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TO THE STANDING OF SOIN

990 Form

Deparement of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047 2014 Open to Public

Δ_	For the	2014 c	alendar vea	er, or tax year b	eginning 0°	9/01/14	, and ending	8/3	1/1	5		I	<u> </u>
<u>~</u> _ В	Check if ap		C Name of org				ional Founda				D Employe	er identification n	umber
	•				/o Craig		ronar rounda						
=	Address ch	nange	Doing busin		/O Clary	Wakeman					13_1	622121	
	Name char	nge	,	d street (or PO box	f mail is not delivere	ed to street addre	55)			Room/suite	E Telephon		·
	Initial return	n	7926	E 171st S	treet								
Ħ	Final return		City or town	n, state or province, c	ountry, and ZIP or fo	oreign postal code	•						
믐	terminated		Belto	n		MO 64	012				G Gross rec	cerpts \$	2,490
\sqsubseteq	Amended r	return	F Name and a	address of principal o	fficer								<u> </u>
	Application	n pending								H(a) Is this a gro	oup return for s	subordinates?	Yes X No
										H(b) Are all sub	ordinates incl	luded?	Yes No
									I	If "No,	" attach a list	(see instructions))
$\overline{}$	Tax-exem	not status	X 501	(c)(3) 501(c) () \blacktriangleleft	(insert no)	4947(a)(1) or	527					
÷	Website:		I/A	(0)(0)	, , , , , ,	(MIGGRITIO)	1011(0)(1) 01	<u> </u>		H(c) Group exe	mation aumbe	or b	
<u>-</u>	Form of or		X Corpor	ration Trust	Association	Other				ar of formation	траоттапье	M State of lega	l domicile
	art I		ımmary	Tauon (Tust	ASSOCIATION	Outer			L IE	as or iorniauori		I M State of lega	i dominicile
				organization's m	esion or most	cianificant ac	huttoe				· · · · · · · · · · · · · · · · · · ·		
	ŀ	_	Schedul		ission of most :	signilicant ac	uviues						
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폡													
Ver	1			1									
Ô	2 C		-	•			ons or disposed of m	nore tha	an 25%	% of its net ass	1 1	۱ ۵	
∞ಶ	3 N		_	mbers of the go							3	3	
ies	4 N		=	ent voting meml	-						4	3	
Ξ	5 T	Fotal nun	nber of indiv	ıduals employe	d in calendar y	ear 2014 (Pa	rt V, line 2a)				5	0	
Activities & Governance	6 T	Fotal กนท	nber of volu	nteers (estimate	of necessary)						6	0	
		Fotal unre	elated busin	ess revenue fro	m Part VIII, co	lumn (C), line	: 12				7a		0
	b N	Vet unrel	lated busine	ss taxable incor	ne from Form 9	990-T, line 34					7b		0
									-	Prior Yea		Currei	nt Year
ē	8 0		· -	ants (Part VIII, I					-		5 , 485		1,259
en) 9 F	-		enue (Part VIII,					ļ				0
Revenue	10 li			Part VIII, columi					⊢		889		1,231
<u> </u>	11 0	Other rev	venue (Part	VIII, column (A)	, lines 5, 6d, 8d	, 9c, 10c, an	d 11e)		- _				0
	12 T	Total reve	enue – add	lines 8 through	11 (must equal	Part VIII, col	umn (A), line 12)				6,374		2 , 490
	13 (Grants ar	nd similar ai	mounts paid (Pa	ırt IX, column (A), lines 1–3)							0
	14 E	Benefits (paid to or fo	r members (Par	t IX, co <u>lumn (</u> A), line 4)			L				0
တ္ဆ	15 8						in (A), lines 5–10)		L				0
benses	16a F	Professio	onal fundrais	sing fees (Part I)	K, column (A),	line 11e)			L				0
e e	. ьт	Total fund	draising exp	enses (Part IX,	column (D), lin	e 25) ▶	91	. 3	Ē.				
ŵ	17 (Other exp	penses (Par	t IX, column (A)	, lines 1,1a+11c	v.415–29eΩ					6,505		8,176
				lines 13-17 (m	11.5	•	, ,				6,505		8,176
	19 F			ses Subtract lin			• *				-131		-5,686
5	sea				1		2 U L			Beginning of Cur			f Year
Net Assets or	E 20 T	Fotal ass	sets (Part X,	line 16)	- ==		ā→ - , ,			15	2 , 347	1	41,662
Y S	21 T	Total liab	olities (Part	X, line 26)							0		0
2	된 22 N	Net asse	ets or fund b	alances Subtra	ct line 21 from	line 20				15	2 <u>,</u> 347	<u> </u>	41,662
	art II	Si	gnature l	Block									
ι	Jnder per	nalties of	perjury, I dec	lare that I have ex	amined this retu	rn, including ac	companying schedules	s and sta	atemer	nts, and to the b	est of my kr	nowledge and b	elief, it is
t	rue, corre	ect, and c	complete Dec	laration of prepare	er (other than off	icer) is based o	on all information of whi	ich prep	arer ha	as any knowledo	ge .		
											10	9-DEC	-18
Si	gn	7 25	Signature of Office	7							Date	, , ,	
	ere		Craid	-Wakemar	ì			Sec	ret	ary/Tre	easure	er	
		│ 	Type or print nar										
		Print/Typ	e preparer's na	me		Preparer's sign	ature 1	,		Date	Check	f PTIN	
Pa	id	Diana	L. Blake	man		Lien		ens	n	12/16	/15 self-en	\neg	562001
Pro	eparer	Firm's na			Blakeman	& Smi		7 7 00	<u> </u>		irm's EIN	<u></u>	730214
Us	e Only	3 114					Suite 108		<u> </u>	'		<u></u>	.
	-	Firm's ad	tdress •	Belton,		012-53					Phone no	816-3	31-1151
Ma	v the IR			n with the prepa							TOTIO 110		Yes No
_				lotice, see the se									orm 990 (2014
DA					,					P		4	200 (2014
										-		1	

DAA

	Alpha Iota Educat		-1622121	Page 2
	tatement of Program Servi	ice Accomplishments a response or note to any line in this	s Part III	X
	ribe the organization's mission	s a response of note to any line in this	s i ait iii	
See Sch	edule O			
	anization undertake any significant	program services during the year which were	not listed on the	Yes X No
If "Yes," des	scribe these new services on Scheo	dule O e significant changes in how it conducts, any	program	
	scribe these changes on Schedule	O ccomplishments for each of its three largest p	rogram services, as measured by	Yes X No
expenses S		anizations are required to report the amount o		
4a (Code. Provide)(Expenses \$ d scholarships to	6,728 including grants of \$ students) (Revenue \$)
4b (Code) (Expenses \$	including grants of \$) (Revenue \$)
4c (Code) (Expenses \$	including grants of \$) (Revenue \$)
4d Other progr	ram services (Describe in Schedule	O) uding grants of \$) (Revenue \$)
	am service expenses ▶	6,728		
DAA				Form 990 (2014)

Part IV Checklist of Required Schedules

	,		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3	1	Χ
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	İ	Χ
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,		ŀ	
	Part III	5	ŀ	Χ
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If	·	ŀ	
	"Yes," complete Schedule D, Part I	6		Χ
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		Χ
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Χ
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Χ
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a		Χ
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more		1	
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Χ
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more	1		
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets		i	
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Χ_
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		_X_
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if		•	
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u>X</u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		<u>X</u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u>X</u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			٠,
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			.,
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			٠,
	If "Yes," complete Schedule G, Part III	19		<u>X</u>
20a		20a		X
<u>b</u>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

•	·		Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 12 If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		<u>X</u>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			١,,
	through 24d and complete Schedule K If "No," go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		<u> </u>
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		ļ.—
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			٠
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		<u>X</u>
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			٠,,
	If "Yes," complete Schedule L, Part I	25b		<u>X</u>
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			٠,,
	disqualified persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			v
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)	20-		v
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		<u>X</u>
b	·	206		v
_	Schedule L, Part IV	28b		_X_
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	20-		v
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29 20	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	30		Х
24	conservation contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	30		
31		31		Χ
32	Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	31		
32	complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
55	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,	- 55		
J -	or IV, and Part V, line 1	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b		552		
-	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	 -		
٠.	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note. All Form 990 filers are required to complete Schedule O	38		X.

Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V				П
		•		Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	_		ĺ
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	_		ĺ
С	Did the organization comply with backup withholding rules for reportable payments to vendors and				ĺ
	reportable gaming (gambling) winnings to prize winners?		1c		ļ
2a					
	Statements, filed for the calendar year ending with or within the year covered by this return	2a	┥		ĺ
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return		2b		
2-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions))			v
3a b	Did the organization have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule C	•	3a 3b		X
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other air		30_		
74	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account.)				
	account)?	iriolai	4a		Х
b	If "Yes," enter the name of the foreign country		10		
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Ad	ccounts			
	(FBAR)				į
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a	•	Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transact	ion?	5b		Х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	•			
	organization solicit any contributions that were not tax deductible as charitable contributions?		6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	ns or			
	gifts were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for go	oods			
	and services provided to the payor?		7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	•	70		
d	·	7d	7c		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit con		7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contrain		7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form		7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	•	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	l by the			
	sponsoring organization have excess business holdings at any time during the year?		8		
9	Sponsoring organizations maintaining donor advised funds.				
а	Did the sponsoring organization make any taxable distributions under section 4966?		9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations. Enter	1			
а	· · · · · · · · · · · · · · · · · · ·	10a	_		
b		10b	-		
11	Section 501(c)(12) organizations. Enter	اید			
a		11a	-		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11Ь			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		12a	•	
b	1	12b	120		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	124	⊣ ∣		
а	Is the organization licensed to issue qualified health plans in more than one state?		13a		
-	Note. See the instructions for additional information the organization must report on Schedule O				
b	Enter the amount of reserves the organization is required to maintain by the states in which				
		13b			
С	Enter the amount of reserves on hand	13c			
I4a	Did the organization receive any payments for indoor tanning services during the tax year?		14a		Χ
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule	0	14b	Ī	

2/16/2	015 10 39 AM			
Form	990 (2014) Alpha Iota Educational Foundation 43-1622121		P	age 6
	rt VI · Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and	for a '		ugo o
, t.	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. Se			ns.
	Check if Schedule O contains a response or note to any line in this Part VI			
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or			
	if the governing body delegated broad authority to an executive committee or similar			
	committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 3			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	_X_	
b	Each committee with authority to act on behalf of the governing body?	8b	Χ	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		<u>X</u>
<u>Sec</u>	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Co	de.)		
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		77
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		X
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990	40-		v
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		X
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	120		
42	describe in Schedule O how this was done Did the organization have a written whistleblower policy?	12c		
13	Did the organization have a written document retention and destruction policy?	14		X
14	Did the process for determining compensation of the following persons include a review and approval by	14		
15	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
_	The organization's CEO, Executive Director, or top management official	15a		Х
a b	Other officers or key employees of the organization	15b		X
ь	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)	100		
16a				
IVA	with a taxable entity during the year?	16a		Х
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	100		
-	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure	,		
17	List the states with which a copy of this Form 990 is required to be filed ▶ None			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)			
	available for public inspection. Indicate how you made these available. Check all that apply			
	Own website Another's website Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and			
-	financial statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			

5044 W 129th Terr

KS 66209

_Leawood

Craig Wakeman

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2	121	Page 7
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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

(A) Name and Title	(B) Average hours per week (list any	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1)Stephen Buechler										
	0.00					ļ		_	_	_
President	0.00	X		X		ļ		0	0	(
(2)Matthew Johnson	0 00									
_	0.00	١.,		.,						,
V. President	0.00	X		X	-			0	0	(
(3)Craig Wakeman	0 00									
D = - / M =	0.00	١,,		X	1			0	o	(
Sec/Treasure	0.00	X	┢	├^	 			0		(
(4)										
(5)										
(6)										
(7)										
(8)										
(9)		-	i.							
10)										
11)					<u> </u>					

	rt VII Section A. Officers	(B)		φ, ιτ		c)	o,cc	3, 0	nd Highest Compensate	(E)	(F		
٠	Name and title	Average hours per week (list any	bo	x, unie	Pos check ess pe	ition more rson i	than o s both r/truste	an	Reportable compensation from the	Reportable compensation from related organizations	Estima amoui othe compen	ated nt of er	
		hours for related organizations below dotted line)	Individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from organiz and re organiz	the ation lated	
(12)					_						·		
(13)													
(14)					:								
(15)													
(16)													
(17)													
(18)													
(19)													
	Sub-total Total from continuation she	eets to Part VII,	Secti	on A	L	L		>					
2	Total (add lines 1b and 1c) Total number of individuals (il reportable compensation from				thos	e lıs	ted a	bov	e) who received more than	1 \$100,000 of			
3	Did the organization list any for employee on line 1a? If "Yes,	" complete Sche	dule	J for	sucl	h inc	lividu	al			3	Yes	No X
4	For any individual listed on lin organization and related orga individual	nizations greatei	than	\$15	0,00	0? I	f "Ye	s," (complete Schedule J for su	uch	4		Х
5 	Did any person listed on line for services rendered to the o	rganization? If "\								r individual	5		Х
1		ve highest comp							dar year ending with or wit	hin the organization's tax year			
	Name and	(A) d business address							Descri	(B) poon of services	Co	(C) mpensati	on
					-								
								_	<u> </u>				
				but									

Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (C) Unrelated (A) (D) Revenue Total revenue exempt function business excluded from tax under sections revenue 512-514 revenue 1a Federated campaigns 1a 1b **b** Membership dues c Fundraising events 1c d Related organizations 1d 1e e Government grants (contributions) All other contributions, gifts, grants, and similar amounts not included above 1,259 g Noncash contributions included in lines 1a-1f 1,259 h Total. Add lines 1a-1f Program Service Revenue **Busn Code** 2a b f All other program service revenue Total. Add lines 2a-2f Investment income (including dividends, interest, and other similar amounts) 1,231 Income from investment of tax-exempt bond proceeds Royalties (ı) Real (II) Personal 6a Gross rents b Less rental exps c Rental inc or (loss) Net rental income or (loss) ▶ (i) Securities (II) Other sales of assets other than inventor b Less cost or other basis & sales exps c Gain or (loss) d Net gain or (loss) 8a Gross income from fundraising events Other Revenue (not including \$ of contributions reported on line 1c) See Part IV, line 18 b Less direct expenses ▶ c Net income or (loss) from fundraising events 9a Gross income from gaming activities See Part IV, line 19 b Less direct expenses ▶ c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances b b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue 11a b C All other revenue Total. Add lines 11a-11d 2,490 0 0 Total revenue. See instructions

Alpha Iota Educational Foundation Form 990 (2014)

Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX (A) Total expenses (B) Do not include amounts reported on lines 6b. Program service Fundraising Management and 7b. 8b. 9b. and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages 7 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits Payroll taxes Fees for services (non-employees) Management Legal 535 535 Accounting Lobbying Professional fundraising services See Part IV, line 17 Investment management fees Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) Advertising and promotion 913 913 Office expenses 13 14 Information technology 15 Royalties 16 Occupancy 17 Travel Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 19 20 21 Payments to affiliates Depreciation, depletion, and amortization 22 23 Insurance 24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) 6,000 6,000 Scholarship 728 728 Bank and credit card fees C d All other expenses $8,\overline{176}$ 6,728 535 91 25 Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and

fundraising solicitation Check here ▶ following SOP 98-2 (ASC 958-720)

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 44,075 41,500 Cash-non-interest bearing 108,272 100,162 Savings and temporary cash investments 2 Pledges and grants receivable, net 3 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L Notes and loans receivable, net 7 Inventories for sale or use 8 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or 10a other basis. Complete Part VI of Schedule D b Less. accumulated depreciation 10b 10c 11 Investments—publicly traded securities 12 Investments—other securities See Part IV, line 11 12 13 Investments-program-related See Part IV, line 11 13 14 14 Intangible assets Other assets See Part IV, line 11 15 15 152,347 16 141,662 Total assets. Add lines 1 through 15 (must equal line 34) 16 17 17 Accounts payable and accrued expenses 18 18 Grants payable 19 19 Deferred revenue 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, Liabilities trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 25 of Schedule D 0 Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117 (ASC 958), check here ▶ Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 152,347 27 141,662 Unrestricted net assets 28 Temporarily restricted net assets 28 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 32 Total net assets or fund balances 33 141,662 Total liabilities and net assets/fund balances

Form	990 (2014) Alpha Iota Educational Foundation 43-1622121			Pag	ge 12
Pa	rt XI Reconciliation of Net Assets				
,	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1			490
2	Total expenses (must equal Part IX, column (A), line 25)	2			<u> 176</u>
3	Revenue less expenses. Subtract line 2 from line 1	3			<u>686</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			<u>347</u>
5	Net unrealized gains (losses) on investments	5	=	4,	<u>999</u>
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10	14	1,	<u>662</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990 X Cash Accrual Other		_		İ
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				İ
	Schedule O				İ
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		<u>X</u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				į
	reviewed on a separate basis, consolidated basis, or both				į
	Separate basis Consolidated basis Both consolidated and separate basis				į
b	Were the organization's financial statements audited by an independent accountant?		2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				ĺ
	separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				į
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight				
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in				
	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?		3a		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				ł
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
			Form	990	(2014)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization

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.

Alpha Iota Educational Foundation

requirement (see instructions) You must complete Part IV, Sections A and D, and Part V.

functionally integrated, or Type III non-functionally integrated supporting organization

Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III

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

OMB No 1545-0047

Employer identification number

Open to Public Inspection

c/o Craig Wakeman 43-1622121 Part I Reason for Public Charity Status (All organizations must complete this part) See instructions. The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) 8 X An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of 11 one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness

(i) Name of supported organization	(n) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	listed in yo	organization ur governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)	
		(000 11100 00110110))	Yes	No			
A)							
В)							
C)							
D)	· · · · · · · · · · · · · · · · · · ·						
E)							

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.)

	tion A. Public Support								
Calen	dar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 201	14	(f) Total	
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")								
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	·····							
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)								
6	Public support. Subtract line 5 from line 4							·-	
Sec	tion B. Total Support							•	
Caler	dar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 201	14	(f) Total	
7	Amounts from line 4								
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources								
9	Net income from unrelated business activities, whether or not the business is regularly carried on								
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)								
11	Total support. Add lines 7 through 10				<u>L</u>	<u> </u>			
12	Gross receipts from related activities, etc	(see instructions)					12		
13	First five years. If the Form 990 is for the	organization's firs	t, second, third, fo	urth, or fifth tax ye	ar as a section 50°	1(c)(3)			
	organization, check this box and stop her			······································				•	
Sec	tion C. Computation of Public Su	ipport Percen	tage						
14	Public support percentage for 2014 (line 6	, column (f) divided	d by line 11, colun	nn (f))			14	%_	
15	Public support percentage from 2013 Scho	edule A, Part II, lin	e 14				15	%	
16a	33 1/3% support test—2014. If the organ	ızatıon dıd not che	ck the box on line	13, and line 14 is $$	33 1/3% or more, o	check this			
	box and stop here. The organization qual	ifies as a publicly s	supported organization	ation				>	
b	33 1/3% support test—2013. If the organ	ızation dıd not che	ck a box on line 1	3 or 16a, and line	15 is 33 1/3% or m	ore,			
	check this box and stop here. The organization qualifies as a publicly supported organization						>		
17a	7a 10%-facts-and-circumstances test—2014. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is								
	10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in								
	Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported								
	organization P								
b	10%-facts-and-circumstances test—201 15 is 10% or more, and if the organization	•							
	Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly								
	supported organization							▶ _	
18	Private foundation. If the organization di	d not check a box	on line 13, 16a, 16	6b, 17a, or 17b, ch	eck this box and se	ee			
	instructions							▶ [

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.)

Sec	tion A. Public Support	1		olow, ploade oc	p.oto : dit ii.	/	
Caler	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	2,312	8,395	8,412	5,485	1,259	25,863
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513	28,104	26,948				55,052
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	30,416	35,343	8,412	5,485	1,259	80,915
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
	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						
	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6)						
Sec	tion B. Total Support	L1	1	L	<u>L</u>		80,915
_	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9	Amounts from line 6	30,416	35,343	8,412	5,485	1,259	80,915
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,084	1,101	1,063	889	1,231	5,368
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b	1,084	1,101	1,063	889	1,231	5,368
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12)	31,500	36,444	9,475	6 274	2 400	06.000
14	First five years. If the Form 990 is for the				6,374	2,490	86,283
	organization, check this box and stop her		, , , , , , , , , , , , , , , , , , , ,	, or man tax you	40 4 00000011 00 1(5,(5)	▶ □
Sec	tion C. Computation of Public Su	upport Percent	age				
15	Public support percentage for 2014 (line 8		•	n (f))		15	93.78%
16	Public support percentage from 2013 Sch					16	94.70%
	tion D. Computation of Investme						
17	Investment income percentage for 2014 (I			column (f))		17	6 %
18	Investment income percentage from 2013			44 45:		18	5%_
19a h	33 1/3% support tests—2014. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization						▶ 🗓
ъ	33 1/3% support tests—2013. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions						> [
<u>20</u>	Private foundation. If the organization di	not check a box o	n line 14, 19a, or 1	19b, check this box	and see instructio	ns	

Part IV. **Supporting Organizations**

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

Section A. All	Supporting	Organizations
----------------	------------	---------------

	Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Pa	art V.)		
ecti	on A. All Supporting Organizations			
1	Are all of the organization's supported organizations listed by name in the organization's governing		Yes	No
	documents? If "No," describe in Part VI how the supported organizations are designated. If designated by			
	class or purpose, describe the designation. If historic and continuing relationship, explain	1		
2	Did the organization have any supported organization that does not have an IRS determination of status			
	under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported			
	organization was described in section 509(a)(1) or (2)	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer			
	(b) and (c) below	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		
C	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)			
	(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If		- 1	
	"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		I	
	under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used		I	
	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,"		1	:
	answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN			
	numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action,			
	(iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action		•	
	was accomplished (such as by amendment to the organizing document)	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already	<u>-</u> .	•	
_	designated in the organization's organizing document?	5b		
C	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to		1	
	anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class		Ī	:
	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.		Ī	
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial	6		
•	contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent		I	
	controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990)	7	Ī	
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		I	
	in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a	- 1	
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	Ī	•
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	Ī	
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	I	

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)

Part V- Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations						
1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 See instructions. All						
other Type III non-functionally integrated supporting organizations must complete Sections A through E.						
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)	7					
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8					
Section B - Minimum Asset Amount		(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					
Adjusted net income for prior year (from Section A, line 8, Column A)	1					
2 Enter 85% of line 1	2	***************************************				
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	<u> </u>					
emergency temporary reduction (see instructions)						
7 Check here if the current year is the organization's first as a non-functionally-integrated		supporting organization (s	see			
instructions)	,,	5 . 5 . 2				

Schedule A (Form 990 or 990-EZ) 2014

	ule A (Form 990 or 990-EZ) 2014 Alpha lota Educat			.121 Page 7
Par		Supporting Organiza	tions (continued)	<u></u>
	on D - Distributions	Current Year		
1	Amounts paid to supported organizations to accomplish exempt purpor			
2	Amounts paid to perform activity that directly furthers exempt purposes			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purposes of support	orted organizations		
_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 which the organizations	ation is responsive		
	(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			
	Section 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			· ·
a				
b				
C				
d				
	From 2013			
f	Total of lines 3a through e		·	
g	Applied to underdistributions of prior years			
h	Applied to 2014 distributable amount			
i	Carryover from 2009 not applied (see instructions)			
	Remainder Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2014 from Section			
	D, line 7 \$			
а	Applied to underdistributions of prior years			
b	Applied to 2014 distributable amount			
С	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			
а			***************************************	
b				
С				
	Excess from 2013			

Schedule A (Form 990 or 990-EZ) 2014

e Excess from 2014

Schedule A (Form 990 or 990-EZ) 2014 Alpha Iota Educational Foundation 43-1622121 F

Part VI. Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, and Part III, line 12. Also complete this part for any additional information. (See instructions)

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.

Department of the Treasury Internal Revenue Service

▶ 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.

Open to Public Inspection

OMB No 1545-0047

Name of the organization

Alpha Iota Educational Foundation c/o Craig Wakeman

Employer identification number

43-1622121

Form 990 - Organization's Mission

To encourage and provide means for the development and advancement of education, educational facilities, and educational equipment; to encourage scholarship among and promote the educational development of students at the University of Missouri-Rolla by granting scholarships and providing educational facilities.

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990 No review was or will be conducted.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation No documents available to the public