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Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No 1545-0047

▶ Do not enter social security numbers on this form as it may be made public. Department of the Treasury Internal Revenue Service ▶ Information about Form 990 and its instructions is at www.irs.gov/form990. Open to Public Inspection

<u>A</u>	For the	2014 calendar year, or tax year beginning	and	ending		
В	Check if applicable	C Name of organization			D Employer identifie	cation number
Г	Addre:	Stuart Educational Found	dation. Inc.			
Ī	Name change	Doing business as			35-2	240517
Ē	Initial	nital			E Telephone number	
Ē	Final	P.O. Box 4612	10 00 00 00 00 00 00 00 00 00 00 00 00 0	Room/suite	· ·	354-3591
	termin ated		G Gross receipts \$	115,549.		
	Ameno		3p		H(a) Is this a group re	
	Applic	F Name and address of principal officer:ROSS	Kory		for subordinates	
	pendir	same as C above	•		H(b) Are all subordinates in	
1-	Tax-exe		(insert no.) 4947(a)(1)	or 527	1-1-1 — — —	list. (see instructions)
J	Websit	e: > stuartfund.com			H(c) Group exemption	•
		organization: X Corporation Trust Associ	ciation Other >	L Year	of formation: 2004 N	State of legal domicile; VA
P	art i	Summary				
Ð	1	Briefly describe the organization's mission or most sig	inificant activities To pa	rovide	need-based	
Activities & Governance		<u>scholarships for Stuart Hic</u>	h School grad	uates.		
ž	2	Check this box 🕨 🔲 if the organization discontir	nued its operations or dispos	sed of more	than 25% of its net as	sets.
ŏ	3	Number of voting members of the governing body (Pa	art VI, line 1a)		3	19
- ಇರ	4	Number of independent voting members of the gover	ning body (Part VI, line 1b)		. 4	19
es	5	Total number of individuals employed in calendar yea	r 2014 (Part V, line 2a)		. 5	0
Ξ	6	Total number of volunteers (estimate if necessary)			6	0
ğ	7 a	Total unrelated business revenue from Part VIII, colun	nn (C), line 12		<u>7a</u>	0.
	b	Net unrelated business taxable income from Form 99			7b	0.
			RECEIVED	1 📙	Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)		7 ()	138,358.	115,466.
	9	Program service revenue (Part VIII, line 2g)		481 🗆	0.	0.
ě	10	Investment income (Part VIII, column (A), lines 3, 4, ar	ब्रिहेन) हा। 🛈 ल १०१५		142.	83.
ш.	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 🦫	c, 10c, and 11e)	그리匚	0.	0.
	12	Total revenue - add lines 8 through 11 (must equal Pa	rt VIII, column (A), line 12)		138,500.	115,549.
	13	Grants and sımılar amounts paıd (Part IX, column (A),أ	lines-1-3)	'	72,013.	88,410.
	14	Benefits paid to or for members (Part IX, column (A), I	ine 4)		0.	0.
es	15	Salaries, other compensation, employee benefits (Par	t IX, column (A), lines 5-10)		0.	0.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line			0.	0.
ă	b	Total fundraising expenses (Part IX, column (D), line 2	5) ▶ 3,2	<u>59.</u>		
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 1	1f-24e)		4,191.	6,581.
		Total expenses Add lines 13-17 (must equal Part IX, o			76,204.	94,991.
	19	Revenue less expenses Subtract line 18 from line 12			62,296.	20,558.
200				Be	ginning of Current Year	End of Year
Sset	20	Total assets (Part X, line 16)			190,527.	211,085.
Net Assets or	21	Total liabilities (Part X, line 26)			0.	0.
쳝	22_	Net assets or fund balances Subtract line 21 from lin	e 20		190,527.	211,085.
	art II	Signature Block				
		Ities of perjury, I declare that I have examined this return, inc				y knowledge and belief, it is
true	, correc	t, and complete. Declaration of preparer (other than officer)	s based on all information of wi	hich preparei	has any knowledge.	<u> </u>
		Signature of officer			. Data	
Sig	n				7/1/2015	
He	re	Ross Kory, Treasurer			41/2013	<u> </u>
		Type or print name and title			Data	OTIN .
			eparer's rignature		Date Check Check if	PTIN
Pai		Stephen G Travis, CPA	101		Self-employe	
	parer		nd Company	 .	Firm's EIN	54-1342298
Use	Only	Firm's address 5270 Shawnee Road				
_		Alexandria, VA 223			Phone no. (7	03) 642-2700 ·
840	V 100 11	OC discusses this return with the property chause chave				V V 3 M-

432001 11-07-14 LHA For Paperwork Reduction Act Notice, see the separate instructions.

	1990 (2014) Stuart Educational Foundation, Inc. 35-2240517 Page 2
Pai	rt III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission.
	To provide need-based scholarships for Stuart High School graduates
	pursuing post-secondary education. The Foundation supports students
	who demonstrate a commitment to learning and being contributing
	members of their communities.
2	Did the organization undertake any significant program services during the year which were not listed on
	the pnor 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 \$ 88,410 . including grants of \$ 88,410 .) (Revenue \$)
	Provided scholarships to graduates of Stuart High School graduates who
	have attended Stuart for at least four semesters prior to graduation
	and who demonstrate financial need, academic achievement, and
	contributions to the community.
	(Code) (Expenses \$ including grants of \$) (Revenue \$)
70	(Code) (Expenses \$
4c	(Code) (Expenses \$
4d	Other program services (Describe in Schedule O.)
→ u	
<u></u>	(Expenses \$ including grants of \$) (Revenue \$) Total program service expenses ► 88,410.
<u>4e</u>	Form 990 (2014)
43200 11-07	2

			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	X	ļ
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
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	L	X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		<u> </u>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	<u> </u>	X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	<u> </u>	X
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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete		1	l
	Schedule D, Part III	8		X
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		X
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		<u>X</u>
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		X
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		X
C	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total		ŀ	
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
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	<u> </u>	X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	<u> </u>	X
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		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			l
	Schedule D, Parts XI and XII	12a		<u>X</u>
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			l
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		<u> X</u>
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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	l		3,5
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	-	<u> </u>
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			v
40	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	 	X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			v
47	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	-	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,		İ	v
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	-	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	ا	1	v
40	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			v
00-	complete Schedule G, Part III	19	-	X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	\vdash	X
D	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	000	(2014)
		rom	マプリ	(2014)

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
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		X
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), 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	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's pnor Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
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		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	-		
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member	}		
	of any of these persons? If "Yes," complete Schedule L, Part III	27		_X_
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
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		<u>X</u>
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		<u> </u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
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		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
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	ļ	X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	ļ	X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	1		
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		<u> </u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X_
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?]
	Note. All Form 990 filers are required to complete Schedule O	38	X	<u> </u>
		Form	990	(2014)

	W Contract Description Of the IDC Ciliana A Tourist Contract of the IDC Contract of th	<u> </u>		age •
Pai	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			_
	Shook is Solidadio S contains a response of note to any line in this Fart Y			<u>ا</u>
4-	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		Yes	No
1a				
b				
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	4.		
20		1c		
Za	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	20		
32	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		x
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	30		
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
h	If "Yes," enter the name of the foreign country:	- 		1
-	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		X
ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	-	X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
-	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		Х
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).			
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		x
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		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year . 7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			l
	sponsoring organization have excess business holdings at any time during the year?	8		<u> </u>
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		<u> </u>
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		<u> </u>
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12	l		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders	ļ		
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)	l		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		<u> </u>
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year . 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	 	-
_	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans	{		
C	Enter the amount of reserves on hand	-		17
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
D	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Form 990 (2014) Stuart Educational Foundation, Inc. 35-2240517 Page Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI			\mathbf{x}					
Sec	tion 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 19			_					
	If there are material differences in voting rights among members of the governing body, or if the governing								
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.								
ь	Enter the number of voting members included in line 1a, above, who are independent 1b 19								
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other								
	officer, director, trustee, or key employee?	2	х						
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision								
	of officers, directors, or trustees, or key employees to a management company or other person?	3	•	X					
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?								
-5-									
6	Did the organization have members or stockholders?	6		X					
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or								
	more members of the governing body?	7a		X					
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	Ĭ							
	persons other than the governing body?	7b		X					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:								
а	The governing body?	8a	Х						
b	Each committee with authority to act on behalf of the governing body?	8b	Х						
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		X					
<u>Sec</u>	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)								
			Yes	No					
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х					
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	Х						
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		i						
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		X					
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b							
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	1							
	ın Schedule O how this was done .	12c							
13	Did the organization have a written whistleblower policy?	13		X					
14	Did the organization have a written document retention and destruction policy?	14		Х					
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		X					
b	Other officers or key employees of the organization	15b		X					
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)	1							
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		_X_					
þ	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	1							
	exempt status with respect to such arrangements?	16b							
Sec	tion C. Disclosure								
17	List the states with which a copy of this Form 990 is required to be filed ►VA								
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a	vailab	le						
	for public inspection. Indicate how you made these available. Check all that apply.								
	W Own website								
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	financ	cial						
	statements available to the public during the tax year.								
20	State the name, address, and telephone number of the person who possesses the organization's books and records:								
	Ross Kory - (703)354-3591								
	6505 Waterway Drive, Falls Church, VA 22044								

432006 11-07-14

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, 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

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

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

(A) Name and Title	(B) Average hours per	box	not co	Pos heck ss pe	more rson	than is bot	h an	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer		Highest compensated employee	Ĺ	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) Carrie Douglas	2.00									_
Director		X				ļ		0.	0.	0.
(2) Kathleen Perez-Lopez	2.00	.							_	_
Director	2.00	X	-	├—	-	ļ		0.	0.	0.
(3) Robert A. Feldman Director	2.00	x						0.	0.	0.
(4) Kathleen McBride	2.00									
Director		X						0.	0.	0.
(5) Kari Kelley	2.00									
Director		X						0.	0.	0.
(6) Nelly Samaniego	2.00									
Director		X		_	<u> </u>	<u> </u>		0.	0.	0.
(7) Alexander Kory	2.00							_	_	_
Director		X					ļ	0.	0.	0.
(8) James R. Schroll	2.00	- ₋								_
Director	<u> </u>	X		<u> </u> -		<u> </u>	-	0.	0.	0.
(9) Karen Bizier Smith	2.00	۱				ł				
Director		X		<u> </u>		 	-	0.	0.	0.
(10) Cynthia M. Waters	2.00									_
Director	2.00	X		-		 		0.	0.	0.
(11) Robin Kline	4.00	X						0.	0.	_
Director (12) Allison Ling	2.00	^				1		0.		0.
Director	2.00	X				ł		0.	0.	0.
(13) Diane Morse	2.00	1			-	┢╌		- 0.	0.	
Director	2.00	X						٥.	0.	0.
(14) Thomas W. Perez-Lopez	2.00					Ī				
Director		x				l		0.	0.	0.
(15) Mary B. Tycz	2.00				П					
Corresponding Secretary		X	L	X	L			0.	0.	0.
(16) Susan Tull O'Reilly	2.00]								
Secretary		X		X				0.	0.	0.
(17) Ross Kory	2.00									
Treasurer		X		X		<u> </u>		<u> </u>	0.	0.
432007 11-07-14										Form 990 (2014)

	VII	Check if Schedule O cont		or note to any lin	e in this Part VIII			🗖
			•		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
nts	1 a	Federated campaigns	1a					
등등	b	Membership dues	1b					
Contributions, Gifts, Grants and Other Similar Amounts	С	Fundraising events	. 1c					İ
	d	Related organizations	. 1d					
,E	е	Government grants (contribut	tions) 1e					
Š	f	All other contributions, gifts, gran	nts, and					
혈		similar amounts not included abo	ove 1f	115,466.				
E G	g	Noncash contributions included in lines						
<u>8</u> 8	h	Total. Add lines 1a-1f		<u> </u>	115,466.			
- 1	-	–		Business Code				
8	2 a							
و چَ	b		_					
Program Service Revenue	С							
	d							
	е							
	f	All other program service reve	enue				<u>-</u>	
	g	Total. Add lines 2a-2f	 -	▶				
	3	Investment income (including	dividends, intere	est, and				
		other similar amounts)	•	>	83.	-		83.
	4	Income from investment of ta	x-exempt bond p	roceeds				1
	5	Royalties .	0.5	•				
	_	0	(ı) Real	(II) Personal				
	6 a							
	b	•	_					
l	C	• •	L					
	d	Net rental income or (loss) Gross amount from sales of	(i) Securities	(i) Other				
	/ a	assets other than inventory	(i) Securities	(ıi) Other				
	h	Less: cost or other basis						
	U	and sales expenses						
	_	Gain or (loss)						
	d			—		İ		†
6			na events (not		- ·			
	-	including \$	• ,					
eve		contributions reported on line						
ď.		Part IV, line 18	, a					
Other Revenu	b	Less: direct expenses	b					
٥	c	Net income or (loss) from fun	draising events	•				
	9 a	Gross income from gaming a	ctivities. See					
		Part IV, line 19	а					
	b	Less: direct expenses	. b					
	С	Net income or (loss) from gan	ning activities					
	10 a	Gross sales of inventory, less	returns					
			a					
	b	Less: cost of goods sold	b					
	С	Net income or (loss) from sale	es of inventory	. ▶			<u>.</u>	
		Miscellaneous Revenu	ıe	Business Code				
	11 a			ļ				ļ
	b							
	С			ļ				
	d	All other revenue		L .				
	е	Total. Add lines 11a-11d		. ▶	445 546	 		
43200	12 9	Total revenue. See instructions.	<u> </u>		115,549.	0.1	0.	
43200 11-07	-14							Form 990 (2014)

Sect	ion 501(c)(3) and 501(c)(4) organizations must com			mplete column (A).	
	Check if Schedule O contains a respon	ise or note to any line in (A)	this Part IX	(C)	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	(B) Program service expenses	Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	88,410.	88,410.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salanes 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	· ·				
b	Legal	2,685.		2 605	
C	Accounting	4,000.		2,685.	
d	, ,				
e	Professional fundraising services. See Part IV, line 17				<u> </u>
f	Investment management fees Other (If line 11g amount exceeds 10% of line 25,				
g	column (A) amount, list line 11g expenses on Sch O.)				
40	Advertising and promotion				
12 13	Office expenses	137.		137.	
14	Information technology	500.		500.	
15	Royalties	300.		300.	
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
.0	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	Publicity	1,691.			1,691.
b	Postage and Delivery	1,568.			1,568.
С					
d					
е	All other expenses				
25	Total functional expenses Add lines 1 through 24e	94,991.	88,410.	3,322.	3,259.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here If following SOP 98-2 (ASC 958-720)				

Part X | Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year Cash - non-interest-bearing 1 190,527. 211,085. 2 Savings and temporary cash investments 2 3 Pledges and grants receivable, net 3 Accounts receivable, net 4 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 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 instr). Complete Part II of Sch L 6 Asset 7 Notes and loans receivable, net 7 Inventories for sale or use 8 9 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a b Less: accumulated depreciation 10b 10c Investments - publicly traded securities 11 11 12 Investments - other securities. See Part IV, line 11 12 Investments - program-related. See Part IV, line 11 13 13 intangible assets 14 14 15 Other assets See Part IV, line 11 15 190,527. 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 211,085 Accounts payable and accrued expenses 17 17 18 Grants payable 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, trustees, 22 Liabilities key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 0. Ο. Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 67<u>,77</u>5. 108,853. Unrestricted net assets 27 27 122,752. 102,232. Temporarily restricted net assets 28 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 32 32 33 Total net assets or fund balances 190,527 211,085. 33

> 211,085. Form 990 (2014)

Total liabilities and net assets/fund balances

190,527

34

	990 (2014) Stuart Educational Foundation, Inc.	<u>35-2240</u>	<u>517</u>	Pa	ge 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	11!	5,5	<u>49.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	94	1,9	<u>91.</u>
3	Revenue less expenses. Subtract line 2 from line 1	3	20	0,5	<u>58.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	190	0,5	<u>27.</u>
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
		10	213	L, 0	85.
Pa	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. Cash X Accrual Other				
	If the organization changed its method of accounting from a pnor year or checked "Other," explain in Schedule O		_		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed of	na			
	separate basis, consolidated basis, or both				
	X Separate basis Consolidated basis Both consolidated and separate basis		_		
b	Were the organization's financial statements audited by an independent accountant?	.	2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate to	oasis,			
	consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the a	audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c		X
	If the organization changed either its oversight process or selection process during the tax year, explain in Sched	ule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single				
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the require	d audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(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.

► Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization Employer identification number Stuart Educational Foundation. 35-2240517 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 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). 3 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.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 X 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 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 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 11q ☐ 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 f Enter the number of supported organizations Provide the following information about the supported organization(s) (i) Name of supported (iii) Type of organization (iv) Is the organization (vi) Amount of (ii) EIN (v) Amount of monetary listed in your organization (described on lines 1-9 support (see other support (see governing document? above or IRC section Instructions) Instructions) Yes No (see instructions))

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 432021 09-17-14

Schedule A (Form 990 or 990-EZ) 2014

Schedule A (Form 990 or 990-EZ) 2014 Stuart Educational Foundation, Inc. 35-22405 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.)

Se	ction A. Public Support	<u> </u>	· · · · · · · · · · · · · · · · · · ·				
Cale	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	ınclude any "unusual grants ")	62,198.	77,228.	93,323.	138,358.	115,466.	486,573.
2	Tax revenues levied for the organ-	_					
	ızatıon's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4-	-Total-Add lines 1-through 3	62,198.	77,228.	93,323.	138,358.	115,466.	486,573.
	The portion of total contributions				<u> </u>		
	by each person (other than a						
	governmental unit or publicly					i	
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)					i	114,985.
6	Public support. Subtract line 5 from line 4				· <u>-</u>		371,588.
Se	ction B. Total Support					<u> </u>	
Cale	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	Amounts from line 4	62,198.	77,228.	93,323.			486,573.
8	Gross income from interest,			/			
•	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	221.	75.	40.	142.	83.	561.
9	Net income from unrelated business					000	3021
Ĭ	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	Total support. Add lines 7 through 10				-		487,134.
12		etc. (see instruction	nns)		<u> </u>	12	10771011
	First five years. If the Form 990 is for	•	•	 d. fourth, or fifth ta	ax vear as a sectio		· -
	organization, check this box and stop	-		2, 102111, 01 mar t	an your ao a ooono	00 . (0)(0)	
Se	ction C. Computation of Publ		rcentage			• • •	
	Public support percentage for 2014 (I	_		olumn (fl)		14	76.28 _ %
	Public support percentage from 2013		•			15	85.72 %
	33 1/3% support test - 2014. If the c			line 13, and line	14 is 33 1/3% or r		
	stop here. The organization qualifies	-		-		,	▶ X
t	33 1/3% support test - 2013. If the c		•		I line 15 is 33 1/3%	or more, check to	
	and stop here. The organization qual						▶□
178	10% -facts-and-circumstances tes	•		•	e 13, 16a, or 16b,	and line 14 is 10%	or more.
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"						▶
Ł	10% -facts-and-circumstances tes				=	17a, and line 15 is	10% or
	more, and if the organization meets th	•				•	
	organization meets the "facts-and-circ				-		▶□
18	Private foundation. If the organization		•	•	,	• •	ıs 🔰
						edule A (Form 990	
					2011		

Schedule A (Form 990 or 990-EZ) 2014 Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do not						
include any "unusual grants.")					<u> </u>	
2 Gross receipts from admissions,						
merchandise sold or services per- formed, or facilities furnished in						
any activity that is related to the						
organization's tax-exempt purpose				<u>.</u>		
3 Gross receipts from activities that					1	
are not an unrelated trade or bus-				l		
iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to		j				
or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge			ļ			
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons						
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						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						
Section B. Total Support						
Calendar year (or fiscal year beginning in) ► 📙	(<u>a)</u> 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9 Amounts from line 6					-	
10a Gross income from interest, dividends, payments received on						
securities loans, rents, royalties						
and income from similar sources						
b Unrelated business taxable income					1	
(less section 511 taxes) from businesses						
acquired after June 30, 1975					ļ	
c 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 .					<u> </u>	
12 Other income. Do not include gain or loss from the sale of capital						
assets (Explain in Part VI.)	i					
13 Total support. (Add lines 9, 10c, 11, and 12)						
14 First five years. If the Form 990 is for the	he organization's	s first, second, thii	rd, fourth, or fifth t	tax year as a secti	on 501(c)(3) organiz	ation,
check this box and stop here						<u></u> ▶□
Section C. Computation of Public						
15 Public support percentage for 2014 (lin		•	column (f))		15	
16 Public support percentage from 2013 S					16	
Section D. Computation of Invest					 	
17 Investment income percentage for 201			ne 13, column (f))		17	
18 Investment income percentage from 20	· · · · · · · · · · · · · · · · · · ·	· ·			18	
19a 33 1/3% support tests - 2014. If the o						17 is not
more than 33 1/3%, check this box and		-			•	▶∟
b 33 1/3% support tests - 2013. If the o						and
line 18 is not more than 33 1/3%, check	k this box and s	top here. The org	anızatıon qualıfies	as a publicly supp	oorted organization	▶⊑
20 Private foundation. If the organization	did not check a	box on line 14, 19	a, or 19b, check t	this box and see in	structions	<u> </u>
132023 09-17-14				Sc	hedule A (Form 99	0 or 990-EZ) 20

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V)

Section A. All Supporting	Organizations
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Yes No Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No" describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain. 1 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2). 2 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below. За b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination. 3b c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2) (B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use 3с 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below. 4a b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes." describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations 4b c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) 4c 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document). 5a b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document? 5b c Substitutions only. Was the substitution the result of an event beyond the organization's control? 5с Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI. 6 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990) 7 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990) 8 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI. 9a b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI. 9b c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit

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9с

10a

from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting

b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to

organizations)? If "Yes," answer (b) below.

determine whether the organization had excess business holdings.)

	dule A (Form 990 or 990 EZ) 2014 Stuart Educational Foun			35-2240517 Page 6	
Pa	Type III Non-Functionally Integrated 509(a)(3) Supporting	ng Orga	anizations	<u> </u>	
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. See instructions. All				
	other Type III non-functionally integrated supporting organizations must co	omplete S	Sections A through E		
Section A - Adjusted Net Income			(A) Prior Year	(B) Current Year	
Section A - Adjusted Net Income				(optional)	
1	Net short-term capital gain	1_			
2	Recovenes of prior-year distributions	2_		 	
3	Other gross income (see instructions)	_ 3		<u> </u>	
4	Add lines 1 through 3	4		<u> </u>	
5	Depreciation and depletion	5			
6	Portion of operating expenses paid or incurred for production or				
	collection of gross income or for management, conservation, or				
	maintenance of property held for production of income (see instructions)	6			
7	Other expenses (see instructions)	7			
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8			
Sect	ion B - Minimum Asset Amount		(A) Pnor Year	(B) Current Year (optional)	
1	Aggregate fair market value of all non-exempt-use assets (see				
	instructions for short tax year or assets held for part of year):				
a	Average monthly value of securities	1a			
b	Average monthly cash balances	1b			
_с	Fair market value of other non-exempt-use assets	1c			
d	Total (add lines 1a, 1b, and 1c)	1d			
е	Discount claimed for blockage or other				
	factors (explain in detail in Part VI):	ļ			
2	Acquisition indebtedness applicable to non-exempt-use assets	2			
3	Subtract line 2 from line 1d	3			
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,				
	see instructions)	_ 4			
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5			
6	Multiply line 5 by 035	6			
_7	Recoveries of prior-year distributions	7			
8	Minimum Asset Amount (add line 7 to line 6)	8			
Sect	ion C - Distributable Amount	V. 5 - 5 - 5 - 5 - 5 - 5 - 5 - 5 - 5 - 5	Current Year		
1	Adjusted net income for prior year (from Section A, line 8, Column A)	. 1			
_2	Enter 85% of line 1	2			
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3			
_4	Enter greater of line 2 or line 3	4			
5	Income tax imposed in prior year	5			
6	Distributable Amount. Subtract line 5 from line 4, unless subject to				
	emergency temporary reduction (see instructions)	6			
7	Check here if the current year is the organization's first as a non-functional	lly-integra	ited Type III supporting ord	anization (see	

Schedule A (Form 990 or 990-EZ) 2014

instructions).

Schedule A (Form 990 or 990-EZ) 2014 Stuart Educational Foundation, Inc. 35-2240517 Page 7 Part V | Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D - Distributions **Current Year** Amounts paid to supported organizations to accomplish exempt purposes 2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity Administrative expenses paid to accomplish exempt purposes of supported organizations 4 Amounts paid to acquire exempt-use assets Qualified set-aside amounts (prior IRS approval required) 6 Other distributions (describe in Part VI) See instructions. Total annual distributions. Add lines 1 through 6. Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. Distributable amount for 2014 from Section C, line 6 10 Line 8 amount divided by Line 9 amount (i) (ii) (iii) **Excess Distributions Underdistributions** Distributable Section E - Distribution Allocations (see instructions) Pre-2014 Amount for 2014 Distributable amount for 2014 from Section C, line 6 Underdistributions, if any, for years prior to 2014 (reasonable cause required-see instructions) 3 Excess distributions carryover, if any, to 2014: b d e From 2013 f Total of lines 3a through e g Applied to underdistributions of prior years h Applied to 2014 distributable amount i Carryover from 2009 not applied (see instructions) j Remainder Subtract lines 3g, 3h, and 3i from 3f 4 Distributions for 2014 from Section D. a Applied to underdistributions of prior years b Applied to 2014 distributable amount c Remainder Subtract lines 4a and 4b from 4. Remaining underdistributions for years prior to 2014, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions) 6 Remaining underdistributions for 2014. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions). Excess distributions carryover to 2015. Add lines 3) and 4c. Breakdown of line 7: а b

Schedule A (Form 990 or 990-EZ) 2014

d Excess from 2013
e Excess from 2014

chedule A	(Form 990 or 990 EZ) 2014 Stua	rt Educationa	<u>l Foundation</u>	Inc.	35-2240517 Pa
Part VI	Supplemental Information.	 Provide the explanations r 	equired by Part II, line 10), Part II, line 17a o	r 17b; and Part III, line 12.
	Also complete this part for any add	litional information. (See ins	tructions).		
					
					
					
					
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ջ Employer identification number 35-2240517 Open to Public OMB No 1545-0047 2014 Inspection (h) Purpose of grant or assistance X Yes Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection (g) Description of non-cash assistance ▶ Information about Schedule I (Form 990) and its instructions is at www.lrs.gov/form990. (f) Method of valuation (book, FMV, appraisal, other) Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, (e) Amount of assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States ► Attach to Form 990. recipient that received more than \$5,000 Part II can be duplicated if additional space is needed. (d) Amount of cash grant Inc. Foundation, (c) IRC section if applicable Stuart Educational General Information on Grants and Assistance (P) EIN criteria used to award the grants or assistance? 1 (a) Name and address of organization or government Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE I (Form 990) Part I Part II

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3 Enter total number of other organizations listed in the line 1 table
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (2014)

Schedule I (Form 990) (2014) Stuart Educational Foundation, Inc. Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" to Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed	nal Founds. Complete if the	Foundation, In	Inc. nswered "Yes" to Form 99	10, Part IV, line 22	35-2240517 Page 2	1 <u>ge 2</u>
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance	•
						•
Scholarships	20	88,410,	0			
Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.	Uired in Part I, line	e 2, Part III, column	(b), and any other ad	ditional information.		
Part I, Line 2:						-
The Foundation tracks total scholarship	_	monies pledged		and paid only to		
educational institutions on behalf	of i	ndividual rec	recipients, ar	and confirms		
enrollment in qualifying college c	courses.					
432102 10-15-14		27			Schedule I (Form 990) (2014)	014)

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 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

2014

Open to Public

Inspection

Name of the organization Stuart Educational Foundation, Inc.	Employer identification number 35-2240517
Form 990, Part VI, Section A, line 2:	
Alexander Kory is the son of Ross Kory.	
Form 990, Part VI, Section B, line 11:	
Form 990 is reviewed by the board of directors.	
Form 990, Part VI, Section C, Line 19:	
The Foundation makes its governing documents, conflict of	interest policy,
or financial statements available to the public upon requ	iest.
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