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DLN: 93493128017365

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 <u>www.IRS.gov/form990</u>

OMB No 1545-0047

2013

Open to Public Inspection

		2013 cal applicable	C Name of organization	907-01-2013 , 2013, and ending 06-	30-2014	D Emplo	yer iden	tification number
	dress ch		HILLSBOROUGH EDUCATION FOUND	ATION INC		59-28	883361	
— Na	me cha	ange	Doing Business As					
Init	ial retu	ım		all is not delivered to street address) Room/s	suite	E Telepho	one numb	per
Ter	mınate	ed	2306 N HOWARD AVENUE No 212			(813)	574-0	260
_ Am	ended	return	City or town, state or province, coun TAMPA, FL 33607	try, and ZIP or foreign postal code		(013)	3710	
App	olication	n pending	,			G Gross r	eceıpts \$	6,188,279
			F Name and address of prin Barnie Philip Jones Jr	cıpal officer	I	Is this a group	return	
			2306 N HOWARD AVENUE	No 212		subordinates?		Γ Yes Γ No
			TAMPA,FL 33607			Are all subordi	nates	┌ Yes ┌ No
I Ta	x-exen	npt status	✓ 501(c)(3)	nsert no)		ıncluded? If "No," attach	a list ((see instructions)
J W	ebsite	e: ► ww	w educationfoundation com		H(c)	Group exempt	ion num	nber ►
K For	n of or	manization	Corporation Trust Association	Other ►	1(-)	r of formation 19		State of legal domicile FL
	rt I	_	mary	T) Galery	2 100	r or roundation 13	00 11	otate of legal dofficile. TE
Governance	'	To engag	escribe the organization's missio ge business and community parti students	n or most significant activities ners in the support of Hillsborough Co	ounty Publ	ıc Schools and	the ac	ademic achievement
<u> </u>								
	2	Check th	nis box 🛏 if the organization dis	scontinued its operations or disposed	of more t	han 25% of its	net ass	sets
	3	Number	of voting members of the governi	ng body (Part VI, line 1a)			з	39
Activities &	I			of the governing body (Part VI, line 1			4	38
## #	5	Total nu	mber of individuals employed in c	calendar year 2013 (Part V, line 2a)			5	42
ą.	I		·	ecessary)			6	1,126
	I			art VIII, column (C), line 12			7a	0
	Ь	Net unre	lated business taxable income fr	om Form 990-T, line 34		Prior Year	7b	0 Current Year
	8	Contri	hutions and grants (Part VIII lir	ne 1h)		5,181,:	166	Current Year 5,523,595
ā	9			ne 2g)		5,181,188		0
Rayenue	10		tment income (Part VIII, column		118,0		108,103	
æ	11	Other	revenue (Part VIII, column (A),	lines 5, 6d, 8c, 9c, 10c, and 11e)		334,2	228	330,234
	12			(must equal Part VIII, column (A), lı		5,633,4	401	5,961,932
	13			IX, column (A), lines 1-3)		1,409,		1,346,641
	14			X, column (A), line 4)		, ,	0	0
ch.	15			e benefits (Part IX, column (A), lines		1 462 (272	1 622 210
Expenses	16a	5-10)		column (A), line 11e)		1,462,8	0	1,633,319
क ⊕	b		ndraising expenses (Part IX, column (D)		•			
Ð	17			ines 11a–11d, 11f–24e)	. —	3,328,	570	3,349,612
	18			st equal Part IX, column (A), line 25)		6,201,		6,329,572
	19		·	18 from line 12		-567,	_	-367,640
\$ 05 \$C 6.5					Begi	inning of Curre Year	nt	End of Year
Not Assets or Fand Balances	20	Total	assets (Part X, line 16)			18,529,	377	20,010,058
# B 8 B	21					10,439,		11,756,285
žĒ	22	Netas	sets or fund balances Subtract	line 21 from line 20		8,090,	118	8,253,773
Pai	rt II	Sign	ature Block					
my k	nowle	dge and		imined this return, including accompa iplete Declaration of preparer (other		er) is based on		
c:		**** Signa	** ature of officer			2015-03-21 Date		
Sign Here		[]	e Philip Jones Jr PRESIDENT					
			or print name and title					_
			Print/Type preparer's name Gam A Lazzara	Preparer's signature	Date	Check I if	PTIN	929
Paid	b	_	oam A Lazzara Firm's name ► Rivero Gordimer & Con	l npany PA		self-employed Firm's EIN F 5	P01342 9-304070	
	pare	∍r _		. ,				
Use	On	ly F	rım's address ► PO Box 172359			Phone no (813) 875-77	74

Tampa, FL 33602

May the IRS discuss this return with the preparer shown above? (see instructions) $\,$.

✓ Yes ☐ No

orm	n 990 (2013)	age 2
Par	Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III	<u>.</u> [~
1	Briefly describe the organization's mission	
	ngage business and community partners in the support of Hillsborough County Public Schools and the academic achievement of all ents	ıts
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?)
	If "Yes," describe these new services on Schedule O	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?)
	If "Yes," describe these changes on Schedule O	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.	
4a	(Code) (Expenses \$ 2,360,664 including grants of \$) (Revenue \$)	
	Teaching Tools for Hillsborough Schools provides critical school supplies year-round to economically disadvantaged students. The program allows teachers from I schools the opportunity to shop for free school supplies to distribute to their students in need. Teaching Tools serves 130 Title I schools and reaches more th 68,000 at-risk students annually. Since 2002, we have distributed more than \$14 million in free school supplies to our schools in Hillsborough County. The Teather Store is a real brick and mortar store stocked 100 percent through donations from individuals and local businesses, purchases with donated funds and partnerships with organizations.	nan
4b	(Code) (Expenses \$ 718,800 including grants of \$ 260,100) (Revenue \$)	
	Through School Enrichment Grants the Foundation provides funding for teachers with bright ways to enhance the learning environment and inspire their stude through innovation and excitement. Working with our corporate and community partners, the Foundation is able to provide over \$150,000 in classroom grants schools to help projects that go beyond the typical school budget for classroom enhancement. Sometimes, all a student really needs to succeed is someone to believe in them. Now in its 4th year, the AmeriCorps Graduation Pathways program is helping students in grades K-12 who are at risk of dropping out of school Hillsborough and Leto High Schools and 21 feeder elementary and middle schools. The Foundation's 20 dedicated AmeriCorps members mentor over 260 stude each week resulting in 35,500 service hours. They help them not only through encouragement and assistance with school work, but also through teaching invitesons of goal setting, personal values, fostering academic goals and exploring career path options. Last year, 86% of these students were promoted to the grade level and 100% of our mentored seniors graduated from high school.	s to 70 to ool in dents valuable
4c	(Code) (Expenses \$ 1,906,594 including grants of \$ 948,022) (Revenue \$)	
•	Success for so many high school students lies in scholarships to college. At the Hillsborough Education Foundation, it is our number one priority to help ensure students who are motivated and able to go to college have the financial resources to do so. Together with community partners and through events like our St for Education 5K Walk/Run, we were able to award scholarships to more than 375 students during the year ended June 30, 2014. The Foundation works in collaboration with the statewide Take Stock in Children program to offer scholarships to low income students between the 6th and 10th grades. These student receive a two-year community college, four-year state college or four-year university Florida prepaid scholarship. In this program, we also pair mentors with income 6th through 10th graders to help these students get the support, motivation and accountability they need to escape the cycle of poverty, graduate hig school and attend college on a scholarship. During 2013, the Foundation provided mentoring to 309 Take Stock in Children students. The Foundation also procash scholarships starting at \$1,000 to juniors and seniors who meet minimum requirements including GPA, income, community service and school involvements.	itrides its can low- gh ovides
	(Code) (Expenses \$ 510,309 including grants of \$ 49,487) (Revenue \$)	
	(Code) (Expenses \$ 510,309 including grants of \$ 49,487) (Revenue \$) We believe that the best teachers result in better student outcomes. It's been proven that Board Certified teaches foster achievement in the classroom. Nation Board Certified Teachers (NBCT) meet rigorous standards of excellence that far exceed the basic requirements of state teacher licensing. NBCT grants are an initiative launched by the Foundation in 2012 to provide \$500 matching grants to help teachers in achieving certification. The Foundation believes that outstart teachers and support staff should be recognized for their achievements. Each year we collaborate with the Hillsborough County Public School District for the all Excellence in Education Awards to recognize faculty and staff who consistently bring forth extraordinary efforts to make miracles happen for our students and schools. At this event, over 3,000 educators and members of the community honor the Teacher of the Year, the Ida S. Baker Diversity Educator of the Year and Instructional Support Employee of the Year. In 2013, the Foundation launched its Teaching Excellence Lecture Series designed to engage educators, administry parents and policy makers in leading-edge education trends and topics that impact the classroom. Now an on-going program, the Lecture Series will help teacher the classroom.	new nding innual and the rators,
	(Code) (Expenses \$ 225,246 including grants of \$ 89,032) (Revenue \$)	
	Half of the fastest growing occupations in Florida require some training beyond high school, but not a college degree. By supporting Hillsborough County's fou Career Centers and four Technical Education Centers, the Foundation is helping to prepare students to become the next generation of American workers. The Foundation provides financial assistance to help students focused on CTE training in an effort to help them graduate and cement better career opportunities behigh school. Career and technical scholarships and financial assistance through Project Success come from a triad of support by the Foundation, Hillsborough Countries and the business community.	e eyond
4d	Other program services (Describe in Schedule O) (Expenses \$ 735,555 including grants of \$ 138,519)(Revenue \$)	
<u>4</u> e	Total program service expenses by 5.721.613	

Part IV Checklist of Required Schedule
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			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)? $^{f g}$	2	Yes	
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? <i>If "Yes," complete Schedule C, Part II</i>	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^{\bullet}	6	Yes	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II"</i>	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			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. 2	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	Yes	
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
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	Yes	
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	Yes	
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	Yes	
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
ь	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t 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	Yes	
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	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	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)			
а	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		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
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? <i>If "Yes," complete Schedule R, Part V, line 2</i>	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	
		F	orm 99 0	(2013)

Par	Statements Regarding Other 1RS Filings and Tax Compliance			_
	Check if Schedule O contains a response or note to any line in this Part V		· ·	.) No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 33		163	110
	Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1		
_	gaming (gambling) winnings to prize winners?	1c	Yes	
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			
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			
U	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		Νo
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
ь	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			
	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		Νo
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	_		
6 -	December 2000 100 100 100 100 100 100 100 100 10	5c		NI -
	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? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	6a		No
U	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
А	If "Yes," indicate the number of Forms 8282 filed during the year	10		INO
u	11 Tes, indicate the number of forms 6262 med during the year			
е	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
_	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	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.			
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
L1	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
	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			
L3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	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		
	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			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
h	If "Yes," has it filed a Form 7.20 to report these payments? If "No," provide an explanation in Schedule O	14h		ı

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.

30	ection A. Governing Body and Management					
					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	39			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O					
b	Enter the number of voting members included in line 1a, above, who are independent	1b	38			
2	Did any officer, director, trustee, or key employee have a family relationship or a bus other officer, director, trustee, or key employee?			2		No
3	Did the organization delegate control over management duties customarily performe supervision of officers, directors or trustees, or key employees to a management con			3		No
4	Did the organization make any significant changes to its governing documents since filed?			4		No
5	Did the organization become aware during the year of a significant diversion of the or	rganiz	ation's assets?	5		No
6	Did the organization have members or stockholders?	94		6		No
	Did the organization have members, stockholders, or other persons who had the pow	erto	elect or appoint one or	۳		140
	more members of the governing body?			7a		No
	Are any governance decisions of the organization reserved to (or subject to approva or persons other than the governing body?			7b	ı	No
8	Did the organization contemporaneously document the meetings held or written action year by the following	ons ui	ndertaken during the		1	
а	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, organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule</i>			9		No
Se	ection B. Policies (This Section B requests information about policies not a	requi	ired by the Internal R	Reveni	ue Cod	e.)
					Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a		No
				104		140
b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization			10b		NO
		on's e	xempt purposes?	10b	Yes	NO
11a	affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of it the form?	on's e s gov	xempt purposes? erning body before filing 	10b	Yes	NO
11a b	affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of it the form?	on's e s gov • • form 9	xempt purposes? erning body before filing	10b	Yes	NO
11a b 12a	affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of it the form?	on's e s gov orm 9	xempt purposes? erning body before filing	10b		IN O
11a b 12a b	affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of it the form?	on's e s gov orm 9	xempt purposes? erning body before filing	10b 11a 12a 12b	Yes	IN O
11a b 12a b	affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this F Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done.	on's e s gov orm 9	xempt purposes? erning body before filing	10b 11a 12a 12b 12c	Yes Yes	IN O
11a b 12a b c	affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this F Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done. Did the organization have a written whistleblower policy?	on's e s gov orm 9	xempt purposes? erning body before filing	10b 11a 12a 12b 12c 13	Yes Yes Yes	IN O
11a b 12a b c 13	affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this F Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy?	on's es gov form S y inte the p	xempt purposes? erning body before filing	10b 11a 12a 12b 12c	Yes Yes	
11a b 12a b c 13 14 15	affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this F Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a revindependent persons, comparability data, and contemporaneous substantiation of the	on's ess gov form S y inte the p	xempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes	
11a b 12a b c 13 14 15	affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this F Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a revindependent persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official	on's ess gov form S y inte the p	xempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes	
11a b 12a b c 13 14 15	affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this F Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a revindependent persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official. Other officers or key employees of the organization	on's ess gov form S y inte the p	xempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes	
11a b 12a b c 13 14 15	affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this F Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a revindependent persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official	on's ess gov form S y inte the p	xempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes	
11a b 12a b c 13 14 15 a b	affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this F Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a revindependent persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official. Other officers or key employees of the organization. If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture of taxable entity during the year?	on's ession's ession'	xempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes	No
11a b 12a b c 13 14 15 a b	affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this F Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a revindependent persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture of	on's estepon's estep	xempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes	
11a b 12a b c 13 14 15 a b 16a b	affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of it the form?	on's estepon's estep	xempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes	
11a b 12a b c 13 14 15 a b 16a b	affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this F Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a revindependent persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official. Other officers or key employees of the organization. If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture of taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization participation in joint venture arrangements under applicable federal tax law, and take organization's exempt status with respect to such arrangements?	on's estepon's estep	xempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes	
11a b 12a b c 13 14 15 a b 16a b	affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this F Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a revindependent persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture of taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization participation in joint venture arrangements under applicable federal tax law, and take organization's exempt status with respect to such arrangements?	on's es gov form 9 y inter the p hewarre deli corsim	xempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes	

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

Form 990	(2013	
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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) A verage hours per week (list any hours for related organizations below dotted line)	more t	han o	one l both	box, an o	heck sofficer (stee) Highest compensated	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)

		_	1						,					
	(A) Name and Title	(B) A verage hours per week (list any hours for related	more than one box, unless person is both an officer and a director/trustee) org							table sation the tion (W- -MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	C	ted f other ation he on and	
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099	-MISC)	2/1099-MISC)		relate rganıza	ed
1b	Sub-Total							•						
c d	Total from continuation sheet Total (add lines 1b and 1c) .	ts to Part VII, S	ection A	٩.	•	•	•	•		265,561		0		26,223
2 2	Total number of individuals (in	cluding but not	Imited	to the	ose l	ıste	d abov	e) w	l ho receive			<u> </u>		
	\$100,000 of reportable compo													
											_		Yes	No
3	Did the organization list any f oon line 1a? <i>If "Yes," complete S</i>					key	emplo	yee	, or highes	t compen	sated employee			
4	For any individual listed on lin	e 1a, is the sum	of repo	rtabl	e coi							3		No_
	organization and related organ	nizations greater	than \$	150,0 • •	0007	? If •	"Yes," (comp	olete Schedi	ule J for s	uch	4	Yes	
5	Did any person listed on line 1 services rendered to the organ									anızatıon	or individual for			
	services renuered to the organ	nzacion <i>i II TE</i> S	, compi	حدد ع	cried	uie J	ioi su	cii pi	CISUII :		[5		No
	ection B. Independent Co													
1	Complete this table for your five compensation from the organization												ax year	
	N	(A) Name and business	address							Des	(B) cription of services		(C) Compen	
												1	•	
												\pm		
												+		

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 $\blacktriangleright 0$

art VIII	Statement of Revenue Check if Schedule O contains a respons	e or note to any lin	e in this Part VIII			_
		e of flote to any in	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
<u>v</u> ⊈ 1a	Federated campaigns 1a					
and Other Similar Amounts	Membership dues 1b					
ه الجَارِةِ	Fundraising events 1c					
g Fe o	Related organizations 1d					
ō.≝ ∘ E e	Government grants (contributions) 1e	797,681				
∰ iš .	All other contributions, gifts, grants, and 1f	4,725,914				
Other:	similar amounts not included above					
를 중 º	Noncash contributions included in lines 1a-1f \$	2,116,337				
and P	Total. Add lines 1a-1f		5,523,595			
		Business Code				
불 2a	, †					
èй р	,					
발 c						
돌 d						
చ్ e						
E f	All other program service revenue					
Program Service Revenue						
<u> </u>	Investment income (including dividends					
	and other similar amounts)		108,103			108,103
4	Income from investment of tax-exempt bond pr	oceeds				
5	Royalties					
	(I) Real	(II) Personal				
6a	Gross rents Less rental					
"	expenses					
c	or (loss)					
d						
	(1) Securities Gross amount	(II) Other				
72	from sales of assets other than inventory					
Ь	Less cost or other basis and					
	sales expenses					
C						
d 8a	` /	· · · · •				
b	events (not including \$ of contributions reported on line 1c)					
<u> </u>	See Part IV, line 18					
<u>.</u> .	a	419,468				
5 b		226,347	193,121			193,12
. .	Gross income from gaming activities See Part IV, line 19	/ents p -	133,121			133,12
	a Less direct expenses b					
	Net income or (loss) from gaming activi	ties				
	Gross sales of inventory, less returns and allowances	<u>-</u>				
	a					
b						
c	Net income or (loss) from sales of inver Miscellaneous Revenue	Business Code				
11a		900099	137,113	137,113		
b		_ 55555				
d						1
e	_	🛌				
			137,113			
12	Total revenue. See Instructions	· · · •	5,961,932	137,113	(301,224

Part IX Statement of Functional Expenses

Section 501(c)(3) and $501(c)(4$) organizations must complete	all columns All other	organizations must a	complete column (A)
) CC (1011	Janu Soricht	, ordanizacions musi combiete	an columns An other	organizacions inusci	combiete column (A)

<u> </u>	on 501(c)(3) and 501(c)(4) organizations must complete all columns All Check if Schedule O contains a response or note to any line in this		-	· '	
Do no	ot include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	o, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	402,385	402,385		
2	Grants and other assistance to individuals in the United States See Part IV, line 22	944,256	944,256		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	,23	2 , = 3		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	265,561	203,429	26,894	35,238
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	1,075,972	824,232	108,965	142,775
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	91,942	70,431	9,311	12,200
9	Other employee benefits	87,124	66,740	8,823	11,561
10	Payroll taxes	112,720	86,348	11,415	14,957
11	Fees for services (non-employees)				
а	Management				
b	Legal				
С	Accounting	29,800	18,774	4,480	6,546
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on	429,400	420.864	1 461	C 174
4.0	Schedule O)	428,499	420,864	 	6,174
12	Advertising and promotion	85,934	70,917	12,708	2,309
13	Office expenses	105,127	64,281	22,085	18,761
14	Information technology	42,067	32,574	2,295	7,198
15	Royalties				
16	Occupancy	72,017	45,578	10,741	15,698
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	78,635	66,150	6,489	5,996
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	49,548	31,215	7,447	10,886
23	Insurance	21,943	14,346	2,776	4,821
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	Donated School Supplies	2,200,015	2,189,594	2,412	8,009
b	Banquets, Facilities &	156,018	112,701	14,758	28,559
c	Grant Supplies and Serv	51,813	39,135	11,165	1,513
d	Miscellaneous	28,196	17,663	2,830	7,703
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	6,329,572	5,721,613	267,055	340,904
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

Par	τχ	Check if Schedule O contains a response or note to any line in the	nis Pari	t X			
					(A)		(B)
	1				Beginning of year		End of year
	1	Cash-non-interest-bearing			385,529		411,452
	2	Savings and temporary cash investments			9,487,463		10,482,866
	3	Pledges and grants receivable, net			389,772	3	413,280
	4	Accounts receivable, net				4	
	5	Loans and other receivables from current and former officers, di employees, and highest compensated employees Complete Pa Schedule L	rt II of			5	
Assets	6	Loans and other receivables from other disqualified persons (as section 4958(f)(1)), persons described in section 4958(c)(3)(E employers and sponsoring organizations of section 501(c)(9) v beneficiary organizations (see instructions) Complete Part II of	3), and oluntar	contributing y employees'		6	
8	,	Notes and loans receivable, net				7	
4	8	Inventories for sale or use				8	
	-					9	
	9	Prepaid expenses and deferred charges	 I I	• • 		9	
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	604,534			
	b	Less accumulated depreciation	10b	236,229	,		368,305
	11	Investments—publicly traded securities			3,698,238		3,918,292
	12	Investments—other securities See Part IV, line 11		331,085	12	604,144	
	13	Investments—program-related See Part IV, line 11			13		
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11		3,862,124	15	3,811,719	
	16	Total assets. Add lines 1 through 15 (must equal line 34) .		18,529,377	16	20,010,058	
	17	Accounts payable and accrued expenses		•	882,281	17	1,203,369
	18	Grants payable				18	
	19	Deferred revenue			69,515	19	70,050
	20	Tax-exempt bond liabilities				20	
Ø.	21	Escrow or custodial account liability Complete Part IV of Sche	dule D			21	
Liabilitie	22	Loans and other payables to current and former officers, directo key employees, highest compensated employees, and disqualifi	stees,				
<u>ge</u>		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 relat and other liabilities not included on lines 17-24) Complete Par	t X of S	chedule	_ , ,		
		D			9,487,463		10,482,866
	26	Total liabilities. Add lines 17 through 25			10,439,259	26	11,756,285
S e S		Organizations that follow SFAS 117 (ASC 958), check here ► 5 lines 27 through 29, and lines 33 and 34.	ando	complete			
an an	27	Unrestricted net assets			729,235	27	578,291
8	28	Temporarily restricted net assets			6,827,839	28	7,093,204
돧	29	Permanently restricted net assets			533,044	29	582,278
Assets or Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check he complete lines 30 through 34.	re ► 「	and			
0	30	Capital stock or trust principal, or current funds				30	
ě	31	Paid-in or capital surplus, or land, building or equipment fund				31	
ΑS	32	Retained earnings, endowment, accumulated income, or other fu				32	
Šet	33	Total net assets or fund balances			8,090,118	33	8,253,773
Z	34	Total liabilities and net assets/fund balances			18,529,377	34	20,010,058
	1	The state of the s		-	1 .5,525,577		Form 000 (2013)

Par	t XI Reconcilliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI		<u> </u>	<u> </u>	. .
1	Total revenue (must equal Part VIII, column (A), line 12)	1		5,9	961,932
2	Total expenses (must equal Part IX, column (A), line 25)	2		6,3	329,572
3	Revenue less expenses Subtract line 2 from line 1	3		- 3	367,640
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) \cdot .	4		8,0	90,118
5	Net unrealized gains (losses) on investments	5		3	389,526
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			141,769
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		8,2	253,773
Par	t 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	-			
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 rev a separate basis, consolidated basis, or both	ıewed on			
	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 se basis, consolidated basis, or both	parate			
	☐ 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 oversi audit, review, or compilation of its financial statements and selection of an independent accountant?	ght of the	e 2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain Schedule O	ı ın			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in Single Audit Act and OMB Circular A-133?	the	3a		No
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		

Software ID: Software Version:

EIN: 59-2883361

Name: HILLSBOROUGH EDUCATION FOUNDATION INC

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

Form 990, Part VII - Compensation Compensated Employees, and Inde	or Officers, pendent Coi	Directo ntracto	ors, ers	ıru	ste	es, r	сеу	Employees, Higi	nest	
(A) Name and Title	(B) Average hours per week (list any hours for related	Posit more th person and a	ion (nan o n is b	ne b oth ctor/	ox, u an of trus	inless fficer tee)		(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
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1033-11130/	2/1033-1413-0	related organizations
Michael Poland	1 00	х		х				0	0	0
Past Chair R Duane Johnson	1 00	×		×				0	0	0
Chairman Tom R Dorety	1 00	x		х				0	0	0
Vice Chairman John B Brannan	1 00	х		х				0	0	0
Treasurer Kevin Sutton	1 00	х						0	0	0
Legal Counsel Carlos Del Castillo	1 00	Х						0	0	0
Director Doretha Edgecomb	1 00	×						0	0	0
Director MaryEllen Elia	1 00	х						0	0	0
Director Bruce Faulmann	1 00	х						0	0	0
Sol J Fleischman JR	1 00	Х						0	0	0
Director Mary Gamble	1 00	х						0	0	0
Director Luis Garcia	1 00	х						0	0	0
Andrew M Harris	1 00	х						0	0	0
Director Sue M House	1 00	х						0	0	0
Director Randy James	1 00	Х						0	0	0
Director John Kirtley	1 00	х						0	0	0
Director Jim Major	1 00	х						0	0	0
Gov Bob Martinez Director	1 00	х						0	0	0
T Corey Neil Director	1 00	х						0	0	0
Mary Sue Rothenberg Director	1 00	х						0	0	0
Amy Shimberg Director	1 00	х						0	0	0
Matt Silverman Director	1 00	х						0	0	0
Ted Stasney Director	1 00	х						0	0	0
Joel K Stephens Director	1 00	х						0	0	0
Yvette Tremonti Secretary	1 00	х						0	0	0
	_						-	1	Ī	<u> </u>

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

Compensated Employees, and Inde	pendent Cor	itracto	rs		J.C.		,			
(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	Positi more to persola and individual trustae or director	nan (o nan o n is b dire	ne booth a	ox, u an of trus	ınless fficer tee)		(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
						2				
Alton C Ward	1 00	x						0	0	0
Director Barnie P Jones JR	40.00									
President	40 00	x		х				162,294	0	15,692
Hope Barnett	1 00	V							0	
Director		X						0	0	0
Charles Bruck	1 00	х						0	0	0
Director										
Betty Castor	1 00	×						0	0	0
Director										
Jean Clements	1 00	x						0	0	0
Director Bridgette Kramer	1 00									
Director		X						0	0	0
Fraser MacKechnie	1 00	х						0	0	0
Director		^						0	U	J
Kımberly Thresher	1 00	х						0	0	0
Director										
Gregory Wılder	1 00	×						0	0	0
Director Bryon Baylor	1.00	-								
Bryan Baylor Director	1 00	x						0	0	0
Royce Reed	1 00									
Director		×						0	0	0
Sean Shaw	1 00	х						0	0	0
Director		_ ^						0	0	
Chris Taylor	1 00	х						0	0	0
Director										
Debra Friedberg	40 00			х				103,267	0	10,531
VP Finance	J									

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As Filed Data -

DLN: 93493128017365

OMB No 1545-0047

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.

2013

Open to Public Inspection

Name of the	organization
HILLSBOROUGH	EDUCATION FOUNDATION INC

Employer identification number

59-2883361

	rt I			blic Charity Sta te foundation becaus						nstructions	
1	Ji gaili			on of churches, or a	· ·		-	•	•		
2	<u>'</u>		•	•				ection 170(i	D)(1)(A)(I).		
	<u>'</u>			in section 170(b)(1			•	170/b)/1)	(A)(:::)		
3	<u> </u>			perative hospital se	_					(4)/8)/:::\	
4	ı			n organization operat ty, and state	tea in conjun	ction with a	nospital desc	cribed in se	ction 170(B)((I)(A)(III).	enter the
5	\vdash			erated for the benefi	t of a college	or universit	tv owned or o	perated by	a governmen	tal unit desc	ribed in
-		_	•	A)(iv). (Complete P	_		-,	p = . = . =	- g		
6	\vdash			local government or		al unit desc	ribed in secti	on 170(b)(1	L)(A)(v).		
7	, V			at normally receives	_					rom the aen	eral public
-	•	_		n 170(b)(1)(A)(vi).		•	опрести поли	go			o. a. p a b c
8	\sqcap	A comr	nunity trust	described in section	170(b)(1)(A)(vi) (Con	nplete Part II)			
9	\sqcap	An orga	anization th	at normally receives	(1) more th	an 331/3% o	f its support	from contrib	outions, mem	ıbershıp fees	s, and gross
		receipt	s from activ	ities related to its e	xempt function	ons—subjec	t to certain e	xceptions, a	and (2) no mo	ore than 331	/3% of
		ıts sup	port from gr	oss investment inco	me and unrel	ated busine	ss taxable ın	come (less	section 511	tax) from bu	ısınesses
		acquire	ed by the org	janızatıon after June	30,1975 S	ee section 5	509(a)(2). (C	omplete Pa	rt III)		
10	Γ	Anorga	anızatıon or	ganized and operated	dexclusively	to test for p	oublic safety	See sectio	n 509(a)(4).		
11											509(a)(3). Check
e f g	l	other the section of the ocheck the Since A	nan foundati n 509(a)(2) rganization this box lugust 17, 2 ng persons?	ox, I certify that the on managers and other received a written do 2006, has the organizectly or indirectly or	her than one etermination zation accep	or more pub from the IR oted any gift	olicly support	ed organiza Type I, Typ on from any	tions describe	ed in sectio	n 509(a)(1) or
				governing body of th			_	persons de	scribed iii (ii) 11g	
		•		er of a person descri		-	1.				(ii)
			•	lled entity of a perso	• •		ahove?			11g	
h				ng information about		., .,				119	(,
:	i) Nan suppo rganiz	rted	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see	(iv) Is to organization col (i) listo your gove docume	on in ted in rning	(v) Did you the organi in col (i) o suppor	zation f your	(vi) Is organizat col (i) org in the U	ion in janized	(vii) A mount of monetary support
				instructions))	Yes	No	Yes	No	Yes	No	
Tota	I										

instructions

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 (a) 2009 **(b)** 2010 (c) 2011 (d) 2012 (e) 2013 (f) Total in) 🟲 1 Gifts, grants, contributions, and membership fees received (Do not 4,415,737 4,657,187 4,689,759 5,181,166 5,523,595 24,467,444 include any "unusual grants ") 7 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 4,415,737 4,657,187 4,689,759 5,181,166 5,523,595 24,467,444 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly 348,025 supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column Public support. Subtract line 5 24,119,419 from line 4 Section B. Total Support Calendar year (or fiscal year (a) 2009 **(b)** 2010 (c) 2011 (d) 2012 **(e)** 2013 (f) Total beginning in) 🟲 4,415,737 4,657,187 4,689,759 5,181,166 5,523,595 24,467,444 Amounts from line 4 Gross income from interest, dividends, payments received on 101,491 90,080 118,007 108,103 securities loans, rents, royalties 63,636 481,317 and income from similar sources 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 24,948,761 through 10) Gross receipts from related activities, etc (see instructions) 12 12 956,692 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 Section C. Computation of Public Support Percentage 14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f)) 14 96 680 % Public support percentage for 2012 Schedule A, Part II, line 14 15 15 95 970 % 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

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

Schedule A (Form 990 or 990-EZ) 2013 Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support

Cale	ndar year (or fiscal year beginning in) 🟲	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
2	include any "unusual grants ") 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						
3	Gross receipts from activities that						
	are not an unrelated trade or						
4	business under section 513 Tax revenues levied for the						
•	organization's benefit and either						
	paid to or expended on its						
_	behalf The value of services or facilities						<u> </u>
5	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2,						
	and 3 received from disqualified persons						
ь	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						
c	Add lines 7a and 7b						
8	Public support (Subtract line 7c						
	from line 6) ction B. Total Support						
	ndar year (or fiscal year beginning	() 2000	(1) 2010	() 2011	(1) 2012	() 2012	(C) T
				(A) 2011 I	(d) 2012	(e) 2013	(f) Total
	in) ►	(a) 2009	(b) 2010	(c) 2011	(4) 2012	(-,	(-,
9	in) ► A mounts from line 6	(a) 2009	(B) 2010	(6) 2011	(4) 2012	(5, 2222	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	in) ► A mounts from line 6 Gross income from interest,	(a) 2009	(B) 2010	(6) 2011	(4) 2012	(0, 2000	(7,7,5,5,1)
9	in) ► A mounts from line 6	(a) 2009	(b) 2010	(6) 2011	(4) 2012	(5,232	
9	in) A mounts from line 6 Gross income from interest, dividends, payments received on	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable	(a) 2009	(b) 2010	(6) 2011	(4) 2012		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	(a) 2009	(b) 2010	(6) 2011	(4) 2012		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated	(a) 2009	(b) 2010	(6) 2011	(4) 2012		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a b c 11	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include	(a) 2009	(b) 2010	(6) 2011			
9 10a b c 11	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of	(a) 2009	(b) 2010	(c) 2011			
9 10a b c 11	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	(a) 2009	(b) 2010	(6) 2011			
9 10a b c 11	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c,	(a) 2009	(b) 2010	(c) 2011			
9 10a b c 11	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
9 10a b c 11 12	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here	or the organizati	on's first, second				
9 10a b c 11 12 13 14	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here	or the organizati	on's first, second	, thırd, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage for 2013	or the organizati ic Support Pe (line 8, column (on's first, second ercentage f) divided by line	, thırd, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15 16	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201	or the organization of the	on's first, second ercentage f) divided by line art III, line 15	, third, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15 16 Se	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization of the	on's first, second ercentage f) divided by line art III, line 15 me Percenta	, third, fourth, or 13, column (f))	fifth tax year as a	a 501(c)(3) orga 15 16	nization,
9 10a b c 11 12 13 14 Se 15 16 Se 17	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization ic Support Performance (line 8, column (2 Schedule A, Paragraphic Performance) colors (line 10c, colors)	on's first, second ercentage f) divided by line art III, line 15 me Percentagolumn (f) divided	, third, fourth, or 13, column (f)) ge by line 13, colum	fifth tax year as a	15 16	nization,
9 10a b c 11 12 13 14 Se 15 16 Se 17 18	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization of the organization of the organization of the second of the secon	on's first, second ercentage f) divided by line art III, line 15 me Percentago olumn (f) divided A, Part III, line 1	, third, fourth, or 13, column (f)) ge by line 13, column	fifth tax year as a	15 16	nization,

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 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV		Information. Provide the explanations required by Part II, line 10; Part II, line 17a or , line 12. Also complete this part for any additional information. (See instructions).								
		Facts And Circumstances Test								
Retu	ırn Reference	Explanation								
		Schodulo A / Form 000 o	000 E7) 201							

Schedule A (Form 990 or 990-EZ) 2013

DLN: 93493128017365

OMB No 1545-0047

SCHEDULE D

(Form 990)

Department of the Treasury

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) Open to Public

ema	Revenue Service	and its instruc	tions is at <u>www.irs.gov/form990</u> .		Inspection
	me of the organ			Emp	loyer identification number
HIL	LSBOROUGH EDUCA	ATION FOUNDATION INC		59-2	2883361
Pa	rt I Organ	nizations Maintaining Donor Ad	vised Funds or Other Similar Fu		
	organı	zation answered "Yes" to Form 990			
	-		(a) Donor advised funds		(b) Funds and other accounts
	Total number a		33		
		tributions to (during year)	42,901		
1		nts from (during year)	60,532	 	
		ue at end of year	1,146,797		
	funds are the o	organization's property, subject to the o			✓ Yes
•	used only for c		onor advisors in writing that grant funds of fit of the donor or donor advisor, or for any		
a			the organization answered "Yes" to	Form	<u> </u>
	Preservation Preservation Complete lines	of natural habitat on of open space	ianization (check all that apply) i or education)	ertified	d historic structure
		me rube day or the tax year	Γ		Held at the End of the Year
а	Total number o	of conservation easements		2a	
b	Total acreage	restricted by conservation easements		2b	
c	Number of con	servation easements on a certified hist	oric structure included in (a)	2c	
d		servation easements included in (c) accurre listed in the National Register	quired after 8/17/06, and not on a	2d	
;	Number of con	servation easements modified, transfer	red, released, extinguished, or terminated	by th	e organization during
	the tax year ►	·			
	Number of stat	tes where property subject to conservat	ion easement is located 🗠	_	
		nization have a written policy regarding f the conservation easements it holds?	the periodic monitoring, inspection, handl	ıng of	violations, and Yes No
	Staff and volur	nteer hours devoted to monitoring, inspe	ecting, and enforcing conservation easeme	ents d	uring the year
	A mount of exp		g, and enforcing conservation easements	durınd	the year
	► \$			•	,
1		nservation easement reported on line 2(70(h)(4)(B)(ii)?	d) above satisfy the requirements of secti	ion 17	70(h)(4)(B)(ı)
)	balance sheet		nservation easements in its revenue and e footnote to the organization's financial s		
ar	t IIII Organ		s of Art, Historical Treasures, o	r Otl	ner Similar Assets.
.a	If the organiza works of art, h	tion elected, as permitted under SFAS : istorical treasures, or other similar asse	116 (ASC 958), not to report in its revenuets held for public exhibition, education, of to its financial statements that describes	r rese	arch in furtherance of public
b	works of art, h		L16 (ASC 958), to report in its revenue states held for public exhibition, education, of the items		
	(i) Revenues i	included in Form 990, Part VIII, line 1			- \$
	(ii) Assets inc	luded in Form 990, Part X			▶ \$
•	If the organiza	tion received or held works of art, histor	rical treasures, or other similar assets for 116 (ASC 958) relating to these items	finan	cial gain, provide the
а	_	uded in Form 990, Part VIII, line 1	· -		► \$
	- ··· ·	,,			

b Assets included in Form 990, Part X

Description of the property Part XIII and complete the following table Amount Amount It	Part	•••• Organizations Maintaining Co	llections of Art,	His	<u>tori</u>	<u>cal Tr</u>	easu	res, or O	<u>ther</u>	Similar Ass	ets (c	ontinued)
B Scholarly research E Other	3		ion, and other record	ls, ch	neck a	any of t	he follo	owing that a	re a s	ignificant use	of its	
Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Pert XIII 5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be add to raise funds rather than to be maintained as part of the organization answered "Yes" to Form 990, Part XII V, 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, line 21. 1b If "Yes," explain the arrangement in Part XIII and complete the following table 1c Amount 1c C Press No. 1d Adottons during the year 1d d	а	Public exhibition		d	Γ	Loan	or exch	nange progr	ams			
Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII Duning the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rether than to be maintained as part of the organization's collection? Ves. No. Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets on the included on Form 990, Part X? If "Yes," explain the arrangement in Part XIII and complete the following table If "Yes," explain the arrangement in Part XIII and complete the following table If "Yes," explain the arrangement or Form 990, Part X, line 21? If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII. If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII. If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII. If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII. If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII. If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII. If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII. If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII. If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII. If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII. If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII. If "Yes," explain the arrangement	b	Scholarly research		e	Γ	Other	-					
Part XIII South the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be minitarined as part of 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 an included on Form 990, Part X, line 21. 1b if "Yes," explain the arrangement in Part XIII and complete the following table C Beginning belance 1d	c	Preservation for future generations										
## Part IV In 9, or reported an amount on Form 990, Part X, line 21. Part IV In 9, or reported an amount on Form 990, Part X, line 21. Part IV In 9, or reported an amount on Form 990, Part X, line 21. Part IV In 9, or reported an amount on Form 990, Part X, line 21. Part IV In 9, or reported an amount on Form 990, Part X, line 21. Part IV In 9, or reported an amount on Form 990, Part X, line 21. Part IV In 9, or reported an amount on Form 990, Part X, line 21. Part IV In 9, or reported an amount on Form 990, Part X, line 21. Part IV In 9, or reported an amount on Form 990, Part X, line 21. Part IV In 9, or reported an amount on Form 990, Part X, line 21. Part IV In 9, or reported an amount on Form 990, Part X, line 21. Part IV In 9, or reported an amount on Form 990, Part X, line 21. Part IV In 9, or reported an amount on Form 990, Part X, line 21. Part IV In 9, or reported an amount on Form 990, Part X, line 21. Part IV In 9, or reported an amount on Form 990, Part X, line 21. Part IV In 9, or reported an amount on Form 990, Part X, line 21. Part IV In 9, or reported an amount on Form 990, Part X, line 21. Part IV In 9, or reported an amount on Form 990, Part X, line 21. Part IV In 9, or reported an amount on Form 990, Part X, line 21. Part IV In 9, or reported an amount on Form 990, Part X, line 21. Part IV In 9, or reported an amount on Form 990, Part X, line 21. Part IV In 9, or reported an amount on Form 990, Part X, line 21. Part IV In 9, or reported and amount on Form 990, Part X, line 21. Part IV In 9, or reported and amount on Form 990, Part X, line 10. Part IV In 9, or reported and amount on Form 990, Part X, line 10. Part IV In 9, or report and amount on Form 990, Part IV, line 10. Part IV In 9, or report and amount on Form 990, Part IV, line 10. Part IV In 9, or report and amount on Form 990, Part IV, line 10. Part IV In 9, or report and amount on Form 990, Part IV, line 10. P	4		ollections and explai	n hov	w the	y furthe	er the o	rganızatıon	's exe	mpt purpose ır	1	
Part IV. Ine 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodain or other intermediary for contributions or other assets not included on Form 990, Part X? 1b If "Yes," explain the arrangement in Part XIII and complete the following table C Beginning balance 4 Additions during the year 5 Beginning balance 2a Did the organization include an amount on Form 990, Part X, line 21? b If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII. c Part V Endowment Funds. Complete if the organization is netwered "Yes" to Form 990, Part XIII. 1a Beginning of year balance 1b Contributions 1c Part V Endowment Funds. Complete if the organization is netwered "Yes" to Form 990, Part IV, line 10. 1a Beginning of year balance 1a Beginning of year balance 1b Contributions 1c Part V Endowment Funds. Complete if the organization is netwered "Yes" to Form 990, Part IV, line 10. 1c Not investment earnings, gains, and losses 1d Calcium year (b)Provided 1, 150,600 Beginning of Calcium (a) 1, 150,600 Beginning of Calcium (b)Provided 1, 150,600 Beginning of Calcium (b) Beginn	5										,	 .
Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Is Is the organization an agent, fusitese, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? If "Yes," explain the arrangement in Part XIII and complete the following table It It It It It It It	Dor									<u>'</u>		No
1	FGI							i aliswelet	ı re	5 (0 (0)))) 9:	,	
C Beginning balance C Beginning balance C C C C C C C C C	1a	Is the organization an agent, trustee, custoo						r other ass	ets no		Yes	
C Beginning balance C C C C C C C C C C C C C C C C C C C C C C C C C C C C C C C C C C C C C C C C C C C C C C C C C C C C C C C C C C	b	If "Yes," explain the arrangement in Part XII	I and complete the	follov	wing t	able		_				
Additions during the year Ending balance Ending ba										Am	ount	
Distributions during the year Ite Itr Itr Itr Itr	_							-	-			
Did the organization include an amount on Form 990, Part X, line 21? Yes N	d							<u> </u>	-			
2a	_							-				
Description 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. Calcument year (b)Prior year b (c)Two years back (d)Prior years back (e)Four years (e)Fou	Ť	-							1f			
Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.	2a	Did the organization include an amount on Fo	orm 990, Part X, line	21?						ļ	Yes	Г No
1a Beginning of year balance (a)Current year (b)Pror year b (c)Two years back (d)Three years back (e)Four years back (d)Three years back (e)Four years back (d)Three years back (e)Four years												
1a Beginning of year balance 1,317,356 1,166,648 1,160,600 877,667 656, b Contributions 72,421 20,833 37,663 61,096 66, c Net investment earnings, gains, and losses 273,892 171,375 4,685 201,375 79, d Grants or scholarships 20 ther expenditures for facilities and programs 36,300 24,000 15, e Other expenditures for facilities and programs 72,315 41,500 36,300 24,000 15, f Administrative expenses 1,591,354 1,317,356 1,166,648 1,160,600 877, 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as a Board designated or quasi-endowment ► 53,850 % b Permanent endowment Funds or in the possession of the organization that are held and administered for the organization in line 2a, 2b, and 2c should equal 10.0% 3a,00 3a,00 3a,00 3a,00 24,000 15, 1 February in yeasting and in lines 2a, 2b, and 2c should equal 10.0% 3a,00 3a,00 3a,00 3a,00 3a,00 3a,00 3a,00 <td< td=""><td>Pai</td><td>t V Endowment Funds. Complete</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>(a)Eour</td><td>voore boek</td></td<>	Pai	t V Endowment Funds. Complete									(a)Eour	voore boek
b Contributions	1a	Beginning of year balance	` ' '	(D)			<u> </u>		 ` ´ 	<u> </u>	(e)roury	656,558
c Net investment earnings, gains, and losses d Grants or scholarships	_				•							66,933
273,892 171,375 4,685 201,375 79,			·			-		·		·		<u> </u>
e Other expenditures for facilities and programs			273,892			171,375		4,685		201,375		79,299
and programs .		•										
g End of year balance	e	·	72,315			41,500		36,300		24,000		15,500
2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as a Board designated or quasi-endowment ▶ 53 850 % b Permanent endowment ▶ 36 590 % c Temporarily restricted endowment ▶ 9 560 % The percentages in lines 2a, 2b, and 2c should equal 100% 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations	f	Administrative expenses										
a Board designated or quasi-endowment ► 53 850 % b Permanent endowment ► 36 590 % c Temporarily restricted endowment ► 9 560 % The percentages in lines 2a, 2b, and 2c should equal 100% 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations	g	End of year balance	1,591,354		1,	317,356		1,166,648		1,160,600		877,667
b Permanent endowment 36 590 % The percentages in lines 2a, 2b, and 2c should equal 100% 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations 3a(i) No (ii) related organizations 3a(i) No 1f "Yes" to 3a(ii) No 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 (investment) (c) Accumulated depreciation b Buildings (d) Book validation (d) Book validatio	2	Provide the estimated percentage of the cur	rent year end balanc	e (lın	ne 1g,	, colum	n (a)) h	neld as				
Temporarily restricted endowment ▶ 9 560 % The percentages in lines 2a, 2b, and 2c should equal 100% 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations	а	Board designated or quasi-endowment ►	53 850 %									
The percentages in lines 2a, 2b, and 2c should equal 100% Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations	b	Permanent endowment ► 36 590 %										
Fig.	c	remporarily restricted endowment										
(i) unrelated organizations	3a	Are there endowment funds not in the posse	ssion of the organiza	tion	that a	are held	d and a	dmınıstered	for th	ne		
(ii) related organizations		-								[a.		+
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 validation as (investment) (d) Book validation (d) Book validation (d) Book validation (d) Book validation (d				•	•				•			
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 of the value of the basis (other) (e) Accumulated depreciation (f) Book value of the value of the value of the basis (other) (g) Cost or other basis (other) (h) Cost or other basis (other) (h) Cost or other basis (other) (h) Book value of the	ь	• •							٠. ٠		''	110
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 depreciation 1a Land		,	•							L		<u> </u>
Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (d) Book value depreciation (d) Book value depreciation (d) Book value depreciation (e) Accumulated depreciation (d) Book value depreciation (e) Accumulated depreciation (e) Accumulated depreciation (f) Accumulated depreciatio	Par			he o	rgan	ızatıor	n answ	ered 'Yes	' to F	orm 990, Pai	t IV, lı	ine
b Buildings			101								(d) B	book value
c Leasehold improvements 490,359 186,279 304,0 d Equipment 114,175 49,950 64,2 e Other 0 <td>1a </td> <td>Land</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>\dashv</td> <td></td> <td></td> <td></td>	1a	Land							\dashv			
d Equipment 114,175 49,950 64,2 e Other	b I	Buildings										
e Other	c I	Leasehold improvements						490	,359	186,27	9	304,080
	d I	Equipment						114	,175	49,95	0	64,225
T-1-1 Add by a distributed of Column (d) words a 15 000 B 17 1 (B) 1 (C) 1												
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)	Tota	I. Add lines 1a through 1e <i>(Column (d) must e</i>	qual Form 990, Part X	, colu	ımn (ı	B), line	10(c).)			▶		368,305

See Form 990, Part X, line 12.	Complete if the organization	answered Yes' to Form 990, Part IV, line 11b.
(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		Cost of end-of-year market value
(2)Closely-held equity interests		
Other		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12 Part VIII Investments—Program Related		<u> </u>
See Form 990, Part X, line 13.	1. Complete il the organization	rianswered les to form 990, Part IV, line IIC.
(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	· · · · · · · · · · · · · · · · · · ·), Part IV, line 11d See Form 990, Part X, line 15
	escription	(b) Book value
(1) Beneficial Interest In Assets		54,240
(2) Prepaid Scholarships and Expenses		3,756,181
(3) Deposits		1,298
Total. (Column (b) must equal Form 990, Part X, col.(B) I	ine 15.)	▶ 3,811,719
	organization answered 'Yes' t	o Form 990, Part IV, line 11e or 11f. See
Form 990, Part X, line 25. (a) Description of liability	(b) Book value	
Federal income taxes	.,	
Payable to HCPS as Fiscal Agent for Gates FNDN		
Agreement	10,482,866	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) • 10,482,866	
2. Liability for uncertain tax positions In Part XIII, pr	ovide the text of the footnote to th	e organization's financial statements that

Part	XI		Revenue per Audited Financial Statements With Revenue powered 'Yes' to Form 990, Part IV, line 12a.	er R	eturn Complete If
1	Tota		er support per audited financial statements	1	6,509,227
2	A mo	unts included on line 1 bi	ut not on Form 990, Part VIII, line 12		
a	Net	unrealized gains on inves	tments		
b	Dona	ated services and use of t	facilities		
c	Reco	overies of prior year grant	s 2c		
d	Othe	er (Describe in Part XIII))		
e	Add	lines 2a through 2d .		2e	547,295
3	Subt	ract line 2e from line 1 .		3	5,961,932
4	A mo	unts included on Form 99	0, Part VIII, line 12, but not on line 1		
а	Inve	stment expenses not inc	luded on Form 990, Part VIII, line 7b . 4a		
b	Othe	er (Describe in Part XIII))		
С	Add	lines 4a and 4b		4 c	0
5	Tota	l revenue Add lines 3 an	d 4c. (This must equal Form 990, Part I, line 12)	5	5,961,932
Part	XII		xpenses per Audited Financial Statements With Expenses aswered 'Yes' to Form 990, Part IV, line 12a.	per	Return. Complete
1	Tota		r audited financial statements	1	6,345,572
2	A mo	unts included on line 1 bu	ut not on Form 990, Part IX, line 25		
а	Dona	ated services and use of f	acılıtıes		
b	Prior	year adjustments	2b		
c	Othe	rlosses	2c		
d	Othe	r (Describe in Part XIII)) 2d		
e	Add	lines 2a through 2d		2e	16,000
3	Subt	ract line 2e from line 1 .		3	6,329,572
4	A mo	unts included on Form 99	0, Part IX, line 25, but not on line 1:		
а	Inve	stment expenses not incl	luded on Form 990, Part VIII, line 7b 4a		
b	Othe	r (Describe in Part XIII)) 4b		
С	Add	lines 4a and 4b	 	4 c	0
5		•	nd 4c. (This must equal Form 990, Part I, line 18)	5	6,329,572
Part	XIII	Supplemental In	formation		
Part		4, Part X, line 2, Part XI	r Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b , lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to		de any additional
	R	eturn Reference	Explanation		
Part V	, Line	4	The Hillsborough Education Foundation Inc maintains an endowment fund the organization	d for t	he long term benefit of
Part X	, Line	2	Income taxes are not provided for in the financial statements since the Fe federal and state income taxes under Section 501(c)(3) of the Internal Restate provisions. Management is not aware of any activities that would jet tax exempt status. The Foundation is not aware of any tax positions it has significant degree of uncertainty. Tax years after June 30,2011 remains taxing authorities.	evenu opard s take	le Code and similar ize the Foundation's en that are subject to a
Part X Adjust		2d - Other	Unrealized Scholarship Appreciation 141,769		

	<u> </u>	
Part XIII	Supplemental Info	ormation (continued)
Ret	turn Reference	Explanation

Schedule D (Form 990) 2013

DLN: 93493128017365

OMB No 1545-0047

SCHEDULE G (Form 990 or 990-EZ) **Supplemental Information Regarding Fundraising or Gaming Activities**

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply all Mail solicitations Internet and email solicitations Phone solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization or entity (fundraiser) (i) Name and address of individual or entity (iii) Did fundraiser have custody or control of contributions? Yes No Yes No Yes No Yes No If "We Grow and address of individual or entity (iii) Did fundraiser listed in col (i) or retained by) organization organization.	Name of the organization HILLSBOROUGH EDUCATION FOUNDATION INC						Employer identification number		
Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply a Mail solicitations	TEESBORO GOTT EBUCATION TO UN	DATION INC				59-2883361			
Indicate whether the organization raised funds through any of the following activities. Check all that apply Mail solicitations						to Form 990, Part IV	, line 17.		
Mail solicitations Internet and email solicitations Internet and fundrasing events Internet and fundrasing		•	•		•	eck all that apply			
Intermet and email solicitations F Solicitation of government grants		Traised failes	in ough u		=				
## Special fundraising events The person solicitations The person solicitations	<u> </u>	ns		f					
Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Ves No IT "ves," In it is the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (i) Name and address of individual or entity (fundraiser have custody or control of contributions? Ves No (v) Amount paid to (or retained by) fundraiser listed in coll (i) organization.	c Phone solicitations			g					
or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (i) Name and address of individual or entity (fundraiser have custody or control of contributions? Yes No Yes No List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from	d In-person solicitations								
(i) Name and address of individual or entity (fundraiser) (ii) Activity (iii) Did fundraiser have custody or control of							Г _{Yes} Г _N		
Individual or entity (fundraiser) Individual or en				fundraıse	rs) pursuant to agreem	ents under which the fu	ndraiser is		
1 2 3 4 5 5 6 7 7 8 8 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9	ındıvıdual	ii) Activity	fundrais custo cont contrib	ser have ody or crol of		(or retained by) fundraiser listed in	(or retained by)		
2 3 4 5 6 7 8 9 0 tal	1		Yes	No					
3 4 5 6 7 8 9 0 tal	1								
4 5 6 7 8 9 0 tal	2								
5 6 7 8 9 0 tal	3								
5 6 7 8 9 0 tal									
6 7 8 9 0 tal	4								
7 8 9 0 tal	5								
8 9 10 11 12 13 14 15 15 16 17 18 18 18 18 18 18 18 18 18 18 18 18 18	6								
8 9 10 11 12 13 14 15 15 16 17 18 18 18 18 18 18 18 18 18 18 18 18 18	7								
9 tal	, i								
tal	8								
tal	9								
List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from	10								
				▶					
	-	zation is regis	tered or li	censed to	l o solicit contributions o	I r has been notified it is	exempt from		

		G (Form 990 or 990-EZ) 2013				Page 2
Pa	rt II	Fundraising Events. Com more than \$15,000 of fundra events with gross receipts g	aising event contributi			
		<u>-</u>	(a) Event #1 Strides For Education Scholarship (event type)	(b) Event #2 Tools4 School Breakfast (event type)	(c) O ther events 1 (total number)	(d) Total events (add col (a) through col (c))
Revenue	1	Gross receipts	242,474		83,129	419,468
Æ	3	Less Contributions Gross income (line 1 minus line 2)	242,474	93,865	83,129	419,468
	4	Cash prizes				
Expenses	5 6	Noncash prizes	19,282	12,269	36,852	68,403
ਸ Expe	7	Food and beverages . Entertainment				
Direct	9	Other direct expenses .	135,737	4,816	17,391	157,944
	10 11	Direct expense summary Add lin Net income summary Subtract lii	ne 10 from line 3, column	(d)	· · · · · •	(226,347) 193,121
Par	t III	Gaming. Complete if the or \$15,000 on Form 990-EZ, lir		"Yes" to Form 990, Pa	rt IV, line 19, or repo	rted more than
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
<u>~</u>	1	Gross revenue				
enses	2	Cash prizes				
Xper	3	Non-cash prizes				
Direct Exp	4	Rent/facility costs				
<u></u>	5	Other direct expenses				
	6	Volunteer labor	┌ Yes% ┌ No	┌ Yes <u>%</u> ┌ No	Г Yes <u>%</u> Г No	_
		Direct expense summary Add lines				
9 a b	Ente Is t If "!	Net gaming income summary Subter the state(s) in which the organization licensed to operate No," explain	ation operates gaming actigation gaming activities in each	tivities n of these states?		
		Yes," explain				· · I Yes I No

						1:
Does	s the organization operate gaming activi	ties with nonmember	rs?		T Yes T No	
12	Is the organization a grantor, beneficia					
	formed to administer charitable gaming	g [,]			· Fyes [– No
13	Indicate the percentage of gaming act	ıvıty operated ın				
а	The organization's facility					%
b	An outside facility			13b		%
14	Enter the name and address of the per	son who prepares the	e organization's gaming/special e	vents books and reco	ords	
	Name ▶					
	Address 🟲					
15a b	Does the organization have a contract revenue?	evenue received by t	the organization 🟲 \$		· · 「Yes「	– No
	amount of gaming revenue retained by	the third party 🟲 \$ _				
C	If "Yes," enter name and address of th	e thırd party				
	Name ▶					
	Address ►					
16	Gaming manager information					
	Name 🕨					
	Gaming manager compensation ► \$					
	Description of services provided					
	Director/officer	E mployee	☐ Independent cor	ntractor		
17	Mandatory distributions					
а	Is the organization required under stat	e law to make charit	able distributions from the gaming	g proceeds to		
	retain the state gaming license?				┌ Yes 「	— No
b	Enter the amount of distributions requi	red under state law (distributed to other exempt organi	ızatıons or spent		
	ın the organızatıon's own exempt actıv	ities during the tax y	⁄ear ⊳ \$			
Pai		5b, 15c, 16, and 1	xplanations required by Part I 7b, as applicable. Also compl			and
	Return Reference		Explanat	ıon		
		<u> </u>	<u> </u>		rm 990 or 990-	7) 2012

the selection criteria used to award the grants or assistance?

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

Schedule I (Form 990)

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

Open to Public

DLN: 93493128017365 OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

	al Revenue Service Information about Schedule I (Form 990) and its instructions is at <u>www.irs.gov/form</u>	<u>990</u> .	Inspection
Name o	of the organization	Employe	er identification number
HILLS	SBOROUGH EDUCATION FOUNDATION INC	59-288	33361
Par [*]	rt I General Information on Grants and Assistance		
1	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the g	rants or assistance, and	

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section If applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
(1) Gibsonton Elementary School 7723 Gibsonton Dr Gibsonton,FL 33534	59-6000660		7,400				Mosiac Education Fund		
(2) Progress Village Middle School 8113 Zinnia Dr Tampa,FL 33619	59-6000660		5,000				Mosiac Education Fund		
(3) Paul Mort Elementary School 1806 Bearss Ave East Tampa,FL 33613	59-6000660		5,974				School Excellence Initiative		
(4) Roosevelt Elementary School 3205 Ferdinand Ave South Tampa,FL 33629	59-6000660		12,500				Technology Match Grant		
(5) Stewart Middle School 1125 Spruce St Tampa,FL 33607	59-6000660		5,994				Technology Match Grant		
(6) Kimbell Elementary School 8406 N 46th St Tampa,FL 33617	59-6000660		5,000				Technology Match Grant		
(7) Mulrennan Middle School 4215 Durnat Rd Valrico,FL 33594	59-6000660		11,298				Technology Match Grant		
(8) Hillsborough County Public Schools PO Box 3408 Tampa,FL 33601	59-6000660		121,655				Classroom/School Grants		
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table									

Enter total number of other organizations listed in the line 1 table.

Grants and Other Assistance to Individuals in the United States	Complete if the organization answered	"Yes" to Form 990,	Part IV, line 22
Part III can be duplicated if additional space is needed.	-		

(a)Type of grant or assistance	(b) Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance					
(1) Scholarships	288	944,256								
Part IV Supplemental Info	Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.									
Return Reference Explanation										

Part I, Line 2

Each school receiving grant funding is required to provide a report to us with the following information describing the measurable outcome of the project, the academic achievement of the students involved/impacted, describing the evaluation process and results, and a detailed use of the funds. This report is reviewed by the programs director. This report must be received for the school to be eligible for future funding. Students apply for scholarships annually and are selected by a committee based on criteria established for various scholarships. The selected recipients are entered into a database by name, scholarship, expected date of graduation, etc. Upon receipt of an Enrollment Verification form from a college or university stating the students name, etc., the Foundation will then release funds.

Additional Data

Software ID:

Software Version:

EIN: 59-2883361

Name: HILLSBOROUGH EDUCATION FOUNDATION INC

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Gibsonton Elementary School 7723 Gibsonton Dr Gibsonton, FL 33534	59-6000660		7,400				Mosiac Education Fund

form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
Progress Village Middle School 8113 Zinnia Dr Tampa,FL 33619	59-6000660		5,000				Mosiac Education Fund		

Form 990,Schedule 1, Pa	rt II, Grants an	<u>a Otner Assistance</u>	e to Governments	and Organizations	s in the United Sta	tes	
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Paul Mort Elementary School 1806 Bearss Ave East Tampa,FL 33613	59-6000660		5,974				School Excellence Initiative

Form 990,Schedule I, Pa	orm 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States						
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Roosevelt Elementary School 3205 Ferdinand Ave South Tampa,FL 33629	59-6000660		12,500				Technology Match Grant

Form 990,Schedule 1, Pa	rt II, Grants an	d Otner Assistance	<u>e to Governments</u>	and Organizations	s in the United Sta	tes	
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Stewart Middle School 1125 Spruce St Tampa,FL 33607	59-6000660		5,994				Technology Match Grant

Form 990, Schedule I, Pa	orm 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States						
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Kımbell Elementary School 8406 N 46th St Tampa,FL 33617	59-6000660		5,000				Technology Match Grant

Form 990,Schedule 1, Pa	<u>rt 11, Grants an</u>	<u>a Otner Assistanc</u> e	<u>a to Governments</u>	and Organizations	s in the United Sta	tes	
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Mulrennan Middle School 4215 Durnat Rd Valrico,FL 33594	59-6000660		11,298				Technology Match Grant

Form 990,Schedule 1, Pa	orm 990,Schedule 1, Part II, Grants and Other Assistance to Governments and Organizations in the United States							
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
Hillsborough County Public Schools PO Box 3408 Tampa,FL 33601	59-6000660		121,655				Classroom/School Grants	

DLN: 93493128017365

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

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. Open to Public Inspection

Internal Revenue Service

Name of the organization HILLSBOROUGH EDUCATION FOUNDATION INC **Employer identification number**

59-2883361

Pai	Tt I Questions Regarding Compensation					
					Yes	No
1a	Check the appropriate box(es) if the organization provide 990, Part VII, Section A, line 1a Complete Part III to					
	First-class or charter travel	Γ	Housing allowance or residence for personal use			
	Travel for companions	Γ	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Γ	Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organ reimbursement or provision of all of the expenses descr			1b		
2	Did the organization require substantiation prior to reim directors, trustees, officers, including the CEO/Executi			2		
3	Indicate which, if any, of the following the filing organization's CEO/Executive Director Check all that a used by a related organization to establish compensation	appl	y Do not check any boxes for methods			
	▼ Compensation committee	Γ	Written employment contract			
	☐ Independent compensation consultant	<u></u>	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 or a related organization	t VII	I, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control pay	mer	nt?	4a		No
b	Participate in, or receive payment from, a supplemental	non	nqualified retirement plan?	4b		No
С	Participate in, or receive payment from, an equity-base	d co	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide	de th	ne applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must of	omj	plete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, lin compensation contingent on the revenues of	e 1 a	a, did the organization pay or accrue any			
а	The organization?			5a		No
b	Any related organization?			5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in Form 990, Part VII, Section A, lin compensation contingent on the net earnings of	e 1 a	a, did the organization pay or accrue any			
а	The organization?			6a		No
b	Any related organization?			6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A, lin payments not described in lines 5 and 6? If "Yes," desc			7		No
8	Were any amounts reported in Form 990, Part VII, paid	ora	accured pursuant to a contract that was			
	subject to the initial contract exception described in Re					
	ın Part III			8		Νo
9	If "Yes" to line 8, did the organization also follow the resection 53 $4958\text{-}6(c)\text{?}$	butt	able presumption procedure described in Regulations	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)(1)-(111) 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-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation	
		(i) Base compensation	(ii) Bonus & ıncentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported as deferred in prior Form 990	
	(i) (ii)	162,294 0	0 0	0 0	15,692 0	0	177,986 0	0 0	

Schedule J (Form 990) 2013

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 J (Form 990) 2013

DLN: 93493128017365

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

SCHEDULE M

(Form 990)

Noncash Contributions

▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990. ▶Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization HILLSBOROUGH EDUCATION FOUNDATION INC

Employer identification number

				59	-2883361			
Pa	rt I Types of Property							
	Ant. Words of out	(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method of noncash contri		_	nts
	Art—Works of art							
	Art—Historical treasures .							
	Art—Fractional interests							
	Books and publications							
Э	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
	Intellectual property							
	Securities—Publicly traded .							
10	Securities—Closely held stock .							
11	Securities—Partnership, LLC, or trust interests							
12	Securities—Miscellaneous							
13	Qualified conservation contribution—Historic							
14	structures Oualified conservation							
	contribution—Other							
	Real estate—Residential .							
	Real estate—Commercial							
	Real estate—Other							
	Collectibles Food inventory							
	Drugs and medical supplies .							
	Taxidermy							
	Historical artifacts							
	Scientific specimens							
	Archeological artifacts							
	Other►(X	0	2,116,337	Fair Market Value	2		
Sch	ool Suppli)			, ,				
26	O ther ►()							
27	O ther ▶()							
28	O ther ▶ ()							
29	Number of Forms 8283 received by th				۵			
	for which the organization completed F	orm 8283,	Part IV, Donee Acknowled	agement	<u> </u>			NI-
302	During the year, did the organization	receive by	contribution any property r	enorted in Dart I lines 1	through 28 that		Yes	No
Jou	it must hold for at least three years fi							
	for exempt purposes for the entire ho			•	to be used	20-		NI -
L						30a		No
о 31	If "Yes," describe the arrangement in Does the organization have a gift acc		licy that requires the revie	w of any non-standard co	ntributions?	31	Yes	
	_		,	,				
∍∠đ	Does the organization hire or use thir contributions?	· · ·	related organizations to s	· · · · · · ·		32a		No
b	If "Yes," describe in Part II							
33	If the organization did not report an a	mount in co	olumn (c) for a type of prop	erty for which column (a)	ıs checked,			
	describe in Part II							

Part II

Supplemental Information. Provide the information required by Part I, lines 30b,

32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference Explanation

Schedule M (Form 990) (2013)

DLN: 93493128017365

OMB No 1545-0047

Open to Public Inspection

SCHEDULE 0 (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.

Name of the organization HILLSBOROUGH EDUCATION FOUNDATION INC

Employer identification number

59-2883361

990 Schedule O, Supplemental	Information
Return Reference	Explanation
Form 990, Part VI, Section B, line 11	
Form 990, Part VI, Section B, line 12c	Annually, the Hillsborough Education Foundation's independent auditors send conflict of in terest questionnaires to each of its Board of Director. Upon completion of the questionnai re, the auditors and the management of the Foundation review these forms to identify any potential conflicts of interest. Any conflict of interest identified will then be taken to the Board of Directors for resolution. All employees will complete a conflict of interest questionnaire upon commencement of employment, and then all senior staff, officers, and ot her key personnel who have the ability to influence decisions, will complete the form annually. The President reviews these forms and identifies any possible conflict of interest. Following full disclosure of a possible conflict of interest, the Board of Directors shall determine whether a conflict of interest exists, and if so, the Board will vote to author ize or reject the transaction or take any other action deemed necessary to address the conflict and protect the Foundations best interest. Both votes shall be a majority vote witho ut counting the vote of any interested Director, even if the disinterested Directors are less than a quorum provided that at least one consenting Director is disinterested. An interested Board member, officer, or staff member shall not participate in a discussion or deb ate of the Board of Directors, in which the subject of discussion is a contract, transaction, or situation in which there may be a perceived or actual conflict of interest. However, they may be present to provide clarifying information in such a discussion or debate unless objected to by any present board or committee member. A copy of this policy shall be given to all Board members, staff members, or volunteers, upon commencement of such person's relationship with the organization, or at the official adoption of stated policy.
Form 990, Part VI, Section B, line 15	Key Officer - President In order to insure that the president's compensation is fair and reasonable, the Foundation's Board established an independent Compensation Committee made up of its members to review and determine the president's compensation package on an annual basis. The Compensation Committee, chaired by the Chairman of the Board, sets written yearly goals that are measurable. Near the president's anniversary date, the Compensation Committee reviews the goals and the written results to decide his compensation package and salary increases. As an aid in this process, the Compensation Review Committee reviews salarly surveys and comparable data obtained from reliable outside sources. Compensation is reviewed and approved based on performance. There is contemporaneous documentation and record keeping with respect to the deliberations and decisions regarding compensation arrangements. After a decision has been made, a letter is written to the Vice President of Finance and disapproved by signature by the Chairman of the Board. Other Officers & Key Employees Once a year at the direction of the President, other officers and key employees set written go als. These goals are reviewed and a written performance evaluation is prepared for each key employee by the President. Third party salary surveys and comparable data also aid in determining their compensation. All raises are based on merit. Key employees on a personal improvement plan or during their 90 day probationary period are not eligible for a raise. Raises are fully discretionary and under certain circumstances, including lack of sufficient funding, may not awarded. Other Staff. Written performance evaluations of other staff are completed annually. Other staff also set written goals each year and the results of these goals, along with their performance evaluations, are used when considering staff raises. Salary adjustments for promotions will also be considered based on comparative data and level of responsibility. All raises are based on merit. Employe
Form 990, Part VI, Section C, line 19	The Hillsborough Education Foundation, Inc. makes its governing documents, conflict of int erest policy and financial information available to the public upon individual request
Form 990, Part XI, line 9	Unrealized Scholarship Appreciation 141,769
Form 990, Part XII Line 2c	Oversight process has not changed from prior year
,	-