726

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	23,270,380	20,956,202	25,820,574	23,722,361	26,890,174	120,659,691
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	194,677	186,802	148,405	128,577	149,020	807,481
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c	Add lines 10a and 10b	194,677	186,802	148,405	128,577	149,020	807,481
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)	23,465,057	21,143,004	25,968,979	23,850,938	27,039,194	121,467,172

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here** ▶☐

Section C. Computation of Public Support Percentage

15	Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f))	15	68 660 %
16	Public support percentage from 2012 Schedule A, Part III, line 15	16	71 320 %

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2013** (line 10c, column (f) divided by line 13, column (f))	17	0 660 %
18	Investment income percentage from **2012** Schedule A, Part III, line 17	18	1 000 %

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).

Facts And Circumstances Test

Return Reference	Explanation

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93493307001324

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. ▶ See separate instructions. ▶ 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	Employer identification number
BOARD OF CONTROL FOR SOUTHERN REGIONAL EDUCATION	58-0566141

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? ☐ Yes ☐ 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? ☐ Yes ☐ 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)

☐ Preservation of land for public use (e g , recreation or education)
☐ Preservation of an historically important land area
☐ Protection of natural habitat
☐ Preservation of a certified historic structure
☐ 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 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)*

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
d ☐ Loan or exchange programs
b ☐ Scholarly research
e ☐ Other
c ☐ Preservation for future generations

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? ☐ Yes ☐ No

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

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

		(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a	Beginning of year balance	25,080	25,006	24,933	24,534	24,534
b	Contributions					
c	Net investment earnings, gains, and losses	19	74	73	399	0
d	Grants or scholarships					
e	Other expenditures for facilities and programs					
f	Administrative expenses					
g	End of year balance	25,099	25,080	25,006	24,933	24,534

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

a Board designated or quasi-endowment ▶ 16 270 %

b Permanent endowment ▶ 83 730 %

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

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

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		1,625,000	910,000	715,000
c Leasehold improvements		861,237	550,656	310,581
d Equipment		680,188	618,996	61,192
e Other				
Total. Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* ▶				1,086,773

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		
Other		
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
Total. *(Column (b) must equal Form 990, Part X, col (B) line 13)* ▶		

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
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
Federal income taxes	
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	27,029,584
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains on investments	2a	37,439		
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	37,439
3	Subtract line **2e** from line **1**			3	26,992,145
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	47,049		
b	Other (Describe in Part XIII)	4b			
c	Add lines **4a** and **4b**			4c	47,049
5	Total revenue Add lines **3** and **4c.** (This must equal Form 990, Part I, line 12)			5	27,039,194

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	26,546,283
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	0
3	Subtract line **2e** from line **1**			3	26,546,283
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	47,049		
b	Other (Describe in Part XIII)	4b			
c	Add lines **4a** and **4b**			4c	47,049
5	Total expenses Add lines **3** and **4c.** (This must equal Form 990, Part I, line 18)			5	26,593,332

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

Return Reference	Explanation
PART V, LINE 4	THE INCOME EARNED FROM THE ENDOWMENT FUNDS ARE USED TO AWARD OUTSTANDING EDUCATORS IN THE SREB MEMBER STATES

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

Schedule J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 23.
▶ Attach to Form 990. ▶ See separate instructions.
▶ Information about Schedule J (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
BOARD OF CONTROL FOR SOUTHERN REGIONAL EDUCATION

Employer identification number
58-0566141

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropiate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items ☐ First-class or charter travel ☐ Housing allowance or residence for personal use ☐ Travel for companions ☐ Payments for business use of personal residence ☐ Tax idemnification and gross-up payments ☐ Health or social club dues or initiation fees ☐ Discretionary spending account ☐ Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	**1b**		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	**2**		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III ☐ Compensation committee ☑ Written employment contract ☐ Independent compensation consultant ☑ Compensation survey or study ☑ Form 990 of other organizations ☑ Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
a	Receive a severance payment or change-of-control payment?	**4a**		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	**4b**		No
c	Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III	**4c**		No
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
a	The organization?	**5a**		No
b	Any related organization? If "Yes," to line 5a or 5b, describe in Part III	**5b**		No
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
a	The organization?	**6a**		No
b	Any related organization? If "Yes," to line 6a or 6b, describe in Part III	**6b**		No
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	**7**		No
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	**8**		No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	**9**		

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1)DAVID SPENCE PRESIDENT	(i)	229,661	0	0	21,900	10,729	262,290	116,700
	(ii)	0	0	0	0	0	0	0
(2)JAMES E BOTTOMS SENIOR VICE PRESIDENT	(i)	186,278	0	0	18,340	10,744	215,362	96,836
	(ii)	0	0	0	0	0	0	0
(3)ANDY BAXTER VP-EDUCATOR EFFECT	(i)	142,817	0	0	14,400	13,689	170,906	75,000
	(ii)	0	0	0	0	0	0	0
(4)JOAN LORD VP-EDUCATION POLICY	(i)	140,219	0	0	13,300	1,848	155,367	69,500
	(ii)	0	0	0	0	0	0	0
(5)ROBERT SCOTT WARREN DIR-STATE INITIATIVES	(i)	140,138	0	0	13,367	1,747	155,252	70,834
	(ii)	0	0	0	0	0	0	0
(6)STEVE BROOME DIR-STATE DEVELOPMENT	(i)	135,698	0	0	13,567	22,213	171,478	73,334
	(ii)	0	0	0	0	0	0	0

Part III Supplemental Information

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

Return Reference	Explanation

Schedule L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions with Interested Persons

▶ Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.
▶Information about Schedule L (Form 990 or 990-EZ) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047
2013

Open to Public Inspection

Name of the organization
BOARD OF CONTROL FOR SOUTHERN REGIONAL EDUCATION

Employer identification number
58-0566141

Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

1 (a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected? Yes	No

2 Enter the amount of tax incurred by organization managers or disqualified persons during the year under section 4958 . . . . ▶ $

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization . . . . ▶ $

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization? To	From	(e) Original principal amount	(f) Balance due	(g) In default? Yes	No	(h) Approved by board or committee? Yes	No	(i) Written agreement? Yes	No
Total		▶ $										

Part III Grants or Assistance Benefitting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	**(b)** Relationship between interested person and the organization	**(c)** Amount of transaction	**(d)** Description of transaction	**(e)** Sharing of organization's revenues?	
				Yes	**No**
(1) BETSEY D AVERY	OFFICER'S CHILD	31,756	PART-TIME WAGES		No

Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions)

Return Reference	**Explanation**

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Name of the organization
BOARD OF CONTROL FOR SOUTHERN REGIONAL EDUCATION

Employer identification number
58-0566141

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 1	
FORM 990, PART VI, SECTION A, LINE 6	THE BOARD OF CONTROL FOR SOUTHERN REGIONAL EDUCATION WAS CREATED IN 1948 AS AN INTERSTATE COMPACT COMPRISED OF MEMBER STATES CURRENTLY THERE ARE SIXTEEN STATES WHOSE GOVERNORS SER VE AS MEMBERS OF THE GOVERNING BOARD EACH GOVERNOR APPOINTS FOUR ADDITIONAL MEMBERS OF TH E GOVERNING BOARD ALL BOARD MEMBERS HAVE EQUAL VOTING RIGHTS
FORM 990, PART VI, SECTION A, LINE 7A	GOVERNORS OF EACH MEMBER STATE APPOINT FOUR MEMBERS OF THE GOVERNING BOARD THE GOVERNORS AND THEIR APPOINTEES HAVE EQUAL VOTING RIGHTS
FORM 990, PART VI, SECTION B, LINE 11	THE CFO REVIEWS THE FORM 990-- ANY ISSUES ARE DISCUSSED AND RESOLVED WITH APPROPRIATE PERS ONNEL ONCE ALL ISSUES ARE RESOLVED, A COPY OF THE 990 IS PROVIDED TO THE EXECUTIVE COMMIT TEE WHO ARE EMPOWERED TO ACT ON BEHALF OF THE ENTIRE BOARD THE EXECUTIVE COMMITTEE MAY DI RECT ANY QUESTIONS/ISSUES TO THE PRESIDENT/CFO FOR RESOLUTION ONCE THE EXECUTIVE COMMITTE E APPROVES THE 990, A COPY OF THE FINAL TAX FORM IS SENT TO ALL BOARD MEMBERS BEFORE IT IS FILED
FORM 990, PART VI, SECTION B, LINE 12C	OFFICERS, DIRECTORS AND KEY EMPLOYEES ARE PROVIDED COPIES OF THE CONFLICT OF INTEREST POLI CY AND A DISCLOSURE QUESTIONNAIRE WHICH THEY COMPLETE AND SIGN, INDICATING THAT THEY HAVE READ AND UNDERSTAND THE POLICY AND THAT THEIR ANSWERS ARE COMPLETE AND ACCURATE QUESTIONN AIRES ARE COMPLETED AND SUBMITTED ANNUALLY, HOWEVER, SREB REQUIRES DISCLOSURE OF POTENTIAL CONFLICTS OF INTEREST ON A CONTINUOUS BASIS THE BOARD/EXECUTIVE COMMITTEE DECIDES IF A C ONFLICT OF INTEREST EXISTS AND, IF SO, APPOINTS A DISINTERESTED PERSON/COMMITTEE TO INVEST IGATE ALTERNATIVES THE BOARD DETERMINES APPROPRIATE DISCIPLINARY/CORRECTIVE ACTION FOR AN Y VIOLATIONS OF THE POLICY A WHISTLEBLOWER POLICY PROVIDES A MECHANISM FOR REPORTING OF A NY SUSPECTED VIOLATIONS
FORM 990, PART VI, SECTION B, LINE 15	THE BOARD OF DIRECTORS DETERMINES THE COMPENSATION OF THE PRESIDENT THE EXECUTIVE COMMITT EE, ACTING ON BEHALF OF THE BOARD, REVIEWS COMPENSATION BENCHMARKING ANALYSES (INCLUDING G OVERNMENT, EDUCATION TESTING, COMPETITIVE NONPROFITS AND OTHER LIKE ORGANIZATIONS) FOR SIM ILAR POSITIONS AND MAKES RECOMMENDATIONS AS APPROPRIATE, ENSURING THEY ARE WELL JUSTIFIED, REASONABLE AND DOCUMENTED THE PRESIDENT HAS NOT RECEIVED A PAY RAISE SINCE 2005 COMPENS ATION FOR EXECUTIVE STAFF/KEY EMPLOYEES IS DETERMINED BY THE EXECUTIVE COMMITTEE BASED ON AN ANNUAL PERFORMANCE REVIEW AND RECOMMENDATIONS BY THE PRESIDENT, INCLUDING ATTAINMENT OF PERFORMANCE GOALS AND EXPECTATIONS LAST DATE OF PAY RAISES ARE SENIOR VP (2008), VP FOR SPECIAL PROJECTS (2008), VP FOR EDUCATIONAL POLICIES (2007), ASSISTANT TREASURER (2008), EXECUTIVE DIRECTOR-COUNCIL FOR COLLEGIATE NURSING (2008) IN THE FOLLOWING CASES, PAY INCR EASES WERE THE RESULT OF INCREASED JOB RESPONSIBILITIES OR PROMOTION CFO (2012), VP FOR S TATE SERVICES (2012), DIRECTOR OF HUMAN RESOURCES (2012)
FORM 990, PART VI, SECTION C, LINE 19	DOCUMENTS ARE AVAILABLE ON AN AS REQUESTED BASIS
FORM 990, PART IX, LINE 11G	CONTRACTED SERVICES PROGRAM SERVICE EXPENSES 7,601,639 MANAGEMENT AND GENERAL EXPENSES 2 31,609 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 7,833,248