Form **990**

EXTENDED TO NOVEMBER 15, 2016

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

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 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

<u>A</u> !	For the	2015 calendar year, or tax year beginning and e	ending				
В	Check if applicable	C Name of organization		D Employer identific	cation number		
	Addres	NELLIE MAE EDUCATION FOUNDATION, INC.					
	Name change		_	04-2	755323		
	Initial return		Room/suite	E Telephone number			
	Final return/	· I	205N		348-4200		
	termin- ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	142,288,318.		
	Amend return	OUINCY, MA UZI69		H(a) Is this a group re			
	Applica	F Name and address of principal officer: NICHOLAS C. DONORUE	3	for subordinates			
_	pendin	SAME AS C ABOVE		H(b) Are all subordinates in	ncluded? Yes No		
		mpt status: X 501(c)(3)	r 527		list. (see instructions)		
		e: ► WWW.NMEFOUNDATION.ORG		H(c) Group exemptio	n number 🕨		
		organization: X Corporation Trust Association Other Summary	L Year	of formation: 1998	State of legal domicile; MA		
_	T_{\bullet}	Briefly describe the organization's mission or most significant activities: TO ST	מ. דנות די	TE TRANSFOR	MATTUR		
Activities & Governance	1 6	CHANGE OF PUBLIC EDUCATION SYSTEMS ACROSS					
3	2	Check this box if the organization discontinued its operations or dispos					
ري ج	3 1	thembound water manufacture of the state of		1 . 1	14		
ූිර්	4	Number of independent voting members of the governing body (Part VI, line 1b)		·	14		
	5	Total number of individuals employed in calendar year 2015 (Part V, line 2a)			29		
itie	6	Total number of voluntoors (estimate if necessary)		6	0		
ਂ ਵੁੱ	7a	Fotol unrelated by space any party from Don't Mill, setting (C), by a 40		· · · · · · ·	-81,665.		
	bı	Net unrelated business taxable income from Form 990-T, line 34		7a	-117,594.		
<u> </u>	 	ter emocres outshout taxable income from out 1000 1, into 04	'''''	Prior Year	Current Year		
)	8	Contributions and grants (Part VIII, line 1h)	<u> </u>	0.	0.		
2 2		Program service revenue (Part VIII, line 1h)		352,841.	0.		
Revenue		nvestment income (Part VIII, column (A), lines 3, 4, and 7d)	····	23,334,588.	22,120,245.		
ř		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	" ·	0.	0.		
シー		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A); line 12)		23,687,429.	22,120,245.		
<i></i>		Grants and similar amounts paid (Part IX, column (A), Thes 13 1 1 1 1 1		17,160,055.	19,361,313.		
		Benefits paid to or for members (Part IX, column (A), line 4)	···	0.	0.		
ø		Salanes, other compensation, employee benefits (Part Columni(A), times 5-10)	······	3,839,941.	3,937,351.		
Se	16a l	Professional fundraising fees (Part IX, column (A)-line 11e)	-	0.	0.		
Expenses	b -	Total fundraising expenses (Part IX, column (D), line 25)	lo.		<u> </u>		
ŭ	17	Other expenses (Part IX, column (A), lines 11a 11d, 111 24e)	᠆	4,695,674.	4,393,975.		
	18	Fotal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	· · · · —	25,695,670.	27,692,639.		
		Revenue less expenses. Subtract line 18 from line 12		-2,008,241.	-5,572,394.		
ts or	3	to review to the state of the s	R/	eginning of Current Year	End of Year		
ass.	20	Fotal assets (Part X, line 16)		344,884,592.	506,350,110.		
ASS.	21	Fotal liabilities (Part X, line 26)	····· -3	12,492,421.	12,264,030.		
Net Asset	22	Net assets or fund balances. Subtract line 21 from line 20	····	32,392,171.	494,086,080.		
		Signature Block		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	474,000,000.		
		ties of perjury, I declare that I have examined this return, including accompanying schedules	e and etatem	nents and to the hest of m	v knowledge and helief it is		
		, and complete Declaration of preparer (other than officer) is based on all information of wh			y kilomosgo alla conol, kilo		
	1	X/\	non propuro		0/16		
Sig	ın İ	Signature of officed		Date	- 7 · 0		
Hei	1	NICHOLAS C. DONOHUE, PRESIDENT & CEO					
		Type or print name and title					
_		Print/Type preparer's name Preparer's signature #		Date, , Check	PTIN		
Pai	d	CRAIG KLEIN	احتسا	11 7 /16 d sett-employ	P00734640		
_		Firm's name CBIZ TOFIAS		Firm's EIN	26-3753134		
	. ,	Firm's address 500 BOYLSTON STREET					
BOSTON, MA 02116 Phone no.617-761-0600							
Ma	y the IF	S discuss this return with the preparer shown above? (see instructions)		1. 110110 11010 2	X Yes No		
_		propagation and the propag			222, 100		

532001 12-16-15 LHA For Paperwork Reduction Act Notice, see the separate instructions. SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Form **990** (2015)

04-2755323 Form 990 (2015) Page 3 Part IV Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? X If "Yes," complete Schedule A X Is the organization required to complete Schedule B. Schedule of Contributors? 2 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for X 3 public office? If "Yes." complete Schedule C. Part I Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect X during the tax year? If "Yes." complete Schedule C. Part II Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or X 5 similar amounts as defined in Revenue Procedure 98-19? If "Yes." complete Schedule C. Part III Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to Х provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes." complete Schedule D. Part I 6 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, X the environment, historic land areas, or historic structures? If "Yes." complete Schedule D. Part II 7 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Х 8 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? X If "Yes," complete Schedule D, Part IV 9 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent 10 X endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 11 If the organization's answer to any of the following guestions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, 11a X b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total X assets reported in Part X, line 167 If "Yes," complete Schedule D, Part VII 11b c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total X assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 11c d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX X 11d e 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 X the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 11f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete 12a X Schedule D. Parts XI and XII b Was the organization included in consolidated, independent audited financial statements for the tax year? X If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 12b X Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 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 X 14b or more? If "Yes," complete Schedule F, Parts I and IV 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 Χ_ foreign organization? If "Yes," complete Schedule F, Parts II and IV 15 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to \mathbf{X}_{-} or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 16 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, X column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 17

Form 990 (2015)

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X

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Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

complete Schedule G, Part III

1c and 8a? If "Yes," complete Schedule G, Part II

Part IV Checklist of Required Schedules (continued)

NELLIE MAE EDUCATION FOUNDATION, INC.

20a X 20a X 20a X 20b 11 20a X 20b 11 20a X 20b 11 20a X 20b 11 20a X 20b 20b 11 20a X 20b 2				Yes	No
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22 Did the organization report more than \$5.000 of grants or other assistance to or for domestic individuals on Part X, committee Schedule I, Part I is and III 22 X Did the organization answer "Yes" to Part VII, Section A, Inie 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 K II "No"; go to line 25a X 24a Did the organization have a tax exempt bond issue with an outstanding principal amount of more than \$100,000 as of the tast day of the year, that was used after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K II "No"; go to line 25a Did the organization maintain an escrew account other than a refunding escrow at any time during the year to defease any tax exempt bonds? d Did the organization maintain an escrow account other than a refunding escrow at any time during the year? d Did the organization and at as an "on behalf of" issuer for bonds outstanding at any time during the year? d Did the organization and at as an "on behalf of" issuer for bonds outstanding at any time during the year? 5 Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization are an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule I, Part I and that the transaction has not been reported on any of the organization is principle. Part I is being a principle of any of the organization is principle schedule I, Part I is being a principle schedule I, Part I is being a principle schedule I, Part I is 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, by employees, indication principle schedule II, Part I V instructions for applicable fling thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employees (if "Yes," complete Schedule II, Part I V instructions for appli	21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
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23 Dd the organization answer "Yes" to Part VII, Section A, Inc 3, 4, or 5 about compensation of the organization's current and former officers, directors, rustleses, key employees, and highest compensated employees? If "Yes," complete Schedule J, Part IV, section A, or 5 about compensation of the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the list day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K, If "No", go to line 25a. 24a	22				
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that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E2? If "Yes," complete Schedule L, Part I 25b X 26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III 28 Was the organization aparty to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule L, Part IV organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M organization included te, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I organization included te, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I organization organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-37 If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 30 Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 31 Section 501(c)(3) organizations. Did the organization make any transfers to a	b				
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Part V, line 1 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 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 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 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	34				
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b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 36 X 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 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	35a				
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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		•	37		x
Note. All Form 990 filers are required to complete Schedule O	38		<u> </u>		
			38	x	
					(2015)

Form **990** (2015)

14a

X

c Enter the amount of reserves on hand

14a Did the organization receive any payments for indoor tanning services during the tax year?

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

13c

	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions									
	Check if Schedule O contains a response or note to any line in this Part VI			X						
Sec	tion A. Governing Body and Management									
			Yes	No						
1a	Enter the number of voting members of the governing body at the end of the tax year 14									
	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 14									
2	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?									
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			<u>X</u>						
	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	X							
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the									
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X						
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)									
			Yes	No						
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х						
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,									
	and branches to ensure their operations are consistent with the organization's exempt purposes?									
11a	1a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?									
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990									
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X							
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X							
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe									
	ın Schedule O how this was done	12c	X							
13	Did the organization have a written whistleblower policy?	13	X							
14	Did the organization have a written document retention and destruction policy?	14	X	<u></u>						
15	Did the process for determining compensation of the following persons include a review and approval by independent									
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			ľ						
а	The organization's CEO, Executive Director, or top management official	15a	X	<u> </u>						
b	Other officers or key employees of the organization	15b	X	L						
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)									
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a									
	taxable entity during the year?	16a		_X_						
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation									
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's									
	exempt status with respect to such arrangements?	16b								
Sec	tion C. Disclosure									
17	List the states with which a copy of this Form 990 is required to be filed ▶MA									
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) and 990-T (Section 501(c)(3)s only) are	avaılab	le							
	for public inspection. Indicate how you made these available. Check all that apply									
	X Own website Another's website X 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	finan	cial							
	statements available to the public during the tax year									
20	State the name, address, and telephone number of the person who possesses the organization's books and records 🕨									
	MICHAEL CAREY - 781-348-4271									
	1250 HANCOCK STREET, 205N, QUINCY, MA 02169									
		Earm	000	(2015)						

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)	(B)	}		(0	C) _			(D)	(E)	(F)
Name and Title	Average	/40		Pos	Sition more than one			Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	rson	is bot	h an	compensation	compensation	amount of
	week	⊢	cer an	dad	recto	or/trus	tee)	from	from related	other
	(list any	recto					ĺ	the	organizations	compensation
	hours for related	trustee or director	ee			sated		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the
	organizations	ruste	Institutional trustee		ge	ng u		(44-2/1099-141130)		organization and related
	below	dualt	ntrona	_	Key employee	st co	_]	organizations
	line)	Individual	lustit	Officer	Key e	Highest compensated employee	Former	ł		
(1) ALLEN BOSTON	4.00									
DIRECTOR		X						24,260.	0.	0.
(2) HENRY BOURGEOIS	3.00									
DIRECTOR		X	L		L.			24,260.	0.	0.
(3) GREGORY GUNN	4.00									
DIRECTOR		X	_					20,000.	0.	0.
(4) KARÉN HAMMOND	4.00									
DIRECTOR		X						24,000.	0.	0.
(5) DEBORAH JEWELL SHERMAN	2.00			,	ĺ			1	_	_
DIRECTOR		X			ļ	 		10,000.	0.	<u> </u>
(6) STEPHEN KOSSAKOSKI	3.00				{					_
DIRECTOR		X			<u> </u>			20,104.	0.	0.
(7) JOANNA LAU	4.00							0.4.000		•
DIRECTOR		X						24,000.	0.	0.
(8) ELSA NUNEZ	3.00	1			Į			20 104	<u>, </u>	•
DIRECTOR	4 00	X		_	 -	-		20,104.	0.	0.
(9) JANET PHLEGAR	4.00	X						20 000	0.	0.
DIRECTOR (10) COLLEGE COLLEGE	3.00	^	-				<u> </u>	28,000.		
(10) COLLEEN QUINT	3.00	x		'				20,000.	0.	0.
DIRECTOR (11) JOHN REMONDI	2.00	^	_		 	 		20,000.		
DIRECTOR	2.00	x				•		20,000.	0.	0.
(12) WARREN SIMMONS	2.00	^		\vdash		 -	-	20,000.		
DIRECTOR	2.00	x			(}		20,000.	0.	0.
(13) NICHOLAS WARREN	3.00	-		7				20/0001		
DIRECTOR		X				ļ		20,000.	0.	0.
(14) DAVID WOLK	5.00					m		20,000		
DIRECTOR/BOARD CHAIR		x				1		32,000.	0.	0.
(15) NICHOLAS C. DONOHUE	40.00									
PRESIDENT & CEO]		x	L			407,492.	0.	65,180.
(16) MICHAEL CAREY	40.00									
TREASURER & DIR. OF FINANCE				X				220,720.	0.	52,817.
(17) PAMELA WHITE	40.00]								
CLERK				X	<u></u>			89,106.	0.	28,612.
532007 12-16-15						_				Form 990 (2015

the organization. Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation
ROPES AND GRAY		
800 BOYLSTON STREE, BOSTON, MA 02116	LEGAL COUNSEL	418,286.
PRIME BUCHHOLZ & ASSOCIATES		
273 CORPORATE DRIVE, PORTSMOUTH, NH 03801	INVESTMENT COUNSEL	218,341.
SOLOMON MCOWN	COMMUNICATION	
177 MILK STREET, STE. 610, BOSTON, MA 02109	CONSULTANT	208,000.
NONPROFIT PROFESSIONALS ADVISORY		
56 FARLOW ROAD, NEWTON, MA 02458	SEARCH CONSULTANT	196,216.
FOUNDATION STRATEGY GROUP, 500 BOYLSTON	STRATEGY PLANNING	
STREET, STE. 600, BOSTON, MA 02116	CONSULTANT	141,771.
2 Total number of independent contractors (including but not limited to those lister	d above) who received more than	
\$100,000 of compensation from the organization		
		Form 990 (2015)

Form **990** (2015)

532009 12-16-15

Do	Check if Schedule O contains a response include amounts reported on lines 6b,	(A)	this Part IX (B)	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	(B) Program service expenses	(C) Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	19,361,313.	19,361,313.		
2	Grants and other assistance to domestic				
	ındıvıduals See Part IV, line 22				
3	Grants and other assistance to foreign			}	
	organizations, foreign governments, and foreign				
	individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	1 665 140	T02 000	002 222	
	trustees, and key employees	1,667,140.	783,808.	883,332.	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and			l l	
_	persons described in section 4958(c)(3)(B)	1 (52 125	1 101 700	F20 207	
7	Other salaries and wages	1,652,125.	1,121,728.	530,397.	
8	Pension plan accruals and contributions (include	1// 707	103,084.	41,623.	
9	section 401(k) and 403(b) employer contributions) Other employee benefits	144,707. 301,761.	180,121.	121,640.	
10	Payroll taxes	171,618.	107,615.	64,003.	
11	Fees for services (non-employees):	1/1,010.	107,013.	04,000.	
''a	Management				
b	Legal	285,019.	-	285,019.	
c	Accounting	73,170.		73,170.	
d		63,500.		63,500.	
e	Professional fundraising services. See Part IV, line 17			03/3001	_
f	Investment management fees	1,214,065.		1,214,065.	
g	Other (If line 11g amount exceeds 10% of line 25,				
J	column (A) amount, list line 11g expenses on Sch O.)	1,612,388.	1,447,386.	165,002.	
12	Advertising and promotion				
13	Office expenses	105,394.	63,797.	41,597.	
14	Information technology	62,885.	38,064.	24,821.	
15	Royalties				
16	Occupancy	353,952.	214,247.	139,705.	
17	Travel	153,635.	110,128.	43,507.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	230,922.	201,624.	29,298.	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	100,486.	60,824.	39,662.	
23	Insurance	45,732.	27,682.	18,050.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
а	REGIONAL ASSOCIATIONS	73,664.	73,664.		
b	PROF. DVLPMT/MEMBERSHIP	19,163.	9,887.	9,276.	
С					
d					
е	All other expenses				
25	Total functional expenses Add lines 1 through 24e	27,692,639.	23,904,972.	3,787,667.	0
26	Joint costs. Complete this line only if the organization	<u> </u>			
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)		<u> </u>		

	Check if Schedule O contains a response or note to any line in this Part X			í i
		(A)		(B)
		Beginning of year		End of year
1	Cash - non-interest-bearing	4,422,480.	1	432,632
2	Savings and temporary cash investments		2_	ļ
3	Pledges and grants receivable, net		3_	
4	Accounts receivable, net		4_	<u> </u>
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 instr) Complete Part II of Sch L	<u> </u>	6	
7	Notes and loans receivable, net	262,058.	7	443,942
8	Inventories for sale or use		8	
9	Prepaid expenses and deferred charges		9_	
10a	Land, buildings, and equipment cost or other			
	basis Complete Part VI of Schedule D 10a 1,143,517.			
b	Less accumulated depreciation 10b 915,972.	276,908.	10c	227,545
11	Investments - publicly traded securities	197,215,216.		186,750,536
12	Investments - other securities See Part IV, line 11	342,707,930.	12	318,495,455
13	Investments · program-related See Part IV, line 11		13	
14	Intangible assets		14	
15	Other assets See Part IV, line 11		15	
16	Total assets. Add lines 1 through 15 (must equal line 34)	544,884,592.	16	506,350,110
17	Accounts payable and accrued expenses	918,663.	17	820,009
18	Grants payable	11,573,758.	18	11,444,021
19	Deferred revenue		19	
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
22	Loans and other payables to current and former officers, directors, trustees,			
	key employees, highest compensated employees, and disqualified persons.			
	Complete Part II of Schedule L		22	
23	Secured mortgages and notes payable to unrelated third parties		23	
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities (including federal income tax, payables to related third			_
	parties, and other liabilities not included on lines 17-24) Complete Part X of			
	Schedule D	_	25	
<u> 26</u>	Total liabilities. Add lines 17 through 25	12,492,421.	26	12,264,030
	Organizations that follow SFAS 117 (ASC 958), check here ▶ X and			
	complete lines 27 through 29, and lines 33 and 34.			
27	Unrestricted net assets	532,392,171.	27	494,086,080
28	Temporarily restricted net assets		28	
29	Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here			
	and complete lines 30 through 34.		i	
30	Capital stock or trust principal, or current funds		30	
31			31	
32	• • • • • • • • • • • • • • • • • • • •		32	
33	Total net assets or fund balances	532,392.171.		494,086,080
34				506,350,110
	8 9 10 a b 11 12 13 14 15 16 17 18 19 20 22 23 22 25 26 27 28 29 30 31 22 33	Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 1,143,517. Less accumulated depreciation 11 Investments - publicly traded securities 12 Investments - other securities See Part IV, line 11 13 Investments - program-related See Part IV, line 11 14 Intangible assets 15 Other assets See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability Complete Part IV of Schedule D 22 Loans and other payables to current and former officers, directors, 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 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17·24) Complete Part X of Schedule D 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here 27 Unrestricted net assets 28 Temporarily restricted net assets 7 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here 28 and complete lines 30 through 34. 29 Capital stock or trust principal, or current funds 20 Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds Total net assets or fund balances	Inventories for sale or use	8 Inventories for sale or use 8 9 Prepaid expenses and deferred charges 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis. Complete Part IV of Schedule D 1,143,517. 276,908. 10c 1,143,517. 10b 915,972. 10c 1,143,517. 10c 1,143,51

	1990 (2015) NELLIE MAE EDUCATION FOUNDATION, INC.	04-	<u> 2755323</u>	Pa	ge 12				
Pa	rt XI Reconciliation of Net Assets								
	Check if Schedule O contains a response or note to any line in this Part XI	,							
1	Total revenue (must equal Part VIII, column (A), line 12)	1	22,12						
2									
3									
4	<u> </u>								
5	Net unrealized gains (losses) on investments	5	-32,73	3,6	<u>97.</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			0.				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,								
	column (B))	10	494,08	<u>86,0</u>	<u>80.</u>				
Ра	rt XII Financial Statements and Reporting								
	Check if Schedule O contains a response or note to any line in this Part XII	_			للل				
				Yes	No				
1	Accounting method used to prepare the Form 990 Cash X Accrual Other								
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	O.							
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	ļ	<u>X</u>				
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe	d on a							
	separate basis, consolidated basis, or both.		ŀ						
	Separate basis Consolidated basis Both consolidated and separate basis								
b	Were the organization's financial statements audited by an independent accountant?		_2b	X	<u> </u>				
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separa	te basis,							
	consolidated basis, or both								
	X Separate basis Consolidated basis Both consolidated and separate basis		ļ						
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	ne audıt,							
	review, or compilation of its financial statements and selection of an independent accountant?		2c	<u> </u>					
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O							
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the S	ngle Aud	lit						
	Act and OMB Circular A-133?		3a	ļ	_X_				
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	iired aud	ıt						
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	<u> </u>	<u> </u>				
			Forn	n 990	(2015)				

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust.

➤ Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

Open to Public Inspection

Employer identification number Name of the organization 04-2755323 NELLIE MAE EDUCATION FOUNDATION, 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) 1 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 (Form 990 or 990-EZ).) 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.) 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.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 X An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g. a X Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions), You must complete Part IV. Sections A and D. and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization SEE PART VI f Enter the number of supported organizations Provide the following information about the supported organization(s) (iv) is the organization (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of listed in your (described on lines 1-9 organization support (see other support (see governing document? above (see instructions)) instructions) instructions) Yes No 2, 6, 7 & 9 SEE PART VI 19,361,313. 0.

LHA For Paperwork Reduction Act Notice, see the Instructions for

Form 990 or 990-EZ. 532021 09-23-15

PART VI

Total

Schedule A (Form 990 or 990-EZ) 2015

0.

19,361,313.

Schedule A (Form 990 or 990-EZ) 2015 NELLIE MAE EDUCATION FOUNDATION

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) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2011 (b) 2012 (c) 2013 (d) 2014 (e) 2015 (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 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 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2011 (b) 2012 (c) 2013 (d) 2014 (e) 2015 (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 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f) 14 % 15 % 15 Public support percentage from 2014 Schedule A, Part II, line 14 16a 33 1/3% support test - 2015. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2014. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2015. 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

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b 10% -facts-and-circumstances test - 2014. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 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 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions Schedule A (Form 990 or 990-EZ) 2015 NELLIE MAE EDUCATION FOUNDATION, INC. 04-2755323 Page 3
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 be Section A. Public Support	elow, please com	plete Part II.)				
Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not						
include any "unusual grants") 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						
Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b		 	 	 	 	
8 Public support. (Subtract line 7c from line 6) Section B. Total Support						
Calendar year (or fiscal year beginning in) ►	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on					 	
 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support (Add lines 9, 10c, 11, and 12) 						
14 First five years. If the Form 990 is for	the organization'	s first, second, thir	d, fourth, or fifth ta	ax year as a section	on 501(c)(3) organiz	zation,
check this box and stop here						▶□
Section C. Computation of Publi					 _	
15 Public support percentage for 2015 (Ir		•	column (f))		15	%
16 Public support percentage from 2014					16	%
Section D. Computation of Inves					TT	
17 Investment income percentage for 20	•	• • • • • • • • • • • • • • • • • • • •	ne 13, column (f))		17	%
18 Investment income percentage from 219a 33 1/3% support tests - 2015. If the	•		on line 14, and line	15 is more than	18 and line:	%
more than 33 1/3%, check this box ar	-		· ·			▶ □
b 33 1/3% support tests - 2014. If the	-					. —
line 18 is not more than 33 1/3%, chec 20 Private foundation. If the organization		•	•			

Schedule A (Form 990 or 990-EZ) 2015 NELLIE MAE EDUCATION FOUNDATION, INC.

Part IV | Supporting Organizations

(Complete only if you checked a box in line 11 on 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

S	<u>ections A, D, and E</u>	If you checked	11d of Part I.	complete:	Sections A	and D, and	l complete	Part \	<u>V)</u>
Section A.	All Supporting	Organization	าร						_

- Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No" describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 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)
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- 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
- 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.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 11a or 11b in Part I, answer (b) and (c) below.
- 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
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) 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.
- Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- 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 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) 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.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)

	Yes	No
11		X
2	X	
3a		х
3b		
3c_	}	
30		
4a		X
4b		
		i
4c		
5a		x
5b 5c		
		v
6		X
7	ļ 	x
8		X
9a		x
		}
9b		X
9c		X
	}	
10a		X
10b	<u> </u>	<u> </u>
1 990 or 99	90-EZ	2015

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	edule A (Form 990 or 990-EZ) 2015 NELLIE MAE EDUCATION FOUNDATION, INC. 04-27 IT IV Supporting Organizations (continued)	5532	3 Pa	age 5
ra	rt IV Supporting Organizations (continued)		V	
11	Has the organization accepted a gift or contribution from any of the following persons?	<u> </u>	Yes	No
'' a		l	·	
_	below, the governing body of a supported organization?	11a		X
b	A family member of a person described in (a) above?	11b		X
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	110		X
	ction B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to	l	ļ	
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or		ľ	
	controlled the organization's activities If the organization had more than one supported organization,	Ì	1)
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported]
_	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1	X	
2	Did the organization operate for the benefit of any supported organization other than the supported		1	ĺ
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in	ļ .	ł	
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,		ļ	X
Sec	supervised, or controlled the supporting organization stion C. Type II Supporting Organizations	2_	L	_ <u>^</u>
000	nion of Type it oupporting Organizations		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		163	110
•	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control	Ì	Ì	
	or management of the supporting organization was vested in the same persons that controlled or managed	}	ì	
	the supported organization(s)	1	1	
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	(ĺ	
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax	1		
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	L	<u> </u>
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	ĺ	Ì	}
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	}	İ	}
_	the organization maintained a close and continuous working relationship with the supported organization(s).	2		 - -
3	By reason of the relationship described in (2), did the organization's supported organizations have a	}	ł	}
	significant voice in the organization's investment policies and in directing the use of the organization's	1	ł	\
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	3	}	1
Sec	supported organizations played in this regard. tion E. Type III Functionally-Integrated Supporting Organizations		L	L
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions):			
a	The organization satisfied the Activities Test. Complete line 2 below			
b	The organization is the parent of each of its supported organizations. Complete line 3 below			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see ins	tructions	:).	
2	Activities Test Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify	}	}	ł
	those supported organizations and explain how these activities directly furthered their exempt purposes,	1		
	how the organization was responsive to those supported organizations, and how the organization determined	1	(ļ
	that these activities constituted substantially all of its activities	2a	ļ	L
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more		l	ĺ
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the		ļ	ł
	reasons for the organization's position that its supported organization(s) would have engaged in these	Ì]
-	activities but for the organization's involvement.	2b	 	}
3	Parent of Supported Organizations Answer (a) and (b) below.		}	
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	_	}	1
	trustees of each of the supported organizations? Provide details in <i>Part VI</i> .	3a		
Ь	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	O.L	1	{
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	<u>3b</u>		Ь

	edule A (Form 990 or 990-EZ) 2015 NELLIE MAE EDUCATION FO)4-2755323 Page
	rt V Type III Non-Functionally Integrated 509(a)(3) Supportin			
1	Check here if the organization satisfied the Integral Part Test as a qualifyin	•		uctions. All
	other Type III non-functionally integrated supporting organizations must co	mplete S	ections A through E	T
Sec	ion 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		<u> </u>
6	Portion of operating expenses paid or incurred for production or	1		
	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		
Sec	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year).	_		
а	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		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5	· · · · · · · · · · · · · · · · · · ·	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		
	Chook here if the current year is the organization's first as a non-functional			

Schedule A (Form 990 or 990-EZ) 2015

	dule A (Form 990 or 990 EZ) 2015 NELLIE MAE ED TV Type III Non-Functionally Integrated 509			4-2755323 Page 7
Sect	ion D - Distributions			Current Year
_1	Amounts paid to supported organizations to accomplish exe	mpt purposes		
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported		
	organizations, in excess of income from activity			
_3	Administrative expenses paid to accomplish exempt purpose	s		
_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	ne organization is responsive	÷	}
	(provide details in Part VI) See instructions.			
9	Distributable amount for 2015 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount		,	
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1	Distributable amount for 2015 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2015			
	(reasonable cause required-see instructions)			
3_	Excess distributions carryover, if any, to 2015			
a				
b				
c				
<u>d</u>	From 2013			
е	From 2014			
f	Total of lines 3a through e			
9_	Applied to underdistributions of prior years		<u></u>	
<u>h</u>	Applied to 2015 distributable amount			
<u>i</u> _	Carryover from 2010 not applied (see instructions)			
i_	Remainder. Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2015 from Section D,			
	line 7 \$) 	
a	Applied to underdistributions of prior years			
b	Applied to 2015 distributable amount			
c	Remainder Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2015, if			
	any. Subtract lines 3g and 4a from line 2 (if amount			
	greater than zero, see instructions)			
6	Remaining underdistributions for 2015 Subtract lines 3h			
	and 4b from line 1 (if amount greater than zero, see			
	instructions).		<u></u>	
7	Excess distributions carryover to 2016. Add lines 3j and 4c			
8	Breakdown of line 7			
a a				
b				
	Excess from 2013			
	Excess from 2014			
	Excess from 2015			

Schedule A (Form 990 or 990-EZ) 2015

Schedule A (Form 990 or 990-EZ) 2015 NELLIE MAE EDUCATION FOUNDATION, INC. 04-2755323 Page 8

Part VI Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information (See instructions)

PART IV, SECTION A, LINE 1:

NELLIE MAE EDUCATION FOUNDATION, INC. (THE "FOUNDATION") IS ORGANIZED

AND OPERATED AS AN ORGANIZATION EXEMPT FROM TAXATION UNDER IRC SECTION

501(C)(3). IT IS NOT A PRIVATE FOUNDATION BECAUSE IT IS A SUPPORTING

ORGANIZATION AS DESCRIBED IN IRC SECTION 509(A)(3). IN PRIOR YEARS, THE

FOUNDATION WAS ALSO PUBLICLY SUPPORTED AS DESCRIBED IN IRC SECTION

509(A)(2).

PURSUANT TO ITS ARTICLES OF ORGANIZATION, THE FOUNDATION OPERATES EXCLUSIVELY FOR THE BENEFIT OF, AND TO PROMOTE THE CHARITABLE AND EDUCATIONAL PURPOSES OF A CLASS OF ORGANIZATIONS, SPECIFICALLY EDUCATIONAL ORGANIZATIONS, INCLUDING UNIVERSITIES, COLLEGES, SECONDARY SCHOOLS, ELEMENTARY SCHOOLS, AND OTHER EDUCATIONAL ORGANIZATIONS WHICH ARE DESCRIBED IN IRC SECTION 501(C)(3) AND WHICH ARE NOT PRIVATE FOUNDATIONS AS DESCRIBED IN IRC SECTION 509(A). THE FOUNDATION'S ACTIVITIES INCLUDE MAKING GRANTS TO THE PUBLIC CHARITIES IT SUPPORTS AND PROVIDING SERVICES TO THOSE ORGANIZATIONS. A MAJORITY OF THE FOUNDATION'S DIRECTORS ARE REPRESENTATIVES OF ORGANIZATIONS THAT WOULD BE ELIGIBLE TO RECEIVE SUPPORT FROM THE FOUNDATION. IN ADDITION, THE COMMITTEE THAT NOMINATES BOARD MEMBERS IS COMPOSED ENTIRELY OF DIRECTORS WHO ARE ALSO OFFICERS, DIRECTORS, KEY EMPLOYEES OR PERSONS SERVING IN A LEADERSHIP ROLE IN PUBLIC CHARITIES THAT WOULD BE ELIGIBLE TO RECEIVE SUPPORT FROM THE FOUNDATION. THE FOUNDATION ONLY SUPPORTS PUBLIC CHARITIES DESCRIBED IN IRC SECTION 509(A)(1) OR 509(A)(2) AND ONLY ORGANIZATIONS THAT ARE ORGANIZED IN THE UNITED STATES.

PART IV, SECTION A, LINE 2:

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part III, line 17a or 17b, Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V, Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information (See instructions)
PUBLIC SCHOOL SYSTEM GRANTEES ARE DESCRIBED IN SECTION 509(A)(1) AND
TYPICALLY DO NOT HAVE IRS DETERMINATION LETTERS. THE FOUNDATION
VERIFIES PUBLIC SCHOOL/GOVERNMENTAL STATUS IN WRITING.

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Open to Public Inspection

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B.
- Section 527 organizations Complete Part I-A only

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)). Complete Part II-B Do not complete Part II-A

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

	() (see separate instructions), then				
	Section 501(c)(4), (5), or (6) organizate of organization	ations Complete Part III			mployer identification number
	· ·	MAE EDUCATION FO	ארד אות דרואו ד	1	04-2755323
P	art I-A Complete if the or	ganization is exempt un	der section 501(c)	or is a section 52	
2	Provide a description of the organic Political expenditures Volunteer hours	zation's direct and indirect politi	cal campaign activities		> \$
Pa	art I-B Complete if the org	ganization is exempt une	der section 501(c)(3).	
1	Enter the amount of any excise tax				> \$
2	Enter the amount of any excise tax	incurred by organization manaç	gers under section 495		▶ \$
3	If the organization incurred a section	on 4955 tax, did it file Form 4720) for this year?		Yes No
4:	a Was a correction made?				Yes No
	o If "Yes," describe in Part IV				
Pa	art I-C Complete if the org	ganization is exempt und	der section 501(c), except section 5	601(c)(3).
1	Enter the amount directly expende	d by the filing organization for se	ection 527 exempt fund	ction activities	▶ \$
2	Enter the amount of the filing organ	nization's funds contributed to o	ther organizations for s	section 527	_
	exempt function activities				▶ \$
3	Total exempt function expenditures	s Add lines 1 and 2 Enter here	and on Form 1120-POI		
	line 17b				►\$
4	Did the filing organization file Form	1120-POL for this year?			Yes No
5	Enter the names, addresses and en				
	made payments. For each organization contributions received that were presented that were presented to the contributions.				
	political action committee (PAC) If		•	-	parate segregated fund of a
					om (a) Amount of political
	(a) Name	(b) Address	(c) EIN	(d) Amount paid for filing organization funds. If none, enter	's contributions received and
-					
					

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2015

LHA 532041 10-05-15

Schedule C (Form 990 or 990-EZ) 2015 Part II-A Complete if the org section 501(h)).	NELLI janizatio	E MAE on is exer	EDUCATION Enpt under section	r <u>OUNDATION</u> , on 501(c)(3) and file	INC. 04- ed Form 5768 (2755323 Page 2 election under
	tion holon	as to an offi	hatad group (and hat i	n Part IV each affiliated	group member's nai	me address FIN
expenses, and shar		-		ii Fait iv each ainmaieu i	Broth meruper a uer	ne, address, ENA,
. — ` '		, ,				
Limit	ts on Lobi	bying Expe	nd "limited control" pri nditures ints paid or incurred		(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influ	Jence pub	lic opinion (grass roots lobbying)			
b Total lobbying expenditures to influ						
c Total lobbying expenditures (add li		_	., (aee.,g,			
d Other exempt purpose expenditure		u . b ,				
e Total exempt purpose expenditure		se 1c and 1c	1\	<u> </u>		
f Lobbying nontaxable amount Ente	•		•	th columns		
						
If the amount on line 1e, column (a) o Not over \$500,000	1 (D) 18.		bying nontaxable am			
	2.000		the amount on line 1e			
Over \$500,000 but not over \$1,000			00 plus 15% of the ex			
Over \$1,000,000 but not over \$1,5				cess over \$1,000,000.		
Over \$1,500,000 but not over \$17,	000,000	\$225,000 plus 5% of the excess over \$1,500,000.				
Over \$17,000,000		\$1,000,	000			
h Subtract line 1g from line 1a If zero i Subtract line 1f from line 1c If zero j If there is an amount other than zer reporting section 4911 tax for this (Some organizations the	o or less, e ro on eithe year? nat made	enter -0- er line 1h or 4-Year Ave a section 5	eraging Period Unde	r section 501(h) have to complete all c	of the five columns	Yes No
				ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a)	2012	(b) 2013	(c) 2014	(d) 2015	(e) Total
2a Lobbying nontaxable amount						
b Lobbying ceiling amount						
(150% of line 2a, column(e))				<u> </u>		<u> </u>
c Total lobbying expenditures						
d Grassroots nontaxable amount						
e Grassroots ceiling amount (150% of line 2d, column (e))						
f Grassroots Johnving expenditures						

Schedule C (Form 990 or 990-EZ) 2015

Schedule C (Form 990 or 990-EZ) 2015 NELLIE MAE EDUCATION FOUNDATION, INC. 04-2755323 Page 3

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768

(election under section 501(h)).

For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description)	(b)	
of the lobbying activity.	No	Amount	
During the year, did the filing organization attempt to influence foreign, national, state or	1		
local legislation, including any attempt to influence public opinion on a legislative matter		}	
or referendum, through the use of		}	
a Volunteers?		X	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		X	
c Media advertisements?		<u> </u>	
d Mailings to members, legislators, or the public?	<u> </u>	X	
e Publications, or published or broadcast statements?	ļ	<u>x</u>	
f Grants to other organizations for lobbying purposes?		X	62.50
g Direct contact with legislators, their staffs, government officials, or a legislative body?	X	77	63,50
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X	
i Other activities?			63,50
J Total Add lines 1c through 1:		$-\mathbf{x}$	03,30
 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912		,	
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			
Part III-A Complete if the organization is exempt under section 501(c)(4), sect	ion 501(c)	(5), or sec	ction
501(c)(6).		(-),	
			Yes No
1 Were substantially all (90% or more) dues received nondeductible by members?		1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2	
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?		2	
3 Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(4).		2 3 (5), or sec	
3 Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered		2 3 (5), or sec	
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Part III-B Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the expenditure next year? 5 Taxable amount of lobbying and political expenditures (see instructions) Part IV Supplemental Information Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated ground instructions); and Part II-B, line 1 Also, complete this part for any additional information. PART II-B, LINE 1, LOBBYING ACTIVITIES: A LOBBYING FIRM WAS HIRED DURING 2015 TO MONITOR ACTIVITIES:	d "No," Of tical xcess political up list), Part II	2 3 (5), or see (b) Part 1 2a 2b 2c 3 4 5 -A, lines 1 a	nd 2 (see

Schedule C (Form 990 or 990-EZ) 2015

SCHEDULE D

Department of the Treasury

(Form 990)

Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No 1545-0047 Open to Public Inspection

Internal Revenue Service Name of the organization

Employer identification number

	NELLIE MAE EDUCATION FOUNDATION, INC.	04-2755323
Pa	rt I Organizations Maintaining Donor Advised Funds or Other Similar Funds or A	Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line 6.	
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate value of contributions to (during year)	
3	Aggregate value of grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised fur	nds
	are the organization's property, subject to the organization's exclusive legal control?	└── Yes └── No
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used	only
	for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose confe	rring
	impermissible private benefit?	Yes No
Ра	rt II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV	, line 7
1	Purpose(s) of conservation easements held by the organization (check all that apply)	
	Preservation of land for public use (e.g., recreation or education) Preservation of a historically	•
	Protection of natural habitat Preservation of a certified h	istoric structure
_	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a contribution in t	1 1
	day of the tax year	Held at the End of the Tax Year
a	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
C	Number of conservation easements on a certified historic structure included in (a)	2c
đ	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organ	2d
J	year	mization during the tax
4	Number of states where property subject to conservation easement is located	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservat	ion easements during the year
	>	-
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation ea	asements during the year
	▶ \$	
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(line 2(d) above satisfy the requirement 170(h)(h)(h)(h)(h)(h)(h)(h)(h)(h)(h)(h)(h)(B)(ı)
	and section 170(h)(4)(B)(II)?	Yes No
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expense state	ment, and balance sheet, and
	include, if applicable, the text of the footnote to the organization's financial statements that describes the or	ganization's accounting for
	conservation easements	
Pa	rt III Organizations Maintaining Collections of Art, Historical Treasures, or Other	Similar Assets.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement a	
	historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of	f public service, provide, in Part XIII,
	the text of the footnote to its financial statements that describes these items.	
D	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and I	
	treasures, or other similar assets held for public exhibition, education, or research in furtherance of public se	ervice, provide the following amounts
	relating to these items	> 0
	(i) Revenue included on Form 990, Part VIII, line 1	S
^	(ii) Assets included in Form 990, Part X	\$
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain,	, provide
•	the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items Revenue included on Form 990, Part VIII, line 1	▶ \$
a h	Assets included in Form 990, Part X	▶ \$

532051 11-02-15

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule D (Form 990) 2015

		MAE EDUCAT								Page 2
Pa	rt III Organizations Maintaining C	ollections of A	rt, His	torical Tr	easures,	or Oth	er Simil	ar Asse	ts (continu	ıed)
3	Using the organization's acquisition, accessi	on, and other record	ds, chec	k any of the	following that	at are a s	ignificant	use of its	collection	ıtems
	(check all that apply)		_							
а	Public exhibition	•		Loan or exc	hange progr	ams				
b	Scholarly research	•	e	Other						
С	Preservation for future generations									
4	Provide a description of the organization's co							ose in Par	t XIII	
5	During the year, did the organization solicit o					er sımıla	r assets	r	7	
Da	to be sold to raise funds rather than to be ma								Yes	No_
Pal	rt IV Escrow and Custodial Arran reported an amount on Form 990, Par		lete if the	e organizatio	n answered	"Yes" or	i Form 99	D, Part IV,	line 9, or	
			4							
та	Is the organization an agent, trustee, custod	ian or other interme	diary for	contribution	is or other a	ssets no	included		٦.,	
_	on Form 990, Part X?	and namplets the f	مالمنسم	Anhin.				L	」Yes	∟_ No
D	If "Yes," explain the arrangement in Part XIII	and complete the fo	bilowing	table.					Amount	
_	Beginning balance						10		Amount	
9	Additions during the year						1c 1d			
<u> </u>	Distributions during the year						1e			
f	Ending balance						1f			
	Did the organization include an amount on F	orm 990. Part X. line	e 21. for	escrow or ci	ustodial acci	ount liab			Yes	No
	If "Yes," explain the arrangement in Part XIII									
	t V Endowment Funds. Complete									
		(a) Current year		Prior year	(c) Two year			years back	(e) Four	years back
1a	Beginning of year balance									
b	Contributions				Ī					
С	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities		1		1					
	and programs									
f	Administrative expenses		ļ							
g	End of year balance		<u> </u>		L				L	
2	Provide the estimated percentage of the curr	rent year end balan	ce (line 1	lg, column (a	a)) held as					
а	Board designated or quasi-endowment		%							
b	Permanent endowment	%								
С	Temporarily restricted endowment	%								
	The percentages on lines 2a, 2b, and 2c sho									
За	Are there endowment funds not in the posse	ssion of the organiz	zation th	at are held a	ind administi	ered for 1	the organi	zation	Г.	
	by.									Yes No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations) - II- I- DO					3a(ii)	
4	If "Yes" on line 3a(ii), are the related organization. Describe in Part XIII the intended uses of the	-							_3b	
Par	t VI Land, Buildings, and Equipm		Owinent	lunus						
	Complete if the organization answere		n Part l'	V line 11a S	See Form 99	0 Part X	line 10			
	Description of property	(a) Cost or			or other		ccumulat	ed he	(d) Book	value
	bescription of property	basis (invest		1	(other)	, , ,	preciation	1	(u) Dook	value
1a	Land			† 	·/	t				
	Buildings			 		 				
	Leasehold improvements	<u> </u>		5	2,505.	 	46,1	18.	6	3,387.
	Equipment				6,640.	 	374,0			568.
	Other				4,372.		<u>495,7</u>			590.
	. Add lines 1a through 1e (Column (d) must e	qual Form 990, Par	t X, colui							,545.

Schedule D (Form 990) 2015

Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII.
 Schedule D (Form 990) 2015

532053 09-21-15

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25)

	t XI Reconciliation of Revenue per Audited Financial Statemer			2755323 Pag	<u>e 4</u>
Fai		its with Revenue per n	etuii	1.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a			11 007 51	- -
1	Total revenue, gains, and other support per audited financial statements		1	<u>-11,827,51</u>	<u>/•</u>
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	20 522 605	ĺ		
а	Net unrealized gains (losses) on investments	2a -32,733,697.			
þ	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d		<u>2</u> e	-32,733,69	
3	Subtract line 2e from line 1		3	20,906,18	<u>o.</u>
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		ļ	1	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a 1,214,065.			
b	Other (Describe in Part XIII)	4b			
С	Add lines 4a and 4b		4c	1,214,06	5.
5.	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	22,120,24	5.
Pai	t XII Reconciliation of Expenses per Audited Financial Stateme	ents With Expenses per	Retu	ırn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a				
1	Total expenses and losses per audited financial statements		1	26,478,57	4.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a	ļ	1	
ь	Prior year adjustments	2b			
c	Other losses	2c	1		
d	Other (Describe in Part XIII)	2d]		
_	Add lines 2a through 2d		2e		0.
3	Subtract line 2e from line 1		3	26,478,57	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		_ _ _	20/1/0/0/	
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a 1,214,065.)		
	Other (Describe in Part XIII.)		1		
b	Add lines 4a and 4b	4b		1,214,06	5
			4c 5	27,692,63	
Par	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) † XIII Supplemental Information.		_ 5	21,092,03	<u> </u>
Provi	de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; Part I' 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any addit		4, Part	X, line 2, Part XI,	
PAF	RT X, LINE 2:				
THE	FOUNDATION ACCOUNTS FOR THE EFFECT OF ANY	UNCERTAIN TAX	POS	ITIONS	
BAS	SED ON A "MORE LIKELY THAN NOT" THRESHOLD T	O THE RECOGNITI	ON	OF THE TAX	, •
POS	SITIONS BEING SUSTAINED BASED ON THE TECHNI	CAL MERITS OF T	HE	POSITION	
UNI	DER SCRUTINY BY THE APPLICABLE TAXING AUTHO	RITY. IF A TAX	PO	SITION OR	
	SITIONS ARE DEEMED TO RESULT IN UNCERTAINTI				
UNR	RECOGNIZED TAX BENEFIT IS ESTIMATED BASED O	ON A "CUMULATIVE	PR	OBABILITY	
<u>ASS</u>	ESSMENT" THAT AGGREGATES THE ESTIMATED TAX	LIABILITY FOR	ALL	UNCERTAIN	<u>i</u>
TAX	POSITIONS. INTEREST AND PENALTIES ASSESS	SED, IF ANY, ARE	AC	CRUED AS	
INC	OME TAX EXPENSE.				

Schedule D (Form 990) 2015 NELLIE MAE EDUCATION FOUNDATION, INC. 04-2755323 Page 5 Part XIII Supplemental Information (continued)
ITS DETERMINATIONS AS TO ITS INCOME BEING RELATED OR UNRELATED AS ITS ONLY
SIGNIFICANT TAX POSITIONS AND HAS DETERMINED THAT SUCH TAX POSITIONS DO
NOT RESULT IN AN UNCERTAINTY REQUIRING RECOGNITION. THE FOUNDATION IS NOT
CURRENTLY UNDER EXAMINATION BY ANY TAXING JURISDICTION. FEDERAL AND STATE
INCOME TAX RETURNS ARE GENERALLY OPEN FOR THREE YEARS FOLLOWING THE DATE
FILED.

Part VII Investments - Other Securities. See Form 990, Part X, line 1:	2	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
INVESTMENT FUND - LONG/SHORT EQUITY	38,389,148.	FMV
INVESTMENT FUND - MULTI-STRATEGY	15,009,996.	FMV
REAL ASSETS	17,166,651.	FMV
REAL ESTATE FUND	9,388,402.	FMV
DIRECT REAL ASSET - TIMBER	2,240,449.	FMV
PRIVATE COMMODITY	4,686,321.	FMV
NATURAL RESOURCES FUND OF FUNDS	6,546,205.	FMV
PRIVATE EQUITY	3,705,038.	FMV
		
532421 04-01-15		Schedule D (Form 990)

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

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

➤ Attach to Form 990.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

Employer identification number

	LLIE MAE EDUC				04-27553	
	rt I General Info	rmation on A		tside the United States. Complet	te if the organization answered	"Yes" on
	Form 990, Part I					
1		-		ds to substantiate the amount of its grai the selection criteria used to award the		Yes No
	the grantees engionity i	or the grants or a	assistance, and	the selection chiefla used to award the	grants or assistance,	
2	For grantmakers. Desc United States	cribe in Part V the	e organization's	procedures for monitoring the use of its	grants and other assistance ou	itside the
3_	Activities per Region (T	he following Part	I, line 3 table ca	an be duplicated if additional space is no	eeded)	
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
				}		
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	CARIBBEAN	0	o	INVESTMENTS		75,278,885.
		 				
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	Cub total	 		 		
	Sub-total	0	0	 		75,278,885
D	Total from continuation	[_	[_
_	sheets to Part I		0	 		
С	Totals (add lines 3a]	_	1		75 050 00-
_	and 3b)		0	t l		75 278 885

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule F (Form 990) 2015

04-2755323

NELLIE MAE EDUCATION FOUNDATION, INC.

Schedule F (Form 990) 2015

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any

recipient who received more than \$5,000. Part II can be duplicated if additional space is needed

(i) Method of valuation (book, FMV appraisal, other)					
(h) Description of non-cash assistance					
(g) Amount of non-cash assistance					demot by
(f) Manner of cash disbursement					recognized as tax-p
(e) Amount of cash grant					foreign country
(d) Purpose of grant					Enter total number of receivant occanizations listed above that are recognized as charities by the foreign country, recognized as tax-evenint by
(c) Region					s listed above that are
(b) IRS code section and EIN (if applicable)					recipient organization
1 (a) Name of organization					5 Enter total pumber of

Schedule F (Form 990) 2015

the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

Enter total number of other organizations or entities

04-2755323 NELLIE MAE EDUCATION FOUNDATION, INC. Schedule F (Form 990) 2015

Page 3

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

(h) Method of valuation (book, FMV, appraisal, other)					
(g) Description of non-cash assistance					
(f) Amount of non-cash assistance					
(e) Manner of cash disbursement					
(d) Amount of cash grant					
(c) Number of recipients					
(b) Region					
(a) Type of grant or assistance (b) Region					

Schedule F (Form 990) 2015

Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see

Schedule F (Form 990) 2015

Yes X No

Foreign Partnerships (see Instructions for Form 8865)

Instructions for Form 5713, do not file with Form 990)

Part V Supplemental Information Provide the information required by Part I, line 2 (monitoring of funds), Part I, line 3, column (f) (accounting method, amounts of investments vs expenditures per region), Part III, line 1 (accounting method), Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information.	Schedule F	(Form 990) 2015	NELLIE MAE	EDUCATION	FOUNDATION,	INC	04-2755323	Page 5
Provide the information required by Part I, line 2 (monitoring of funds), Part I, line 3, column (f) (accounting method, amounts of investments vs expenditures per region), Part II, line 1 (accounting method), Part III (accounting method); and Part III, column (c)	Part V			·				
investments vs expenditures per region), Part II, line 1 (accounting method), Part III (accounting method); and Part III, column (c)				rt 1. line 2 (monitorina	of funds). Part I, line 3.	column (f) (acco	ounting method, amounts of	
								-1
Jesunised hunge on deplensy, as apprecise. Asso compete this part of provide any adultional monimum.								-1
		(estimated numb	er of recipients), as ap	plicable_Also comple	ete this part to provide a	any additional in	normation.	
								
								
								
								
								
				 				
								
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SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

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

▶ Attach to Form 990.

CI 07	Open to Public	Inspection

OMB No 1545-0047

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

Employer identification number 04-2755323 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection INC. NELLIE MAE EDUCATION FOUNDATION, General Information on Grants and Assistance Parti

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization are cipient that received more than \$5.000. Part IV, line 21, for any recipient that received more than \$5.000. Part II can be duplicated if additional space is needed recipient that received more than \$5.000. Part IV, line 21, for any recipient that received more than \$5.000. Part IV, line 21, for any recipient that received more than \$5.000. Part IV, line 21, for any recipient that received more than \$5.000. Part IV, line 21, for any recipient that received more than \$5.000. Part II can be duplicated if additional space is needed (f) Method of received more than \$5.000. Part II can be duplicated if additional space is needed (f) Method of received more than \$5.000. Part II can be duplicated if additional space is needed (f) Method of received more than \$5.000. Part II can be duplicated if additional space is needed (g) Amount of received more than \$5.000 part II can be duplicated if additional space is needed (g) Amount of received more than \$5.000 part II can be duplicated if additional space is needed (g) Amount of received more than \$5.000 part II can be duplicated if additional space is needed (g) Amount of received more than \$5.000 part II can be duplicated if additional space is needed (g) Amount of received more than \$5.000 part II can be duplicated if additional space is needed (g) Amount of received more than \$5.000 part II can be duplicated if additional space is needed (g) Amount of received more than \$5.000 part II can be duplicated if additional space is needed (g) Amount of received more than \$5.000 part II can be duplicated if additional space is needed (g) Amount of received more than \$5.000 part II can be duplicated if additional space is needed (g) Amount of received more than \$5.000 part II can be duplicated if additional space is needed (g) Amount of received more	Part II Grants and Other Assistance to Domestic Organizations an recipient that received more than \$5,000. Part II can be duplicated and address of organization (b) EIN (c) IRC III can be duplicated or government (b) EIN (c) IRC III can be duplicated to the configuration (d) IRC III can be duplicated to the configuration (e) IRC III can be duplicated to the con	회 및 전
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recipient that received more than \$5,000, har it can be duplicated in	40,000. Par II car	t be duplicated if addit	additional space is needed	par	AN KASAGO JOS		
1 (a) Name and address of organization or government	(p) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(i) Medical Si valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
A BETTER WAY FOUNDATION							
PO BOX 942							
HARTFORD, CT 06101	06-1576383	501(C)(3)	55,000.	0			HEARING YOUTH VOICES
				1			
ALLIANCE FOR BUSINESS LEADERSHIP							ALLIANCE FOR BUSINESS
21 DRYDOCK AVE., 6TH FLOOR C/O MASS	₩.						LEADERS - LAB IDEAS
BOSTON, MA 02210	26-0847220	501(C)(3)	40,000.	0			COLLABORATION ACTION 2016
AMERICAN INSTITUTES FOR RESEARCH							
PELAVIN RESEARCH CENTER 1000	_						
THOMAS JEFFERSON STREET, NW -							HIGH SCHOOL MATH NETWORK
WASHINGTON, DC 20	25-0965219	501(C)(3)	720,113.	0			IMPROVEMENT COMMUNITY
ANNENBERG INSTITUTE FOR SCHOOL							
REFORM / BROWN UNIVERSITY - BROWN	_						
UNIVERSITY OFFICE OF SPONSORED	,						TECHNICAL ASSISTANCE FOR
PROJECTS 164 ANGELL STREET BOX	05-0258809	501(C)(3)	480,000.	0		,	PUBLIC UNDERSTANDING
ANNENBERG INSTITUTE FOR SCHOOL							
REFORM / BROWN UNIVERSITY - BROWN							TECHNICAL ASSISTANCE FOR
UNIVERSITY OFFICE OF SPONSORED							LEAD COMMUNITY PARTNERS
PROJECTS 164 ANGELL STREET BOX	05-0258809	501(C)(3)	38,000.	0			AND YOUTH GROUPS
BEND THE ARC							
330 SEVENTH AVENUE							FUNDERS COLLABORATIVE -
NEW YORK, NY 10001	52-1332694	501(C)(3)	40,000.	0			YOUTH ORGANIZING
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	and government or	rganizations listed in th	ne line 1 table				119.
3 Enter total number of other organizations listed in the line 1 table	is listed in the line	1 table				į	•0
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.	s, see the Instruct	lions for Form 990.				i	Schedule I (Form 990) (2015)
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LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.
SEE PART IV FOR COLUMN (H) DESCRIPTIONS

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Schedule I (Form 990) NELLIE MAE EDUCATION FOUNDATION, INC. Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)	Assistance to G	ON FOUNDATION,	ON, INC.	nited States (Sche	dule I (Form 990), Par		04-2755323 Page 1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BIG BROTHERS BIG SISTERS OF MERCER COUNTY - 535 E. FRANKLIN STREET - TRENTON, NJ 08610	06-1653897	501(c)(3)	10,000.	0			SLACKWOOD ELEMENTARY MENTORING PROGRAM
BLUE ENGINE 75 BROAD STREET, SUITE 2900 NEW YORK, NY 10004	27-1182991	501(C)(3)	10,000.	0.			BLUE ENGINE PROGRAM GRANT
BOSTON EDUCATION DEVELOPMENT FOUNDATION - 2300 WASHINGTON STREET - ROXBURY, MA 02119	22-2514422	501(C)(3)	50,000.	0			SUPERINTENDENT TRANSITION
BRANDEIS UNIVERSITY PO BOX 549110 WALTHAM, MA 02454-9110	04-2103552	501(C)(3)	296,058.	0			DISTRICT LEVEL SYSTEM CHANGE TECHNICAL ASSISTANCE AND TASK FORCE COORDINATION
BRONXDALE TENANTS LEAGUE D.C.C., INC 1065 BEACH AVENUE - BRONX, NY 10472	13-2681414	501(c)(3)	10,000.	0.			BRONXDALE NURSERY AND KINDERGARTEN - DEMOGRAPHY ISN'T DESTINY PROGRAM
BRYANT UNIVERSITY 1150 DOUGLAS PIKE SMITHFIELD, RI 02917	05-0258810	501(C)(3)	15,000.	0.			PRUSTEE SCHOLARSHIP FUND
BURLINGTON HIGH SCHOOL 52 INSTITUTE RD. BURLINGTON, VT 05408	GOV'T UNIT	PUBLIC SCHOOL	10,000.	0			LAWRENCE W. O'TOOLE LEADERSHIP AWARD TO ADVANCE STUDENT CENTERED LEARNING
BURLINGTON SCHOOL DISTRICT 150 COLCHESTER AVENUE BURLINGTON, VT 05401	03-6000410	PUBLIC SCHOOL	783,311.	0			DISTRICT LEVEL SYSTEM CHANGE IMPLEMENTATION
BURLINGTON SCHOOL DISTRICT 150 COLCHESTER AVENUE BURLINGTON, VT 05401	03-6000410	PUBLIC SCHOOL	31,720.	0			GRADUATION EXPECTATION COMMUNICATIONS SUPPORT - IMPLEMENTATION FUNDS
							Schedule I (Form 990)

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(a) Name and address of (b) EIN (c) IRO section (d) Amo organization or government (a) Name and address of (d) EIN (f) IRO section (d) Amo organization or government (d) Amo (d	Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II)	inea States (Solicande I (I Ol		
L DISTRICT VENUE 5401 5401 5401 511Y 511Y 511Y 511Y 511Y 512 511Y 513 511Y 514 FLOOR 514 FLOOR 515 614 FLOOR 614-3241676 617 (C)(3) 518 FLOOR 614-3241676 617 (C)(3) 52-1256563 501 (C)(3) 618 FLOOR 619 FENUE 619 FOR THE 610 619 FOR THE 610 619 FOR THE 610 619 FOR THE 610 610 FOR THE 610 610 FOR THE 610 610 FOR THE 610 610 FOR THE 610 610 FOR THE 610 610 FOR THE 610 610 FOR THE		(f) Method of non-cash valuation assistance (book, FMV, appraisal, other)	nod of (g) Description of tool (g) Description of non-cash assistance FMV,	(h) Purpose of grant or assistance
SITY SITY SITY SITY 135 03-0213787 PUBLIC SCHOOL 135 03-0213787 PUBLIC SCHOOL 135 04-3241676 501(C)(3) 145, 6TH FLOOR 04-3241676 501(C)(3) 150 LENCE IN EDUCATION 04-3241676 501(C)(3) 161 171 172 173 174 175 175 176 176 176 177 178 178 178 170 170 170 170		.0		COMMUNICATIONS SUPPORT -
### SITY ###################################	PUBLIC	.0		STRATEGIC INITIATIVES - LEADERSHIP AND SUCCESS PROGRAM
BORATIVE EDUCATION UE, 6TH FLOOR 04-3241676 501(C)(3) 2 BORATIVE EDUCATION UE, 6TH FLOOR 04-3241676 501(C)(3) 1 LENCE IN EDUCATION BRIVE, SUITE 215 52-1256563 501(C)(3) E TREET 5401 TION FOR THE	PUBLIC	o		STUDENT ATHLETES SUPPORT PROGRAM
BORATIVE EDUCATION UE, 6TH FLOOR 04-3241676 501(C)(3) 1 LENCE IN EDUCATION DRIVE, SUITE 215 52-1256563 501(C)(3) E TREET TION FOR THE		0.		MASSACHUSETTS PERSONALIZED LEARNING NETWORK
DRIVE, SUITE 215 DRIVE, SUITE 215 52-1256563 501(C)(3) E TREET 5401 03-0220266 501(C)(3)		.0		STRENGTHENING PROFICIENCY BASED GRADUATION IN RI
STREET 05401 03-0220266 501(C)(3)	501(.0		RESEARCH SCIENCE INSTITUTE PROGRAM
COMMUNITY FOUNDATION FOR THE	501(C	0		DIVERSITY ROCKS CAPACITY BUILDING
ALLEGHENIES - 116 MARKET STREET, SUITE 4 - JOHNSTOWN, PA 15901 25-1637373 501(C)(3) 25(°.		PROMISSING PRACTICE AND
COMPASS YOUTH COLLABORATIVE, INC 55 AIRPORT ROAD SUITE 201 HARTFORD, CT 06114 31-1768549 501(C)(3) 8.		0		YOUTH 4 CHANGE

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Schedule I (Form 990) NELLIE MAE EDUCATION FOUNDATION, INC. Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II)	E EDUCATION Assistance to Govern	ION FOUNDATION	ON, INC.	nited States (Sche	dule I (Form 990). Par		04-2755323 Page 1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CONNECTICUT ASSOCIATION OF PUBLIC SCHOOL SUPERINTENDENTS FOUNDATION - 26 CAYA AVENUE - WEST HARTFORD, CT 06110	45-5636114	501(C)(3)	199,626.	0			SUPPORT STUDENT CENTERED
CONNECTICUT PUBLIC BROADCASTING NETWORK - 1049 ASYLUM AVE HARTFORD, CT 06105	06-0758938	501(C)(3)	125,000.	0			EDUCATION REPORTING ON STUDENT CENTERED LEARNING
CONVERGENCE CENTER FOR POLICY RESOLUTION - 1133 19TH STREET, NW, SUITE 250 - WASHINGTON, DC 20036	32-0280279	501(C)(3)	250,000.	0.			EDUCATION REIMAGINED - RESHAPE THE PUBLIC CONVERSATION
COUNCIL OF CHIEF STATE SCHOOL OFFICERS - ONE MASSACHUSETTS AVE NW, STE, 700 - WASHINGTON, DC 20001	53-0198090	501(C)(3)	188,871.	0			CONTINUED SUPPORT FOR INNOVATION LAB NETWORK
COUNCIL OF CHIEF STATE SCHOOL OFFICERS - ONE MASSACHUSETTS AVE NW, STE, 700 - WASHINGTON, DC 20001	53-0198090	501(C)(3)	74,434.	0			LEADERSHIP COMPETENCIES FOR PERSONALIZED, LEARNER-CENTERED SCHOOLS
EDUCATE MAINE 15 MONUMENT SQUARE, SUITE #4 PORTLAND, ME 04101	20-3559947	501(c)(3)	155,000.	0.			SUPPORTING PROFICIENCY-BASED SYSTEMS IN MAINE (YEAR 2)
EDUCATE MAINE 15 MONUMENT SQUARE, SUITE #4 PORTLAND, ME 04101	20-3559947	501(C)(3)	15,000.	0			MAINE EDUCATION AWARENESS CAMPAIGN
EDUCATION DEVELOPMENT CENTER 43 FOUNDRY AVE. WALTHAM, MA 02453	04-2241718	501(C)(3)	1,050,000.	.0			DISTRICT LEVEL SYSTEM CHANGE PHASE 2 EVALUATION 2016
EDUCATION DEVELOPMENT CENTER 43 FOUNDRY AVE. WALTHAM, MA 02453	04-2241718	501(C)(3)	460,000.	0			DISTRICT LEVEL SYSTEM CHANGE PHASE 2 EVALUATION
							Schedule I (Form 990)

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EDUCATION DEVELOPMENT CENTER							DISTRICT LEVEL SYSTEM
43 FOUNDRY AVE. WALTHAM, MA 02453	04-2241718	501(C)(3)	397,952.	0.			CHANGE TECHNICAL ASSISTANCE PHASE 2
EDUCATION DEVELOPMENT CENTER 43 FOUNDRY AVE. WALTHAM, MA 02453	04-2241718	501(C)(3)	75,000.	0			FAIRFEILD COUNTY EARLY COLLEGE OPPORTUNITES
EDUCATION DEVELOPMENT CENTER 43 FOUNDRY AVE. WALTHAM, MA 02453	04-2241718	501(C)(3)	51,768.	0.0			DISTRICT LEVEL SYSTEM CHANGE TECHNICAL ASSISTANCE PHASE 2
EDUCATION DEVELOPMENT CENTER 43 FOUNDRY AVE. WALTHAM, MA 02453	04-2241718	501(C)(3)	50,813.	0.			DISTRICT LEVEL SYSTEM CHANGE LEARNING AGENDA
EDUCATION FOUNDATION OF THE KENNEBUNKS AND ARUNDEL - PO BOX 1531 - KENNEBUNKPORT, MA 04046	20-5050593	501(C)(3)	10,000.	0			EXPERIENTIAL LEARNING PROJECTS
EDUCATION WRITERS ASSOCIATION 3516 CONNECTICUT AVENUE, NW WASHINGTON, DC 20008	23-7439790	501(C)(3)	75,000.	0.			2016 NATIONAL SEMINAR
ENGAGING SCHOOLS 23 GARDEN STREET CAMBRIDGE, MA 02138	04-2764204	501(C)(3)	8,000.	0			SUPPORT TO SOCIAL AND EMOTIONAL LEARNING
ESSEX COUNTY COMMUNITY FOUNDATION 175 ANDOVER STREET, STE. 101 DANVERS, MA 01923	04-3407816	501(C)(3)	20,000.	0			BETTY BELAND GREATER LAWKENCE SUMMER FUND
C/O THOMSON SAFARIS, 14 MOUNT AUBURN STREET - WATERTOWN, MA				c			

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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)	Assistance to G	overnments and Orgar	nizations in the Ur	nited States (Sche	edule I (Form 990), Pa		- ada
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FRAMEWORKS INSTITUTE 1333 H STREET NW, SUITE 700 WEST WASHINGTON, DC 20005	71-0891642	501(C)(3)	100,000	0.			GRASSTOPS GRANTEE SUPPORT
GENERATION CITIZEN 175 VARICK STREET, FL 5 NEW YORK, NY 10024	27-2039522	501(C)(3)	.000,02	0			YOUTH VOICE INTERGRATION INTO STUDENT CENTERED LEARNING
GIRLS WHO CODE INC. 28 W. 23RD STREET, 4TH FLOOR NEW YORK, NY 10010	30-0728021	501(C)(3)	.000,01	.0			PERSONALIZED LEARNING EXPERIENCES FOR GIRLS
GRANTMAKERS FOR EDUCATION 720 SW WASHINGTON STREET SUITE 605 PORTLAND, OR 97205	33-0919329	501(C)(3)	25,000.	.0			2015 PUBLIC POLICY LEADERSHIP INSTITUTE
GREAT SCHOOLS PARTNERSHIP 482 CONGRESS STREET, SUITE 500 PORTLAND, ME 04101	26-3834610	501(C)(3)	425,000.	0			SUPPORT FOR NEW ENGLAND SECONDARY SCHOOL CONSORTIUM ON POLICY DEVELOPMENT AND STRATEGIC
GREAT SCHOOLS PARTNERSHIP 482 CONGRESS STREET, SUITE 500 PORTLAND, ME 04101	26-3834610	501(C)(3)	371,438.	.0			PUBLIC UNDERSTANDING AND DEMAND INITIATIVE INTERMEDIARY
GROWTH PHILANTHROPY NETWORK 122 E. 42ND STREET 17TH FLOOR NEW YORK, NY 10168	42-1625224	501(C)(3)	50,000.	0.			EDUCATION WORKING GROUP
HANOVER PERMANENT SCHOLARSHIP FUND PO BOX 67 HANOVER, MA 02339	04-2625836	501(C)(3)	7,500	0			JENNA ATTURIO MEMORIAL SCHOLARSHIP
HARTFORD JOURNALISM AND MEDIA MAGNET SCHOOL - 150 TOWER AVE							LAWRENCE W. O'TOOLE LEADERSHIP AWARD TO ADVANCE STUDENT CENTERED
HARTEORD CT 06120	06-6001876	1001100					

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Schedule	l (Form 990)	NELLIE MAE	MAE	EDUCATION	POUNDATION,	
Part II	Continuation of	Grants and O	ther Ass	istance to Governm	nents and Organization	s in the United States (Schedule I (Form 990), Part II)

(a) Name and address of (b) EIN (c) IRC section	(b) EIN	(c) IRC section	(d) Amount of	(e) Amount of	on (d) Amount of (e) Amount of (f) Method of (a	(a) Description of	(h) Purpose of grant
organization or government		if applicable	cash grant	non-cash assistance	valuation (book, FMV, appraisal, other)	non-cash assistance	or assistance
HARTFORD PARENT UNIVERSITY 207 MAIN STREET, SUITE 200 HARTFORD CT 06106	45-1859686	501(0.)(3)	129 000	c			ממאוחם גם יאוד אנדות מאוחם בה
14 03							DISTRICT LEVEL SYSTEM
HARTFORD, CT 06103	06-6001876	PUBLIC SCHOOL	1,796,049.	0		,	CHANGE PHASE II
HARTFORD PUBLIC SCHOOLS 960 MAIN STREET, 8TH FLOOR HARTFORD, CT 06103	06-6001876	PUBLIC SCHOOL	152,155.	0			COMMUNICATION SUPPORT - IMPLEMENTATION FUNDS
HARTFORD PUBLIC SCHOOLS 960 MAIN STREET, 8TH FLOOR							PUBLIC UNDERSTANDING AND DEMAND COMMUNITY
HARTFORD, CT 06103	06-6001876	PUBLIC SCHOOL	20,000.	0		-	ENGAGEMENT
PUBLIC S							BOUNDLESS - HARTFORD FUBLIC SCHOOL AND
HARTFORD, CT 06103	06-6001876	PUBLIC SCHOOL	20,000.	0.			HAKTFOKD FUBLIC LIBKAKY PARTNERSHIP VIDEO
HARVARD UNIVERSITY, GRADUATE SCHOOL OF EDUCATION - PO BOX 415649 - CAMBRIDGE, MA 02241-5649	04-2103580	501(C)(3)	10,000.	•0			ASTER'S STUDENTS FINANCIAL AID
HIGHLANDER INSTITUTE 65 ATLANTIC AVE, PROVIDENCE, RI 02907	22-3115046	501(C)(3)	279,947.	.0			FUSE PROGRAM RI
HIGHLANDER INSTITUTE 65 ATLANTIC AVE.							AWRENCE W. O'TOOLE LEADERSHIP AWARD TO ADVANCE STUDENT CENTERED
PROVIDENCE, RI 02907	22-3115046	501(C)(3)	10,000.	0			LEARNING
INSTITUTE FOR DEMOCRATIC EDUCATION IN AMERICA (IDEA) - 3644 44TH AVE., S - MINNEAPOLIS, MN 55406	27-0812635	501(C)(3)	10,000.	0			LEARNING BREAKTHROUGH SERIES
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Schedule I (Form 990) NELLIE MAE EDUCATION FOUND Part II Continuation of Grants and Other Assistance to Governments and	E EDUCATION Assistance to Govern	CON FOUNDATION	ON, INC.	nited States (Sche	ATION, INC. Organizations in the United States (Schedule I (Form 990), Part II.)		04-2755323 Page 1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
INSTITUTE FOR DEMOCRATIC EDUCATION IN AMERICA (IDEA) - 3644 44TH AVE., S - MINNEAPOLIS, MN 55406	27-0812635	501(C)(3)	10,000.	0			LEARNING TOURS FOR ASVL YOUTH GROUPS
INTERNATIONAL ASSOCIATION FOR K-12 ONLINE LEARNING - 1934 OLD GALLOWS RD, SUITE 350 - VIENNA, VA 22182	20-0310109	501(C)(3)	188,445.	.0			COMPETENCYWORKS
JOBS FOR MAINE'S GRADUATES 45 COMMERCE DRIVE, SUITE 9 AUGUSTA, ME 04330	01-0482628	501(C)(3)	1,197,597.	0			DISTRICT LEVEL SYSTEM CHANGE IMPLEMENTATION
JOBS FOR THE FUTURE 88 BROAD STREET, 8TH FLOOR BOSTON, MA 02110	06-1164568	501(C)(3)	810,000.	0.			STUDENTS AT THE CENTER RESEARCH COLLABORATIVE
JOBS FOR THE FUTURE 88 BROAD STREET, 8TH FLOOR BOSTON, MA 02110	06-1164568	501(C)(3)	700,000.	0.0			STUDENTS AT THE CENTER HUB PROJECT
JOBS FOR THE FUTURE 88 BROAD STREET, 8TH FLOOR BOSTON, MA 02110	06-1164568	501(C)(3)	27,988.	0.			SUPPORT FOR DEEPER LEARNING FORUM
JOHN F. KENNEDY LIBRARY FOUNDATION COLUMBIA POINT BOSTON, MA 02125	04-6113130	501(C)(3)	15,000.	0.			PROFILE IN COURAGE
JOHN F. KENNEDY LIBRARY FOUNDATION COLUMBIA POINT BOSTON, MA 02125	04-6113130	501(C)(3)	.000,3	.0			PROFILE IN COURAGE TRUST
KENNEBUNK FREE LIBRARY ASSOCIATION 112 MAIN STREET KENNEBUNK, ME 04043	01-0249983	501(C)(3)	10,000,	0			YOUTH AND TEEN PROGRAMS AT THE KENNEBUNK LIBRARY
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Schedule I (Form 990) NELLIE MAE EDUCATION FOUNDATION, INC. Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II)	E EDUCATION Assistance to Govern	ON FOUNDATION,	ON, INC.	nited States (Sche	dule I (Form 990), Par		04-2755323 Page 1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KITTERY SCHOOL DISTRICT TOWN MUNICIPAL BUILDING 200 ROGERS KITTERY, ME 03904	GOV'T UNIT	GOVT AGENCY	10,000.	.0			PUBLIC UNDERSTANDING AND DEMAND COMMUNITY ENGAGEMENT
KNOWLEDGEWORKS FOUNDATION ONE WEST FOURTH ST., SUITE 200 CINCINNATI, OH 45202	31-1321973	501(C)(3)	125,027.	0			NH TECHNICAL GUIDE ON PACE PROGRAM
LEARNLAUNCH 31 ST. JAMES AVE. #920 BOSTON, MA 02116	46-1270864	501(C)(3)	6,000.	0.			ACROSS BOUNDARIES: FROM DIGITIZING PAST PRACTICE TO PERSONALIZED LEARNING
MAINE AFTERSCHOOL NETWORK 12 E. CHESTNUT STREET AUGUSTA, ME 04330	01-6000769	501(C)(3)	10,000.	0			POSITIVE YOUTH DEVELOPMENT CONFERENCE
MAINE DEVELOPMENT FOUNDATION 295 WATER STREET, SUITE 5 AUGUSTA, ME 04330	01-0355563	501 (C)(3)	20,000.	0.			NEXT STEP MAINE SCHOLARSHIPS
MAINE PUBLIC BROADCASTING NETWORK 323 MARGINAL WAY PORTLAND, ME 04101	22-3171529	501(C)(3)	149,380.	0			EDUCATE ME - MEDIA GRANT YEAR 1
MANCHESTER COMMUNITY COLLEGE BOX 1046 MANCHESTER, CT 06045	86-6000798	PUBLIC SCHOOL	40,000.	0			RETENTION INITIATIVE
MASSACHUSETTS BUDGET & POLICY CENTER - 15 COURT SQUARE, SUITE 700 - BOSTON, MA 02108	04-2967537	501(C)(3)	25,000.	.0			CONTINUED SUPPORT FOR ROAD MAP PROJECT
MASSINC 11 BEACON STREET, STE, 500 BOSTON, MA 02108	04-3271457	501(C)(3)	25,000.	0			SATEWAY CITIES INNOVATION AWARDS
							Schedule I (Form 990)

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Schedule I (Form 990) NELLIE MAE EDUCATION FOUNDATION, INC. [Part II] Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II)	LE EDUCATI	EDUCATION FOUNDATION, sistance to Governments and Organizati	ON, INC.	nited States (Sche	dule I (Form 990), Pa		04-2755323 Page 1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MERIDEN CHILDREN FIRST 105 MILLER STREET MERIDEN, CT 06450	06-1626440	501(c)(3)	143,436.	.0			SUPPORTING PARENT LEADERS TO BECOME EDUCATIONAL ADVOCATES
MERIDEN PUBLIC SCHOOLS 22 LIBERTY STREET MERIDEN, CT 06450	06-6001893	PUBLIC SCHOOL	1,000,000.	0			DISTRICT LEVEL SYSTEM CHANGE PHASE II
MERIDEN PUBLIC SCHOOLS 22 LIBERTY STREET MERIDEN, CT 06450	06-6001893	PUBLIC SCHOOL	35,958.	0			VIDEO SUPPORT - COMMUNICATIONS IMPLEMENTATION FUNDS
MERIDEN PUBLIC SCHOOLS 22 LIBERTY STREET MERIDEN, CT 06450	06-6001893	PUBLIC SCHOOL	20,000.	0			PUBLIC UNDERSTANDING AND DEMAND COMMUNITY ENGAGEMENT
MEXICAN AMERICAN UNITY COUNCIL 2300 W COMMERCE, SUITE 200 SAN ANTONIO, TX 78207	74-6088061	501(C)(3)	9,000.	0.			MAUC SPIRIT OF EDUCATION SCHOLARSHIP
MORGAN STATE UNIVERSITY FOUNDATION PO BOX 64261 BALTIMORE, MD 21264-4261	23-7089143	\$01(c)(3)	15,000.	0.			GRAVES SCHOOL HONORS PROGRAM
MOSES BROWN SCHOOL 250 LLOYD AVENUE PROVIDENCE, RI 02906	05-0393999	501(C)(3)	9,000.	0.			MOSES BROWN FUND
MOUSE INC 55 BROAD STREET, 16TH FLOOR NEW YORK, NY 10004	13-3973196	501(C)(3)	10,000.	.0			MOUSE GRANT FOR THE DESIGN LEAGUE
NATIONAL ASSOCIATION FOR FAMILY, SCHOOL AND COMMUNITY ENGAGEMENT - 5272 RIVER RD, SUITE 340 - BETHESDA, MD 20816	47-0968569	501(C)(3)	100,000.	.0			ENGAGEMENT FRAMEWORKS RESEARCH

Schedule I (Form 990)

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Schedule I (Form 990) NELLIE MAE EDUCATION FOUNDATION, INC. Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part III)	E EDUCATION Assistance to Govern	CON FOUNDATION overnments and Organizat	ON, INC.	nited States (Sche	dule I (Form 990). Par		04-2755323 Page 1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NATIONAL COMMITTEE FOR RESPONSIVE PHILANTHROPY - 1331 H STREET, NW, SUITE 200 - WASHINGTON, DC 20005	52-1072749	501(C)(3)	.000,6	o			OPERATING SUPPORT
NEW HAMPSHIRE DEPARTMENT OF EDUCATION - 101 PLEASANT STREET - CONCORD, NH 03301	02-6000618	GOVT AGENCY	295,000.	0			CONTINUED SUPPORT FOR
NEW HAMPSHIRE JOBS FOR AMERICA'S GRADUATES (NH-JAG) - 175 AMMON DR., STE. 212 - MANCHESTER, NH 03103	02-0514787	501(C)(3)	,000,8	0			NATIONAL STUDENT LEADERSHIP ACADEMY
NORTHWESTERN UNIVERSITY ALUMNI RELATIONS AND DEVELOPMENT, 1201 DAVIS STREET - EVANSTON, IL 60208	36-2167817	PUBLIC SCHOOL	40,000.	.0			FUSE PROGRAM
NORTHWESTERN UNIVERSITY ALUMNI RELATIONS AND DEVELOPMENT, 1201 DAVIS STREET - EVANSTON, IL 60208	36-2167817	PUBLIC SCHOOL	000'6				FUSE PROGRAM
OUR PIECE OF THE PIE, INC. 20-28 SARGEANT STREET HARTFORD, CT 06105	06-0939659	501(C)(3)	30,000.	0.			PERSONALIZED LEARNING - COMBINING EXPERTISE AND DISTRICT IMPLEMENTATION
OUR PIECE OF THE PIE, INC. 20-28 SARGEANT STREET HARTFORD, CT 06105	06-0939659	501(C)(3)	7,500.	0.			40TH ANNIVERSARY GALA
OXFORD HILLS SCHOOL DISTRICT 1570 MAIN ST., SUITE 11 OXFORD, ME 04270	01-6006629	PUBLIC SCHOOL	10,000.	0			PUBLIC UNDERSTANDING COMMUNITY ENGAGEMENT
PARAMOUNT CENTER, INC. 30 CENTER STREET RUTLAND, VT 05101	22-2528303	501(C)(3)	20,000.	.0			PROJECT 240 - PROFESSIONAL ARTS PROGRAM
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Schedule I (Form 990) NELLIE MAE EDUCATION FOUNDATION, INC. Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)	E EDUCATION Assistance to Govern	CON FOUNDATION, overnments and Organization	ON, INC.	nited States (Sche	dule I (Form 990), Par		04-2755323 Page 1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PITTSFIELD SCHOOL DISTRICT SAU 51, 23 ONEIDA STREET, UNIT 1 PITTSFIELD, NH 03263	02-6000701	PUBLIC SCHOOL	352,313.	0.			DISTRICT LEVEL SYSTEM CHANGE IMPLEMENTATION
PITTSFIELD SCHOOL DISTRICT SAU 51, 23 ONEIDA STREET, UNIT 1 PITTSFIELD, NH 03263	02-6000701	PUBLIC SCHOOL	44,970.	.0			COMMUNICATIONS SUPPORT -
PITTSFIELD YOUTH WORKSHOP PO BOX 206 PITTSFIELD, NH 03263	02-0414050	501(C)(3)	130,000.	0.			LEAD COMMUNITY PARTNER
PITTSFIELD YOUTH WORKSHOP PO BOX 206 PITTSFIELD, NH 03263	02-0414050	501(C)(3)	35,805.	0			COMMUNICATIONS STRATEGIC AND TACTICAL SUPPORT
POLAND REGIONAL HIGH SCHOOL 1457 MAINE STREET POLAND, ME 04274	26-4196919	PUBLIC SCHOOL	10,000.	.0			POLAND REGIONAL HIGH SCHOOL OPPORTUNITY GRANTS
PRISON BOOK PROGRAM 1306 HANCOCK STREET, SUITE 100 QUINCY, MA 02169	20-3235673	501(C)(3)	10,000.	0.			PRISON BOOK PROGRAM
PROTEUS FUND 15 RESEARCH DRIVE, SUITE B AMHERST, MA 01002	04-3243004	501(C)(3)	14,000.	0			DIVERSITY FELLOWSHIP FOLLOW UP REPORT
REACHING HIGHER NH BOX 760, 12 CRANFIELD ST. NEW CASTLE, NH 03854	47-4397833	501(C)(3)	49,767.	0.			COMMUNICATIONS SUPPORT FOR CBE
READING IS FUNDAMENTAL 1730 RHODE ISLAND AVENUE, NW, SUITE WASHINGTON, DC 20036	52-0976257	501(C)(3)	40,000.	0			READ FOR SUCCESS
***************************************							Schedule I (Form 990)

(h) Purpose of grant or assistance	CONTINUED SUPPORT FOR	COMMUNICATIONS SUPPORT - IMPLEMENTATION FUNDS	NEW APPROACHES IN URBAN DISTRICTS PHASE 2	COMMUNICATIONS CAPACITY FOR THE STRATEGIC PLAN	STUDENT-CENTERED LEARNING IN RHODE ISLAND	PROJECT OPEN DOOR	RHODE ISLAND SCHOOL OF DESIGN MENTORING PROGRAM	
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RHODE ISLAND SCHOOL OF DESIGN

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EDUCATION - 143 PRAIRIE AVE, 1ST

FL - PROVIDENCE, RI 02905

2083 LAWRENCEVILLE ROAD LAWRENCEVILLE, NJ 08648

RIDER UNIVERSITY

RHODE ISLANDERS SPONSORING

PROVIDENCE, RI 02903

2 COLLEGE STREET

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(g) Description of non-cash assistance

(e) Amount of assistance non-cash

(d) Amount of cash grant

(c) IRC section if applicable

(b) EIN

(a) Name and address of organization or government

(book, FMV, appraisal, other) (f) Method of valuation

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51-0548106

RESEARCH AND POLICY - 114 STATE

STREET - BOSTON, MA 02109

REVERE HIGH SCHOOL 101 SCHOOL STREET

REVERE, MA 02151

RENNIE CENTER FOR EDUCATION

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83,470

PUBLIC SCHOOL

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PUBLIC SCHOOL

04-6001412

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99,400

BOVT AGENCY

GOV'T UNIT

EDUCATION - 255 WESTMINSTER STREET

- PROVIDENCE, RI 02903

RHODE ISLAND KIDS COUNT

ONE UNION STATION

PROVIDENCE, RI 02903

RHODE ISLAND DEPARTMENT OF

REVERE PUBLIC SCHOOLS

101 SCHOOL STREET

REVERE, MA 02151

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

NELLIE MAE EDUCATION FOUNDATION,

Schedule I (Form 990)

INC.

SAFE PASSAGE							
81 BRIDGE ST., SUITE 104		-	_	_			
YARMOUTH, ME 04096	01-0532835 501	01(C)(3)	10,000.	.0	 İ	EXPEDITIONARY LEARNING	_
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Schedule I (Form 990) NELLIE MAE EDUCATION FOUNDATION, INC. Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)	E EDUCATION Assistance to Govern	ON FOUNDATION,	ON, INC.	nited States (Sche	dule I (Form 990), Par		04-2755323 Page 1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SANBORN REGIONAL SCHOOL DISTRICT 17 DANVILLE RD. KINGSTON, NH 03848	GOV'T UNIT	PUBLIC SCHOOL	100,000.	0			LAWRENCE W. O'TOOLE LEADERSHIP AWARD TO ADVANCE STUDENT CENTERED LEARNING
SANFORD SCHOOL DEPARTMENT 917 MAIN STREET, SUITE 200 SANFORD, ME 04073	01-6000355	PUBLIC SCHOOL	400,000.	0			DISTRICT LEVEL SYSTEM CHANGE GRANT
STRATEGIES FOR A STRONGER SANFORD PO BOX 958 SANFORD, ME 04073	80-0144697	501(C)(3)	130,000.	.0			LEAD COMMUNITY PARTNER
STRATEGIES FOR A STRONGER SANFORD PO BOX 958	80-0144697	501(C)(3)	6,750.	0			COLLEGE KNOWLEDGE
STUDENT VOICE, INC. 12 TAIN DRIVE GREAT NECK, NY 11021	46-2636244	501(C)(3)	10,000.	0.			STUDENT VOICE LIVE! AT SXSWEDU
TEACHERS21 34 WASHINGTON STREET, SUITE 220 WELLEGLEY, MA 02481	04-3174042	501(C)(3)	36,000.	0.			SUPPORTING EDUCATION FUNDERS TRIP ON TEACHER PREPARATION
THE BOSTON FOUNDATION 75 ARLINGTON STREET, 10TH FLOOR BOSTON, MA 02116	04-2104021	501(C)(3)	100,000.	0			BOSTON OPPORTUNITY AGENDA
THE BOSTON FOUNDATION 75 ARLINGTON STREET, 10TH FLOOR BOSTON, MA 02116	04-2104021	501(C)(3)	10,000.	.0			100TH ANNIVERSARY GALA
THE CATHOLIC SCHOOLS FOUNDATION, INC 260 FRANKLIN STREET, SUITE 630 - BOSTON, MA 02110	22-2485502	501(c)(3)	10,000.	0			INNER CITY SCHOLARSHIP FUND
							Schedule I (Form 990)

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Part II Continuation of Grants and Other Assistance to Governments an	Assistance to Go	vernments and Organ	nizations in the Ur	nited States (Sche	id Organizations in the United States (Schedule I (Form 990), Part II)	t)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE CENTER FOR THE ARTS IN NATICK, INC 14 SUMMER STREET - NATICK, MA 01760	04-3364016	501(C)(3)	11,000.	0.0			EDUCATIONAL PROGRAMS
THE COLLEGE CRUSADE OF RHODE ISLAND - 134 THURBERS AVENUE, SUITE 111 - PROVIDENCE, RI 02905	22-3031765	501(C)(3)	39,239.	0.			READABOUT
THE CONNECTICUT FORUM, INC. 750 MAIN STREET HARTFORD, CT 06103	06-1343149	501(C)(3)	75,720.	0.			CONNECTICUT YOUTH FORUM
THE FOUNDATION CENTER 32 OLD SLIP, 24TH FLOOR NEW YORK, NY 10005	13-1837418	501(C)(3)	7,500.	0.0			GENERAL PROGRAM FUNDING
THE OPPORTUNITY ALLIANCE 50 MONUMENT SQUARE PORTLAND, ME 04101	01-0274725	501(C)(3)	97,000.	0			MAINE YOUTH ACTION NETWORK
THIRD SECTOR NEW ENGLAND NONPROFIT CENTER 89 SOUTH ST., #700 BOSTON, MA 02111	04-2261109	501(C)(3)	400,000	0			PUBLIC UNDERSTANDING AND DEMAND TECHNICAL ASSISTANCE SUFFORT
THOMPSON ISLAND OUTWARD BOUND PO BOX 127 BOSTON, MA 02127	04-3027900	501(C)(3)	50,000	0			CONNECTIONS
UNIVERSITY OF MASSACHUSETTS BOSTON 100 MORRISSEY BLVD BOSTON, MA 02125	04-3167352	501(C)(1)	100,000.	0.			STUDENT-CENTERED LEARNING OPPORTUNITIES FOR ADOLESCENT ENGLISH LEARNERS IN FLIPPED
UNIVERSITY OF MASSACHUSETTS, BOSTON - 100 MORRISSEY BOULEVARD - BOSTON, MA 02125-3393	04-3167352	501(C)(1)	7,500.	0			COLLABORATIVE RESEARCH AND ACTION FOR EQUITY IN PUBLIC EDUCATION
							Schedule I (Form 990)

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Schedule I (Form 990) NELLIE MAE EDUCATION FOUNDATION, INC. Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II)	Assistance to G	EDUCATION FOUNDATION, istance to Governments and Organization	ON, INC.	nited States (Scho	edule I (Form 990), Pa		04-2755323 Page 1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF SOUTHERN MAINE-MUSKIE SCHOOL OF PUBLIC SERVICE - PO BOX 9300 - PORTLAND, ME 04104-9300	01-6000769	501(C)(3)	139,977.	0			LEAD COMMUNITY PARTNER
UNIVERSITY OF SOUTHERN MAINE-MUSKIE SCHOOL OF PUBLIC SERVICE - PO BOX 9301 - PORTLAND, ME 04104-9300	01-6000769	501(C)(3)	. 900, 76	0			PORTLAND EMPOWERED- AMPLIFYING STUDENT VOICE
UNIVERSITY OF SOUTHERN MAINE-MUSKIE SCHOOL OF PUBLIC SERVICE - PO BOX 9302 - PORTLAND, ME 04104-9300	01-6000769	501(C)(3)	10,000.	0			LAWRENCE W. O'TOOLE LEADERSHIP AWARD TO ADVANCE STUDENT CENTERED LEARNING
URBAN COLLABORATIVE 75 CARPENTER STREET PROVIDENCE, RI 02903	05-0448102	501(C)(3)	38,400.	0			ACCELERATION PRACTICES EVALUATION
VBR RESEARCH & EDUCATION FOUNDATION - PO BOX 735 - EAST DORSET, VT 05253	46-0716588	501(C)(3)	51,500.	0			BUILDING COMMUNICATION CAPACITY
VERMONT AGENCY OF EDUCATION 120 STATE STREET MONTPELIER, VT 05620	GOV'T UNIT	GOVT AGENCY	250,000.	0.			EDUCATION QUALITY STANDARDS
VIRTUAL LEARNING ACADEMY CHARTER SCHOOL - 30 LINDEN STREET, PO BOX 1050 - EXETER, NH 03833	56-2668724	501(C)(3)	40,000.	0.			STUDENT CENTERED LEARNING PROMOTION AND SOFTWARE DEVELOPMENT
VOICES FOR VERMONT'S CHILDREN 149 STATE STREET, PO BOX 261 MONTPELIER, VT 05601	22-2611535	501(c)(3)	130,000.	0.0			LEAD COMMUNITY PARTNER
WASHINGTON NORTHEAST SUPERVISORY UNION - 149 MAIN ST., 1ST FLOOR, PO BOX 470 - PLAINFIELD, VT 05667	03-6000883	GOVT AGENCY	10,000.	0.			PUBLIC UNDERSTANDING AND DEMAND COMMUNITY ENGAGEMENT
							Schedule I (Form 990)

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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)	Assistance to Govern	overnments and Organizati	nizations in the Ur	ited States (Sche	dule I (Form 990), Par		Lade
(a) Name and address of organization or government	(b) EIN	(c) IRC sectron if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WASHINGTON WEST SUPERVISORY UNION 340 MAD RIVER PARK SUITE 7 WAITSFIELD, VT 05673	03-0218197	GOVT AGENCY	10,000.	0			FUBLIC UNDERSTANDING AND DEMAND COMMUNITY ENGAGEMENT
WESTBROOK SCHOOL DEPARTMENT 117 STROUDWATER STREET WESTBROOK, ME 04092	GOV'T UNIT	GOVT AGENCY	20,000.	0			PUBLIC UNDERSTANDING AND DEMAND COMMUNITY ENGAGEMENT
WILLISTON NORTHAMPTON SCHOOL 19 PAYSON AVE EASTHAMPTON, MA 01027	04-1975990	501(C)(3)	10,000.	0.			WILLISTON SCHOLARSHIP FUND
WINDSOR LOCKS PUBLIC SCHOOLS 58 SOUTH ELM ST. WINDSOR LOCKS, CT 06096	06-6001689	PUBLIC SCHOOL	10,000,	0			PUBLIC UNDERSTANDING AND DEMAND COMMUNITY ENGAGEMENT
WOMEN ENCOURAGING EMPOWERMENT 50 WALNUT STREET REVERE, MA 02151	04-3286531	501(C)(3)	75,000.	.0			GEAD COMMUNITY PARTNER
WOODROW WILSON NATIONAL FELLOWSHIP FOUNDATION - 5 VAUGHN DRIVE, SUITE 300, PO BOX 5281 - PRINCETON, NJ 08543	21-0703075	501(C)(3)	200,000.	0			WOODROW WILSON ACADEMY OF TEACHING AND LEARNING AT MIT
XAVERIAN BROTHERS HIGH SCHOOL 800 CLAPBOARDTREE STREET WESTWOOD, MA 02090	04-2314036	501(C)(3)	.000,6	0			CALL TO LEAD
YALE SCHOOL OF MANAGEMENT PO BOX 208200 NEW HAVEN, CT 06520-8200	06-0546973	501(C)(3)	10,000.	0			TALE EDUCATION LEADERSHIP
YOUTH IN ACTION 672 BROAD STREET PROVIDENCE, RI 02907	05-0495230	501(C)(3)	20,000.	0			AMPLIFYING YOUTH VOICE
							Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II)	r Assistance to Go	sistance to Governments and Organizatic	nizations in the Ur	nited States (Sche	edule I (Form 990), Pa		
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YOUTH ON BOARD / YOUTHBUILD USA 58 DAY STREET SOMERVILLE, MA 02144	22-3076454	501(C)(3)	23,500.	0.			AMPLIFYING YOUTH VOICE
YOUTH ON BOARD / YOUTHBUILD USA 58 DAY STREET SOMERVILLE, MA 02144	22-3076454	501(C)(3)	10,000.	.0			LAWRENCE W. O'TOOLE LEADERSHIP AWARD TO ADVANCE STUDENT CENTERED LEARNING
532241 04-01-15			53				Schedule I (Form 990)

04-01-15

(f) Description of non-cash assistance 04-2755323 (e) Method of valuation (book, FMV, appraisal, other) Q AND INCLUDE NARRATIVES TO REPORT QUESTIONS INCLUDING THE MEASURABLE PROGRESS Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information. Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed DEPENDING ON THE THE GRANTEE WOULD SUBMIT A NARRATIVE THE REPORTS SUBMIT (d) Amount of non-cash assistance 5 F BUDGET SPENT TO DATE WITH THE PROGRESS AND FINAL REPORTS. NELLIE MAE EDUCATION FOUNDATION, INC. GRANTEE IS REQUIRED PROGRESS REPORT AND A FINAL REPORT TO THE FOUNDATION. (c) Amount of cash grant THE ORIGINAL GOALS AND OBJECTIVES OF THE GRANT (b) Number of recipients THE SIZE AND COMPLEXITY OF THE GRANT, GRANT AGREEMENT, (a) Type of grant or assistance Schedule I (Form 990) (2015) THE LINE QF. AS PART PART I, Part III

Schedule I (Form 990) (2015)

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LINE 1, COLUMN (H):

PART II,

532102 10-28-15

Page 2

Schedule I (Form 990) NELLIE MAE EDUCATION FOUNDATION, INC. 04-2755323 Page 2 Part IV Supplemental Information
NAME OF ORGANIZATION OR GOVERNMENT: GREAT SCHOOLS PARTNERSHIP
(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPORT FOR NEW ENGLAND SECONDARY
SCHOOL CONSORTIUM ON POLICY DEVELOPMENT AND STRATEGIC PLANNING
NAME OF ORGANIZATION OR GOVERNMENT: HARTFORD PUBLIC SCHOOLS
(H) PURPOSE OF GRANT OR ASSISTANCE: BOUNDLESS - HARTFORD PUBLIC SCHOOL
AND HARTFORD PUBLIC LIBRARY PARTNERSHIP VIDEO PROPOSAL
NAME OF ORGANIZATION OR GOVERNMENT: UNIVERSITY OF MASSACHUSETTS BOSTON
(H) PURPOSE OF GRANT OR ASSISTANCE: STUDENT-CENTERED LEARNING
OPPORTUNITIES FOR ADOLESCENT ENGLISH LEARNERS IN FLIPPED CLASSROOMS Y2

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

2015

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

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

Empl

NELLIE MAE EDUCATION FOUNDATION, INC.

Employer identification number 04-2755323

Pa	art I Questions Regarding Compensation			
			Yes	No
1 a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items	- (ł	[
	X First-class or charter travel	- ({	l
	Travel for companions Payments for business use of personal residence		{	l
	Tax indemnification and gross-up payments Health or social club dues or initiation fees		}	
	Discretionary spending account Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or		1	
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	<u> </u>	L _X
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2	X	<u> </u>
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
	CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to	l l	ļ	
	establish compensation of the CEO/Executive Director, but explain in Part III			l
	X Compensation committee			
	Independent compensation consultant			
	X Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing	1		
	organization or a related organization.		ł	1
а	Receive a severance payment or change-of-control payment?	4a	<u> </u>	X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	<u> </u>	X
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a·c, list the persons and provide the applicable amounts for each item in Part III			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation		ļ	
	contingent on the revenues of.			
а	The organization?	<u>5</u> a	L	X
b	Any related organization?	5b		X_
	If "Yes" to line 5a or 5b, describe in Part III			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of.	1		Ì
а	The organization?	6a	<u> </u>	X
þ	Any related organization?	6b	<u> </u>	X
	If "Yes" on line 6a or 6b, describe in Part III	1	}	i
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7	<u> </u>	X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the	}	1	}
_	initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	8		X_
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in	- {	1	}
_	Regulations section 53 4958-6(c)?	9	1	1

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2015

NELLIE MAE EDUCATION FOUNDATION, INC.

Page 2

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed 04 - 2755323Schedule J (Form 990) 2015

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(C) Retirement and	able	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	Denents	(a)-(i)(a)	in column (b) reported as deferred on prior Form 990
(1) NICHOLAS C. DONOHUE	(E)	407,492.	0	0	41,275.	23,905.	472,672.	0
	Ξ	0	0	0	0	0	0	0
(2) MICHAEL CAREY	()	220,720.	0.	0	36,380.	16,437.	273,537.	0
TREASURER & DIR, OF FINANCE] (ii)	0	0	0	0	0	0	0
(3) MARY HARRISON	(i)	221,310.	0	0	36,244.	16,437.	273,991.	0
VP OF PROGRAMS	(ii)	0	0	0	0	0	0	0
(4) SHAUN ADAMEC	(i)	165,676.	0	0.	26,297.	23,802.	215,775.	
DIR, OF STRATEGIC COMMUNICATIONS	(ii)	0	0	.0	• 0	0	1	
(5) LYNN D'AMBROSE	(i)	148,207.	0	.0	3,241.	15,695.	167,143.	į
SENIOR PROGRAM OFFICER	(ii)	0.	0.	0	• 0	0	0.	
(6) CHARLES TOULMIN	(i)	146,173.	0	0	22,410.	23,729.	192,312.	0
DIRECTOR OF POLICY	(ii)	0	0	0	0	0	0.	0.
(7) JESSICA SPOHN	(i)	133,170.	0	0.	19,696.	23,676.	176,542.	0.
SENIOR PROGRAM OFFICER	(ii)	0	0	0	• 0	0	0	0
(8) PAUL MARSH	(i)	124,203.	0	0	18,110.	23,648.	165,961.	0
IT MANAGER	(ii)	0	0.	0	0	0	0	0
(9) EVE GOLDBERG	8	123,088.	0	0.	17,899.	22,827.	163,814.	0.
DIR, OF RESEARCH	(ii)	0	0	0.	0	0	0	0.
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532112 10-14-15

Schedule J (Form 990) 2015 NELLIE MAE EDUCATION FOUNDATION, INC. Part III Supplemental Information	04-2755323 Page 3
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information	nplete this part for any additional information
PART I, LINE 1A:	
THE FOUNDATION DOES NOT, AS A MATTER OF POLICY, PROVIDE FIRST CLASS TRAVEL	31.
TWO EXCEPTIONS WERE MADE THIS YEAR FOR OUR PRESIDENT, WHO WITH PRIOR	
APPROVAL OF OUR BOARD CHAIR, FLEW FIRST CLASS FOR TWO BUSINESS MEETINGS	
CROSS COUNTRY.	
	Schedule J (Form 990) 2015
532113	

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047 Open to Public Inspection

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

Name of the organization Employer identification number NELLIE MAE EDUCATION FOUNDATION, 04-2755323 INC. FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: EDUCATIONAL ORGANIZATIONS. FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: ESSENTIALLY UNDERSERVED LEARNERS - TO OBTAIN THE SKILLS, KNOWLEDGE AND SUPPORTS NECESSARY TO BECOME CIVICALLY ENGAGED, ECONOMICALLY SELF-SUFFICIENT LIFE-LONG LEARNERS. FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS: SKILLS THAT AREN'T ADDRESSED IN A TRADITIONAL CURRICULUM, SUCH AS CRITICAL THINKING, PROBLEM SOLVING, COMMUNICATIONS, COLLABORATION, SELF-DIRECTED LEARNING AND SOCIAL-EMOTIONAL SKILLS. AND WHILE GRADUATION RATES ARE RISING, TOO MANY STUDENTS ARE STILL LEFT BEHIND, AND ALARMING NUMBER OF GRADUATES ARE NOT ADEQUATELY PREPARED FOR COLLEGE OR THE WORKPLACE. THE FOUNDATION WORKS WITH SCHOOLS TO IMPLEMENT THE PRINCIPLES OF STUDENT-CENTERED LEARNING: LEARNING THAT IS PERSONALIZED, ENGAGING, COMPETENCY-BASED AND NOT RESTRICTED TO THE TRADITIONAL CLASSROOM. WE HELP STRENGTHEN WHAT IS WORKING AND SUBSTANTIALLY UPDATE AND IMPROVE POLICIES AND PRACTICES THAT ARE OUTDATED. STUDENTS TAKE GREATER RESPONSIBILITY FOR THEIR LEARNING AND SUPPORT EACH OTHERS' PROGRESS, SO EVERY STUDENT GETS THE SKILLS THEY NEED TO SUCCEED AND CONTRIBUTE TO SOCIETY. WE_AWARD GRANTS PRIMARILY THROUGH OUR FOUR STRATEGIC INITIATIVES:

BUILD PUBLIC UNDERSTANDING AND DEMAND - THE GOAL OF THIS INITIATIVE IS

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 532211 09-02-15

Schedule O (Form 990 or 990-EZ) (2015)

Name of the organization Employer identification number 04-2755323 NELLIE MAE EDUCATION FOUNDATION, INC. TO BUILD STRONGER PUBLIC AWARENESS AND UNDERSTANDING OF INNOVATIVE APPROACHES TO PUBLIC SCHOOLING, WHILE CULTIVATING PUBLIC SUPPORT AND DEMAND FOR STUDENT-CENTERED APPROACHES TO LEARNING. GRANTS UNDER THIS AREA TARGET BOTH GRASSROOTS (COMMUNITY ENGAGEMENT AND ORGANIZING) AND GRASS TOPS (POLICYMAKERS, INFLUENCERS) IN BUILDING AWARENESS, SUPPORT AND DEMAND FOR STUDENT-CENTERED APPROACHES TO LEARNING. THIS INITIATIVE ALSO SEEKS TO SHIFT THE PUBLIC NARRATIVE AROUND PUBLIC EDUCATION FROM ONE THAT FOCUSES ON INDIVIDUAL ACHIEVEMENT AND SUCCESS. TO ONE THAT EMPAHISIZES THE PUBLIC GOOD THAT EDUCATION PLAYS IN THE BUILDING OF COMMUNITIES AND ENGAGED STAKEHOLDERS. THE FOUNDATION DISTRIBUTED \$4.9 MILLION TO EDUCATIONAL ORGANIZATIONS TO PROMOTE AND PROVIDE A FORUM TO BUILD PUBLIC UNDERSTANDING ON STUDENT-CENTERED APPROACHES TO LEARNING. BUILD EDUCATOR OWNERSHIP, LEADERSHIP, AND CAPACITY - TO IMPLEMENT STUDENT-CENTERED APPROACHES TO LEARNING WITH RIGOR AND RELIABILITY, TOOLS AND RESOURCES MUST BE DEVELOPED AND UTILIZED. GRANTS UNDER THIS INITIATIVE FOCUS ON BUILDING EDUCATOR CAPACITY THROUGH PROJECTS LIKE TEACHER AND PRINCIPAL FELLOWSHIPS, AIMING TO EMPOWER EDUCATORS TO IMPLEMENT HIGH QUALITY, RIGOROUS AND EQUITABLE STUDENT-CENTERED PRACTICES IN THEIR CLASSROOMS AND DISTRICTS. ADDITIONALLY, THIS INITIATIVE FOCUSES ON DEVELOPING INSTRUCTIONAL AND PROFESSIONAL TOOLS TO SUPPORT EDUCATORS IN THE IMPLEMENTATION OF STUDENT-CENTERED APPROACHES TO LEARNING. THE FOUNDATION DISTRIBUTED \$.7 MILLION TO EDUCATIONAL ORGANIZATIONS BUILDING EDUCATOR CAPACITY TO SUPPORT THE IMPLEMENTATION OF STUDENT-CENTERED APPROACHES TO LEARNING.

<u>DEVELOP EFFECTIVE SYSTEMS DESIGNS - A CORNERSTONE OF THE FOUNDATION'S</u>
532212 09-02-15

Schedule O (Form 990 or 990-EZ) (2015)

Name of the organization **Employer identification number** NELLIE MAE EDUCATION FOUNDATION, INC. 04-2755323 MISSION IS TO PROMOTE THE TRANFORMATION OF EDUCATION SYSTEMS TOWARDS STUDENT-CENTERED APPROACHES. THIS INITIATIVE FOCUSES ON REIMAGINING SCHOOL DISTRICTS - INCLUDING WORK SUCH AS PILOTING REDESIGNS OF CENTRAL OFFICE PURPOSES, GOVERANCE MODELS AND PILOTS IN THE AREAS OF DIGITAL BADGING AND ASSESSMENT. ADDITIONALLY, THIS INITIATIVE INCLUDES SUPPORTING THE DEVELOPMENT OF FAVORABLE POLICY CONDITIONS (FEDERAL, STATE AND LOCAL) TO SUPPORT AND HELP SCALE STUDENT-CENTERED APPROACHES. THE FOUNDATION DISTRIBUTED \$9 MILLION TO NEW ENGLAND SCHOOL DISTRICTS' AND OTHER EDUCATIONAL ORGANIZATIONS' SUPPORTING WORK AROUND STUDENT-CENTERED APPROACHES TO LEARNING. ADVANCE QUALITY AND RIGOR OF STUDENT-CENTERED PRACTICES - THIS INITIATIVE FOCUSES ON BUILDING A RESEARCH BASE OF EVIDENCE SUPPORTING STUDENT-CENTERED LEARNING, EVALUATING STUDENT-CENTERED PRACTICES IN HIGH SCHOOLS, DEVELOPING RESEARCHER-PRACTITIONER COLLABORATIONS, AND ESTABLISHING CRITERIA FOR WHAT IT TAKES TO PUT HIGH QUALITY, STUDENT-CENTERED LEARNING INTO PRACTICE. WORK IN THIS INITIATIVE INCLUDES PROJECTS SUCH AS DEVELOPING RESEARCH AND PRACTITIONER NETWORKS TO IDENTIFY COMMON PROBLEMS IN IMPLEMENTING STUDENT-CENTERED LEARNING, AND DETERMINE INNOVATIVE APPROACHES TO SOLVING SUCH PROBLEMS. THE FOUNDATION DISTRIBUTED \$2.9 MILLION TO BUILD AND DEVELOP KNOWLEDGE ON

FORM 990, PART VI, SECTION B, LINE 11:

STUDENT-CENTERED APPROACHES TO LEARNING.

REVIEW OF FORM 990 - MANAGEMENT OF THE FOUNDATION PLAYED AN ACTIVE AND KEY

ROLE IN THE PREPARATION AND REVIEW OF FORM 990. MANAGEMENT DRAFTED THE FORM

990 AND FORWARDED TO THE FOUNDATION'S INDEPENDENT CPA FIRM, WHICH REVIEWED

THE FILING FOR COMPLETENESS, ACCURACY, AND FINALIZATION BEFORE FILING. THE

532212 00-02-15

Schedule O (Form 990 or 990-EZ) (2015)

Schedule O (Form 990 or 990 EZ) (2015) **Employer identification number** Name of the organization 04-2755323 NELLIE MAE EDUCATION FOUNDATION, INC. FORM 990 WAS REVIEWED AND APPROVED BY THE AUDIT COMMITTEE AND WAS PROVIDED TO THE FULL BOARD BEFORE IT WAS FILED. FORM 990, PART VI, SECTION B, LINE 12C: THE FOUNDATION'S CONFLICT OF INTEREST POLICY REQUIRES AN ANNUAL CONFLICT OF INTEREST DISCLOSURE FORM FROM BOARD AND STAFF MEMBERS REGARDING OUTSIDE AFFILIATIONS AS A DIRECTOR, TRUSTEE OR OFFICER. THE POLICY REQUIRES DISCLOSURE OF ANY TRANSACTIONS, FINANCIAL ARRANGEMENT OR BUSINESS RELATIONSHIP EACH BOARD MEMBER, STAFF MEMBER AND OR FAMILY MEMBER MAY HAVE WITH THE FOUNDATION. UPON SUBMISSION OF THE CONFLICT DISCLOSURE FORM, A LISTING OF EACH BOARD AND STAFF MEMBER IS COMPILED ALONG WITH AFFILIATIONS. THE LIST IS MONITORED DURING THE YEAR FOR ANY UPDATES. BOARD MEMBERS ARE REQUIRED TO RECUSE THEMSELVES FROM VOTING ON TRANSACTIONS IN WHICH THE INDIVIDUAL OR A MEMBER OF HIS OR HER IMMEDIATE FAMILY OR AN AFFILIATED ENTITY OF ANY SUCH PERSON HAS A FINANCIAL INTEREST. STAFF MEMBERS ARE REQUIRED TO RECUSE THEMSELVES FROM THE GRANT MAKING PROCESS IF ANY SUCH AFFILIATION EXISTS. ANY POTENTIAL CONFLICTS ARE DETERMINED BY THE BOARD WHICH WILL IMPOSE RESTRICTIONS UPON AFFECTED PARTIES ACCORDINGLY. FORM 990, PART VI, SECTION B, LINE 15: THE EXECUTIVE FINANCE COMMITTEE OF THE BOARD OF DIRECTORS CONSIDERS COMPARABILITY DATA, PROVIDED BY AN INDEPENDENT CONSULTANT, WHEN DETERMINING COMPENSATION FOR STAFF MEMBERS AND THE BOARD OF DIRECTORS. DOCUMENTATION

INCLUDING THE RELIED UPON COMPARABILITY DATA, DELIBERATION PROCESS, AND DECISIONS ARE INCLUDED IN BOARD MATERIALS AND ARE RECORDED IN COMMITTEE AND BOARD MINUTES. IN ALL CASES, COMPENSATION IS DETERMINED BY INDEPENDENT PERSONS. THIS PROCESS WAS MOST RECENTLY UNDERTAKEN IN 2015.

Name of the organization NELLIE MAE EDUCATION FOUNDATION, INC.	Employer identification number 04-2755323
FORM 990, PART VI, SECTION C, LINE 19:	
MANAGEMENT WILL PROVIDE UPON REQUEST GOVERNING DOCUMENTS	AND THE CONFLICT
OF INTEREST POLICY TO THE PUBLIC. CURRENTLY THE FOUNDATION	N'S AUDITED
FINANCIAL STATEMENTS AND TAX RETURNS APPEAR ON THE ORGANI	ZATION'S WEBSITE
AND ARE AVAILABLE UPON REQUEST.	