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Form 990-EZ

Short Form Return of Organization Exempt From Income Tax

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

2014

OMB No 1545-1150

Open to Public

Inspection

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

A For the 2014 calendar year, or tax year beginning 2014, and ending . 20 B Check if applicable C Name of organization D Employer identification number Address change Nicolas Fund for Education 45-4887611 Name change Room/suite Number and street (or P O box, if mail is not delivered to street address) E Telephone number Initial return 9311 SE 36th Street, Suite 202 2066190999 Final return/terminated City or town, state or province, country, and ZIP or foreign postal code F Group Exemption Amended return Number ▶ Application pending Mercer Island, WA 98040 G Accounting Method: ✓ Cash Accrual Other (specify) ► H Check ► ☐ if the organization is not I Website: ▶ nicolasfund org required to attach Schedule B J Tax-exempt status (check only one) — / 501(c)(3) 501(c) ((Form 990, 990-EZ, or 990-PF).) ◀ (insert no.) ☐ 4947(a)(1) or K Form of organization: Corporation ☐ Trust L Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I) Check if the organization used Schedule O to respond to any question in this Part I. 177677 2 Program service revenue including government fees and contracts 2 3 3 4 4 Gross amount from sale of assets other than inventory. Less: cost or other basis and sales expenses

Gain or (loss) from sale of assets other than inventory (Subtract line 5b to Gaming and fundations assets) ဝို့ရုံ line 5a) . 5c Gaming and fundraising events ക Gross income from gaming (attach Schedule @\) (3 greater \$15,000) Gross income from fundraising events (not including specific from fundraising events reported on line 1) (attach schedule: G-if-the of contributions sum of such gross income and contributions exceeds \$15,000). . . 6b 6c Less: direct expenses from gaming and fundraising events . . . Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract 6d -2669 Gross sales of inventory, less returns and allowances . . . Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) . . . 7c 8 8 9 **Total revenue.** Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 9 175016 Grants and similar amounts paid (list in Schedule O) 10 10 100845 11 11 12 12 Professional fees and other payments to independent contractors . . . 13 13 2181 14 14 Printing, publications, postage, and shipping 15 15 16 16 7179 17 Total expenses. Add lines 10 through 16 110205 18 18 64811 Net Assets 19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with 19 68536 20 Other changes in net assets or fund balances (explain in Schedule O) 20 Net assets or fund balances at end of year. Combine lines 18 through 20 133347

For Paperwork Reduction Act Notice, see the separate instructions.

243

Form **990-EZ** (2014)

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1 OIL	730-La (2014)					i ugo 🗕
Pa	t II Balance Sheets (see the instructions	•				
	Check if the organization used Schedule	O to respond to a		Part II		(B) End of year
22	Cash, savings, and investments			68536	22	133347
23	Land and buildings				23	
24	Other assets (describe in Schedule O)				24	
25	Total liabilities (decembers Schodule C)			68536	25 26	133347
26 27	Total liabilities (describe in Schedule O) Net assets or fund balances (line 27 of column	n (B) must agree with	n line 21)	68536	_	133347
Par					1	
	Check if the organization used Schedule			Part III 🔽	(Rec	Expenses juired for section
	s is the organization's primary exempt purpose?			•	501(c)(3) and 501(c)(4) nizations, optional for
as n	ribe the organization's program service accompli- leasured by expenses. In a clear and concise mons benefited, and other relevant information for ea	nanner, describe the	s services provided	, the number of	othe	
28	Tuition, Tutoring, Transportation and supplies for 49	children to go to sch	ool			
	See detail on Schedule O					
	(Grants \$) If this amount	includes foreign ara	nts. check here .	▶ 🗆	28a	74756
29	Impact Team Trips					
	See detail on Schedule O					
	(Grants \$) If this amount	includes foreign gra	nts check here	▶ □	29a	14635
30	Repairs and upgrades to school buildings in 2 villag					14000
	See detail on Schedule O					
	(Grants \$) If this amount	includes foreign gra	nts check here	▶ □	30a	9800
31	Other program services (describe in Schedule O)				-	3000
	(Grants \$) If this amount	includes foreign gra	nts, check here .	▶ □	31a	1654
	Total program service expenses (add lines 28a				32	100845
Par	List of Officers, Directors, Trustees, and Ker Check if the organization used Schedule					
		(b) Average	(c) Reportable compensation	(d) Health benefits,		
	(a) Name and title	hours per week devoted to position	(Forms W-2/1099-MISC) (if not paid, enter -0-)	contributions to employ benefit plans, and deferred compensation	6	other compensation
Al Lo	pus President					•
Kath	Riper Vice President	•				
Lolo	Levy Treasurer				+	
					+	
Becc	Merritt Director	-				
Bill S	afstrom Director				1	
					\bot	
		-				
						
					_	
		-				
					+	····
		1			\perp	
		-{				

Part	•			
	instructions for Part V) Check if the organization used Schedule O to respond to any question in this	rait	Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33		√
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)	34		✓
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		1
b	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b	\vdash	1
c	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		1
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		1
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a	~		لبنا
b	Did the organization file Form 1120-POL for this year?	37b		_
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	20-		
b	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b	38a	٠,	√
39	Section 501(c)(7) organizations. Enter:	۱,۰,	1.00	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
а	Initiation fees and capital contributions included on line 9	Later 1	1	4
b	Gross receipts, included on line 9, for public use of club facilities]	1	
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶		5 7	1. 1
b	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958			
	excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		1
С	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958	e jun «	27	arie e arie e Taymatinisti T
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e	·	√
41	List the states with which a copy of this return is filed ► WA			
42a	The organization's books are in care of ▶ Lolo Levy Telephone no ▶	20661)
h	Located at ► Cle Elum, WA At any time during the calendar year, did the organization have an interest in or a signature or other authority over	989		LNa
J	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b	Yes	No ✓
	If "Yes," enter the name of the foreign country: ►			
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
С	At any time during the calendar year, did the organization maintain an office outside the U.S.?	42c		<u>√</u>
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year		.	▶ □
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be		Yes	No
	completed instead of Form 990-EZ	44a		✓
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b		✓
C	Did the organization receive any payments for indoor tanning services during the year?	44c		√
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	44d		
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		1
b	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," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)			
		45b		

Form 990-EZ	Z (2014)							age 4
46 Did	d the organization engage, directly or in	ndirectly in political c	ampaign activities on	hehalf of o	r in opposit	ion 💮	Yes	No
	candidates for public office? If "Yes," of						- CONTRACTOR	1 1 1 1 1 1 1 1 1 1
Part Vi	Section 501(c)(3) organizations All section 501(c)(3) organization 50 and 51.	only	······································				or line	es
	Check if the organization used Scl	hedule O to respond	to any question in t	this Part VI	<u> </u>	<u></u>		
	d the organization engage in lobbying						Yes	No
•	ar? If "Yes," complete Schedule C, Par					<u> </u>		√
	the organization a school as described individual the organization make any transfers to							/
	Yes," was the related organization a se	· · · · · · · · · · · · · · · · · · ·						
50 Co	omplete this table for the organization's aployees) who each received more than	five highest compen	sated employees (otl	her than off	icers, direct	ors, truste	es an lone."	d key
	(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	contributions benefit plans	n benefits, s to employee , and deferred ensation	(e) Estimate other com		
	tal number of other employees paid ov	or \$100,000						
	omplete this table for the organization			contractor	s who each	received	more	than
\$1	00,000 of compensation from the orga	nızation. If there is no	one, enter "None."					
	(a) Name and business address of each independ	dent contractor	(b) Type of sen	VICO	(c)	Compensati	on	
			-					
					<u> </u>			
					-			
			-					
d To	tal number of other independent contra	actors each receiving	over \$100,000	.	<u> </u>			
52 Did	d the organization complete Schedumpleted Schedule A	_		anızations ı	nust attach	n a . ⊳ ☑ Yes		No
Under penal true, correct	ties of perjury, I declare that I have examined this, and complete Declaration of preparer (other than	return including accompan	lying schedules and statem ormation of which preparer	ents, and to th has any knowl	e best of my kr	nowledge and	belief,	ıt ıs
Sign	Signature of officer	Juy-		Da	7/30/ Ite	2015		
Here	Lois HW Levy		<u>.</u>					
 Paid	▼ Type or print name and title Print/Type preparer's name	Preparer's signature	D	ate	Check	ıf PTIN		
Prepare	1 = .			ı	self-emplo	yed		
Use On	ly Firm's name ► Firm's address ►				m's EIN ▶ ione no			
May the II	RS discuss this return with the prepare	r shown above? See	instructions			► ☐ Yes		No
						Form 99		

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.

► Attach to Form 990 or Form 990-EZ.

Department of the Treasury Internal Revenue Service ▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Employer identification number Name of the organization

OMB No 1545-0047

Open to Public Inspection

licol.	as Fund for Education					45-48	
	t I Reason for Public Char						ns.
he c	organization is not a private founda						
1	A church, convention of church			bed in se	ection 17	U(b)(1)(A)(i).	
2	A school described in section				470/6\/4	:\/A\/;;;\	
3	☐ A hospital or a cooperative hos ☐ A medical research organization						iii) Enter the
4	hospital's name, city, and state		onjunction with a nost	mai uesc	indea iii s	ection fro(b)(f)(A)(my. Linter the
5	An organization operated for		college or university	owned o	r operate	ed by a government	al unit described in
Ū	section 170(b)(1)(A)(iv). (Comp		college of university	0111100	Ороган	a by a government	u. u u
6	☐ A federal, state, or local govern		mental unit described	ın sectio	on 170(b)	(1)(A)(v).	
7	An organization that normally						the general public
•	described in section 170(b)(1)						
8	☐ A community trust described ii			Part II.)			
9	☐ An organization that normally				from con	tributions, members	hip fees, and gross
•	receipts from activities related						
	support from gross investme						
	acquired by the organization a	fter June 30, 197	75 See section 509(a	i)(2). (Cor	mplete Pa	art III.)	
10	☐ An organization organized and	l operated exclus	sively to test for public	safety.	See sect i	ion 509(a)(4).	
11	☐ An organization organized and	operated exclusi	vely for the benefit of,	to perfor	m the fun	ctions of, or to carry	out the purposes of
	one or more publicly supported	d organizations d	escribed in section 50	09(a)(1) o	r section	509(a)(2). See sect	on 509(a)(3). Check
	the box in lines 11a through 11c						
а							
	the supported organization(s			ct a majo	ority of the	e directors or trustee	es of the supporting
_	organization. You must com	-					
b							
	control or management of th			e same p	persons t	nat control or manag	je tne supported
_	organization(s). You must co	-		tad in car	nnection :	with and functional	v integrated with
С	its supported organization(s)						y integrated with,
d		•					ed organization(s)
u	that is not functionally integra						
	requirement (see instructions						
е		•					I, Type III
•	functionally integrated, or Ty						
f	Enter the number of supported of	organizations .					
g	Provide the following information	n about the supp	oorted organization(s).				
	(i) Name of supported organization	(ii) EIN	(iii) Type of organization		organization	(v) Amount of monetary	(vi) Amount of
			(described on lines 1–9 above or IRC section		ur governing ment?	support (see instructions)	other support (see instructions)
			(see instructions))		L N1-		
				Yes	No		
(A)							
B)							
(C)							
,					ļ		
D)					1.		
(E)							
		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	a mid	. j. j.	野沙人		

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.)

	on A. Public Support		· ···				
Calen	dar 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					1	
	include any "unusual grants.")				102160	177677	279837
2	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge	•					
4	Total. Add lines 1 through 3				102160	177677	279837
5	The portion of total contributions by		, ,		s s		
	each person (other than a	·			1		
	governmental unit or publicly			ı			
	supported organization) included on		1				
	line 1 that exceeds 2% of the amount shown on line 11, column (f)	,	4 - 3		<u> </u>		
^		- · · · ·	1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1				
6 Sacti	Public support. Subtract line 5 from line 4. on B. Total Support	<u> </u>	, , , , , , , , , , , , , , , , , , , ,	L	<u> </u>		
	dar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	Amounts from line 4	(a) 2010	(6) 2011	(0) 2012	102160	177677	279837
7					102100	177077	273037
8	Gross income from interest, dividends, payments received on securities loans,						
	rents, royalties and income from similar						
	sources				3	8	11
9	Net income from unrelated business		<u> </u>		,		
9	activities, whether or not the business					ļ	
	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						279848
12	Gross receipts from related activities, etc	. (see instructi	ons)			12	
13	First five years. If the Form 990 is for the	ne organizatioi	n's first, secon	d, third, fourth	n, or fifth tax ye	ear as a sectio	n 501(c)(3)
	organization, check this box and stop he	re					🕨 🗸
Secti	on C. Computation of Public Support	rt Percentag	е				
14	Public support percentage for 2014 (line	6, column (f) d	ıvıded by line 1	1, column (f))		14	<u>%</u>
15	Public support percentage from 2013 Sci	hedule A, Part	II, line 14 .			15	<u>%</u>
16a	331/3% support test-2014. If the organi	zation did not	check the box	on line 13, an	d line 14 is 331.		
	box and stop here. The organization qua	•	•	•			. ▶ 🗆
b	331/3% support test-2013. If the organ					15 is 331/3%	
	check this box and stop here. The organ	•			-		. ▶ □
17a	10%-facts-and-circumstances test—2						
	10% or more, and if the organization me						
	Part VI how the organization meets the "					as a publicly si	
	•						. ▶ □
b	10%-facts-and-circumstances test—2						
	15 is 10% or more, and if the organiza						
	Explain in Part VI how the organization in				The organizatio	n qualifies as a	publicly
							. ▶ □
18	Private foundation. If the organization d	id not check a	box on line 13	, 16a, 16b, 17a	a, or 17b, chec	k this box and	see
	instructions			· · · · ·			<u> </u>

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) 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 performed, or facilities					ļ	
	furnished in any activity that is related to the						
	organization's tax-exempt purpose					<u> </u>	
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513					<u> </u>	
4	Tax revenues levied for the]	ļ		ļ	
	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					ļ	
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3		}			l	
	received from disqualified persons .					ļ	
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			. 1			
	,						
С 8	Add lines 7a and 7b	.,				 	
0	line 6.)	,		1			
Secti	on B. Total Support		<u> </u>			<u> </u>	
	dar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9	Amounts from line 6	10/2010	(6) 2011	(0) 2012	(4) 2010	(6) 2014	(i) Total
10a	Gross income from interest, dividends,					 	
104	payments received on securities loans, rents,						
	royalties and income from similar sources .	í					
ь	Unrelated business taxable income (less						
_	section 511 taxes) from businesses						1
	acquired after June 30, 1975	,				1	
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	,	j	J]	
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)		_				
14	First five years. If the Form 990 is for the		i's first, second	d, third, fourth,	, or fifth tax ye	ear as a sectio	n 501(c)(3)
	organization, check this box and stop her			<u></u>	<u></u>	<u> </u>	<u> </u>
	on C. Computation of Public Suppor				·····		
15	Public support percentage for 2014 (line 8						%
16 Sooti	Public support percentage from 2013 Sch	edule A, Part	III, line 15 .		· <u>·</u> ···	16	%
17	on D. Computation of Investment Inc			line 12 police	an (f)	147	0′
18	Investment income percentage for 2014 (Investment income percentage from 2013)						<u>%</u>
19a	331/3% support tests—2014. If the organi						% and line
134	17 is not more than 3313%, check this box						
ь	331/2% support tests – 2013. If the organiz						
S	line 18 is not more than 331/a%, check this b						
20	Private foundation. If the organization did						

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 C. If you checked 11b of Part I, complete

and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, com	plete	
Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part	i V.)	
Section A. All Supporting Organizations		
	Yes	ſ

			Yes	No
1	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	<u> </u>	
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.	3a	,-	
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		
С	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		
С	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) purposes.	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 c	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? Substitutions only. Was the substitution the result of an event beyond the organization's control?	5b 5c		
6	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	, 24°	1
7	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		
8	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		
С	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		
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 organizations)? If "Yes," answer (b) below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to			

determine whether the organization had excess business holdings.)

10b

Part	IV Supporting Organizations (continued)					
			Yes	No		
11	Has the organization accepted a gift or contribution from any of the following persons?					
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		ļ		
b	A family member of a person described in (a) above?	11b				
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		_		
	on B. Type I Supporting Organizations					
			Yes	No		
1	Did the directors, trustees, or membership of one or more supported organizations have the power to	Ì	ĺ	ļ		
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or	}		ļ		
	controlled the organization's activities. If the organization had more than one supported organization,					
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported	l	}			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1				
2	Did the organization operate for the benefit of any supported organization other than the supported					
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part	ļ				
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.					
Sooti		2				
3600	on C. Type II Supporting Organizations		Yes	No		
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		763	140		
-	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control					
	or management of the supporting organization was vested in the same persons that controlled or managed					
	the supported organization(s).	1				
Secti	on D. All Type III Supporting Organizations	_				
	Did the assessmentian assessed to each of its assessment assessmentions, but the last day of the fifth month of the		Yes	No		
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax					
	year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the			,		
	organization's governing documents in effect on the date of notification, to the extent not previously provided?					
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported					
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			ļ		
•	the organization maintained a close and continuous working relationship with the supported organization(s).	2				
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's					
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's					
	supported organizations played in this regard.	3				
Secti	on E. Type III Functionally-Integrated Supporting Organizations					
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see	instru	ction	s):		
а	☐ The organization satisfied the Activities Test. Complete line 2 below.					
b	☐ The organization is the parent of each of its supported organizations. Complete line 3 below.					
C	☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity (s	see ins	tructi	ons).		
2	Activities Test. Answer (a) and (b) below.		Yes	No		
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of					
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			l		
	those supported organizations and explain how these activities directly furthered their exempt purposes,		,			
	how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.					
h	·	2a		- ,		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the					
	reasons for the organization's position that its supported organization(s) would have engaged in these					
	activities but for the organization's involvement.	2b				
3	Parent of Supported Organizations. Answer (a) and (b) below.					
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or					
_	trustees of each of the supported organizations? Provide details in Part VI.	3a				
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If</i> "Yes," describe in <i>Part VI</i> the role played by the organization in this regard.	3b				

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functional Part V Type III Non-Function Part V Type III Non	gan	izations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying other Type III non-functionally integrated supporting organizations must co			
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
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) 8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Section B - Minimum Asset Amount	0	(A) Prior Year	(B) Current Year (optional)
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		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
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		
Section C - Distributable Amount		,	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	towarded Type III gun pert	ing averagination (one
7 Check here if the current year is the organization's first as a non-functionall instructions).	y-111	regrated Type III Suppoπ	my organization (see

Part) Supporting Organi	zations (continued)	
Secti	on D - Distributions			Current Year
1_	Amounts paid to supported organizations to accomplish e			
2	Amounts paid to perform activity that directly furthers exe	rted		
	organizations, in excess of income from activity			
3_	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations	
4_	Amounts paid to acquire exempt-use assets			
5_	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to whic	h the organization is res	ponsive	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2014 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount		/::\	/:::\
Se	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1	Distributable amount for 2014 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2014			
	(reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2014:			
а				
b				
С				
d				
е	From 2013			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
<u>h</u>	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, line 7: \$			
<u>a</u>	Applied to underdistributions of prior years			
b	Applied to 2014 distributable amount			
<u>_</u>	Remainder. Subtract lines 4a and 4b from 4.			
5	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).			
7	Excess distributions carryover to 2015. Add lines 3j			
•	and 4c.			
8	Breakdown of line 7:			
a				
b				
d	Excess from 2013			
e	Excess from 2014			
			,	

Schedule A (Form 990 or 990-EZ) 2014						
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line Part III, line 12. Also complete this part for any additional information. (See instructions.)	17a or 17b; and				
	Tart III, IIIC 12. Also complete this part for any additional information. (edo instructions.)					
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		•••••				

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SCHEDULE O (Form 990 or 990-EZ)

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.

OMB No 1545-0047

Employer identification number

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization ► 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.

Nicolas Fund for Education	454887611
Part I Other Expenses	
Bank Charges and Fees 1822	
Website and Software 1778	
Insurance 1112	
Travel and Meetings 2467	
Total Other Expenses 7179	
Part III Statement of Program Service Accomplishments	
28 The Nicolás Fund for Education provides safe transportation for students from their village to the	school in a nearby town which is
approximately 40 minutes away and back home again at the end of the day. In this town of Nebaj,	these students not only attend a
private junior high and high school but also receive tuition, tutoring, supplies and a nutritious mea	l with their scholarship These
students live in a remote agricultural region in the highlands of Guatemala where most young peop	ple do not have an opportunity
to receive higher education beyond the sixth grade	
29 Each year NFE provides three opportunities for individuals, families, and especially educators to	participate on Impact Teams to
Guatemala Two teams each year share enrichment activities with the NFE students and staff, as well a	as in two small community
primary schools. These Impact Teams not only give the team members an opportunity to share their lo	ove, expertise and knowledge
with the poor in the lxil region of Guatemala but it also opens their eyes to global poverty and gives th	
difference in the lives of the poor. The third team of the year attends the graduation of the NFE studen	
school or the university. During the graduation trip the team also visits the students and their parents	
30. Major repairs were made to the primary school including replacing broken windows with reinforce	
insulated metal roofing, refurbished the outhouse with flushing toilets, and painting the whole school	
Provided road improvements to enable better school bus access for students travelling to secondary	
31 Supplied Kuske mathematics manipulative blocks to two village primary schools to help teachers	
principles. Science supplies were also provided (magnifying glasses, prisms, small microscopes) in a	duttion to new projectors for teachers

Schedule O (Farm 990 or 990-EZ) (2014)	F	age 2
Name of the organization	Employer identification number	

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