

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Frgm 990-PF

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

OMB No 1545-0052

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-PF and its separate instructions is at www.irs.gov/form990pf. Open to Public Inspection

F	or ca	alendar year 2014 or tax year beginning	0	7/01 , 2014, ;	and end	ing		06/30,2015
	Name	of foundation NORTH CAROLINA SCIE	ENCE, MATHEMATIC	s,		Α	Employer identifi	cation number
	AND	TECHNOLOGY EDUCATION CENTER	, INC.				04-360292	9
_		per and street (or P O box number if mail is not deliver			Room/suit	ie B	Telephone numb	er (see instructions)
						ŀ	(91	9) 991-5100
	P.0	. BOX 13901					,	
_		or town, state or province, country, and ZIP or foreign p	ostal code					
	•	, , , ,				c	If exemption applica	ation is
	RES	EARCH TRIANGLE PARK, NC 2770	9_3901			ľ	If exemption applica pending, check here	
<u>-</u>		eck all that apply Initial return		of a former pu	blic cha	citi		,
G	Cite	Final return		•	DIIC Chai	ם עייי	1. Foreign organizat	
		├──	Amended re			ł	Foreign organiza85% test, check h	
-		Address change	Name chang				computation .	
H		eck type of organization: X Section 501				E	If private foundation	status was terminated
\perp		Section 4947(a)(1) nonexempt charitable trust	Other taxable pr				under section 507(b)(1)(A), check here . ►
I		· · · · · · · · · · · · · · · · · · ·		ash X Accri	ual	F	If the foundation is	in a 60-month termination
			Other (specify)		- -		under section 507(b)	(1)(B), check here . >
_	16)	▶ \$ 401,945. (Part I,	column (d) must be on ca	sh basıs)				
L	art	Analysis of Revenue and Expenses (The	(a) Revenue and	(h) N -4	·	1.1		(d) Disbursements
		total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in	expenses per	(b) Net inves income		(C) /	Adjusted net income	for charitable purposes
_		column (a) (see instructions))	books					(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule) .	641,380.	` , , · `		•	, , , , ,	, <u>j</u>
	2	Check ► if the foundation is not required to attach Sch B		V 35 V *	,**		\$1, ₁₂	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	3	Interest on savings and temporary cash investments.	329.		329.			
	4	Dividends and interest from securities						
	5a	Gross rents						Frage of the State of the
	ь	Net rental income or (loss)	. , ``	0,1000	;	~ .	*	
a	6a	, , , , , , , , , , , , , , , , , , , ,	 		;			
Revenue	b	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all	, *; * 2	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	2 0,0			
Ve	_	assets on line 6a	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7		- 1233	71 N. 19	773	
S	7	Capital gain net income (from Part IV, line 2) .	* (*)	, , , , , , , , , , , , , , , , , , ,			·	
	8	Net short-term capital gain	<u> </u>	11,	¥ *			* * * * * * * * * * * * * * * * * * * *
	9 10a	Income modifications		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		1 5 5 5		
		and allowances • • • • •	\$ 2 2 4 7 5 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	<u> </u>	^	· · · ·	1 June 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Accepted to the form of the
		Less Cost of goods sold .		i Freij se s				* * * * * * * * * * * * * * * * * * * *
		Gross profit or (loss) (attach schedule)	226 040	, F(P,) 2+1			226 040	
	11	Other income (attach schedule) ATCH, 1	336,049.				336,049.	
4	12	Total. Add lines 1 through 11	977,758.		329.		336,049.	
es	13	Compensation of officers, directors, trustees, etc	202,383.					
Se	14	Other employee salaries and wages	70,622.					
틸	15	Pension plans, employee benefits	94,478.					
Administrative Expense	16 a	Legal fees (attach schedule)						
삥	b	Accounting fees (attach schedule)ATCH 2	22,533.					·
ا≩	С	Other professional fees (attach/schedule) . [3]	110,371.	·				3,500
2	17	Interest	.'1'	<u> </u>				
<u>s</u>	18	Taxes (attach schedule) (see instructions)	'					
'n	19	Depreciation (attack-schedule) and depletion.						
힑	20	Occupancy	t					
Ø	21	Travel, conferences, and meetings	90,684.					2,721
=1	22	Printing and publications	24,176.					
힏	23	Other expenses (attach schedule) ATCH .4.	360,057.			_	235,892.	86,779
늹	24	Total operating and administrative expenses.						
띪	-	Add lines 13 through 23	975,304.				235,892.	93,000
임	25	Contributions, gifts, grants paid	7,000.	, , ,		`	1.2	7,000
- 1	26	Total expenses and disbursements Add lines 24 and 25	982,304.		o	_	235,892.	100,000
—	27	Subtract line 26 from line 12			<u>; </u>		•	
- [Excess of revenue over expenses and disbursements	-4,546.	te de l'annue de l'	3	,21	^	
		Net investment income (if negative, enter -0-)		*	329.			, 1
- 1		Adjusted net income (if negative, enter -0-).	,				100.157.	

JSA For Paperwork Reduction Act Notice, see instructions. 4E1410 1 000 UV5977 U172 5/12/2016 4:41:

Form 990-PF (2014)

D.	art II	Ralance Sheets	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End	of year
<u> </u>	ant ii	Dalance Sheets	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
ľ	1	Cash - non-interest-beari	ng	296,346.	384,404.	384,404
ļ	2		cash investments			
- 1					` , , , , , , , , , , , , , , , , , , ,	
		Less allowance for doul	otful accounts ▶	:		
	4	Pledges receivable ▶_		- , ·		
		Less allowance for doul	otful accounts >			
					14,560.	14,560
			officers, directors, trustees, and other			
		disqualified persons (att	ach schedule) (see instructions)			
- 1			eceivable (attach schedule)	-		
			otful accounts			
S			e			
Assets	9	Prepaid expenses and de	eferred charges	2,981.	2,981.	2,981
As			government obligations (attach schedule)	-		
			stock (attach schedule)			
			bonds (attach schedule)			
-	11	Investments - land, buildings	tion			·
	12	Investments - mortgage I	oans	·		
			ch schedule)			
	14	Land, buildings, and	N			
-		Less accumulated deprecial	tion			
- .	15	Other assets (describe)			
.			completed by all filers - see the			
		instructions Also, see pa	age 1, item I)	300,040.	401,945.	401,945.
7.			ccrued expenses	5,521.	9,855.	
1.						
g)				165,273.	267,390.	and the same of th
Liabilities			s, trustees, and other disqualified persons			
펿!			tes payable (attach schedule)			
<u>ا</u> ت			>)			
- 1		·				
	23	Total liabilities (add lines	s 17 through 22)	170,794.	277,245.	
		Foundations that follow	ow SFAS 117, check here . ▶ X			
S		and complete lines 2	4 through 26 and lines 30 and 31.			\$ 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1
<u>اق</u>	24	Unrestricted		129,246.	124,700.	
ā		Temporarily restricted				
<u> </u>						
Net Assets or Fund Balances		•	not follow SFAS 117, ▶			
띤		check here and com	plete lines 27 through 31.			
<u>آرٍ</u>		•	ipal, or current funds			
			land, bldg , and equipment fund			
8			lated income, endowment, or other funds		 	
뒿		- ·	balances (see instructions)	129,246.	124,700.	
ŽĮ,			net assets/fund balances (see			
		nstructions)		300,040.	401,945.	* !
Pa			ges in Net Assets or Fund Balar			<u> </u>
			alances at beginning of year - Part I		nust agree with	
			d on prior year's return)			129,246.
2	Ente	r amount from Part I,	1 07 -			-4,546.
		lines 1, 2, and 3				124,700.
		eases not included in	line 2 (itemize) ▶		5	
			alances at end of year (line 4 minus	line 5) - Part II. column (b		124,700.
						50m 990-PE (2014)

Page	3

P		and Losses for Tax on Inv	· · · · · · · · · · · · · · · · · · ·	(b) How	(a) Data	
	(a) List and 2-story b	P - Purchase		(d) Date sold (mo , day, yr)		
1a				D - Donation	(110 ; day; y)	
b						
С						
d						
<u>e</u>						
_	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
<u>a</u>		.		 		
<u>_b</u>						
_ <u>c</u>		· · · · · · · · · · · · · · · · · · ·				 -
<u>d</u>						
<u>e</u>	Complete only for assets	showing gain in column (h) and owne	d by the foundation on 12/31/69	(0)	Coine (Col. (h) m	
	(i) F M.V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any		Gains (Col (h) ga (k), but not less the Losses (from co	han -0-) or
b						
С						
_d						
_e			<u>.</u>			
2	Capital gain net income of	nr (net canital loss)	gain, also enter in Part I, line 7			
•		, , , , , , , , , , , , , , , , , , ,	(loss), enter -0- in Part I, line 7	2		
3		in or (loss) as defined in sections art I, line 8, column (c) (see inst				
	_			,		
Pa			duced Tax on Net Investment I	ncome		
(Fo	r optional use by domestic	private foundations subject to the	e section 4940(a) tax on net investi	ment inco	me)	
•	,	•	, ,		•	
If s	ection 4940(d)(2) applies,	leave this part blank				
						-
			outable amount of any year in the b	ase perio	d?	Yes X No
		not qualify under section 4940(e)				
1	(a)		r, see the instructions before makin	ig any ent I	ries (d)	
Co	Base penod years lendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(с) Net value of nonchantable-use assets		Distribution ra (col (b) divided by	
	2013	18,469.	327,065.			0.056469
	2012	31,988.	376,537.			0.084953
	2011	213,522.	485,165.			0.440102
	2010	33,489.	286,135.			0.117039
	2009	43,000.	83,206.			0.516790
2	Total of line 1, column (d))		2		1.215353
3	Average distribution ratio	for the 5-year base period - divid-	e the total on line 2 by 5, or by the			
	number of years the foun	dation has been in existence if les	s than 5 years	3		0.243071
4	Enter the net value of nor	ncharitable-use assets for 2014 fro	om Part X, line 5	4		334,951.
				[_		01 410
5	Multiply line 4 by line 3.			5		81,417.
						3
6	Enter 1% of net investme	ent income (1% of Part I, line 27b)		6		3.
7	Add lines 5 and 6			7		81,420.
•	Add midd d dild U , , , ,					<u> </u>
8		ons from Part XII, line 4		8		100,000.
		eater than line 7, check the box	in Part VI, line 1b, and complete	that part	using a 1% tax	rate. See the
	Part VI instructions.					

Pai	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	instru	ction	s)
1a	Exempt operating foundations described in section 4940(d)(2), check here			, ,
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)		, / _	
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			3.
	here ► X and enter 1% of Part I, line 27b			٠, ٥,
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of J			· · ·
_	Part I, line 12, col (b).			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 2 Add lines 1 and 2			
3	Add med 1 drug 2.1.			<u>. 3.</u>
4	Submiter / (intermed) tax (domestic section 4047 (a)(1) tradia and taxable roundations only officers effect 4047			3.
5 6	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0	,	5.54	- (,
a	2014 estimated tax payments and 2013 overpayment credited to 2014 6a	,	, , ,	
b	Exempt foreign organizations - tax withheld at source			,
c	Tax paid with application for extension of time to file (Form 8868).		*	
ď	Backup withholding erroneously withheld	-	•	~ ,
7	Total credits and payments. Add lines 6a through 6d			0
8	Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is attached			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			3.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11	Enter the amount of line 10 to be Credited to 2015 estimated tax ▶ Refunded ▶ 11			
Par	t VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		Х
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see			
	Instructions for the definition)?	1b	15	X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	' _	• ,	a
	published or distributed by the foundation in connection with the activities	- 25	<u> </u>	"Eki"
	Did the foundation file Form 1120-POL for this year?	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation (1) On foundation managers (1) On			
	(1) On the foundation 1 4		,	
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ \$0	.	, °	^
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	t decome	×
_	If "Yes," attach a detailed description of the activities	- ,,	N .	~. *`
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of		",	,
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	~~ *	X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Х
	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		Х
	If "Yes," attach the statement required by General Instruction T		Ň., .	137
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either		,	
	By language in the governing instrument, or			
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that		*	<u></u> .
	conflict with the state law remain in the governing instrument?	6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	Х	<u> </u>
	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	NC			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	-	- ~	
	(or designate) of each state as required by General Instruction G ² If "No," attach explanation	86	<u> </u>	<u> </u>
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or		*** -	- /4.
	4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes,"	9		Х
40	complete Part XIV			
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	10		х
	names and addresses			

Pa	rt VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified	4		
	person had advisory privileges? If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		Х	
	Website address WWW.NCSMT.ORG			
14	The books are in care of ► SAM HOUSTON Telephone no ► 919 99	1-510	0	
	Located at ▶PO BOX 13901, RESEARCH TRIANGLE PARK, NC ZIP+4 ▶ 27701-	3901		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		▶	. 🔲
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authorit		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16	<u> </u>	Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22 1) I	f	- ~	;
	"Yes," enter the name of the foreign country ▶		·	,
Pai	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required	1		
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	<u> </u>	Yes	No
1 a	During the year did the foundation (either directly or indirectly)		, ,	1
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No	ľ	*	1
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	\$-1, a	ا پر سور	
	disqualified person?	'	٠٠.	, ,
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	;		1
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? X Yes No	,	!	. 1
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	-		, ,
	the benefit or use of a disqualified person)? Yes X No	-	İ	,
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the	-		, ^*
	foundation agreed to make a grant to or to employ the official for a period after	1 .		;
	termination of government service, if terminating within 90 days)		*	, [
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	/		· · ·
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		<u> </u>
	Organizations relying on a current notice regarding disaster assistance check here		- î.º	
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	1	L 1, 0	X
•	were not corrected before the first day of the tax year beginning in 2014?	1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)).			
9	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and			3 ,
u	6e, Part XIII) for tax year(s) beginning before 2014?	`		
	If "Yes." list the years	.	, ,	_ 1
h	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)	\	٠,٠	
_	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			,
	all years listed, answer "No" and attach statement - see instructions)	2b		3
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	*		1
	>			,
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	,		•
	at any time during the year?		`	# 1
b	If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the	ľ	. ;	, ,
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of			1
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			
	foundation had excess business holdings in 2014)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b		Х
				_

Pai	t VII-B Statements Regarding Activities	for Which Form	4720 May Be Req	uired (continued)	
5a	During the year did the foundation pay or incur any am	ount to.			
	(1) Carry on propaganda, or otherwise attempt to influ	ence legislation (section	n 4945(e))?	Yes X No	
	(2) Influence the outcome of any specific public el	* .			
	directly or indirectly, any voter registration drive?	·	· · · · · · · · · · · · · · · · · · ·		
	(3) Provide a grant to an individual for travel, study, or				,
	(4) Provide a grant to an organization other than a				
	section 4945(d)(4)(A)? (see instructions)			مناكا يونا	, :
	(5) Provide for any purpose other than religious, c				
	purposes, or for the prevention of cruelty to children		•		
b	If any answer is "Yes" to 5a(1)-(5), did any of the				
	Regulations section 53 4945 or in a current notice rega)
	Organizations relying on a current notice regarding disa			_	
G	If the answer is "Yes" to question 5a(4), does the		•	1 1 1 1	
	because it maintained expenditure responsibility for the				
٥.	If "Yes," attach the statement required by Regulations se	• •			
6a	Did the foundation, during the year, receive any fu	•	• • • •	Yes X No	
.	on a personal benefit contract?			. —	6b - X
b	Did the foundation, during the year, pay premiums, dir	ectly or indirectly, on a	personal benefit contra	Ctr.,.,.,.	l
	If "Yes" to 6b, file Form 8870	and the second days	· abaltar transaction?	Yes X No	
	At any time during the tax year, was the foundation a p if "Yes," did the foundation receive any proceeds or ha	• •		•	/
	Information About Officers, Director				
	and Contractors				
1	List all officers, directors, trustees, foundation	managers and their (b) Title, and average	compensation (see	instructions). (d) Contributions to	
	(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	(e) Expense account, other allowances
		devoted to position	enter -0-j	and defended compensation	
ATC			202,383.	67,056.	0
		,			
				1	
2	Compensation of five highest-paid employees	(other than thos	e included on line	1 - see instruction	ons). If none, enter
	'NONE."			(d) Contabilities to	
(a)	Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit	(e) Expense account,
(-/	tallo and address of data simple, so paid in site sites and in sit	devoted to position	(c) componication	plans and deferred compensation	other allowances
ATCI			70,622.	27,422.	0
		<u> </u>			
Fotal	number of other employees paid over \$50,000.	<u> </u>			0
					Form 990-PF (2014)

Form 990-PF (2014) Page 7 Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued) Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE." (a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensation NONE Total number of others receiving over \$50,000 for professional services , Part IX-A **Summary of Direct Charitable Activities** List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of Expenses organizations and other beneficianes served, conferences convened, research papers produced, etc. 1 LASER ATTACHMENT 10 268,233. 2 FLIGHT FELLOWS ATTACHMENT 10 88,271. 3 STEM LEARNING NETWORK ATTACHMENT 10 25,561. 4 PROFESSIONAL DEVELOPMENT ATTACHMENT 10 11,560. Part IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount 1 NONE All other program-related investments. See instructions. 3 NONE

Form 990-PF (2014)

Total. Add lines 1 through 3

Page 8

Par	Minimum Investment Return (All domestic foundations must complete this part. Forei see instructions.)	gn foundations,	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	F 3* 5.	
	purposes:		
а	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1b	340,052.
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	340,052.
е	Reduction claimed for blockage or other factors reported on lines 1a and	- 10 mg/m	
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	340,052.
4	Subtract line 2 from line 1d Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see		
	instructions)	4	5,101.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	334,951.
6	Minimum investment return. Enter 5% of line 5	6	16,748.
Part	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foun and certain foreign organizations check here ▶ and do not complete this part)	ndations	
- 1 -	Minimum investment return from Part X, line 6	1	16,748.
•		37,37	
b	Income tax for 2014 (This does not include the tax from Part VI).	1.	
c	Add lines 2a and 2b	2c	3.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	16,745.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	16,745.
6	Deduction from distributable amount (see instructions).	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5 Enter here and on Part XIII,		
•	line 1	7	16,745.
Pari	XII Qualifying Distributions (see instructions)	<u> </u>	· · · · · · · · · · · · · · · · · · ·
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes.		
	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	_{1a}	100,000.
	Program-related investments - total from Part IX-B	1b	· <u> </u>
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
-	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the	1 1 1	
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	100,000.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income	 	
•	Enter 1% of Part I, line 27b (see instructions)	5	3.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	99,997.
J	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when c		
	qualifies for the section 4940(e) reduction of tax in those years.	alculating wheth	ici tile loulidatio

Form 990-PF (2014)

Form 990-PF (2014) Page 9 Part XIII Undistributed Income (see instructions) (b) (c) (d) (a) 2013 Corpus Years prior to 2013 2014 Distributable amount for 2014 from Part XI, 16,745. Undistributed income, if any, as of the end of 2014 a Enter amount for 2013 only Total for prior years 20 12 ,20 11 ,20 10 3 Excess distributions carryover, if any, to 2014: a From 2009 19,187. b From 2010 c From 2011 189,271. 13,168. d From 2012 e From 2013 2,122. 262,590 Qualifying distributions for 2014 from Part XII, line 4: ▶ \$ 100,000. a Applied to 2013, but not more than line 2a b Applied to undistributed income of prior years (Election required - see instructions) Treated as distributions out of corpus (Election required - see instructions) 16,745 d Applied to 2014 distributable amount 83,255 e Remaining amount distributed out of corpus . . Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as indicated below: 345,845 a Corpus Add lines 3f, 4c, and 4e Subtract line 5 Prior vears' undistributed income Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed d Subtract line 6c from line 6b Taxable amount - see instructions
Undistributed income for 2013. Subtract line 4a from line 2a Taxable amount - see f Undistributed income for 2014 Subtract lines 4d and 5 from line 1. This amount must be 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) Excess distributions carryover from 2009 not 38,842 applied on line 5 or line 7 (see instructions) Excess distributions carryover to 2015. 307,003 Subtract lines 7 and 8 from line 6a 10 Analysis of line 9 19,187. a Excess from 2010 . . . 189,271. b Excess from 2011 . . . 13,168. c Excess from 2012 . . . 2,122. d Excess from 2013 . . .

Form 990-PF(2014)

e Excess from 2014 . . .

83,255.

Forn	n 990-PF (2014)	NORTH CAP	ROLINA SCIENCE,	MATHEMATICS,	04-	-3602929 Page 10
Pa	rt XIV Private Op	erating Foundations	s (see instructions a	nd Part VII-A, questi	on 9)	NOT APPLICABLE
1 a	If the foundation has					
	foundation, and the rulin	g is effective for 2014, e	nter the date of the ruling		>	·
b	Check box to indicate	whether the foundation	is a private operating	foundation described in	section 4942(j)(3) or 4942(j)(5)
2 a	Enter the lesser of the ad-	Tax year		Prior 3 years		(e) Total
	justed net income from Part	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(0)
	I or the minimum investment return from Part X for each	1	•			
	year listed					
b	85% of line 2a					
C	Qualifying distributions from Part					
	XII, line 4 for each year listed					
a	Amounts included in line 2c not used directly for active conduct	1				
	of exempt activities					
е	Qualifying distributions made directly for active conduct of					
	exempt activities. Subtract line	!				
3	2d from line 2c					
•	alternative test relied upon					
а	"Assets" alternative test - enter					
	(1) Value of all assets (2) Value of assets qualifying					
	under section		_			-
h	4942(j)(3)(B)(i)					
-	enter 2/3 of minimum invest-					
	ment return shown in Part X,					
c	line 6 for each year listed "Support" alternative test - enter					
	(1) Total support other than					
	gross investment income					
	(interest, dividends, rents, payments on securities					
	loans (section 512(a)(5)), or royalties)					
	(2) Support from general					
	public and 5 or more exempt organizations as					
	provided in section 4942 ()(3)(B)(iii)					
	(3) Largest amount of sup-					
	port from an exempt organization.					
	(4) Gross investment income					
Pai		ntary Information (only if the found	ation had \$5,000	or more in assets
		during the year - se				
	Information Regarding List any managers of			than 20/ of the total	l contributions receiv	and by the formulation
а	before the close of any	tax year (but only if th	ey have contributed m	ore than \$5,000) (Se	ee section 507(d)(2))	ed by the roundation
	N/A	, , ,	•	. , , ,	(((((((((((((((((((
b	List any managers of	the foundation who	own 10% or more of	the stock of a corpo	oration (or an equally	large portion of the
	ownership of a partner					large pertient of the
		•		-		
	N/A					
2	Information Regarding	g Contribution, Grant,	Gift, Loan, Scholarshi	p, etc., Programs:		
	Check here ▶ if the	he foundation only r	nakes contributions	to preselected chard	table organizations a	ind does not accept
	unsolicited requests for	or funds. If the founda	ition makes gifts, gra	nts, etc (see instruct	ions) to individuals o	r organizations under
	other conditions, comp					
а	The name, address, ar	•	or e-mail address of th	ne person to whom app	olications should be add	dressed
	SEE ATTACHM					
D	The form in which appl	ications snould be SUD	milled and informatio	n and materials they s	snoula include	
	SEE ATTACHM	ENT 9				
С	Any submission deadling					
	- '					
	SEE ATTACHM		 			
	Any restrictions or lir factors	mitations on awards,	such as by geograp	ohical areas, charitat	ole fields, kinds of it	nstitutions, or other
	SEE ATTACHM	ENT 9				
						

Page **11**

	990-PF (2014)			<u> </u>	Page 1 1
Pa	rt XV Supplementary Information (continued)			
_3	Grants and Contributions Paid Duri Recipient Name and address (home or business)	ng the Year or Appl	oved for I	Future Payment	
	Recipient	show any relationship to	status of	Purpose of grant or contribution	Amount
	Name and address (nome or business)	or substantial contributor	recipient	-	
а	Paid during the year				
Δ	FCH 7				
• •					
					,
					İ
				-	
			ľ		
			-		
			}		
			1		
			-		
			<u> </u>		
	Total	 	• • • • • • • • • • • • • • • • • • •	▶ 3a	7,000.
b	Approved for future payment				
NC	ONE				
]		
]		
			1		
			<u></u>		
	Total	<u> </u>		▶ 3b	<u>C</u>

JSA 4E1491 1 000

Form 990-PF (2014)

Page **12**

Part X\	/I-A Analysis of Income-Produ	icing Activ	vities						
Enter gros	ss amounts unless otherwise indicated	Unrel	ated business income	Excluded by	y section 512, 513, or 514	(e) Related or exempt			
		(a)	(b)	(c)	(d)	function income			
	am service revenue.	Business code	Amount	Exclusion code	Amount	(See instructions)			
	JIGHT FELLOWS					10,892.			
· · —	ASER					300,000.			
c SI	TEM LEARNING NETWORK					25,000.			
d			ļ						
e				<u> </u>					
f	· · · · · · · · · · · · · · · · · · ·								
g Fee	_			<u> </u>					
2 Memb	Membership dues and assessments			<u> </u>					
	t on savings and temporary cash investments			14	329.	·			
4 Divide	nds and interest from securities	,	-	_					
5 Net re	ntal income or (loss) from real estate:	1 9		``					
	bt-financed property								
	t debt-financed property								
6 Net ren	tal income or (loss) from personal property .					· · · · · · · · · · · · · · · · · · ·			
7 Other	investment income								
8 Gain or	(loss) from sales of assets other than inventory								
9 Net inc	come or (loss) from special events								
10 Gross	profit or (loss) from sales of inventory								
11 Other	revenue. a								
b	ATCH 8		<u>-</u>			157.			
c									
d									
e									
12 Subtot	al. Add columns (b), (d), and (e)				329.	336,049.			
13 Total.	Add line 12, columns (b), (d), and (e)				13	336,378.			
<u> </u>	sheet in line 13 instructions to verify calci								
Part XV	Relationship of Activities	to the Ac	complishment of Ex	xempt Purp	oses				
Line No.	Explain below how each activity	y for which	n income is reported	ın column (e	e) of Part XVI-A contribu	ted importantly to the			
▼	accomplishment of the foundation	n's exemp	t purposes (other than	by providing	funds for such purposes) (See instructions)			
-15	THE PLACEM PRINCIPLE	OCDAN C	SOMETONE OF THE	AMA BADEL) m				
1A	THE FLIGHT FELLOWS PR								
		TH POTENTIAL TO DRIVE STEM IMPROVEMENTS WHO							
		ABOUT CONTEMPORARY AEROSPACE SCIENCE AND DEVELOP							
		RESOURCES TO MOTIVATE STUDENTS TO PURSUE STEM							
				TO PURSU	JE SIEM	 			
10	STUDY AND CAREERS IN			DEDCUTD #	DE AMC				
<u> 1B</u>	LASER INSTITUTE GUIDE					·			
	FOR INITIATING AND IN				GIC PLAN	, 			
				<u> </u>					
1C	INQUIRY-CENTERED SCIE THE STEM LEARNING NET			TUE CMM C	יבאיתבס	· · · · · · · · · · · · · · · · · · ·			
10	THE NC STEM LEARNING NET								
	STATE'S COORDINATED S					· · · · · · · · · · · · · · · · · · ·			
	ACHIEVEMENT IN STEM,								
	EDUCATION, AND BUILD					·, · · · · · · · · · · · · · · · · · ·			
	AND RELEVANT STEM EDU LEARNING NETWORK ARE					··			
	WEB PORTAL, AND NC ST								
	!	LEM ATTR	TEGIES, KUBICS	AND SCHO	NOTO OF				
	DISTINCTION.								
									
	 		 						
		····							
	<u> </u>					5 000 DE (004)			

Form 990-PF (2014)

Form 99	0-PF (2				A SCIENCE					04-360			
Part	XVII	Information R Exempt Orga	Regarding Tr nizations	ansfers	To and Tr	ransacti	ions an	d Relation	ships	With Non	chari	table	
in o	n sect rganiz	e organization direction 501(c) of the Cozations? ers from the reporting	ode (other than	section	501(c)(3) org	janization	s) or in s	ection 527,			2 ° 4	Yes	No
		sh									1a(1)		X
(2	2) Oth	ner assets									1a(2)		<u> x</u>
		transactions:											
(1	I) Sal	les of assets to a no	oncharitable exe	empt orga	inization						1b(1)		X
(2	z) Pui	rchases of assets fr	om a noncharit	able exen	npt organization	on			• • • • •		1b(2)		$\frac{x}{x}$
()) Rei	ntal of facilities, equ	ilpment, or othe	r assets	• • • • • •				• • • •		16(3)		X
(*	*) \e	imbursement arrang ans or loan guarante	eniens			• • • • •			• • • • •	• • • • • • •	10(4)		$\frac{x}{x}$
(6	6) Pei	rformance of service	es or members	hip or fur		ıtatıons			• • • • •		15(6)		<u>X</u>
c S	harin	g of facilities, equipr	ment, mailing li	sts, other	assets, or pa	id employ	ees				1c		X
d If	the a	answer to any of the	ne above is "Y	es," com	plete the foll	owing sc	hedule (Column (b)	should a	always show	the f	air m	arket
Vä	alue d	of the goods, other	assets, or serv	rices give	n by the rep	orting for	undation.	If the found	dation re	eceived less	than f	air m	arket
		n any transaction o											
(a) Line	no	(b) Amount involved	(c) Name of	noncharital	ble exempt organi	ization	(d) Des	cription of trans	sfers, transa	actions, and sha	nng arra	ngeme	nts
	-	N/A					N/A						
	-+		<u> </u>										
			 										
												• • • • • • • • • • • • • • • • • • • •	
	_												
	_		ļ										
		·	<u> </u>										
			<u> </u>							·			
		-						·····					
													
			1			· · · · · · · · · · · · · · · · · · ·							
					· · · · · · · · · · · · · · · · · · ·								
		foundation directly ped in section 501(c							ot organi	zations	Ye	s X	—] No
b_lf	"Yes	" complete the follo	wing schedule.										
		(a) Name of organization	on		(b) Type of orga	anization			(c) Descrip	ption of relations	hip		
						.	· <u> </u>						
													
		· · · · · · · · · · · · · · · · · · ·						<u>.</u>				·	
Sign	Under	penalties of perjury, I decl it, and complete Declaration of	are that I have example preparer (other than	nined this ret taxpayer) is b	um, including account ased on all informat	ompanying so tion of which p	hedules and preparer has a	statements, and ny knowledge	to the best				is true,
Here	Sign	nature of officer or trustee	Voristin)	Date Date	2016	Title	1.4 CE	<u> </u>		discuss eparer s s)? X		retum below No
	Ь	Print/Type preparer's na	ame	Prens	arer's signature		.	Date			PTIN		
Paid		MARCIA K KRAU		1.7	- Signatura			1 .		""	P003	9469	:1
Prepa	rer		RICEWATERHO	OUSEGO	OPERS, LL	P	······	1 1 0	Firm's El				<u> </u>
Use C	nly		00 13TH ST						5 [2]	·· • · · · · · · · · · · · · · · · · ·			
		W.F	ASHINGTON,	DC			200	005-3005	Phone no	202-43	14-10	000	
										For	m 990	-PF	(2014)

Schedule B

(Form 990, 990-EZ, or 990-PF)

NORTH CAROLINA SCIENCE, MATHEMATICS,

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No 1545-0047

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

AND TECHNOLOGY EDUCAT	ION CENTER, INC.	04-3602929		
Organization type (check one)				
Filers of:	Section:			
Form 990 or 990-EZ	501(c)() (enter number) organization			
	4947(a)(1) nonexempt charitable trust not treated as a private four	ndation		
	527 political organization			
Form 990-PF X 501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a private foundation	on		
	501(c)(3) taxable private foundation			
Note. Only a section 501(c)(7), (instructions	rered by the General Rule or a Special Rule . (8), or (10) organization can check boxes for both the General Rule and a S	pecial Rule See		
General Rule				
	ng Form 990, 990-EZ, or 990-PF that received, during the year, contribut property) from any one contributor. Complete Parts I and II. See instruction ributions.			
Special Rules				
regulations under secti 13, 16a, or 16b, and th	scribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3 ions 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 on the received from any one contributor, during the year, total contributions amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Contributions	r 990-EZ), Part II, line of the greater of (1)		
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III				
contributor, during the contributions totaled m during the year for an e	scribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received, contributions exclusively for religious, charitable, etc., purposes, but ore than \$1,000. If this box is checked, enter here the total contributions exclusively religious, charitable, etc., purpose. Do not complete any of the pothis organization because it received nonexclusively religious, charitable, etc., purpose by this organization because it received nonexclusively religious, charitable, etc., purpose by the second of the pothis organization because it received nonexclusively religious, charitable, etc., purpose by the second of the pothis organization because it received nonexclusively religious, charitable, etc., purpose by the pothis organization because it received nonexclusively religious, charitable, etc., purpose by the pothis organization because it received nonexclusively religious, charitable, etc., purpose by the pothis organization because it received nonexclusively religious, charitable, etc., purpose by the pothis organization because it received nonexclusively religious, charitable, etc., purpose by the pothis organization because it received nonexclusively religious, charitable, etc., purpose by the pothis organization because it received nonexclusively religious, charitable, etc., purpose by the pothis organization because it received nonexclusively religious, charitable, etc., purpose by the pothis organization because it received nonexclusively religious, charitable, etc., purpose by the pothis organization because it received nonexclusively religious, charitable, etc., purpose by the pothis organization because it received nonexclusively religious, charitable, etc., purpose by the pothis organization by the pothis organization by the pothis organization by the pothis organization by the pothis organization by the pothis organization by the pothis organization by the pothis organization by the pothis organization by the pothis organization by the pothis organization by the pothis organization by the poth	no such that were received parts unless the etc , contributions		
990-EZ, or 990-PF), but it must a	not covered by the General Rule and/or the Special Rules does not file Sch inswer "No" on Part IV, line 2, of its Form 990, or check the box on line H ertify that it does not meet the filing requirements of Schedule B (Form 990,	of its Form 990-EZ or on its		

JSA 4E1251 2 000

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF

Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Schedule B (Form 990, 990-EZ, or 990-PF) (2014) Page 2 Name of organization NORTH CAROLINA SCIENCE, MATHEMATICS, Employer identification number AND TECHNOLOGY EDUCATION CENTER, INC. 04-3602929 Part I Contributors (see instructions) Use duplicate copies of Part I if additional space is needed. (a) (d) (c) No. Name, address, and ZIP + 4 Total contributions Type of contribution THE BURROUGHS WELLCOME FUND Х Person

	21 T.W. ALEXANDER DRIVE, PO BOX 13901 RESEARCH TRIANGLE PARK, NC 27709	\$641,380.	Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization NORTH CAROLINA SCIENCE, MATHEMATICS, AND TECHNOLOGY EDUCATION CENTER, INC.

Employer identification number 04-3602929

Part II Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed.

all til	Troncasi i roperty (see instructions) ase duplicate copies of i	art ii ii additionar space is nee	<u>ucu.</u>
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_ 1	PAYMENT OF EXPENSES ON BEHALF OF NCSMT.	\$641,380.	VAR
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
- -		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

Employer identification number

Name of organization NORTH CAROLINA SCIENCE, MATHEMATICS,

	AND TECHNOLOGY EDUCATI	ON CENTER, INC.		04-3602929
Part III	Exclusively religious, charitable, etc	., contributions to o	rganizations des	cribed in section 501(c)(7), (8), or (10)
	that total more than \$1,000 for the			
	following line entry For organizations			
	contributions of \$1,000 or less for th			
	Use duplicate copies of Part III if addit			
(a) No. from				
from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
			<u></u>	
		(e) Transfe	ar of gift	L
		(c) Trunsie	or grit	
	Transferee's name, address, a	nd 7IP + 4	Relatio	nship of transferor to transferee
	Transfere a fiame, address, at	10211 7 4	Neiatio	namp of transferor to transferee
(a) No.				
from	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
Part I				
				
		(a) T		<u> </u>
		(e) Transfe	er or gift	
	Transferee's name, address, an	ad 7ID ± 4	Dalatia	nabia of transferor to transferor
	Transferee's flame, address, at	10 ZIF + 4	Relatio	nship of transferor to transferee
			-	
(a) No		,		
(a) No from Part I	(b) Purpose of gift	(c) Use o	of gift	(d) Description of how gift is held
raiti				
		-		
		(e) Transfe	or of gift	
		(6)	. o. g	
	Transferee's name, address, ar	nd ZIP + 4	Relatio	nship of transferor to transferee
		<u> </u>		
				_~~
		·		
(a) No			· · · · · · · · · · · · · · · · · · ·	
from Part I	(b) Purpose of gift	(c) Use o	of gift	(d) Description of how gift is held
Parti				
		(e) Transfe	r of gift	
		(e) italisie	. o. giit	
	Transferee's name, address, ar	od ZIP + 4	Palatio	nship of transferor to transferee
	Transieree's name, audress, ar	<u> </u>	Veigilo	ising of transferor to transferee
		· \		
	L		····	0-1-1-1-0-1
JSA 4E1255 1 000				Schedule B (Form 990, 990-EZ, or 990-PF) (2014

- OTHER INCOME PART I FORM 990PF,

NORTH CAROLINA SCIENCE, MATHEMATICS,

STEM LEARNING NETWORK PROGRAM SERVICE FEES FLIGHT FELLOWS DESCRIPTION LASER

10,892. 25,000. 157. 300,000. EXPENSES PER BOOKS AND

REVENUE

336,049.

336,049.

TOTALS

300,000. 10,892. 25,000.

ADJUSTED

NET

INCOME

157.

ATTACHMENT 1 PAGE 14

> V 14-7.16 UV5977 U172 5/12/2016 4:41:44 PM

FORM 990PF, PART I - ACCOUNTING FEES

CHARITABLE <u>PURPOSES</u>		
ADJUSTED NET INCOME		
NET INVESTMENT INCOME		
REVENUE AND EXPENSES PER BOOKS	22,533.	22,533.
DESCRIPTION	PRICEWATERHOUSECOOPERS LLP	TOTALS

FORM 990PF, PART I - OTHER PROFESSIONAL FEES

REVENUE AND

EXPENSES PER BOOKS 109,816. 555.

CHARITABLE
PURPOSES
3,500.

3,500.

TOTALS

CONSULTANT EXPENSE PROFESSIONAL DUES

DESCRIPTION

110,371.

ATTACHMENT 3 PAGE 16

FORM 990PF, PART I - OTHER EXPENSES

REVENUE

	AND	ADJUSTED
	EXPENSES	NET
DESCRIPTION	PER BOOKS	INCOME
STIPENDS	19,600.	
SUPPLIES	10,140.	
REGISTRATIONS	1,050.	
CONTRACTS	225,100.	225.000
WEB ENHANCEMENTS	8,864.	
BANK CHARGES	. 598.	
STAFF DEVELOPMENT	250.	
MISCELLANEOUS	6,183.	
OTHER FLIGHT FELLOWS EXPENSES	88,272.	10,892
TOTALS	360.057.	735 892

CHARITABLE PURPOSES 9,400.		77,379.	86,779.
ADJUSTED NET INCOME	225,000.	10,892.	235,892.

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

TIONS EXPENSE ACCT YEE AND OTHER PLANS ALLOWANCES	0	0	0	0	0	0
CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS						
COMPENSATION	0	0	0	0	0	0
TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	BOARD MEMBER 1.00 ARK, NC 27709-3901	BLATTNER 13901 TRIANGLE PARK, NC 27709-3901	BOARD MEMBER 1.00 ARK, NC 27709-3901	BOARD MEMBER & TREASURER 1.00 ARK, NC 27709-3901	BOARD MEMBER 1.00 ARK, NC 27709-3901	BOARD MEMBER 1.00 ARK, NC 27709-3901
NAME AND ADDRESS	DR MEG BLANCHARD P.O. BOX 13901 RESEARCH TRIANGLE PARK, NC 27709-3901	DR DAVID BLATINER P.O. BOX 13901 RESEARCH TRIANGLE PA	MS AMANDA BULLARD P.O. BOX 13901 RESEARCH TRIANGLE PARK, NC	DR JOHN BURRIS P.O. BOX 13901 RESEARCH TRIANGLE PARK, NC 27709-3901	DR ELAINE FRANKLIN P.O. BOX 13901 RESEARCH TRIANGLE PARK, NC 27709-3901	MR JOSE GARCIA P.O. BOX 13901 RESEARCH TRIANGLE PARK, NC 27709-3901

ATTACHMENT 5 (CONT'D)

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

EXPENSE ACCT AND OTHER ALLOWANCES	o	0	0	0	0
CONTRIBUTIONS EXTO EMPLOYEE	0	67,056.	0	0	0
COMPENSATION	0	202,383. ENCE, ARE.	0	0	0
TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	BOARD MEMBER 1.00	PRESIDENT & CEO 38.00 1 O DR. SAM HOUSTON ARE PAID BY PROVIDED TO NORTH CAROLINA SCIENCE, NO CENTER, INC. THESE SERVICES ARE ID EXPENSES ON NCSMI'S FORM 990-PF.	BOARD MEMBER 1.00	BOARD MEMBER 1.00	BOARD MEMBER 1.00
NAME AND ADDRESS	DR TRACY GOODSON-ESPY P.O. BOX 13901 RESEARCH TRIANGLE PARK, NC 27709-3901	DR SAM HOUSTON 18.00 18.00 19.0. BOX 13901 19.0. BOX 13901 19.0. BOX 13901 19.0. BOX 13901 19.0. COMPENSATION AND BENEFITS PROVIDED TO DR. SAM HOUSTON ARE PAID BY BURROUGHS WELLCOME FUND FOR SERVICES PROVIDED TO NORTH CAROLINA SCIENI MATHEMATICS, AND TECHNOLOGY EDUCATION CENTER, INC. THESE SERVICES ARE REPORTED AS IN-KIND CONTRIBUTIONS AND EXPENSES ON NCSMI'S FORM 990-PF	MR TONY JACKSON P.O. BOX 13901 RESEARCH TRIANGLE PARK, NC 27709-3901	MR MARK JEWELL P.O. BOX 13901 RESEARCH TRIANGLE PARK, NC 27709-3901	MS CONNIE LOCKLEAR P.O. BOX 13901 RESEARCH TRIANGLE PARK, NC 27709-3901

ATTACHMENT 5 (CONT'D)

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

EXPENSE ACCT AND OTHER ALLOWANCES	0	0	0	0	0	0
CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	0	0	0	0	0	0
COMPENSATION	0	0	0	O -	0	0
TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	BOARD MEMBER 1.00 27709-3901	BOARD MEMBER 1.00 709-3901	BOARD MEMBER 1.00 709-3901	BOARD MEMBER 1.00 27709-3901	BOARD MEMBER 1.00 27709-3901	BOARD MEMBER 1.00 709-3901
NAME AND ADDRESS	MR MIKE MCBRIETY P.O. BOX 13901 RESEARCH TRIANGLE PARK, NC 277	MS CAROLINE MCCULLEN P.O. BOX 13901 RESEARCH TRIANGLE PARK, NC 27709-3901	MS CAROL MIDGETT P.O. BOX 13901 RESEARCH TRIANGLE PARK, NC 27709-3901	MR FRANK SCOTT P.O. BOX 13901 RESEARCH TRIANGLE PARK, NC 277	MR DAVID SIMPSON P.O. BOX 13901 RESEARCH TRIANGLE PARK, NC 277	DR RAY SPAIN P.O. BOX 13901 RESEARCH TRIANGLE PARK, NC 27709-3901

ATTACHMENT 5 (CONT'D)

CONTRIBUTIONS EXPENSE ACCT TO EMPLOYEE AND OTHER COMPENSATION BENEFIT PLANS ALLOWANCES	0 0	0 0	0 0	0 0	0 0	
TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	CHAIRMAN OF THE BOARD 1.00 C 27709-3901	BOARD MEMBER 1.00 C 27709-3901	BOARD MEMBER 1.00 C 27709-3901	BOARD MEMBER 1.00 C 27709-3901	BOARD MEMBER 1.00 C 27709-3901	
NAME AND ADDRESS	DR IRA TROLLINGER P.O. BOX 13901 RESEARCH TRIANGLE PARK, NC 27709-3901	DR JAN WEBSTER P.O. BOX 13901 RESEARCH TRIANGLE PARK, NC 27709-3901	MR JOHNNIE WILKINS P.O. BOX 13901 RESEARCH TRIANGLE PARK, NC 27709-3901	MS TRICIA WILLOUGHBY P.O. BOX 13901 RESEARCH TRIANGLE PARK, NC 27709-3901	MS DENISE LEE YOUNG P.O. BOX 13901 RESEARCH TRIANGLE PARK, NC 27709-3901	

D EMPLOYEES	
PAII	
SATION OF THE FIVE HIGHEST	
FIVE	
THE	
OF	
COMPENSATION	
1	
VIII	
PART	
990PF,	

	Т 6	EXPENSE ACCT AND OTHER ALLOWANCES	0
	ATTACHMENT 6	CONTRIBUTIONS EXPENSE ACCT TO EMPLOYEE AND OTHER BENEFIT PLANS ALLOWANCES	27,422.
2011		COMPENSATION	70,622. D BY BURROUGHS NCE, SERVICES ARE FORM 990-PF.
THE THE CONTENT OF THE TANK HOUSE THE PROPERTY OF THE PARTY OF THE PAR		TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	LISA RHOADES 8.00 RESEARCH TRIANGLE PARK, NC 27709-3901 COMPENSATION AND BENEFITS PROVIDED TO LISA RHOADES ARE PAID BY BURROUGHS WELLCOME FUND FOR SERVICES PROVIDED TO NORTH CAROLINA SCIENCE, MATHEMATICS, AND TECHNOLOGY EDUCATION CENTER, INC. THESE SERVICES ARE REPORTED AS IN-KIND CONTRIBUTIONS AND EXPENSES ON NCSMT'S FORM 990-PF.
		NAME AND ADDRESS	LISA RHOADES P.O. BOX 13901 RESEARCH TRIANGLE PARK, NC 27709-3901 COMPENSATION AND BENEFITS PROVIDED TO WELLCOME FUND FOR SERVICES PROVIDED TO MATHEMATICS, AND TECHNOLOGY EDUCATION REPORTED AS IN-KIND CONTRIBUTIONS AND

27,422.

70,622.

TOTAL COMPENSATION

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

FOUNDATION STATUS OF RECIPIENT

2,000.

GRANT FOR PROJECT LEAD - SUPPORT MATH SYMPOSIUM "SUPPORTING INCREASED STUDENT ACHIEVEMENT IN

PURPOSE OF GRANT OR CONTRIBUTION

SECONDARY MATHEMATICS CLASSROOM."

AMOUNT

ATTACHMENT 7

5,000.

RESOURCES AND SUPPLIES TO RUN TOURNAMENTS ACROSS

THE STATE

RECIPIENT NAME AND ADDRESS

2222C S FAYETTEVILLE ST RANDOLPH COUNTY SCHOOLS

ASHEBORO, NC 27205

900

NC SCIENCE OLYMPIAD

NC STATE UNIVERSITY P.O. BOX 8211

RALEIGH, NC 27695-8211

20

7,000

TOTAL CONTRIBUTIONS PAID

ATTACHMENT 7

PAGE 23

V 14-7 16

4.41:44 PM

5/12/2016

UV5977 U172

- ANALYSIS OF OTHER REVENUE FORM 990-PF, PART XVI-A

NORTH CAROLINA SCIENCE, MATHEMATICS,

ATTACHMENT 8

AMOUNT

CODE

AMOUNT

BUSINESS

RELATED OR EXEMPT FUNCTION INCOME

157.

157.

TOTALS

PROGRAM SERVICE FEES

DESCRIPTION

UV5977 U172 5/12/2016 4:41:44 PM V 14-7.16

ATTACHMENT 8 PAGE 24

ATTA		MEN	יתי כ	٠
ATTT	4CHI	$M \to N$	1.1.	

FORM 990PF - PART XV - SUPPLEMENTARY INFORMATION

2A. INDIVIDUAL TO WHOM APPLICATIONS SHOULD BE ADDRESSED:

DR. SAMUEL HOUSTON
PRESIDENT AND CEO
NORTH CAROLINA SCIENCE, MATHEMATICS, AND TECHNOLOGY EDUCATION CENTER
P.O. BOX 13901
RESEARCH TRIANGLE PARK, NC 27709-3901
PHONE: 919-991-5100

2B. FORM IN WHICH APPLICATIONS SHOULD BE SUBMITTED AND INFORMATION AND MATERIALS THEY SHOULD INCLUDE:

THE NORTH CAROLINA SCIENCE, MATHEMATICS, AND TECHNOLOGY EDUCATION CENTER WILL ACCEPT GRANT APPLICATIONS THAT FOSTER THE IMPROVEMENT OF SCIENCE, MATHEMATICS, AND TECHNOLOGY PRE K-12 EDUCATION IN NORTH CAROLINA. PROPOSALS SHOULD BE SUBMITTED TO THE CENTER IN THE FORM OF A LETTER. APPLICANTS SHOULD DESCRIBE THE FOCUS OF THE ACTIVITY, THE EXPECTED OUTCOMES, AND THE PROPOSAL'S RELEVANCE TO PRE K-12 SMT EDUCATION IN NORTH CAROLINA; THE QUALIFICATIONS OF THE ORGANIZATION AND THE INDIVIDUALS INVOLVED; PROVIDE CERTIFICATION OF THE SPONSOR'S INTERNAL REVENUE TAX EXEMPT STATUS; AND GIVE THE TOTAL BUDGET FOR THE ACTIVITY, INCLUDING ANY FINANCIAL SUPPORT OBTAINED OR PROMISED. PROPOSALS ARE GIVEN PRELIMINARY REVIEW BY THE CENTER STAFF AND THOSE DEEMED APPROPRIATE WILL BE PRESENTED TO THE BOARD OF DIRECTORS FOR CONSIDERATION.

- 2C. SUBMISSION DEADLINES: PROPOSALS ARE ACCEPTED THROUGHOUT THE YEAR
- 2D. RESTRICTIONS OR LIMITATIONS ON AWARDS: ALL GRANT RECIPIENTS MUST BE PUBLIC CHARITIES WITH 501(C)(3) STATUS OR GOVERNMENTAL ENTITIES, RESIDE IN THE STATE OF NORTH CAROLINA, AND DEMONSTRATE RELEVANCE TO THE ADVANCEMENT OF PRE K-12 SCIENCE, MATHEMATICS, AND TECHNOLOGY EDUCATION IN NORTH CAROLINA.

ATTA	CHMENT	10
TIL	TATILITIES	

FORM 990PF - PART IX-A - SUMMARY OF DIRECT CHARITABLE ACTIVITIES

- 1) LASER (LEADERSHIP ASSISTANCE IN SCIENCE EDUCATION REFORM) INSTITUTE, GUIDES SCHOOL DISTRICT LEADERSHIP TEAMS THROUGH THE PROCESS OF DEVELOPING A TAILORED STRATEGIC PLAN FOR INITIATING AND IMPLEMENTING AN EFFECTIVE INQUIRY-CENTERED SCIENCE PROGRAM. THE NORTH CAROLINA SCIENCE, MATHEMATICS, AND TECHNOLOGY CENTER INCURRED EXPENSES OF \$268,233 FOR LASER DURING THE FISCAL YEAR.
- 2) THE FLIGHT FELLOWS PROGRAM CONSISTS OF TWENTY EXPERT TEACHERS WITH THE POTENTIAL TO DRIVE STEM IMPROVEMENTS WHO LEARN ABOUT CONTEMPORARY AEROSPACE SCIENCE AND DEVELOP INNOVATIVE, LOCALLY RELEVANT CURRICULUM USING NASA EDUCATIONAL RESOURCES TO MOTIVATE STUDENTS TO PURSUE STEM STUDY AND CAREERS IN AEROSPACE. THE NORTH CAROLINA SCIENCE MATHEMATICS AND TECHNOLOGY CENTER INCURRED EXPENSES OF \$88,271 FOR THE FLIGHT FELLOWS PROGRAM DURING THE FISCAL YEAR.
- 3) THE STEM LEARNING NETWORK IS A PROJECT OF THE SMT CENTER. THE NC STEM LEARNING NETWORK GUIDES IMPLEMENTATION OF THE STATE'S COORDINATED STEM STRATEGY TO INCREASE STUDENT ACHIEVEMENT IN STEM, CREATE GREATER PUBLIC SUPPORT FOR STEM EDUCATION, AND BUILD THE RESOURCES NECESSARY FOR RIGOROUS AND RELEVANT STEM EDUCATION. AMONG THE PROJECTS OF THE STEM LEARNING NETWORK ARE THE NC STEM SCORECARD, NC STEM CENTER WEB PORTAL, AND NC STEM ATTRIBUTES, RUBICS AND SCHOOLS OF DISTINCTION. THE NORTH CAROLINA SCIENCE MATHEMATICS AND TECHNOLOGY CENTER INCURRED EXPENSES OF \$25,561 FOR STEM LEARNING NETWORK DURING THE FISCAL YEAR.
- 4) THE SMT CENTER'S TEACHER PROFESSIONAL DEVELOPMENT IS DESIGNED TO INCREASE TEACHER EFFECTIVENESS IN THE CLASSROOM AS WELL AS TO SUPPORT TEACHERS AS INSTRUCTIONAL LEADERS IN THEIR SCHOOLS AND SCHOOL DISTRICTS. THE NORTH CAROLINA SCIENCE MATHEMATICS AND TECHNOLOGY CENTER INCURRED EXPENSES OF \$11,560 FOR TEACHER PROFESSIONAL DEVELOPMENT DURING THE FISCAL YEAR.