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## Return of Organization Exempt From Income Tax

Department of the Treasury Internal: Revenue Service

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

▶ Do not enter social security numbers on this form as it may be made public. ▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public

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	<u>A</u>	For the 2	2014 cale		ax year beginning		y , 2014	, and endi	ng	Dece	mber	, 20 14	
	В	Check if a	pplicable	C Name of organ	nization <u>Friends for</u>	Education					D Employ	er identificat	ion number
		Address c	hange	Doing busines	sas Friends for E	ducation						27-19137	07
		Name cha	nge	Number and s	treet (or PO box if m	all is not delivered t	o street address)	Room/s	urte		E Telepho	ne number	
		Initial retui	'n	22915 SE 13 v	vaγ,					l		425 208 50	036
		Final return	terminated/	City or town, s	tate or province, cou	ntry, and ZIP or fore	ign postal code						
		Amended	return	Sammamish,	WA 98075						G Gross re	ceipts \$	
	П	Applicatio	n pendina		ress of principal offic	er		_		H(a) is this a or	oun return for	subordinates?	Yes 🗸 No
													Yes No
	ī	Tax-exem	ot status	₹ 501(c)(3)	501(c)	) ◀ (insert r	no) 4947(a)(1) o	r 527	う			list (see inst	
	J	Website:		=======================================		, (	10 17 (4)(1)			H(c) Group	exemption	number ▶	
	ĸ			✓ Corporation	Trust Associa	ation Other ►		Year of forma		2011		of legal dom	icile
		art I	Summ							2011	1		
					ganization's miss	sion or most sig	nificant activitie	es: Been	esta	blished to	provide	informal ed	ducation to
	ą	1	,		d other countries	_							
	and				g special books o								
_		_			the organization								
5	LUID & Governance	1	•		nbers of the gove			disposed	<b>01 1</b> 1		3	113 1101 433	Cl3.
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Ç	Activities	1			ss revenue from		n (C) line 12				7a		10
=	≥				s taxable income						7b		0
C	<b>)</b>	<u> </u>	vet unie	iateu busiries:	s taxable income	HOM FORM 990	7-1, III le 34 .		<del></del>	Prior Ye		Curr	ent Year
¥	U.		Contribus	tions and arar	oto (Dort VIII. lino	1h)			<u> </u>				
2	SCANNING REVENUE	1		_	nts (Part VIII, line	•			<u> </u>	\$26	0,190.67		\$249,601.88
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					es 8 through 11-(			, iine 12)	_		7,857.09		\$249,936.79
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2015	Expenses				nses (Part IX, co				<u> </u>				
		1			X, column (A), l <u>i</u> r						7378.07		\$5,074.12
43		1			nes 13–17 (must						6,704.85		\$281,692.15
<i>€</i> Ø			<u>revenue</u>	less expense	s. Subtract line	18 from line 12					8.847.76	Fd	-\$31,755.36
	Net Assets or Fund Balances				40)	•			Deg	inning of Cu		End	of Year
- 2	sse Bala	20		ets (Part X, Iır	•					\$4	6,020.47		\$12,347.31
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	20				ances. Subtract	line 21 from line	20	· · · · ·	L	\$4	6,020.47		<b>\$12,347.31</b>
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Part	
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	The Friends for Education charitable organization has been established to provide informal education to the needy in the USA and
	other countries where cultural education has been historically been marginalized. This education is not limited to classroom and is
	conducted on farms, areas with high incidence of orphans (such as Sri Lanka), and in impoverished areas in USA.
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.
	(O. I
4a	(Code: 001 ) (Expenses \$ \$3,656.26 including grants of \$ 184,020 ) (Revenue \$ \$165,971.62 )
	Education (traditional agriculture, arts, culture): Promote traditional Vedic Education in various parts of US and other parts of world
	Develop or procure rare books of special artistic and educational significance and distribute free of cost in USA where possible
	Distribute books at discounted rates on Amazon.com, Lulu.com including Amazon kindle
4b	(Code: \ Expenses \$ \$1377 B including greats of \$ 02 509 03 \ (Dayonyo \$ \$02 055 17 \)
40	(Code:) (Expenses \$ \$1277 8 including grants of \$ 92,598.03) (Revenue \$ \$83,965.17)
	Basic needs (food, clothing, shelter). Identify innovative ways of providing basic needs in the world and conduct research in
	fundamental ways to solve problems of food(traditional agriculture), clothing, shelter, and care.  Eco Friendly Housing, Cow Shelters, School Infrastructure in developing countries:
	Eco Friendly Housing, Cow Shelters, School Infrastructure in developing countries:  This specific grant is for school education program, specifically for a school in Salem, TN,India
	***************************************
4c	(Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )
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4c	
	(Code:) (Expenses \$including grants of \$) (Revenue \$)  Other program services (Describe in Schedule O.)  (Expenses \$ including grants of \$ ) (Revenue \$ )

Part	IV Checklist of Required Schedules		•	<u> </u>
			Yes	No
<b>1</b>	is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	<b>√</b>	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		✓
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		1
4	<b>Section 501(c)(3) organizations.</b> 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		1
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		1
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			1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<b>▼</b>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		<b>√</b>
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	_		,
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted	9		✓
10	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.		:	·
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	·	/
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		1
С	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		✓
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		✓
e f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11e		<b>√</b>
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		✓
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		✓
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		✓
14 a	J	14a	_	✓
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		\ \_
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	<b>√</b>	<u> </u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16	•	1
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		1
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		1
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?  If "Yes," complete Schedule G, Part III	19		<b>✓</b>
20 -	Did the organization operate one or more hospital facilities? If "Ves " complete Schedule H	00-		1

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

20b

Form 99	0 (2014)		,	Páge
Part	V Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		Yes	No
22	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	✓ ,	_
23	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		<b>√</b>
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		1
c	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b		1
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	24d 25a		<b>√</b>
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		1
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		1
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		1
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	29		✓
31	conservation contributions? If "Yes," complete Schedule M	30		✓
32	Part I	31		<b>√</b>
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	32		<b>✓</b>
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		<b>▼</b>
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		<b>V</b>
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		<b>→</b>

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable

Did the organization conduct more than 5% of its activities through an entity that is not a related organization

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, 

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Part	V Statements Regarding Other IRS Filings and Tax Compliance		_	
•	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a·	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c		1
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		✓
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		✓
b	If "Yes," enter the name of the foreign country: ▶			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			
	(FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		✓
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		✓
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			1
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		✓
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		✓
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		✓
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		✓_
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	<u></u>	
8	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the			Ì
	sponsoring organization have excess business holdings at any time during the year?	8	ļ	<b>✓</b>
9	Sponsoring organizations maintaining donor advised funds.	1		
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a	ļ	<b>√</b>
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		<b>✓</b>
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . [10b]			
11	Section 501(c)(12) organizations. Enter:			
a	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.)			
10-	· · · · · · · · · · · · · · · · · · ·	40-	ļ	
12a b	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year   12b	12a	<u> </u>	<b>✓</b>
		1		1
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	12-	<del> </del>	-
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	<del> </del>	-
ь	<b>Note.</b> See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which			
	Also appropriate to the second to the control of the state plane.			
С		ł		
	5:11	14-	<del> </del>	-
14a h	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14a 14b	-	<b>✓</b>
U	n 100, has a mod an onn 120 to report these payments: If INO, provide air explanation in Scriedule O .	1-40	1	1

Part	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S	ee ias	trụcti	ons.			
Cooki	Check if Schedule O contains a response or note to any line in this Part VI	<u>· · · </u>	<del></del>				
Section	on A. Governing Body and Management	<del></del> 1	Yes	No			
1a	Enter the number of voting members of the governing body at the end of the tax year 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 2	Enter the number of voting members included in line 1a, above, who are independent . Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		✓			
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? .							
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		✓			
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		✓			
6	Did the organization have members or stockholders?	6		✓			
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		1			
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		1			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:						
а	The governing body?	8a	✓	1			
b	Each committee with authority to act on behalf of the governing body?	8b		1			
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at						
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		✓			
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C	ode.)	<del></del>			
			Yes	No			
10a	Did the organization have local chapters, branches, or affiliates?	10a		<b>1</b>			
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b					
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	1				
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.						
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	✓	ļ			
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	✓				
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.	12c		1			
13	Did the organization have a written whistleblower policy?	13		<b>V</b>			
14	Did the organization have a written document retention and destruction policy?	14		1			
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		_				
а	The organization's CEO, Executive Director, or top management official	15a		1			
b	Other officers or key employees of the organization	15b		1			
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).						
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		1			
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b					
Secti	on C. Disclosure			1			
17	List the states with which a copy of this Form 990 is required to be filed ▶ Washington						
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	1 501	c)(3)s	s only			
19	☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)  Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of int financial statements available to the public during the tax year.	erest	polic	y, and			
20	State the name, address, and telephone number of the person who possesses the organization's books and re Ramesh Yerramsetti, 22915 SE 13 way, Sammamish, WA 98075	cords	:▶				

orm	990	(2014)	
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Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,	and
٠.	Independent Contractors	

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

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

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

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

☑ Check this box if neither the organization nor	any related	d orga	aniz	atıo	n co	ompe	nsa	ted any curren	t officer, directo	r, or trustee.
(C)										
(A)	(B)	(do n	ot ch	Posi	-	than c	nne	(D)	(E)	(F)
Name and Title	Average	(do not check more than one box, unless person is both an					an	Reportable compensation from	Reportable	Estimated
	hours per week (list any	officer and a director/trustee)					<u> </u>		compensation from related	amount of other
	hours for related	Individual trustee or director	nstit	Officer	Key employee	ang la	Former	the organization	organizations (W-2/1099-MISC)	compensation from the
	organizations	idua recto	utio	er	emp	est c	Ē	(W-2/1099-MISC)		organization
	below dotted	ı tru:	nal tı		loye	omp				and related organizations
	",	stee	Institutional trustee		е	Highest compensated employee	İ	ļ		organizations
			ď			ated				
(1) Ramesh Yerramsetti Address: 22915 SE 13th	10	,						_	_	
Way. Sammamish, WA 98075	_	✓						0	0	
(2) Jaimin Barot Address: 2155 East Liberty Lane Apt 323, Phoenix, AZ 85048	5	1						0	o	
(3) Navin Bachani Address: 22720, SE 29th Street,	8	_		-			$\vdash$		<u> </u>	
Apt A 101, Sammamish, WA 98075	ļ <del>-</del>	1						0	0	
(4) Deepak Chandanı										
20984 AlvesDrive,CupertinoCA,95014-1828	8	✓						<u> </u>		
(5)										
			_	_						
(6)	ļ									
(7)	<u> </u>									<del> </del>
(8)		_								_
				l						
(9)										
<del> </del>										
(10)	<u> </u>									
(11)			-	_	-		-	-	-	
3.17	<del> </del>							,		
(12)			$\vdash$					<del></del>		_
(13)										
			ļ		_		_			
(14)	ļ									•

Part	VII Section A. Officers, Directors, Trust	ees, Key E	mplo	yees	s, aı	nd F	lighe	st C	ompensated E	mployees (c	ontinu	ued),	
					-	C)			,			•	,
	(A)		Position (do not check more than on					one	(D)	(E)		(	F)
	Name and title	Average	1 '				is both		Reportable	Reportable			nated
		hours per week (list any	<del> </del>	er and	_	lirect	or/trus	<u> </u>	compensation	compensation related	trom		unt of her
		hours for	Individual trustee or director	Inst	Officer	Ş.	a F	Former	the	organization	ıs		ensation
	•	related	legi	<del>_</del>	Ē	Key employee	ploy	l me	organization	(W-2/1099-MI	SC)		n the
		organizations below dotted	호트	<u>آر</u>	ŀ	횽	8 8	`	(W-2/1099-MISC)		- 1	_	ization elated
		line)	rust	<b>1</b>	İ	yee	) pg	ĺ			ł		zations
			6	Institutional trustee			Highest compensated employee						
							ě						_
(15) N/	Α	<b> </b>											
			<u> </u>	_				<u> </u>					
(16)		ļ									l		
								<u> </u>					
(17)		<b> </b>	ļ										
			<u> </u>			_		<u> </u>		ļ			
(18)	•	ļ	ł								1		
(40)	<u> </u>				<u> </u>	<u> </u>		┝	ļ		_		
(19)		ļ	ł										
(00)				<u> </u>				┝					
(20)		<b></b>	ł				ļ						
(04)						_		├			$\dashv$		
(21)		<b></b>	ł										
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(22)		<b></b>	ł					}					
(02)	<u></u>		-				l						
(23)			1								İ		
(0.4)							ļ <u>-</u>	-			$\rightarrow$		
(24)		<b></b>	1								ļ		
(25)			-						<del> </del>	<u> </u>			
(25)		<b></b>	ł										
1b	Sub-total		L						-		<del>-  </del>		
C	Total from continuation sheets to Part			•	•	٠.	•		0		0		
d	Total (add lines 1b and 1c)			•	•		•		0		0		
2	Total number of individuals (including but						above	2)		ore then \$10		2 - 6	
~	reportable compensation from the organi		יו טו ני	iose	IISI	ea a	above	e) w	no received m	ore than \$10	U,UUL	) OT	
	reportable compensation from the organi	Zation										-	Yes No
3	Did the organization list any former of	ficer, direc	tor. c	r tr	uste	ee.	kev e	emp	olovee, or high	est compen	sated		163 140
_	employee on line 1a? If "Yes," complete							-	· · · · ·	•		์   3	1
4	For any individual listed on line 1a, is the												<b>-   *</b>
•	organization and related organizations												1
	individual											4	1
5	Did any person listed on line 1a receive of									zation or indi	vidua		<u> </u>
	for services rendered to the organization											5	1
Section	on B. Independent Contractors								· · · · · · · · · · · · · · · · · · ·				
1	Complete this table for your five highest	compensate	ed inc	depe	end	ent	contr	acto	ors that receive	ed more than	\$100	0.000 of	
	compensation from the organization. Rep												
	year.	•						•			•	<b>J</b>	
	(A)							F	(B)			(C)	_
	Name and business add	ress						ŀ	Description of s	ervices		Compens	ation
N/A	·							N/A	4				N/
-													
2	Total number of independent contractor							th	ose listed abo	ove) who			
	received more than \$100,000 of compens	sation from	the o	rgar	niza	tion	<b>•</b>		0				

Part	VIII	Statement of Revenue Check if Schedule O contains a response or note to	any lina in thia	Port VIII		
,	· <del>·········</del> ·	Check it scriedule o contains a response of note to	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a b	Federated campaigns 1a 0  Membership dues 1b 0		revenue		312-314
S, (	С	Fundraising events 1c 0			•	
ia gi	d	Related organizations 1d 0				
ns,	е	Government grants (contributions) 1e 0				
utio	f	All other contributions, gifts, grants,				
혈	_	and similar amounts not included above 1f \$249,601.88				
Log PL	g	Noncash contributions included in lines 1a-1f \$ 0				
	h	Total. Add lines 1a-1f	\$249,601.88			
Program Service Revenue	2a					
ev.	b					_
e	C			_		
eΖi	d					
SE	e					
gra	f	All other program service revenue .				
Pro	g	Total. Add lines 2a–2f ▶	0			
	3	Investment income (including dividends, interest,				
		and other similar amounts) ▶	o			
	4	Income from investment of tax-exempt bond proceeds ▶	0	· · ·		
	5	Royalties				
		(i) Real (ii) Personal				
	6a	Gross rents 0 0				
	b	Less: rental expenses 0 0				
	С	Rental income or (loss) 0 0				
	d	Net rental income or (loss) ▶	0			
	7a	Gross amount from sales of (i) Securities (ii) Other				
	_	assets other than inventory 0 0				
	b	Less: cost or other basis				
		and sales expenses 0 0				
	C	Gain or (loss) 0 0				
	d	Net gain or (loss)				
Other Revenue	8a	Gross income from fundraising events (not including \$ 0				
er Re		of contributions reported on line 1c) See Part IV, line 18 a				
ਰ		Less: direct expenses b 0				
_		Net income or (loss) from fundraising events . ▶	0			_
	9a	Gross income from gaming activities.				
		See Part IV, line 19 a 0				
	b	Less: direct expenses b 0				
	C	Net income or (loss) from gaming activities	0	· · · · · · · · · · · · · · · · · · ·		
	10a	Gross sales of inventory, less returns and allowances a \$334.91				
		- <del> </del>				
	1	Less: cost of goods sold <b>b</b> 0  Net income or (loss) from sales of inventory <b>b</b>				
	С	Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code	\$334.91			
	11a				<u> </u>	
	i iia b					
	C				-	
	ď	All other revenue	0	0	0	
	e	Total. Add lines 11a–11d	0		- 0	-
	12	Total revenue. See instructions	\$249,936.79	0	0	

Part IY	Statemen	+ ~	f E.	instianal	Evnonce
I GILIA	Glateillei		ı rı	micuonai	EXDELISES

	IX Statement of Functional Expenses				
Sectio	n 501(c)(3) and 501(c)(4) organizations must con				
	Check if Schedule O contains a respon	se or note to any li	ne in this Part IX .		
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) , Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	£27,440,02	¢27,440,00	,	
2	Grants and other assistance to domestic	\$37,118.03	\$37,118.03		
_	individuals See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals See Part IV, lines 15 and 16	\$239,500.00	\$239,500.00		
4	Benefits paid to or for members	_			
5	Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified			<del></del>	
	persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):				
a	Management				
b	Legal			<del></del>	
٠ د	Accounting			· · · · · · · · · · · · · · · · · · ·	
d e	Lobbying				
f	Investment management fees				-
g	Other. (If line 11g amount exceeds 10% of line 25, column				
J	(A) amount, list line 11g expenses on Schedule O) .				
12	Advertising and promotion				
13	Office expenses	\$1,803.25		\$1,803.25	
14	Information technology				_
15	Royalties				
16 17	Occupancy				
18	Travel				
	for any federal, state, or local public officials		_		
19	Conferences, conventions, and meetings .				
20	Interest				
21	Payments to affiliates	-		<del></del> ,	
22	Depreciation, depletion, and amortization .				
23	Insurance				
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
а	Bank Fees	\$45.00		\$45.00	
b	State and City Taxes	\$89.96		\$89.96	
С	Translation expense	\$1,040.00			
d	Computer distribution to Needy	\$1,955.85			
е	All other expenses Depreciation	\$140.06	\$140.06		
25	Total functional expenses. Add lines 1 through 24e	\$281,692.15	\$279,613.88	\$1,938.21	
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 following SOP 98-2 (ASC 958-720)				
	following SOP 98-2 (ASC 958-720)				L

Р	art X				
	+	Check if Schedule O contains a response or note to any line in this Par			
	•		(A) Beginning of year		( <b>B)</b> End of year
	1	Cash – non-interest-bearing	\$43,682.50	1	\$12,067.20
	2	Savings and temporary cash investments		_ 2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees.  Complete Part II of Schedule L		5	
ts	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
Assets	7	Notes and loans receivable, net		7	
As	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 2572 33			
	b	Less: accumulated depreciation 10b 2292.22	420.17	10c	\$280.11
	11	Investments—publicly traded securities		11	
	12	Investments—other securities. See Part IV, line 11	<u> </u>	12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	\$44,102.67	16	\$12,347.31
	17	Accounts payable and accrued expenses	0		0
	18	Grants payable	0	18	0
	19	Deferred revenue	0	19	0
	20	Tax-exempt bond liabilities	0	20	0
	21	Escrow or custodial account liability. Complete Part IV of Schedule D .	0	21	0
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and	·		
api	:	disqualified persons. Complete Part II of Schedule L	0	22	0
	23	Secured mortgages and notes payable to unrelated third parties	0	_	0
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D	0		0
	26	Total liabilities. Add lines 17 through 25	0	26	0
S		Organizations that follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 27 through 29, and lines 33 and 34.			
ဋ	07			07	:
aa	27	Unrestricted net assets	<u> </u>	27 28	
8	28 29	Permanently restricted net assets		29	_
r Fund Balances	29	Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ✓ and complete lines 30 through 34.		29	
80	30	Capital stock or trust principal, or current funds		30	
Net Assets or	31	Paid-in or capital surplus, or land, building, or equipment fund	· · · · · · · · · · · · · · · · · · ·	31	-
As	32	Retained earnings, endowment, accumulated income, or other funds .	\$44,102.67		\$12,347.31
<u>e</u>	33	Total net assets or fund balances	\$44,102.67		\$12,347.31
~	34	Total liabilities and net assets/fund balances	\$44,102.67		\$12,347.31

☐ Consolidated basis ☐ Both consolidated and separate basis

If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

If the organization changed either its oversight process or selection process during the tax year, explain in

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.

2c

За

3b

Form 990 (2014)

Separate basis

Schedule O.

#### **SCHEDULE A** (Form 990 or 990-EZ)

**Public Charity Status and Public Support** 

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

Department of the Treasury Internal Revenue Service Name of the organization

▶ Attach to Form 990 or Form 990-EZ. ▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. OMB No 1545-0047

Open to Public Inspection

**Employer identification number** 

Friends for Education 27-1913707 Reason for Public Charity Status (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). ☐ A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) ☐ A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions-subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV. Sections A and D. and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations. Provide the following information about the supported organization(s). (i) Name of supported organization (ii) EIN (iii) Type of organization (iv) Is the organization (v) Amount of monetary (vi) Amount of listed in your governing (described on lines 1-9) support (see other support (see document? above or IRC section instructions) instructions) (see instructions)) Yes No (A) (B) (C) (D) (E)

Part II

	(Complete only if you checked the Part III. If the organization fails to						alify under
Secti	on A. Public Support	quality unde	i the tests no	ited below, p	iease compie	oto i dit iii.j	
	dar year (or fiscal year beginning in) ▶	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	(4) 20.0	(2) 23	(6) 23:2	(4)	(6) 2.5	(7)
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge				,	<i>a'</i>	
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4				Ì		
	on B. Total Support				4		
	dar year (or fiscal year beginning in) ▶	(a) 2010	<b>(b)</b> 2011	(c) 2012	<b>(d)</b> 2013	(e) 2014	(f) Total
7	Amounts from line 4			The state of the s			
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources			<i>,</i> "			
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 12	<b>Total support.</b> Add lines 7 through 10 Gross receipts from related activities, etc.					12	
13	First five years. If the Form 990 is for the organization, check this box and stop he	re	<u>./.</u>			ear as a section	
	on C. Computation of Public Suppor					<del>-</del>	
14	Public support percentage for 2014 (line 6					14	<u>%</u>
15 16-	Public support percentage from 2013 Sch					15	%
16a	331/3% support test—2014. If the organization qua				u line 14 is 33	73% or more, c	neck this
b	331/3% support test—2013. If the organ			_	 r 16a and line		or more
	check this box and <b>stop here.</b> The organ					. 10 13 00 /3/0	ormore, ▶ □
17a	10%-facts-and-circumstances test—20 10% or more, and if the organization me- Part VI how the organization meets the "f organization	014. If the orga	inization did no and-circumsta	ot check a box nces" test, che	on line 13, 16 eck this box ar	nd stop here. I	Explain in
b	10%-facts-and-circumstances test—20 15 is 10%-or more, and if the organizate Explain Part VI how the organization me supported organization	tion meets the	"facts-and-ci	rcumstances"	test, check th	nis box and <b>st</b>	op here.
18	Private foundation. If the organization di instructions			, 16a, 16b, 17a			see . ▶ □
	7			_			

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

#### 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.)

Secti	on A. Public Support						
Calen	dar year (or fiscal year beginning in) ▶	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	<b>(e)</b> 2014	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")		\$404 F77 2F	#170 07F 00	200400 67	<b>*240.001.00</b>	#304 AAT 30
2	Gross receipts from admissions, merchandise		\$101,577.25	\$170,075.99	260190.67	\$249,601.88	\$781,445.79
	sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose			\$484.32	627 42	\$334.91	\$1,446.65
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6 7a	<b>Total.</b> Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons .		\$101,577.25	\$170,560.31	\$260,818.09	\$249,936.79	\$782,892.44
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
_	· ·		\$38,239.61	\$38,239.61	\$193,956	\$232,173.12	\$502,608.34
С 8	Add lines 7a and 7b	-	\$38,239.61	\$38,239.61	\$193,956	\$232,173.12	\$502,608.34
	line 6.)						\$278,837.45
	on B. Total Support	(=) 0010	(h) 0011	(-) 0010	(4) 0010	(-) 0014	(O Total
Galen 9	dar year (or fiscal year beginning in)  Amounts from line 6	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.		\$101,577.25	\$170,560.31	\$260,818.09	\$249,936.79	\$782,892.44
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						-
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	,					_
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	<b>Total support.</b> (Add lines 9, 10c, 11, and 12.)		\$101,577.25	\$170,560.31	\$260,818.09	\$249,936.79	\$782,892.44
14	First five years. If the Form 990 is for the organization, check this box and stop he			d, third, fourth	, or fifth tax ye	ear as a sectio	n 501(c)(3)
Secti	on C. Computation of Public Support	rt Percentag	<u>e</u>				
15	Public support percentage for 2014 (line	8, column (f) di	ivided by line 1	3, column (f))		15	%
16	Public support percentage from 2013 Sci				<u> </u>	16	%
Secti	on D. Computation of Investment In	come Perce	ntage				
17	Investment income percentage for 2014 (	•	• • • • • • • • • • • • • • • • • • • •	•		17	
18	Investment income percentage from 2013					18	%
19a	331/3% support tests—2014. If the organ						
b	17 is not more than 331/3%, check this box 331/3% support tests—2013. If the organization 18 is not more than 231/2%, shock this	zation did not c	heck a box on	line 14 or line 1	9a, and line 16	is more than 3	3 <sup>1</sup> /3%, and
20	line 18 is not more than 33½%, check this <b>Private foundation.</b> If the organization di		_				_
20	Tivate iounidation in the organization of	a not check a	DOX OIT IIITE 14,	130, 01 130, 0	HICCK HIIS DUX	and see instru	JUI 13

#### SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

#### **Supplemental Financial Statements**

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

► Attach to Form 990. ► Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. OMB No 1545-0047

Open to Public Inspection

Employer identification number

Friends for Education Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year . . . . . . . 2 Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) . Aggregate value at end of year . . . . . 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? . . . . . . . . ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area ☐ Preservation of a certified historic structure ☐ Protection of natural habitat ☐ Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year 2a 2b h Number of conservation easements on a certified historic structure included in (a) . . . . 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a 2d 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► Number of states where property subject to conservation easement is located ▶ 4 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: Assets included in Form 990, Part X . . . .

Page	2

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection tems (check all that apply):  a	Part	Organizations Maintaining	Collections of	Art, His	torical 1	Treasures,	or Ot	her Similar As	sets (cor	ntinued)
b Scholarly research   c   Other	3			her reco	rds, chec	k any of the	follov	ving that are a s	ignificant	use of its
c	а	☐ Public exhibition		d	☐ Loan	or exchange	e prog	rams		,
c   Preservation for future generations 4   Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5   During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?   yes   No    Part IV   Escrow and Custodial Arrangements.   Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.  1a is the organization an agent, furstee, custodian or other intermediary for contributions or other assets not included on Form 990, Part XV.   yes   No    1b   It "Yes," explain the arrangement in Part XIII and complete the following table:  1   Segimining balance   11d	b	☐ Scholarly research		е	☐ Othe	r				
XIII.  5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No No No No No No No No No No No No No	C									
Part IV   Escrow and Custodial Arrangements.   Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.   Is the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.   Is the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.   Is It "Yes," explain the arrangement in Part XIII and complete the following table:    Complete if the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account lability?   Yes   No If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII   Indicate the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account lability?   Yes   No If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII   Endowment Funds.   Complete if the organization answered "Yes" to Form 990, Part IV, line 10.   Complete if the organization answered "Yes" to Form 990, Part IV, line 10.   Complete if the organization answered "Yes" to Form 990, Part IV, line 10.   Contributions   Complete if the organization answered "Yes" to Form 990, Part IV, line 10.   Contributions   Complete if the organization and programs   Complete if the organization in the possession of the organization that are held and administered for the organization by:    Part V	4		tion's collections a	and expl	ain how t	hey further t	he org	anızation's exen	ipt purpo	se in Part
Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.  1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?	5									s 🗌 No
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?  □ Beginning balance □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	Part									_
included on Form 990, Part X?    Seginning balance		990, Part X, line 21.				•	·	•		Form
Beginning balance	1a									s 🗌 No
d Additions during the year e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?	b	If "Yes," explain the arrangement in Pa	art XIII and comple	ete the fo	ollowing t	able:		A	mount	
Distributions during the year   fending balance   fending balan	C	Beginning balance					10			
f Ending balance . 11	d	Additions during the year					1d			
2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?	е	Distributions during the year					1e			
Part V Endownent Funds.  Complete if the organization answered "Yes" to Form 990, Part IV, line 10.    Beginning of year balance   (a) Current year   (b) Phor year   (c) Two years back   (d) Three years back   (e) Four	f									
Endowment Funds.   Complete if the organization answered "Yes" to Form 990, Part IV, line 10.	2a	Did the organization include an amour	nt on Form 990, Pa	art X, line	e 21, for e	scrow or cu	stodia	account liability	? 🗌 <b>Ye</b> :	s 🗌 No
Complete if the organization answered "Yes" to Form 990, Part IV, line 10.    Beginning of year balance   (a) Current year   (b) Pnor year   (c) Two years back   (d) Three years back   (e) Four years back			art XIII. Check here	e if the e	xplanatio	n has been p	orovide	ed in Part XIII .		
(a) Current year   (b) Pnor year   (c) Two years back   (d) Three years back   (e) Four years back   (d) Three years back   (d) Three years back   (e) Four years back   (d) Three years back   (e) Four years back   (d) Three 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 back   (d) Three years back   (e) Four years back   (d) Three years back   (e) Four years back   (d) Three years back   (d) Three years back   (e) Four years back   (d) Three years back   (e) Four years back   (d) Three 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	Par		· · · ·			•				
Beginning of year balance		Complete if the organization	answered "Yes"	" to For	m 990, F	Part IV, line	10.			
b Contributions c Net Investment earnings, gains, and losses. d Grants or scholarships e Other expenditures for facilities and programs.  f Administrative expenses. g End of year balance  Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:  a Board designated or quasi-endowment ▶ %  b Permanent endowment ▶ %  The percentages in lines 2a, 2b, and 2c should equal 100%.  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) unrelated organizations (ii) related organizations  b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  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 (b) Cost or other basis (c) Accumulated depreciation (d) Book value depreciation  1a Land  b Buildings  c Leasehold improvements  d Equipment  S2572.33  S2572.33  S2592.33  S292.22  S80.11			(a) Current year	<b>(b)</b> Pr	or year	(c) Two years	back	(d) Three years back	(e) Four	years back
C Net investment earnings, gains, and losses	1a	Beginning of year balance	-							
d Grants or scholarships e Other expenditures for facilities and programs	b	Contributions							T	
e Other expenditures for facilities and programs	С									
e Other expenditures for facilities and programs	d	Grants or scholarships								
f Administrative expenses		· ·						•		
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:  a Board designated or quasi-endowment ▶ %  b Permanent endowment ▶ %  Temporarily restricted endowment ▶ %  The percentages in lines 2a, 2b, and 2c should equal 100%.  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) unrelated organizations										
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:  a Board designated or quasi-endowment ▶ %  b Permanent endowment ▶ %  Temporarily restricted endowment ▶ %  The percentages in lines 2a, 2b, and 2c should equal 100%.  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) unrelated organizations	f	Administrative expenses		-					+	
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:  Board designated or quasi-endowment ▶ %  Permanent endowment ▶ %  Temporarily restricted endowment ▶ %  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		•				<u> </u>			+	
a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ % c Temporarily restricted endowment ▶ % The percentages in lines 2a, 2b, and 2c should equal 100%.  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) unrelated organizations	_	- · · · · · · · · · · · · · · · · · · ·	he current vear en	d baland	ce (line 1c	ı column (a)	held:	38.		
b Permanent endowment					30 (1111) 05	,, oolann (a)	,			
Temporarily restricted endowment    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		Permanent endowment	%	'0						
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	c	Temporarily restricted endowment ▶								
Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) unrelated organizations	·	· · · · · · · · · · · · · · · · · · ·		n0%						
Ves   No	3a				ization th	at are held a	nd ad	ministered for th	۵	
(i) unrelated organizations	-		- p	.o o.ga		a. a.oo.a c			_	Vas No
(ii) related organizations		· ·								700 110
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?		-								
4 Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property (a) Cost or other basis (other) (c) Accumulated depreciation (investment) (other)  1a Land	h						• •			
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 (other)  (b) Cost or other basis (other)  (c) Accumulated depreciation  (d) Book value  (d) Book value  (d) Book value  (d) Book value  (d) Book value  (e) Cost or other basis (other)  (other)  (b) Cost or other basis (other)  (c) Accumulated depreciation  (d) Book value  (e) Accumulated depreciation  (f) Book value  (g) Book value  (	_			•			• •		0.5	
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 (ninvestment)  (b) Cost or other basis (other)  (c) Accumulated depreciation  (d) Book value  (d) Book value  (d) Book value  (e) Accumulated depreciation  (f) Cost or other basis (other)  (investment)  (inves	Part									
Description of property  (a) Cost or other basis (other)  (investment)  (b) Cost or other basis (other)  (c) Accumulated depreciation  (d) Book value  (d) Book value  (d) Book value  (e) Accumulated depreciation  (f) Accumulated depreciation  (other)  (investment)  (i				" to For	m 990. F	Part IV line	11a S	See Form 990	Part X lir	ne 10
Ia         Land         (other)         depreciation           b         Buildings         2           c         Leasehold improvements         3           d         Equipment         \$2572.33         \$2572.33         \$2572.33         \$2572.33           e         Other         3         3         4         4         4         4         4         4         4         4         4         4         4         4         5         5         5         5         5         5         7         2					ĭ				_	
b Buildings		Section of property	1		, ,				(4) 5000	
b         Buildings		Land	_		<u> </u>	<del></del>				
c       Leasehold improvements					<del>                                     </del>					
d Equipment	c	_								
e Other	ų	·		\$2572 22	-	\$2572 22		2202 22		280 11
				<del></del>		#E31E.33		2232 44		200.11
				90. Part	X. columr	n (B), line 10a	c.) .			

	(a) Description of security or category	(b) Book value		hod of valuation
	(including name of security)		Cost or end	-of-year market value 
	I derivatives			
	neld equity interests			
Other				
A)				
B)				
C)				<del> </del>
D) <del>-</del>				
<u>:)</u>	•	ļ		
<del>-</del> ) -,				
<del>]</del> (				
<del>-</del> 1)				
	(b) must equal Form 990, Part X, col (B) line 12.)			
rt VIII	Investments – Program Related.  Complete if the organization answered "Yes" to For	m 990 Part IV line	11c See Form	990 Part X line
	(a) Description of investment	(b) Book value		thod of valuation
			Cost or end	-of-year market value
	···			
		<u> </u>		
				<del></del>
1 (0 (	4)			
	(b) must equal Form 990, Part X, col. (B) line 13.) ►	ll		
art IX	Other Assets.	000 Dart IV II-a	11 d Caa Farma	000 Dad V II
	Complete if the organization answered "Yes" to For	m 990, Part IV, line	11a. See Form	(b) Book value
	(a) Description			(b) Book value
<del> </del>	<del></del>			
-				
al (Colu	ump (h) must oqual Form 900. Part V. and (P) line 15.)			
	imn (b) must equal Form 990, Part X, col. (B) line 15.)			
t <b>al</b> . (Colu	Other Liabilities.			Form 000 Posts
	Other Liabilities. Complete if the organization answered "Yes" to For			Form 990, Part
	Other Liabilities. Complete if the organization answered "Yes" to Foiline 25.			Form 990, Part 3
art X	Other Liabilities. Complete if the organization answered "Yes" to Foiline 25.  (a) Description of liability (b) Book value			Form 990, Part 2
art X	Other Liabilities. Complete if the organization answered "Yes" to Foiline 25.			Form 990, Part )
art X	Other Liabilities. Complete if the organization answered "Yes" to Foiline 25.  (a) Description of liability (b) Book value			Form 990, Part )
art X	Other Liabilities. Complete if the organization answered "Yes" to Foiline 25.  (a) Description of liability (b) Book value			Form 990, Part 2
art X	Other Liabilities. Complete if the organization answered "Yes" to Foiline 25.  (a) Description of liability (b) Book value			Form 990, Part
art X	Other Liabilities. Complete if the organization answered "Yes" to Foiline 25.  (a) Description of liability (b) Book value			Form 990, Part
art X	Other Liabilities. Complete if the organization answered "Yes" to Foiline 25.  (a) Description of liability (b) Book value			Form 990, Part
tal. (Colu Part X	Other Liabilities. Complete if the organization answered "Yes" to Foiline 25.  (a) Description of liability (b) Book value			Form 990, Part
art X	Other Liabilities. Complete if the organization answered "Yes" to Foiline 25.  (a) Description of liability (b) Book value			Form 990, Part
ral. (Colu	Other Liabilities. Complete if the organization answered "Yes" to Foiline 25.  (a) Description of liability (b) Book value			Form 990, Part

Schedu	e D (Form 990) 2014			Page 4
Part	XI Reconciliation of Revenue per Audited Financial Stateme Complete if the organization answered "Yes" to Form 990, F		Return.	
1	Total revenue, gains, and other support per audited financial statements		<u> </u>	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		<del>-                                    </del>	<del>- ,</del>
а	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b	1	
C	Recoveries of prior year grants		1 1	
d	Other (Describe in Part XIII.)			
e	Add lines 2a through 2d		00	
3	Subtract line 2e from line 1		2e	
		i . i	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines <b>4a</b> and <b>4b</b>		4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line		5	
Part	· · ·		er Return.	
	Complete if the organization answered "Yes" to Form 990, F	Part IV, line 12a.		
1			1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b	1	
С	Other losses	2c	1	
d	Other (Describe in Part XIII.)			
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
	Investment expenses not included on Form 990, Part VIII, line 7b	40		
a		4a		
b	Other (Describe in Part XIII.)			
C		- 401	4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information.	e 18.)	5	
rovid	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part			art X, line
PART	5, 1d - Books previously treated as assets have been written down - \$1872.05 a	and depreciation for Computer	er, printer and mon	itor in
2012, 2	013, 2014 is \$420.17 total depreciation claımed in 2013 is \$1872.05 + \$420.17 =	2292.22.		
<b>.</b>				
		· <b></b>		
	·			
		······································		

#### SCHEDULE F (Form 990)

**Statement of Activities Outside the United States** 

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. ▶ Attach to Form 990.

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

**Open to Public** Inspection

	i the organization				[ '	,	uncation number
	s for Education	A A Aliciat	Out-:-!-	the United Ctatas O	nlada if dh		913707
Part	Form 990, Part IV, line		es Outside	the United States. Com	piete it the organiz	ation answe	erea "Yes" on
1	For grantmakers. Does the		maintain reco	ords to substantiate the am	ount of its grants	and other	<del></del>
•	assistance, the grantees' eli						
	grants or assistance?						✓ Yes □ No
2	For grantmakers. Describe		he organizati	on's procedures for moni	toring the use of	its grants	and other
	assistance outside the Unite	ed States.					
3	Activities per Region. (The fo	llowing Part I	line 3 table (	can be duplicated if additio	nal snace is neede	ad )	
	(a) Region	(b) Number of	(c) Number of	(d) Activities conducted in	(e) If activity listed		(f) Total
	(a) region	offices in the region	employees, agents, and	region (by type) (e g , fundraising, program services,	a program sen describe specific	vice,	expenditures for and investments
		, region	independent contractors	investments,	service(s) in re	gion	in region
			in region	located in the region)			
(1)	India	0	0	Crante to public charities	Education		#220 E00 00
,	inuid		0	Grants to public charities	Education		\$239,500.00
(2)							
(2)							
(3)			<del></del>				
(4)		!	<u>.</u>				
(5)							
(0)							
(6)							
(7)							
(8)							
(9)							
10)							
10,				-			
11)							
12)							
40)							
13)				-			
14)							
15)				1			
,						-	<del></del>
16)	<u> </u>						
17)							
За	Sub-total						\$239,500.00
Ь	Total from continuation						
	sheets to Part I			<del> </del>	<del> </del>		
•	Totals (add lines 3a and 3b)	1		i	1		\$220 E00 00

Schedule F (Form 990) 2014

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. Part II

(if applicable) (if applicable) India India India India	Education  Education  Basic Needs  Basic Needs	\$70,000.00 Check \$70,000.00 Check \$50,000.00 Check \$50,000.00 Check	cash disbursement theck theck theck	assistance 0 0 0	(f) Description of non-cash assistance	Waluation (book, FMV, appraisal, other)  N/A  N/A
India India India India	Education Education Basic Needs Basic Needs	\$70,000.00 C \$75,000.00 C \$50,000.00 C	theck theck theck	0 0 0		N/A N/A N/A
India India	Education  Basic Needs  Basic Needs	\$75,000.00 (	theck theck	0 0		N/A N/A
India	Basic Needs Basic Needs	\$50,000.00 (	heck	0 0		N/A
India	Basic Needs	\$40,000.00	heck	0		
						N/A
						,

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

N

<sup>3</sup> Enter total number of other organizations or entities

Page 3

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed. Schedule F (Form 990) 2014

Part III Grants al

(h) Method of valuation (book, FMV; appraisat, other)												1							Schedule F (Form 990) 2014
(g) Description of non-cash assistance																			Sche
(f) Amount of non-cash assistance																			
(e) Manner of cash disbursement																			
(d) Amount of cash grant																			
(c) Number of recipients																			
of grant or assistance (b) Region (c) Number of recipients																			
(a) Type of grant or assistance	(1)	(2)	(3)	(4)	(5)	(9)	(2)	(8)	(6)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)	(18)	

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Pa	ae	4

Part	V	Foreign Forms		
1	the c	the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign foration (see Instructions for Form 926)	Yes	No
2	may Rece	the organization have an interest in a foreign trust during the tax year? If "Yes," the organization be required to file Form 3520, Annual Return To Report Transactions With Foreign Trusts and eipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)	☐ Yes	<b></b> ✓ No
3	the c	the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to ain Foreign Corporations (see Instructions for Form 5471)	☐ Yes	✓ No
4	quali <i>Infori</i>	the organization a direct or indirect shareholder of a passive foreign investment company or a fied electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, mation Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing (see Instructions for Form 8621).	☐ Yes	<b>√</b> No
5	the c	the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain and Partnerships (see Instructions for Form 8865)		<b>☑</b> No
6	"Yes	he organization have any operations in or related to any boycotting countries during the tax year? If "the organization may be required to file Form 5713, International Boycott Report (see Instructions orm 5713; do not file with Form 990)		☑ No

☐ Yes

✓ No

Part V Supplemental Informatio	Supplemental Inform	ation
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Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

This year all international donations were in India. The organization is ISKCON known for its philanthrophic work in the area of education and						
has a dedicated volunteer cadre with low cost structure. ISKCON has educational instituions all over India.						
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# **SCHEDULE 1** (Form 990)

Department of the Treasury Name of the organization Internal Revenue Service

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

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

▶ Attach to Form 990.

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

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lo 1545-0047	014
OMB No	Ø

Open to Public

Employer identification number

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, **%** □ **Educational Programs Educational Programs Educational Programs** (h) Purpose of grant or assistance S ✓ Yes 27-1913707 **Book Dist Van** Youth Shelter Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and . . . . (g) Description of non-cash assistance Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. . . . . . . . (f) Method of valuation (book, FMV, appraisal, other) Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. (e) Amount of non-cash assistance Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 250 \$7,008.00 (d) Amount of cash \$4,000.00 \$25,860.03 \$3,000.00 grant Enter total number of other organizations listed in the line 1 table (c) IRC section if applicable the selection criteria used to award the grants or assistance? For Paperwork Reduction Act Notice, see the Instructions for Form 990. General Information on Grants and Assistance 76-0606859 91-2110379 91-0987890 23-7203089 91-1918588 (p) EIN (1) ISKCON, LA, CA (2) Roots Inc. Seattle, WA (3) Texas Krishnas, Dallas, TX 1 (a) Name and address of organization (4) Vedic Cultural Center, or government (5) Northwest SHARE Friends for Education Sammamish, WA Kırkland, WA Part Part II

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Schedule I (Form 990) (2014)

Cat No 50055P

(12)

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Schedule I (Form 990) (2014)

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.

Schedule I (Form 990) (2014) The funds are provided to government approved charities in USA with 501(c)(3) status. The monitoring happens by the cultural activities, educational programs, and free food distribution (f) Description of non-cash assistance programs that these organizations conduct under public eye. The directors have also reviewed the activities by personally reviewing activities conducted by these organizations. Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information. (e) Method of valuation (book, FMV, appraisal, other) (d) Amount of non-cash assistance (c) Amount of cash grant Part III can be duplicated if additional space is needed. (b) Number of recipients (a) Type of grant or assistance Part IV Ŋ ო 9 Ø 4

### SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Name of the organization

Friends for Education

Internal Revenue Service

#### Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047

Open to Public Inspection

Employer identification number

27-1913707

In 2015 we would like to be a truly global charity with local focus and expand activities in the USA. Book sales have gone down from 2014
New book publication has slowed and no new shipments were needed. However donor base has remained and have provided donations
for the purposes of the organization.
In 2014 tax period the organization used cash basis for accounting
In 2015 organization will focus more on identifying new projects to be supported
Part VI: 1a The organization does not have material differences in voting rights, No delegation of governing board's authority
to exec committee
Part V1 8b Since there is no delegation of governing board's authority to exec committee or any committee. There were no separate
meetings conducted by any committee
Part V 13 a: Organization is a supporting education so not involved in issuing health plans in any state
Part VI: 11b The process of reviewing the form 990 was an e-mail sent to all the board and then updates made based on verbal and
Subsequent phone meetings
Part VI 12c: Since the board was composed of a small group each others actions were monitored in person. There is no written policy or
procedure to monitor this compliance
Part Vi 19: The documents are available with the board and upon request by donors or the general public these are being shared as neeeded
Part VII: The board and officers do not draw a salary and are working in a volunteer capacity.
Part I: Line 10 The grants were provided to domestic organizations in some cases with international presence and to worldwide organization
Tarvi. Line 10. The grants were provided to domestic organizations in some cases with memational presence and to worldwide organization.
engaged in educational activities
***** ·
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Schedule O (Form 990 or 990-EZ) (2014)	Page 2
Name of the organization	Employer identification number
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