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### DLN: 93493319054126

Department of the Treasury

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

▶ Do not enter social security numbers on this form as it may be made public

**Return of Organization Exempt From Income Tax** 

▶ Information about Form 990 and its instructions is at <u>www IRS gov/form990</u>

Inspection

ntern	al Rever	nue Servi	ce					
			lendar year, or tax year beginning  C Name of organization	ng 01-01-2015 , and ending 12-31-2	015	D Empl	lavar idar	-tifesteen neember
	eck if ap Idress cl	plicable	SOUTHERN EDUCATION FOUNDATION	ON INC			-	ntification number
	ame cha	_	% TROY D JOHNSON				5562388	3
In	ıtıal retu	ırn	Doing business as					
Fı eturn.	nal <sup>/</sup> termina	ated		nail is not delivered to street address) Room/	suite	E Telep	hone num	ber
	nended i		135 AUBURN AVENUE NE 2ND FLOO	R		(404	) 523-0	001
ПАр	plication	pending	City or town, state or province, coul ATLANTA, GA 30303	ntry, and ZIP or foreign postal code		<b>G</b> Gross	receipts s	\$ 8,541,303
			<b>F</b> Name and address of princip	pal officer	H(a)			
			DR CYRIL K MCGUIRE			Is this a grou subordinates		Tor Yes <b>√</b>
			135 AUBURN AVENUE NE 2N   ATLANTA,GA 30303	ID FL		No		1
<b>T</b> a	x-exem	pt status		Insert no ) 4947(a)(1) or 527		Are all suboro included?	ainates	∏Yes ∏ No
ıw	ehsit e	· <b>&gt;</b> \\\\\\	w southerneducation org	, , , , , , , , , , , , , , , , , , , ,		If "No," attac	h a lıst	(see instructions)
			w southerneaded ton org			Group exemp		
<b>∢</b> For	n of org	anızatıon	Corporation Trust Associa	ation Other >	L Yea	r of formation	L867 <b>M</b>	State of legal domicile G
Pa	rt I	Sum	ımary					
Governance	TC	DIMPR	scribe the organization's missior OVE THE QUALITY OF LIFE FO ING EQUITY AND EXCELLENC	R DISADVANTAGED RESIDENTS I	N THE SO	UTHERN UN	ITED ST	ATES BY
Ě								
Š	<b>2</b> C	heck th	nis box 🕨 🥅 if the organization di	scontinued its operations or dispose	d of more t	han 25% of i	ts net as	sets
	3 N	lumber	of voting members of the govern	ng body (Part VI, line 1a)			3	9
ě.				of the governing body (Part VI, line 1			4	9
Activities &	<b>5</b> T	otal nui	mber of individuals employed in o	calendar year 2015 (Part V, line 2a)			5	13
AC	<b>6</b> T	otal nui	mber of volunteers (estimate if n	ecessary)			6	9
				art VIII, column (C), line 12			7a	0
	<b>b</b> Ne	et unrela	ated business taxable income fro	om Form 990-T, line 34	· · ·		7b	
		6	oboto and analysis (Doubly III I	- 4 ls )		Prior Year		Current Year
ā	8		= :	ne 1h)	•	1,470	0	6,696,000
Ravenua	10			n (A ), lines 3 , 4 , and 7 d )		1,554		672,846
Ğ.	11		· · · · · · · · · · · · · · · · · · ·	lines 5, 6d, 8c, 9c, 10c, and 11e)			637	1,178
	12	Total 12)	revenue—add lines 8 through 11	(must equal Part VIII, column (A), I	ıne	3,026	,025	7,370,024
	13	Grant	s and sımılar amounts paıd (Part	IX, column (A), lines 1-3)		755	,646	677,688
	14	Benef	its paid to or for members (Part 1	X, column (A), line 4)			0	(
Ş	15			ee benefits (Part IX, column (A), lines	5	1,614	.,757	1,660,511
nse	16a	5-10 Profe	<b>,</b>	, column (A), line 11e)			0	
Expenses	ь		undraising expenses (Part IX, column (D	, ,,	•			
ш	17			lines 11a-11d, 11f-24e)	`. <del>                                    </del>	796	,746	758,902
	18	Total	expenses Add lines 13-17 (mu	st equal Part IX, column (A), line 25	)	3,167	,149	3,097,101
	19	Rever	nue less expenses Subtract line	18 from line 12		-141	,124	4,272,923
Net Assets or Fund Balances					Begini	ning of Curren	t Year	End of Year
sset agai	20	Total	assets (Part X, line 16)		. —	23,120	,169	26,399,087
¥ 26	21		liabilities (Part X, line 26)			59	,578	145,866
žŢ	22	Net as	ssets or fund balances Subtract	line 21 from line 20		23,060	,591	26,253,221
Jnde ny k	nowled irer ha	Ities of Ige and s any k		amined this return, including accomp nplete Declaration of preparer (other			n all info	
Her			Y JOHNSON OFFICER					
		Туре	e or print name and title					
			Print/Type preparer's name MARC AZAR	Preparer's signature MARC AZAR	Date	Check   ıf	PTIN P00746	5804
Paid	ľ	L				self-employed	1	
		_   F	Firm's name > SMITH & HOWARD PC	•		Fırm's EIN ▶		
Pre	pare Onl	r	Firm's name SMITH & HOWARD PC Firm's address > 271 17TH STREET SUIT	TE 1600		Firm's EIN ► Phone no (40	04) 874-62	244

ATLANTA, GA 30363

. ✓Yes No

Form 990 (2015)

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

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25b

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28b

28c

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Yes

Form 990 (2015)

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ΙV	Checklist of Required Schedules	(continued)	ī

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	<b>24</b> c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.  Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L. Part I	25a		No

**b** Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

instructions for applicable filing thresholds, conditions, and exceptions)

year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? 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?

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

**b** A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . .

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I.

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Pait II, III, or IV,

**b** If "Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled

Did the organization conduct more than 5% of its activities through an entity that is not a related organization

an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV . . . .

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations

sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I . . . . . . . . . . . . .

entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . . Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

member of any of these persons? *If "Yes," complete Schedule L, Part III* . . . . . . . . . . . . . Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

Part V	Statements	Regarding	Other	IRS Filin	as and	Tax	Complianc
--------	------------	-----------	-------	-----------	--------	-----	-----------

Pai	t V	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this		V			
		eneak in seneaule o contains a response of note to any line in this	- urc	<b>v</b>	·	Yes	No
1a	Enter	the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	22			
		the number of Forms W-2G included in line 1a Enter -0 - if not applicable	1b	0			
		L ie organization comply with backup withholding rules for reportable payments to	o venc	fore and reportable			
٠		ig (gambling) winnings to prize winners?		· · · · · ·	1c	Yes	
2a	Enter	the number of employees reported on Form W-3, Transmittal of Wage and					
		tatements, filed for the calendar year ending with or within the year covered	3.	13			
<b>L</b>	•	s return	2a		2b	Yes	
U		If the sum of lines 1a and 2a is greater than 250, you may be required to e-file				103	
3a	Did th	e organization have unrelated business gross income of \$1,000 or more during	g the y	/ear?	3a		No
b	If "Yes	s," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanati</i> c	on ın S	Schedule O	3b		
4a	Atany	y time during the calendar year, did the organization have an interest in, or a si	gnatu	re or other authority			
		a financial account in a foreign country (such as a bank account, securities acc	count,	or other financial	4a		
	accou	int)?			70		No
Ь		s," enter the name of the foreign country					
	(FBAR	nstructions for filing requirements for FinCEN Form 114, Report of Foreign Bank R)	k and i	Financial Accounts			
5a	,	' he organization a party to a prohibited tax shelter transaction at any time durir	na the	tax vear?	5a		No
		ny taxable party notify the organization that it was or is a party to a prohibited t		ŀ	5b		No
					30		
Ü	11 16	s," to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a		the organization have annual gross receipts that are normally greater than \$10			6a		No
_	-	ization solicit any contributions that were not tax deductible as charitable cont		ŀ			
D		s," did the organization include with every solicitation an express statement th not tax deductible?	nat sud	cn contributions or giπs	6b		
7	Organ	izations that may receive deductible contributions under section 170(c).					
а		e organization receive a payment in excess of \$75 made partly as a contributi		d partly for goods and	7a		No
		es provided to the payor?					
		s," did the organization notify the donor of the value of the goods or services p			7b		
С		le organization sell, exchange, or otherwise dispose of tangible personal proper orm 8282?		which it was required to	<b>7</b> c		No
d	If"Ye	s," indicate the number of Forms 8282 filed during the year $\ldots$ .	7d				
	Did th	ie organization receive any funds, directly or indirectly, to pay premiums on a p	ercon	al hanafit contract?			
C	Dia tii	ic organization receive any lands, directly of indirectly, to pay premiums on a p	)C13011	ar benefit contract.	7e		No
f	Did th	e organization, during the year, pay premiums, directly or indirectly, on a perso	onal be	enefit contract?	<b>7</b> f		No
g		organization received a contribution of qualified intellectual property, did the o	rganız	ation file Form 8899 as	<b>7</b> g		
h	requir If the	organization received a contribution of cars, boats, airplanes, or other vehicles	 s. did 1	the organization file a	, g		
		1098-C?	•		7h		
8	-	oring organizations maintaining donor advised funds.					
		donor advised fund maintained by the sponsoring organization have excess but the year?	siness	s noidings at any time			
0-		, ie sponsoring organization make any taxable distributions under section 4966	2		8 9a		
		le sponsoring organization make any taxable distributions under section 4500 in section 4500 in section 4500 in		orcon?	9b		
10		on <b>501(c)(7) organizations.</b> Enter	ateu p	erson,	30		
		tion fees and capital contributions included on Part VIII, line 12	10a				
		receipts, included on Form 990, Part VIII, line 12, for public use of club	10b				
-	facılıtı	· ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '			, ,		
		on 501(c)(12) organizations. Enter	. 1				
		Income from members or shareholders	11a				
b		Income from other sources (Do not net amounts due or paid to other sources st amounts due or received from them )	11b				
12a	Section	ت o <b>n 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990	) in lie	u of Form 10412	12a		
		s," enter the amount of tax-exempt interest received or accrued during the		2 311 31111 10 71'	a		
_	year	and the second second of decided during the	12b				
13	Section	on 501(c)(29) qualified nonprofit health insurance issuers.					
а	Is the	organization licensed to issue qualified health plans in more than one state? <b>N</b>	lote S	ee the instructions for			
		onal information the organization must report on Schedule O			<b>13</b> a		
b		the amount of reserves the organization is required to maintain by the states	13b				
_		ch the organization is licensed to issue qualified health plans					
		the amount of reserves of fland	13c	<u> </u>	14a		l No
		ie organization receive any payments for indoor tanning services during the tax s," has it filed a Form 720 to report these payments? <i>If "No," provide an explana</i>	•	•	14a 14b		NO
ע	11 16	5, has to med a Form 720 to report these payments of Mo, provide an explana	GOII III	Schedule U	TAN		

orm 9	90 (2015)					Pag
Part	<b>VI Governance, Management, and Disclosure</b> For each "Yes" response to lines 2 through 7b below, and for a "No describe the circumstances, processes, or changes in Schedule O.			or 10	Ob belo	w,
	Check if Schedule O contains a response or note to any line in this Part VI		 			
Sec	tion A. Governing Body and Management					
					Yes	N
	Enter the number of voting members of the governing body at the end of the tax year	1a	9			
ŀ	f 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					

Section C. Disclosure

L7	List the States with which a copy of this Form 990 is required to be filed	
	· · · · · · · · · · · · · · · · · · ·	0

Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply

**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? . . . . . . . . . . . . . . . . . .

- Own website Another's website Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of
- interest policy, and financial statements available to the public during the tax year State the name, address, and telephone number of the person who possesses the organization's books and records ▶TROY D JOHNSON 135 AUBURN AVENUE NE 2ND FL ATLANTA, GA 30303 (404) 523-0001

16b

## Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

#### 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, or 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

<b>(A)</b> Name and Title	(B) A verage hours per week (list any hours	more pers	than on is	one bot	note bo:	chec , unle n offic rustee	ess er	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	from the organization and related organizations
(1) FRED FRELOW	2 0									
TRUSTEE	0 0	×						0	0	U
(2) ESTHER AGUILERA	2 0									
TRUSTEE	0 0	×						0	0	0
(3) DR ALICE BROWN	2 0									
TRUSTEE	0 0	×						0	0	0
(4) DR SUSAN JOHNSTON	5 0									
CHAIR, TRUSTEE	0 0	×						0	0	0
(5) DICK MOLPUS	2 0									
TRUSTEE	0 0	×						0	0	0
(6) DR WARREN SIMMONS	2 0									
TRUSTEE	0 0	×						0	0	0
(7) MICHAEL NETTLES	2 0									
TRUSTEE	0 0	×						0	0	0
(8) LISA HAMILTON SECRETARY, TRUSTEE	5 0	×						0	0	0
(9) MILTON LITTLE	5 0									
TREASURER, TRUSTEE	0 0	×						0	0	0
(10) STEPHEN SUITTS	55 0									
VICE PRESIDENT	0 0			X				151,646	0	35,939
(11) TROY D JOHNSON CFO/COO	50 0			х				164,000	0	28,770
(12) DR CYRIL K MCGUIRE	50 0									
CEO	0 0			×				289,000	0	51,787
(13) TOMEKA HART	50 0									
VICE PRESIDENT	0 0			×				154,458	0	4,471
		<b> </b>		t						

Part VII	Section A	. Officers,	Directors,	Trustees,	Key Employee:	s, and Highest	Compensated	Employees (continued)
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	<b>(A)</b> Name and Title	(B) Average hours per week (list any hours	more t	han o	ne b both	oox, an d	heck unless officer stee)	;	( <b>D)</b> Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
		for related organizations below dotted line)	individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
1b c	Sub-Total	eets to Part VII. S					. <b>&gt;</b>				
d	Total (add lines 1b and 1c)				٠.	٠.	· •		759,104	0	120,967

\$100,000 of reportable compensation from the organization > 4

3	Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	,		
	on the fat if res, complete schedule stor such marviada.	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule I for such person	5		No

**Section B. Independent Contractors** Complete this table for your five highest compensated independent contractors that received more than \$100,000 of

compensation from 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	<b>(C)</b> Compensation				
Name and dusiness address	Description of services	Compensation				

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization  $\blacktriangleright$  0

Yes

No

Form 99	0 (20	15)						Page <b>S</b>
Part V	100	Statement o						
		Check If Schedi	ule O contains a respoi	nse or note to any lir	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
र र	1a	Federated cam	paigns 1a					
rant	ь	Membership du	ies <b>1b</b>					
A. G	c	Fundraising eve	ents <b>1</b> c					
Sifts lar	d	Related organiz	zations 1d					
im;	e	Government grants	s (contributions) <b>1e</b>					
tior er S	f	All other contribution	ons, gifts, grants, and <b>1f</b> ot included above	6,696,000				İ
혈	g	Noncash contribution	ons included in lines					
Contributions, Giffs, Grants and Other Similar Amounts	h	1a-1f \$  Total. Add lines	s 1a-1f		6,696,000			
Program Service Revenue	2a b			Business Code	, ,			
±	c							
er vic	d							
S E	e							
ogra	f	All other progra	am service revenue					
ď	g	Total. Add lines	s 2a-2f	•	0			
	3		ome (including dividen ar amounts)		514,925			514,925
	4		stment of tax-exempt bond	F	0			
	5	Royalties		🕨	0			
	6a	Gross rents	(ı) Real	(II) Personal				
	ь	Less rental expenses						
	С	Rental income or (loss)	0	0				
	d	Net rental inco	me or (loss)		0			
	7a	Gross amount from sales of assets other	(i) Securities 1,329,200	(II) O ther				
	ь	than inventory  Less cost or other basis and	1,171,279					
	c	sales expenses Gain or (loss)	157,921					
	d		Ss)		157,921			157,921
Other Revenue	8a	Gross income f events (not inc \$ of contributions See Part IV, lin	luding s reported on line 1c)					
her	.	100	a					
ŏ	b c		penses <b>b</b> (loss) from fundraising	events •	О			
	9a	Gross income f	rom gaming activities ne 19					
	ь		a penses b (loss) from gaming acti	vities	0			
				VICICS ▶	-			
	10a	Gross sales of returns and allo						
	l	Net income or (	oods sold <b>b</b> (loss) from sales of inv		0			
	44-	Miscellaneous		Business Code 900099	1,178			1,178
	11a b	OTHER INCOM	ଏ ⊏	300039	1,170			1,1/6
	c							
	d	All other reven	ue					
	e	Total. Add lines	s 11a-11d	•	1,178			
	12	Total revenue.	See Instructions .	•	7,370,024			674,024

## Part IX Statement of Functional Expenses

Check if Schedule O contains a response or note to any line in this Part 1)								

	Check it schedule o contains a response of note to any line in t		<b>45</b> )		<b>(5)</b>
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	<b>(B)</b> Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	677,688	677,688		
2	Grants and other assistance to domestic individuals See Part IV, line 22	0			
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	885,652	627,798	194,205	63,649
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	615,152	528,335	86,817	
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	44,733	31,818	12,915	
9	Other employee benefits	42,293	30,322	11,971	
10	Payroll taxes		· · · · ·		
	· · · · · · · · · · · · ·	72,681	51,248	19,161	2,272
11	Fees for services (non-employees)				
а	Management	0			
b	Legal	0			
c	Accounting	31,706		31,706	
d	Lobbying	0			
е	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	79,610		79,610	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	32,067	24,777	7,290	
12	Advertising and promotion	0			
13	Office expenses	146,819	101,294	44,521	1,004
14	Information technology	21,054	5,383	15,671	
15	Royalties	0			
16	Occupancy	60,056	42,823	14,772	2,461
17	Travel	201,882	153,018	48,864	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	90,818	88,917	1,901	
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	52,053	9,890	40,602	1,561
23	Insurance	13,764	9,910	3,303	551
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	DUES & SUBSCRIPTIONS	27,427	8,494	17,623	1,310
b	TAXES & LICENSES	1,646		1,646	
c					
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	3,097,101	2,391,715	632,578	72,808
26	Joint costs.Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation  Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Form 9	90 (2	2015)					Page <b>11</b>
Part	: X	Balance Sheet					
		Check if Schedule O contains a response or note to any li	ne ın th	ıs Part X			
					(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			0	1	0
	2	Savings and temporary cash investments			243,748	2	1,750,425
	3	Pledges and grants receivable, net			551,904	3	4,132,231
	4	Accounts receivable, net			0	4	0
	5	Loans and other receivables from current and former offi key employees, and highest compensated employees C Schedule L	omplet	e Part II of	0	5	0
Assets	6	Loans and other receivables from other disqualified pers section 4958(f)(1)), persons described in section 4958 contributing employers and sponsoring organizations of voluntary employees' beneficiary organizations (see ins II of Schedule L	(c)(3)(E section	3), and   501(c)(9)	0	6	0
SS	7	Notes and loans receivable, net			0	7	0
⋖	8	Inventories for sale or use			0	8	0
	9				16,498	9	21,249
	9 10a	Prepaid expenses and deferred charges  Land, buildings, and equipment cost or other basis		 I	10,490	9	21,249
	IVa	Complete Part VI of Schedule D	10a	1,457,886			
	b	Less accumulated depreciation	<b>10</b> b	1,234,348	268,364	<b>10</b> c	223,538
	11	Investments—publicly traded securities			22,036,875	11	20,268,864
	12	Investments—other securities See Part IV, line 11 $$ .			0	12	0
	13	Investments—program-related See Part IV, line 11 .			0	13	0
	14	Intangible assets			0	14	0
	15	Other assets See Part IV, line 11			2,780	15	2,780
	16	Total assets.Add lines 1 through 15 (must equal line 34	)		23, 120, 169	16	26,399,087
	17	Accounts payable and accrued expenses			59,578	17	145,866
	18	Grants payable			0	18	0
	19	Deferred revenue			0	19	0
	20	Tax-exempt bond liabilities			0	20	0
	21	Escrow or custodial account liability Complete Part IV	of Sche	dule D	0	21	0
lities	22	Loans and other payables to current and former officers, key employees, highest compensated employees, and d					
Liabi		persons Complete Part II of Schedule L			0	22	0
<u>E</u> :	23	Secured mortgages and notes payable to unrelated third	l parties		0	23	0
	24	Unsecured notes and loans payable to unrelated third pa	arties		0	24	0
	25	Other liabilities (including federal income tax, payables and other liabilities not included on lines 17-24) Complete Part X of Schedule D	to relat	ed third parties,			
		Table 19 19 19 19 19 19 19 19 19 19 19 19 19			0	25	145,866
	26	Total liabilities. Add lines 17 through 25			59,578	26	145,866
Net Assets or Fund Balances		Organizations that follow SFAS 117 (ASC 958), check he lines 27 through 29, and lines 33 and 34.	ere ►	√ and complete			
<u>  lar</u>	27	Unrestricted net assets			13,907,696	27	11,318,697
<u>نة</u>	28	Temporarily restricted net assets			8,840,495	28	14,622,124
[ ]	29	Permanently restricted net assets			312,400	29	312,400
<u>.</u>		Organizations that do not follow SFAS 117 (ASC 958), o	heck he	ere 🕨 🦵 and			
ō		complete lines 30 through 34.					
ets	30	Capital stock or trust principal, or current funds				30	
155	31	Paid-in or capital surplus, or land, building or equipment	fund			31	
1 l	32	Retained earnings, endowment, accumulated income, or				32	
ž	33	Total net assets or fund balances			23,060,591	33	26,253,221

34

Total liabilities and net assets/fund balances . . . . . .

23,120,169

34

26,399,087

Form **990** (2015)

# Prior period adjustments .

Part XIII Financial Statements and Reporting

1 Accounting method used to prepare the Form 990

a separate basis, consolidated basis, or both

Single Audit Act and OMB Circular A-133?

Other changes in net assets or fund balances (explain in Schedule O) .

Consolidated basis

**b** Were the organization's financial statements audited by an independent accountant?

Consolidated basis

10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,

If the organization changed its method of accounting from a prior year or checked "Other," explain in

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

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

If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate

c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the

**b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

If the organization changed either its oversight process or selection process during the tax year, explain in

Cash ✓ Accrual COther

Both consolidated and separate basis

Both consolidated and separate basis

Donated services and use of facilities .

Investment expenses .

column (B))

Schedule O

Schedule O

Separate basis

Separate basis

basis, consolidated basis, or both

1

2

3

4

5

6

7

8

9

10

Page **12** 

7,370,024

3,097,101

4,272,923

23,060,591

-1,080,293

26,253,221

No

Νo

Nο

Form 990 (2015)

Yes

Yes

Yes

2a

2b

2c

3a

3b

efile GRAPHIC print - DO NOT PROCESS As Filed Data -

SCHEDULE A

(Form 990 or

Internal Revenue Service Name of the organization

SOUTHERN EDUCATION FOUNDATION INC

(i)

Name of supported organization

Total

990EZ)

Treasury

Department of the

DLN: 93493319054126 OMB No 1545-0047

Employer identification number

13-5562388

Open to Public

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

**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)

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.

Inspection

1		A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
2	<u> </u>	A school described in <b>section 170(b)(1)(A)(ii).</b> (Attach Schedule E (Form 990 or 990-EZ))
3	<u> </u>	A hospital or a cooperative hospital service organization described in <b>section 170(b)(1)(A)(iii).</b>
4		A medical research organization operated in conjunction with a hospital described in <b>section 170(b)(1)(A)(iii).</b> Enter the hospital's name, city, and state
5		An organization operated for the benefit of a college or university owned or operated by a governmental unit described in <b>section</b> 170(b)(1)(A)(iv). (Complete Part II)
6		A federal, state, or local government or governmental unit described in <b>section 170(b)(1)(A)(v).</b>
7	~	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in <b>section 170(b)(1)(A)(vi).</b> (Complete Part II)
8		A community trust described in <b>section 170(b)(1)(A)(vi)</b> (Complete Part II )
9	Γ	An organization that normally receives (1) more than 331/3% 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 331/3% 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 Seesection 509(a)(2). (Complete Part III)
10		An organization organized and operated exclusively to test for public safety See section 509(a)(4).
11 a	Г	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 <b>section 509(a)(3)</b> . Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g  Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the
	ı	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.
b		<b>Type II.</b> 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) <b>You must complete Part IV, Sections A and C.</b>
С	Г	<b>Type III functionally integrated.</b> A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) <b>You must complete Part IV, Sections A, D, and E.</b>
d		<b>Type III non-functionally integrated.</b> 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). <b>You must complete Part IV, Sections A and D, and Part V.</b>
e	Г	Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization
f	Ente	r the number of supported organizations
g		Provide the following information about the supported organization(s)

(iv)

Is the organization

listed in your governing

document?

Yes

(ii)EIN

(iii)

Type of

organization

(described on lines

1-9 above (see instructions))

No

(v)

A mount of

monetary support

(see instructions)

(vi)

A mount of other

support (see

instructions)

supported organization

instructions

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 organiz	ation fails to qua	alify under the	tests listed belo	ow, please com	plete Pa	art III.)	
S	ection A. Public Support							
	Calendar year	(a)2011	<b>(b)</b> 2012	<b>(c)</b> 2013	(d)2014	<b>(e)</b> 20	15	(f)Total
•	fiscal year beginning in) ▶	(4)2011	(8)2012	(6)2013	(4)2014	(0)20	,13	(1)10ta1
1	Gifts, grants, contributions, and	2,074,069	615,125	566,209	1,470,664	-	,696,000	11,422,067
	membership fees received (Do	2,074,009	013,123	300,209	1,470,664	O	,696,000	11,422,067
2	not include any unusual grants ) Tax revenues levied for the							
_	organization's benefit and either							0
	paid to or expended on its behalf							
3	The value of services or facilities							
	furnished by a governmental unit							0
	to the organization without							O
	charge							
4	<b>Total.</b> Add lines 1 through 3	2,074,069	615,125	566,209	1,470,664	6	,696,000	11,422,067
5	The portion of total contributions							
	by each person (other than a							
	governmental unit or publicly							7,228,911
	supported organization) included on line 1 that exceeds 2% of the							7,220,911
	amount shown on line 11, column							
	(f)							
6	Public support. Subtract line 5							4 102 156
	from line 4							4,193,156
S	ection B. Total Support							
	Calendar year	(a)2011	<b>(b)</b> 2012	(c)2013	(d)2014	<b>(e)</b> 20	15	(f)Total
-	fiscal year beginning in) 🟲							
7	Amounts from line 4	2,074,069	615,125	566,209	1,470,664	6	,696,000	11,422,067
8	Gross income from interest,							
	dividends, payments received on	831,459	713,751	558,548	557,185		514,925	3,175,868
	securities loans, rents, royalties and income from similar sources							
9	Net income from unrelated							
•	business activities, whether or							•
	not the business is regularly							0
	carried on							
10	Other income Do not include							
	gain or loss from the sale of	70	12,163	1,061				13,294
	capital assets (Explain in Part		,	, I				,
	VI)							
11	<b>Total support.</b> Add lines 7 through 10							14,611,229
12	Gross receipts from related activit	ies, etc (see insti	ructions)	I		12		27,092
13	First five years. If the Form 990 is	•	·	third fourth or fi	fth tax vear as a s			· ·
	check this box and <b>stop here</b>				'			organización,
S	ection C. Computation of Pu	blic Support P	ercentage					
14	Public support percentage for 201	• • • • • • • • • • • • • • • • • • • •		11. column (f))		14		28 698 %
- · 15	Public support percentage for 201			11/00/4////		_		
		•			1.4 2.2 +/20/	15	1 - 41-	32 781 %
тоя	33 1/3% support test—2015.If the	-			ne 14 is 33 1/3%	or more	, cneck th	_
h	and <b>stop here.</b> The organization qu	•			and line 15 is 22	1/20/2 or	more che	►
U	33 1/3% support test—2014.If the	_			and line to 12 22	1/370 01	more, clie	► CK tills
172	box and stop here. The organization 10%-facts-and-circumstances test				e 13.16a or 16h	. and line	- 14	F 1
_ / d	is 10% or more, and if the organize	_			, ,	•		
	in Part VI how the organization me							ted
	organization			: 5 - :	,	,	, - 'FF''	▶ 🗸
<b>L</b>	10%-facts and sircumstances tool	-2014 If the orga	nization did not c	hack a boy on line	0 1 2 1 6 5 1 6 b ou	r 1 7 2 2 r	ad line	- I <del>-</del>

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

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

Se	ction A. Public Support						
	Calendar year	(a)2011	<b>(b)</b> 2012	(c)2013	(d)2014	(e)2015	<b>(f)</b> ⊤otal
•	iscal year beginning in)	(4)2011	(5)2012	(6)2010	(4)2011	(0)2010	(1)10ta1
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						
4	Tax revenues levied for the organization's benefit and either						
	paid to or expended on its behalf						
5	The value of services or facilities						
•	furnished by a governmental unit						
	to the organization without charge						
6	Total. Add lines 1 through 5						
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						
_	Add lines 7a and 7b						
8	<b>Public support.</b> (Subtract line 7c						
	from line 6 )						
Se	ction B. Total Support				1		I
	Calendar year			1	I	I	
(or f	iscal year beginning in)	<b>(a)</b> 2011	<b>(b)</b> 2012	(c)2013	( <b>d)</b> 2014	<b>(e)</b> 2015	<b>(f)</b> Total
9	A mounts 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 Add lines 10a and 10b						
C	Net income from unrelated						
11	business activities not included						
	in line 10b, whether or not the						
	business is regularly carried on						
12	Other income Do not include						
	gain or loss from the sale of						
	capital assets (Explain in Part						
	VI)						
13	Total support. (Add lines 9, 10c,						
14	11, and 12)  First five years.If the Form 990 is f	or the organization	n's first second	thurd fourth or	fifth tay year ac a	section 501/c	V3) organization
14	•	or the organization	on s mist, second	, tillia, louitii, oi	ilitii tax yeal as a	1 5600001 501(0	)(3) organization,  ▶ □
	check this box and stop here	lia Cunnant D					
	ction C. Computation of Pub						
15	Public support percentage for 2015	(line 8, column	(f) divided by line	: 13, column (f))		15	
16	Public support percentage from 201	l 4 Schedule A, P	art III, line 15			16	
Se	ction D. Computation of Inv	estment Inco	me Percenta	ae			
17	Investment income percentage for				nn (f))	14-1	
	· · · · · ·	•		•	···· (1 <i>))</i>	17	
18	Investment income percentage from	n <b>2014</b> Schedule	A, Part III, line	1 /		18	
19a	<b>33 1/3% support tests—2015.</b> If the	organization did	not check the bo	ox on line 14, and	l line 15 is more t	than 33 1/3%, a	ind line 17 is not
	more than 33 1/3%, check this box	and <b>stop here.</b> T	he organization q	ualıfıes as a publ	icly supported or	ganızatıon	▶┌
b	<b>33 1/3% support tests—2014.</b> If the	organization did	not check a box	on line 14 or line	19a, and line 16	ıs more than 3	3 1/3% and line
	18 is not more than 33 1/3%, check	this box and <b>st</b>	<b>op here.</b> The orga	nızatıon qualıfıes	as a publicly sup	ported organiz	ation 🕨 🗍
20	Private foundation. If the organizati	on did not check	a box on line 14	. 19a. or 19b. ch	eck this box and	see instruction	s ▶⊤ˈ

### Part IV Supporting Organizations

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

	I, complete Sections A and D, and complete Part V)			
Se	ction A. All Supporting Organizations			
	Averally of the community of community of community of community of the community of community o		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents?  If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)?  If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section	2		
	509(a)(1) or (2)			<u> </u>
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)?  If "Yes," answer (b) and (c) below	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)?  If "Yes," describe in <b>Part VI</b> when and how the organization made the determination	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?	<b>3</b> c		
4a	If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use  Was any supported organization not organized in the United States ("foreign supported organization")?			l
	If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization?	4b		
	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	4c		
	organization was used exclusively for section 170(c)(2)(B) purposes			l
5a	Did the organization add, substitute, or remove any supported organizations during the tax year?  If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in	5b		
c	the organization's organizing document? <b>Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?	5c		
	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to	J.		
	anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in <b>Part VI</b> .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990)	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?  If "Yes," complete Part II of Schedule L (Form 990)	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509 (a)(1) or (2))? If "Yes," provide detail in <b>Part VI</b> .	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in <b>Part VI</b> .	9b		
c	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in <b>Part VI</b> .	<b>9</b> c		
0a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)	<b>10</b> b		
1	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	<b>11</b> a		
	A family member of a person described in (a) above?	11b		
c	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	<b>11</b> c		

Part IV	Supporting	Organizations	(continued

I GIC IV		аррог	9	Oi guilleu	LIOIIS	(continue	ч,
Section	n R	Tyne	T Si	innorting	Orga	nization	_

			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to 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 <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization?  If "Yes," explain in <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization	2		

Section C. Type II Supporting Organization	Section	C.	Type	II	Supporting	Organization	s
--	---------	----	------	----	------------	--------------	---

			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or			
	trustees of each of the organization's supported organization(s)?			
	If "No," describe in <b>Part VI</b> how contiol or management of the supporting organization was vested in the same persons			
	that controlled or managed the supported organization(s)	1		

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	of		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization?  If "No," explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s)	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year?  If "Yes." describe in <b>Part VI</b> the role the organization's supported organizations played in this regard	3		

#### Section E. Type III Functionally-Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satis	fy the Integral Part Test during the year (see instructions)

- The organization satisfied the Activities Test Complete line 2 below
- The organization is the parent of each of its supported organizations. Complete line 3 below

С		i ne orga instructi	nization supported a governmental entity. Describe in Part VI now you supported a government entity (see ons)	эe
2	<u>A ctivit</u>	ies Test	_Answer (a) and (b) below.	Y
а			all of the organization's activities during the tax year directly further the exempt purposes of the	

	a 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 those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities			
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in?  If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement			
3	Parent of Supported Organizations Answer (a) and (b) below.			

- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of 3a each of the supported organizations? Provide details in Part VI
- **b** Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard

3b

	Check here if the organization satisfied the Integral Part Test as a qualifying tr Type III non-functionally integrated supporting organizations must complete S			ructions. All other
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
	Net short-term capital gain	1		
	Recoveries of prior-year distributions	2		
	Other gross income (see instructions)	3		
	Add lines 1 through 3	4		
	Depreciation and depletion	5		
i	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
,	Other expenses (see instructions)	7		
;	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
	Aggregate fair market value of all non-exempt-use assets (see	1		
_	instructions for short tax year or assets held for part of year)	<b>—</b>		
a L	A verage monthly value of securities	1a 1b		
b	A verage monthly cash balances			
C	Fair market value of other non-exempt-use assets	1c 1d		+
d	Total (add lines 1a, 1b, and 1c)  Discount claimed for blockage or other factors	La		
e	(explain in detail in Part VI)			
	Acquisition indebtedness applicable to non-exempt use assets	2		
	Subtract line 2 from line 1d	3		
	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
	Multiply line 5 by 035	6		
	Recoveries of prior-year distributions	7		
	Minimum Asset Amount (add line 7 to line 6)	8		
	Section C - Distributable Amount			Current Year
	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
	Enter 85% of line 1	2		
	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
	Enter greater of line 2 or line 3	4		
	Income tax imposed in prior year	5		
	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
	Check here if the current year is the organization's first as a non-functionally-instructions)	ntegrate	d Type III supporting	organization (see

Part V Type III Non-Functionally Integra	ated 509(a)(3) Suppo	rting Organizations (c	ontinued)				
Section D - Distributions			Current Year				
1 Amounts paid to supported organizations to accomp	olish exempt purposes						
2 Amounts paid to perform activity that directly furthe excess of income from activity	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity						
3 Administrative expenses paid to accomplish exemp							
4 Amounts paid to acquire exempt-use assets							
5 Qualified set-aside amounts (prior IRS approval rec	uured)						
6 Other distributions (describe in Part VI) See instru							
·	ic tions						
7 Total annual distributions. Add lines 1 through 6							
<b>8</b> Distributions to attentive supported organizations t details in Part VI) See instructions	o which the organization is r	esponsive (provide					
9 Distributable amount for 2015 from Section C, line	6						
10 Line 8 amount divided by Line 9 amount							
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-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 requiredsee instructions)							
3 Excess distributions carryover, if any, to 2015							
a .							
b c							
d From 2013							
e From 2014							
f Total of lines 3a through e							
<b>g</b> Applied to underdistributions of prior years							
<b>h</b> Applied to 2015 distributable amount							
i Carryover from 2010 not applied (see instructions)							
j 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>b</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)							
<b>7 Excess distributions carryover to 2016.</b> Add lines 31 and 4c							
8 Breakdown of line 7							
a							
b							
c Excess from 2013							
d From 2014							
<b>e</b> From 2015							
		Schodulo A	/Form 990 or 990-F7) /2015				

## 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).

## Facts And Circumstances Test

PART II, LINE 17A While Southern Education Foundation, Inc ("Foundation") failed to meet the mechanical "one-thi support" test in 2015, it clearly satisfied the alternative "facts and circumstances" test outlined section 1 170A-9(f)(3) of the Treasury Regulations Specifically, the two required factors are pre	Return Reference	Explanation
support" test in 2015, it clearly satisfied the alternative "facts and circumstances" test outlined section 1 170A-9(f)(3) of the Treasury Regulations Specifically, the two required factors are pre		·
support As noted in Schedule A to Form 990, in 2015 the Foundation received approximately 28 69% of its total support in the form of public support - an amount far in excess of the 10% threshold 2. The organization must have an active "continuous and bona fide" fundraising progra designed to attract new and additional public support. The Foundation carried on an active and aggressive program of public solicitation in 2015 and raised over \$6,600,000 from more than a clifferent sources. In addition, all of the "favorable factors" described in the tax regulations relevations are present in this case. 1. The higher the percentage of support above 10%, the lesser the burden of the organization in establishing that it is publicly supported this case, the Foundation's public support percentage is substantially above 10% (The Foundation support percentage is substantially above 10% (The Foundation support of persons rather than from members of a single family or from a representative number of persons rather than from members of a single family or from a limited be support. Over the years, the Foundation has attracted contributions from a large and varied numb sources, including dozens of the nation's most well-known and respected charities. 3. The composition of the organization's governing body is representative of broad public interests. The Foundation's Board of Directors has a diverse membership which includes foundation executives, community leaders, and persons with special expertise in education. Its governing body represent the interests of the larger public rather than the personal or private interests of a limited number donors. 4. The organization conducts programs and activities that are available to and that appea the general public. (The fact that a research or educational organization conducts scholarly studi which are used by educators or the general public is evidence of public support.) The Foundation conducts analyses of education issues, trends, and possibilities and disseminates the data in access		While Southern Education Foundation, Inc ("Foundation") failed to meet the mechanical "one-third of support" test in 2015, it clearly satisfied the alternative "facts and circumstances" test outlined in section 1 170A-9(f)(3) of the Treasury Regulations Specifically, the two required factors are present in this case. I The organization must receive at least 10% of its support in the form of public support. As noted in Schedule A to Form 990, in 2015 the Foundation received approximately 28 69% of its total support in the form of public support - an amount far in excess of the 10% threshold. The organization must have an active "continuous and bona fide" fundraising program designed to attract new and additional public support. The Foundation carried on an active and aggressive program of public solicitation in 2015 and raised over \$6,600,000 from more than a dozen different sources. In addition, all of the "favorable factors" described in the tax regulations relevant to non-membership organizations are present in this case. 1 The higher the percentage of support above 10%, the lesser the burden of the organization in establishing that it is publicly supported. In this case, the Foundation's public support percentage is substantially above 10% (The Foundation nearly satisfied the mechanical "one-third" test.) 2. The organization receives support from a representative number of persons rather than from members of a single family or from a limited base of support. Over the years, the Foundation has attracted contributions from a large and varied number of sources, including dozens of the nation's most well-known and respected charities. 3 The composition of the organization's governing body is representative of broad public interests. The Foundation's Board of Directors has a diverse membership which includes foundation executives, community leaders, and persons with special expertise in education. Its governing body represents the interests of the larger public rather than the personal or private interests of a l

#### DLN: 93493319054126

Employer identification number

13-5562388

### SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue

Name of the organization

SOUTHERN EDUCATION FOUNDATION INC

Political expenditures

Service

2

### **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

<u>www.irs.gov/form990</u>.

2015
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

Provide a description of the organization's direct and indirect political campaign activities in Part IV

Section 527 organizations Complete Part I-A only

• Section 501(c)(4), (5), or (6) organizations Complete Part III

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

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

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

3	Volur	nteer hours				
Par	t I-B	Complete if the or	ganization is exempt under s	section 501(c	:)(3).	
1	Enter	the amount of any excise	e tax incurred by the organization und	er section 4955	<b>&gt;</b>	\$
2	Enter	the amount of any excise	e tax incurred by organization manage	ers under section	4955 ▶	\$
3	Ifthe	organization incurred a s	ection 4955 tax, did it file Form 472	O for this year?		☐ Yes ☐ No
<b>4</b> a	Wasa	a correction made?				Yes No
b		es," describe in Part IV				
Par	t I-C	Complete if the or	ganization is exempt under s	section 501(c	), except section 50	1(c)(3).
1	Enter	the amount directly expe	ended by the filing organization for sec	ction 527 exemp	t function activities 🕨	\$
2		the amount of the filing o pt function activities	rganızatıon's funds contributed to oth	ner organizations	for section 527	\$
3	Total	exempt function expendit	tures Add lines 1 and 2 Enter here a	and on Form 1120	O-POL, line 17b ►	\$
4	Did th	ne filing organization file <b>F</b> o	orm 1120-POL for this year?			Yes No
5	organ amou	ization made payments f nt of political contribution	nd employer identification number (EI For each organization listed, enter the ns received that were promptly and di political action committee (PAC) If a	amount paid froi rectly delivered t	m the filing organization's fi to a separate political organ	unds Also enter the nization, such as a
		(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
2						
3						
4						
5						
6						
For F	aperwo	rk Reduction Act Notice, se	ee the instructions for Form 990 or 990	- <b>EZ.</b> C	at No 50084S Schedule C (F	orm 990 or 990-EZ) 2015

Subtract line 1g from line 1a If zero or less, enter -0-Subtract line 1f from line 1c If zero or less, enter -0-

Grassroots lobbying expenditures

## Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

A Check ightharpoonup [if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN,

·			
		(a) Filing organization's totals	(b) Affiliated group totals
lobbying)	,	215,000	
Total lobbying expenditures (add lines 1a and	1b)	215,000	
Other exempt purpose expenditures		2,802,491	
Total exempt purpose expenditures (add lines	1c and 1d)	3,017,491	
Lobbying nontaxable amount Enter the amoun	t from the following table in both columns	300,875	
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
Not over \$500,000	20% of the amount on line 1e		
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess 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			
	Limits on Lobb  (The term "expenditures"  Total lobbying expenditures to influence public lobbying)  Total lobbying expenditures to influence a legil lobbying expenditures to influence a legil lobbying expenditures (add lines 1a and Other exempt purpose expenditures  Total exempt purpose expenditures (add lines  Lobbying nontaxable amount Enter the amount If the amount on line 1e, column (a) or (b) is:  Not over \$500,000  Over \$500,000 but not over \$1,000,000  Over \$1,000,000 but not over \$1,500,000	Total lobbying expenditures to influence a legislative body (direct lobbying)  Total lobbying expenditures (add lines 1a and 1b)  Other exempt purpose expenditures  Total exempt purpose expenditures (add lines 1c and 1d)  Lobbying nontaxable amount Enter the amount from the following table in both columns  If the amount on line 1e, column (a) or (b) is:  The lobbying nontaxable amount is:  Not over \$500,000  20% of the amount on line 1e  Over \$500,000 but not over \$1,000,000  \$100,000 plus 15% of the excess over \$500,000  Over \$1,000,000 but not over \$1,000,000  \$175,000 plus 10% of the excess over \$1,000,000	Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)  Total lobbying expenditures to influence public opinion (grass roots lobbying)  Total lobbying expenditures to influence a legislative body (direct lobbying)  Total lobbying expenditures (add lines 1a and 1b)  Other exempt purpose expenditures  Total exempt purpose expenditures (add lines 1c and 1d)  Lobbying nontaxable amount Enter the amount from the following table in both columns  If the amount on line 1e, column (a) or (b) is:  Not over \$500,000  Over \$1,000,000 but not over \$1,000,000  Stood plus 15% of the excess over \$500,000  Over \$1,000,000 but not over \$1,500,000  Stood plus 10% of the excess over \$1,000,000

j	j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?  ☐ Y e s ▼ No										
4-Year Averaging Period Under section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)											
	Lobbying Expendit	ures During	4-Year Avera	ging Period							
	Calendar year (or fiscal year beginning in)	<b>(a)</b> 2012	<b>(b)</b> 2013	<b>(c)</b> 2014	<b>(d)</b> 2015	<b>(e)</b> ⊤otal					
2a	Lobbying nontaxable amount		289,166	308,357	300,875	898,398					
b	Lobbying ceiling amount (150% of line 2a, column(e))					1,347,597					
c	Total lobbying expenditures		10,468	265,608	215,000	491,076					
d	Grassroots nontaxable amount		72,292	77,089	75,219	224,600					
е	Grassroots ceiling amount (150% of line 2d, column (e))					336,900					

Return Reference

	filed Form 5768 (election under section 501(h)).				<b>/</b> b>
or e	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	(	a)		(b)
ctiv	ıty	Yes	No	An	nount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of	163			
а	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c	Media advertisements?				
d	Mailings to members, legislators, or the public?				
е	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities?				
j	Total Add lines 1c through 1i				
а	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?				
ar	t III-A Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6).	<b>01</b> (c	)(5), c	or sec	ction
			_		Yes N
L	Were substantially all (90% or more) dues received nondeductible by members?		_	1	
	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	
	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3	
3					
3	Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."				III-A,
ar	t III-B Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "				III-A,
ar 1	t III-B Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."	No" C			III-A
ar 1	Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year	1 2a			III-A
a L 2	Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	No" C			III-A
ar L a b	Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total	1 2a 2b 2c			III-A
ar 1 2 a b c	Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	1 2a 2b			111-A,
1 2 a	Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	2a 2b 2c 3			111-A,
3 Par 1 2 a b c	Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess	1 2a 2b 2c			III-A,

Explanation

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

**SCHEDULE D** 

(Form 990)

Treasury

Department of the

## **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

DLN: 93493319054126

Open to Public Inspection

iterr	nal Revenue Service						
Na	me of the organization JTHERN EDUCATION FOUNDATION INC			Emple	oyer identificat	ion numbe	er
					562388		
Pa	rt I Organizations Maintaining Donoi			nds o	r Accounts.		
	Complete if the organization answer		•		- 1 1 .1		
L	Total number at end of year	(a) Donor advised fu	nds	(b)	unds and othe	<u>r accounts</u>	
2	Aggregate value of contributions to (during year)						
3	Aggregate value of grants from (during year)						
1	Aggregate value at end of year						
5	Did the organization inform all donors and donor funds are the organization's property, subject to			radvis	ed	☐ Yes	☐ No
5	Did the organization inform all grantees, donors, used only for charitable purposes and not for the conferring impermissible private benefit?		2 2		purpose	Yes	┌ <b>N</b> o
Pa	rt III Conservation Easements. Comple	ete if the organization	on answered "Yes" or	Form	<u> 1990, Part IV</u>	′, lıne 7.	
L	Purpose(s) of conservation easements held by th	he organization (check	all that apply)				
	Preservation of land for public use (e g , recreducation)	reation or	Preservation of an	hıstorı	cally important	t land area	
	Protection of natural habitat		Preservation of a c	ertifie	historic struc	ture	
	Preservation of open space						
2	Complete lines 2a through 2d if the organization easement on the last day of the tax year	held a qualified conser	vation contribution in th	e form	of a conservat	ion	
					Held at the	End of the	Year
а	Total number of conservation easements		-	2a			
b	Total acreage restricted by conservation easeme			2b			
С	Number of conservation easements on a certified		```	2c			
d	Number of conservation easements included in ( historic structure listed in the National Register			2d			
3	Number of conservation easements modified, tra	nsferred, released, ext	inguished, or terminated	by the	e organization o	luring the	
	tax year <b>▶</b>						
1	Number of states where property subject to cons	ervation easement is I	ocated <b>&gt;</b>	_			
5	Does the organization have a written policy regard violations, and enforcement of the conservation of		toring, inspection, handl	ing of	ΓYe	es No	D
5	Staff and volunteer hours devoted to monitoring, year  •	inspecting, handling of	violations, and enforcin	g cons	ervation easen	nents durır	ng the
7	A mount of expenses incurred in monitoring, inspe	ecting, handling of viol	ations, and enforcing co	nserva	tion easements	during the	e year
	<b>▶</b> \$						
3	Does each conservation easement reported on Ii (B)(i) and section $170(h)(4)(B)(ii)$ ?	ne 2(d) above satisfy t	he requirements of sect	ion 17	0(h)(4) <b>Y</b>	es No	o
•	In Part XIII, describe how the organization repor balance sheet, and include, if applicable, the text the organization's accounting for conservation ea	t of the footnote to the asements	organization's financial s	tatem	ents that desci	ribes	
'a r	Complete if the organization answer			r Oth	er Similar <i>I</i>	Assets.	
La	If the organization elected, as permitted under S works of art, historical treasures, or other similar service, provide, in Part XIII, the text of the foot	r assets held for public	exhibition, education, o	r resea	rch in furtherai		
b	If the organization elected, as permitted under Si works of art, historical treasures, or other similar	•					ıc

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

service, provide the following amounts relating to these items

(i) Revenue included on Form 990, Part VIII, line 1

Revenue included on Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

Assets included in Form 990, Part X

**▶**\$\_

Jene	Eddie D (Form 330) 2013						rage Z
Part	Organizations (continued)	Maintaining	Collections of	Art, Historical	Treasures, or	Other Similar A	ssets
3	Using the organization's a collection items (check al		cession, and other re	cords, check any	of the following tha	t are a significant us	se of its
а	Public exhibition	rende apprij		d L	oan or exchange pro	ograms	
b	Scholarly research			<b>e</b>	ther		
c	Preservation for future	re generations					
4	Provide a description of th			colain how they fur	ther the organization	on's exempt purpose	e in
-	Part XIII	<b></b>		.,	g		
5	During the year, did the or assets to be sold to raise						s No
Par	rt IV Escrow and Cu	stodial Arr	angements.	<u>-</u>			<u>'</u>
	Complete if the or Part X, line 21.	organization	answered "Yes" o	n Form 990, Pai	t IV, line 9, or re	eported an amoui	nt on Form 990,
1a	Is the organization an age included on Form 990, Par		istodian or other inte	rmediary for contr	ibutions or other as	ssets not	s No
ь	If "Yes," explain the ari	rangement in F	Part XIII and comple	te the following ta	ble	An	nount
c	Beginning balance	angement III I	and comple	15 the following to	1	с	
d	Additions during the year	ar			1	d	
e	Distributions during the	year .			1	e	
f	Ending balance				_ 1		
<b>2</b> a	Did the organization include	de an amount (	on Form 990, Part X,	line 21, for escro	w or custodial acco	unt liability?   Ye	s No
b	If "Voc " ovnlain the arran	goment in Dar	+ VIII Chack hara if	the evalenation b	as boon provided in	Dort VIII	П
	If "Yes," explain the arran  rt V Endowment Fu		ete if the organiza				
		'	(a)Current year	(b)Pnor year	<b>b (c)</b> Two years back	(d)Three years back	(e)Four years back
<b>1</b> a	Beginning of year balance		17,152,895	17,115,479	18,495,972	19,667,080	20,044,936
b	Contributions		6,688,023	1,335,600	496,000	575,000	
c	Net investment earnings, losses	gains, and	-6,283	637			187,513
d	Grants or scholarships		900,111	358,466	343,543	6,250	
e	Other expenditures for fac and programs	cilities		759,875	1,181,561		500,000
f	Administrative expenses			180,480	351,389	1,739,858	65,369
g	End of year balance		22,934,524	17,152,895	17,115,479	18,495,972	19,667,080
2	Provide the estimated per	contago of the	current year and ha	lanco (lino 1 a. col	lump (a)) hold as		
a	Board designated or quasi	-	24.000.00	iance (ime 19, coi	umm (a)) neid as		
b	Permanent endowment ▶	1 360 %					
c	Temporarily restricted end	dowment <b>&gt;</b>	63 760 %				
	The percentages on lines		should equal 100%				
3а	Are there endowment fund organization by	s not in the po	ossession of the orga	inization that are h	neld and administer	ed for the	Yes No
	(i) unrelated organizations						a(i) No
ь	(ii) related organizations If "Yes" on 3a(ii), are the			ured on Schedule	 R?	<del>                                     </del>	a(ii) No 3b
4	Describe in Part XIII the						<u> </u>
Par	rt VI Land, Buildings						
	Complete if the o		answered 'Yes' to	Form 990, Part	IV, line 11a.See	Form 990, Part >	
	Description of	property		Cost or other	basis   Cost or other		
	Land			(investme	(outer)		
	Buildings				1,293	3,200 1,069,6	562 223,538
	Leasehold improvements						<u> </u>
ч	Equipment				0.1	112 91	112

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))

223,538

73,574

73,574

See Form 990, Part X, line 12.  (a) Description of security or category	I	(b)Book value	(c)Method of valuation
(including name of security)			Cost or end-of-year market v
Financial derivatives Closely-held equity interests			
Other			
al. (Column (b) must equal Form 990, Part X, col (B) line 12)	•		
TO STATE OF THE PROGRAM RELATED.	l'Vac' on Form Qu	O Part IV line 11c -	
Complete if the organization answered  (a) Description of investment	i tes on form 95	(b) Book value	Gee Form 990, Part X, line 13. (c) Method of valuation
(a) Description of Investment		(D) Book Value	Cost or end-of-year market v
			+
al. (Column (b) must equal Form 990, Part X, col (B) line 13 )  ITT IX Other Assets. Complete if the organizatio  (a) Descri		ı Form 990, Part IV , line	e 11d See Form 990, Part X, line 15 (b) Book value
ITT IX Other Assets. Complete if the organization		ı Form 990, Part IV, line	
ITT IX Other Assets. Complete if the organization		ı Form 990, Part IV , line	
ITT IX Other Assets. Complete if the organization		Form 990, Part IV, line	
ITT IX Other Assets. Complete if the organization		ı Form 990, Part IV, line	
ITT IX Other Assets. Complete if the organization		ı Form 990, Part IV , line	
rt IX Other Assets. Complete if the organization		Form 990, Part IV, line	
rt IX Other Assets. Complete if the organization		ı Form 990, Part IV, line	
rt IX Other Assets. Complete if the organization		Form 990, Part IV, line	
TEX Other Assets. Complete if the organization (a) Description	ription	Form 990, Part IV, line	
Column (b) must equal Form 990, Part X, col (B) line in	ription		(b) Book value
Al. (Column (b) must equal Form 990, Part X, col (B) line in the Organization.  Other Liabilities. Complete if the organization (a) Description.	ription		(b) Book value
(a) Described (b) must equal Form 990, Part X, col (B) line 2	ription		(b) Book value
al. (Column (b) must equal Form 990, Part X, col (B) line 2  Total Tit X Other Liabilities. Complete if the organization of liability  (a) Description of liability	ts) anization answere		(b) Book value
II. (Column (b) must equal Form 990, Part X, col (B) line 2  See Form 990, Part X, line 25.  (a) Description of liability	ts) anization answere		(b) Book value
II. (Column (b) must equal Form 990, Part X, col (B) line 2  See Form 990, Part X, line 25.  (a) Description of liability	ts) anization answere		(b) Book value
II. (Column (b) must equal Form 990, Part X, col (B) line 2  See Form 990, Part X, line 25.  (a) Description of liability	ts) anization answere		(b) Book value
al. (Column (b) must equal Form 990, Part X, col (B) line 2  Total Tit X Other Liabilities. Complete if the organization of liability  (a) Description of liability	ts) anization answere		(b) Book value
al. (Column (b) must equal Form 990, Part X, col (B) line 2  Total Tit X Other Liabilities. Complete if the organization of liability  (a) Description of liability	ts) anization answere		(b) Book value
al. (Column (b) must equal Form 990, Part X, col (B) line in the organization.  Other Liabilities. Complete if the organization.  See Form 990, Part X, line 25.  (a) Description of liability	ts) anization answere		(b) Book value
al. (Column (b) must equal Form 990, Part X, col (B) line in the organization.  Other Liabilities. Complete if the organization.  See Form 990, Part X, line 25.  (a) Description of liability	ts) anization answere		(b) Book value
al. (Column (b) must equal Form 990, Part X, col (B) line is art X  Other Liabilities. Complete if the organization of liability  (a) Description of liability	ts) anization answere		(b) Book value
al. (Column (b) must equal Form 990, Part X, col (B) line is art X  Other Liabilities. Complete if the organization of liability	ts) anization answere		(b) Book value
al. (Column (b) must equal Form 990, Part X, col (B) line is art X  Other Liabilities. Complete if the organization of liability	ts) anization answere		(b) Book value
al. (Column (b) must equal Form 990, Part X, col (B) line 2  art X Other Liabilities. Complete if the organization  See Form 990, Part X, line 25.  (a) Description of liability	ts) anization answere		(b) Book value
al. (Column (b) must equal Form 990, Part X, col (B) line 2  art X Other Liabilities. Complete if the organization  See Form 990, Part X, line 25.  (a) Description of liability	ts) anization answere		(b) Book value
al. (Column (b) must equal Form 990, Part X, col (B) line in art X  Other Assets. Complete if the organization (a) Description  (a) Description  (b) Description  (c) Description  (a) Description  (b) Description  (c) Description  (b) Description  (c) Description  (d) Description  (e) Description  (f) Description  (e) Description  (f) Description  (e) Description  (f) Description  (e) Description  (f) Descriptio	ts) anization answere		(b) Book value
al. (Column (b) must equal Form 990, Part X, col (B) line are art X  Other Liabilities. Complete if the organization of liability  (a) Description of liability	ts) anization answere		(b) Book value

Schedule D (Form 990) 2015

1 2

d

information

**FUNDS** 

Return Reference

INTENDED USES OF THE ORGANIZATION'S ENDOWMENT

6,210,121

1

-1,080,293

Add lines <b>2a</b> through <b>2d</b>	2e	-1,080,293
Subtract line <b>2e</b> from line <b>1</b>	3	7,290,414
Amounts included on Form 990, Part VIII, line 12, but not on line <b>1</b>		
Investment expenses not included on Form 990, Part VIII, line 7b . 4a 79,610		
Other (Describe in Part XIII ) 4b		
Add lines <b>4a</b> and <b>4b</b>	<b>4</b> c	79,610
Total revenue Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 12)	5	7,370,024
Reconciliation of Expenses per Audited Financial Statements With Expenses Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	s pei	Return.
Total expenses and losses per audited financial statements	1	3,017,491
Amounts included on line 1 but not on Form 990, Part IX, line 25		
Donated services and use of facilities 2a		
Prior year adjustments		
Other losses		
Other (Describe in Part XIII).............. <b>2d</b>		
Add lines <b>2a</b> through <b>2d</b>	2e	
Subtract line <b>2e</b> from line <b>1</b>	3	3,017,491
Amounts included on Form 990, Part IX, line 25, but not on line 1:		
Investment expenses not included on Form 990, Part VIII, line 7b 4a 79,610		
Other (Describe in Part XIII).............. 4b		
Add lines <b>4a</b> and <b>4b</b>	4c	79,610
Total expenses Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 18 )	5	3,097,101
ide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2		do any additional
	Subtract line 2e from line 1  Amounts included on Form 990, Part VIII, line 12, but not on line 1  Investment expenses not included on Form 990, Part VIII, line 7b  Add lines 4a and 4b  Total revenue Add lines 3 and 4c.(This must equal Form 990, Part II, line 12)  XII Reconciliation of Expenses per Audited Financial Statements With Expenses  Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.  Total expenses and losses per audited financial statements  Amounts included on line 1 but not on Form 990, Part IX, line 25  Donated services and use of facilities  Prior year adjustments  Other losses  Other (Describe in Part XIII)  Add lines 2a through 2d  Subtract line 2e from line 1  Amounts included on Form 990, Part IX, line 25, but not on line 1:  Investment expenses not included on Form 990, Part VIII, line 7b  Other (Describe in Part XIII)  Add lines 4a and 4b  Total expenses Add lines 3 and 4c. (This must equal Form 990, Part III, lines 1a and 4, Part IV, lines 1b and 2 and 4 and 4 be and 4	Subtract line 2e from line 1

Explanation

ENDOWMENT FUNDS ARE USED TO SUPPORT THE FOUNDATION'S VARIOUS RESEARCH,

ANALYSIS, ADVOCACY, TECHNICAL ASSISTANCE AND OUTREACH PROGRAMS

2a

2b

2c

2d

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

Total revenue, gains, and other support per audited financial statements

Amounts included on line 1 but not on Form 990, Part VIII, line 12

Net unrealized gains (losses) on investments .

Donated services and use of facilities

Recoveries of prior year grants .

Other (Describe in Part XIII )

Schedule D (Form 990) 2015					
Part XIII Supplemental Information	on (continued)				
Return Reference	Explanation				

efile GRAPHIC print - DO NOT PROCESS DLN: 93493319054126 As Filed Data -OMB No 1545-0047 Schedule I Grants and Other Assistance to Organizations, (Form 990) 2015 Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Open to Public Attach to Form 990. Department of the Inspection ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Treasury Internal Revenue Service Name of the organization Employer identification number SOUTHERN EDUCATION FOUNDATION INC 13-5562388 **General Information on Grants and Assistance** Part I Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient Part II that received more than \$5,000 Part II can be duplicated if additional space is needed (d) A mount of cash (a) Name and address of **(b)** EIN (c) IRC section (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant organization if applicable grant cash valuation non-cash assistance or assistance or government (book, FMV, assistance appraisal, other) See Additional Data Table

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

### **Additional Data**

(a) Name and address of

organization

**(b)** EIN

Software ID: Software Version:

(c) IRC section

ıf applıcable

**EIN:** 13-5562388

Name: SOUTHERN EDUCATION FOUNDATION INC

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

grant

or government				assistance	other)	
AMERICAN ASSOCIATION OF SCHOOL ADMINISTRATIORS 1615 DUKE STREET ALEXANDRIA, VA 22314	46-4483186	501(C)(3)	30,000			TEACHING GRANT
BETTER SCHOOLS BETTER JOBS 2 OLD RIVER PLACE SUITE B JACKSON,MS 39202	23-7089143	501(c)(4)	480,000			POLITICAL GRANT
CLAFLIN UNIVERSITY 400 MAGNOLIA ST ORANGEBURG,SC 29115	20-5806345	501(c)(3)	50,000			TEACHING GRANT

(d) Amount of cash (e) Amount of non- (f) Method of valuation

cash

(book, FMV, appraisal,

(g) Description of

non-cash assistance

(h) Purpose of grant

or assistance

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non- (f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) COLLABORATIVE FOR 45-2255077 501(C)(3) 14,000 TEACHING GRANT TEACHING & LEARNING 2303 RIVER ROAD 100 LOUISVILLE, KY 40206

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

NEW VENTURE FUND

NW STE 300

1201 CONNECTICUT AVE

WASHINGTON, DC 20036

58-0593442

2001011222/11 10200					
MORGAN STATE UNIVERSITY FOUNDATION	57-0314374	501(C)(3)	50,000		TEACHING GRANT
1700 EAST COLD SPRING					
LANE					
TRUTH HALL RM 201					

25,000

TEACHING GRANT

**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. ▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990. 2015 Open to Public

OMB No 1545-0047

DLN: 93493319054126

Department of the Internal Revenue Service

Schedule J (Form 990)

Inspection

	me of the organization ITHERN EDUCATION FOUNDATION INC			Employer identification	on nur	nber	
500	THERN EDUCATION FOUNDATION INC			13-5562388			
Pa	rt I Questions Regarding Compensation						
						Yes	No
La	Check the appropriate box(es) if the organization provides 990, Part VII, Section A, line 1a Complete Part III to						
	First-class or charter travel	$\Gamma$	Housing allowance or residence for	personal use			
	Travel for companions	$\Gamma$	Payments for business use of perso	onal residence			
	Tax idemnification and gross-up payments		Health or social club dues or initiat	ion fees			
	Discretionary spending account	Г	Personal services (e g , maid, chau	ffeur, chef)			
b	If any of the boxes in line 1a are checked, did the orga reimbursement or provision of all of the expenses desc				<b>1</b> b		
2	Did the organization require substantiation prior to rein directors, trustees, officers, including the CEO/Execut		· · · · · · · · · · · · · · · · · · ·		2		
3	Indicate which, if any, of the following the filing organiz organization's CEO/Executive Director Check all that used by a related organization to establish compensati	apply	Do not check any boxes for method	s			
	▼ Compensation committee	<b>√</b>	Written employment contract				
	Independent compensation consultant	<b>√</b>	Compensation survey or study				
	Form 990 of other organizations	<b>✓</b>	Approval by the board or compensa	tion committee			
1	During the year, did any person listed on Form 990, Pa or a related organization	rt VII	I, Section A, line 1a with respect to t	he filing organization			
а	Receive a severance payment or change-of-control pa	ymen	t?		<b>4</b> a		Νo
b	Participate in, or receive payment from, a supplementa	al none	qualified retirement plan?		4b		Νo
c	Participate in, or receive payment from, an equity-base	ed cor	mpensation arrangement?		4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provi	ide th	e applicable amounts for each item ir	n Part III			
5	Only 501(c)(3), 501(c)(4), and 501(c)(29) organization For persons listed on Form 990, Part VII, Section A, list compensation contingent on the revenues of		•	any			
а	The organization?				5a		Νo
b	Any related organization?				5b		Νo
	If "Yes," on line 5a or 5b, describe in Part III						
5	For persons listed on Form 990, Part VII, Section A, li compensation contingent on the net earnings of	ne 1a	, did the organization pay or accrue a	nny			
а	The organization?				<b>6</b> a		Νo
b	Any related organization?				6b		Νo
	If "Yes," on line 6a or 6b, describe in Part III						
7	For persons listed on Form 990, Part VII, Section A, li payments not described in lines 5 and 6? If "Yes," des		, , , ,	n-fixed	7	Yes	
3	Were any amounts reported on Form 990, Part VII, par subject to the initial contract exception described in R in Part III		·		8		No
•	If "Yes" on line 8, did the organization also follow the r section 53 4958-6(c)?	ebutta	able presumption procedure describe	d in Regulations	9		

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VICE PRESIDENT

## Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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

(A) Name and Title		(B) Breakdown of	W-2 and/or 1099-MIS	C compensation	(C) Retirement and	( <b>D)</b> Nontaxable	(E) Total of columns	(F) Compensation in	
		Base (1) compensation	(ii) Bonus & incentive compensation	(III) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column(B) reported as deferred on prior Form 990	
1 STEPHEN SUITTS VICE PRESIDENT	(i)	151,646			22,200	15,194	189,040		
VICE INESISEIVI		0					0		
2 TROY D JOHNSON CFO/COO	(i)	144,000	20,000		21,600	8,605	194,205		
	/ii\	0					0		

		(1) compensation	compensation	compensation				Form 990
1 STEPHEN SUITTS VICE PRESIDENT	(i)	151,646			22,200	15,194	189,040	
	(ii)	0					0	
2 TROY D JOHNSON CFO/COO	(i)	144,000	20,000		21,600	8,605	194,205	
	(ii)	0					0	
3 DR CYRIL K MCGUIRECEO	(i)	277,000		12,000	39,750	13,692	342,442	
	(ii)	0					0	
4 TOMEKA HART	(i)	154,458				5.508	159.966	

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Page 3			
Part III Supplemental Information			
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			
Return Reference	Explanation		

Schedule J (Form 990) 2015

BONUSES WERE BASED ON PERFORMANCE EVALUATIONS

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PART II COLUMN (B)(II)

### SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

## Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization SOUTHERN EDUCATION FOUNDATION INC

Employer identification number 13-5562388

Return Reference	Explanation
PART III, LINE 4A (1)	CONTINUED FROM FORM 90. PART III, LINE 4A. Promoting Early Learning Opportunities. Decades of studying the link between poverty and education have confirmed for SEF, high quality early childhood programs may be the single best investment for getting young children, especially the new importly of low income students in the South, to be school-ready and succeed Early childhood declared in the County of the

D. 4	Postor atten
Return Reference	Explanation
Return Reference  PART III, LINE 4A (2)	Other Key Activities and Outcomes of the year. 1 As members of the Education Justice Network (E.N) we worred to highlight specific Southern assess that should impact national efforts, such as the momentum behind community schools. We interviewed key experts in the education justice movement to address outstanding questions about what may be masing from the community schools more intervals to define and measure community schools and particular Southern questions about the whom the community schools movement interacts with the re-segregation of public schools and the continued fight to megrate. 2 We organized with the Alliance to Releasing Outstanding Celeasing Celeasin
	mark the 50th anniversary of the United States Supreme Court decision in Brown v. Board of Education, the decision that broke the spine of legalized segregation in public education. The belief was there remains work to be done in fulfilling the promise of Brown and in ensuring that all children, irrespective of race, class, gender and national origin, receive an excellent education. Since 2004, SEF has provided approximately 185 students this leadership development opportunity to work on education equity issues throughout the South. Through SELI, talented and diverse young leaders have conducted important research, policy analysis, advocacy, and organizing efforts for nearly 85 Southern nonprofits and foundations. In terms of SEFs programmatic
	efforts, SELI is one of the longest-standing initiatives in the Foundations recent history, and is not just important to the students and organizations partnering on this effort, but informs all of SEFs programmatic efforts

Return Reference	Explanation
PART III, LINE 4A (3)	Goal Empower the next generation of innovators, thinkers and leaders to become more effective change agents in education. In 2015, SEF provided a diverse group of eight outstanding undergraduate and graduate level students fellow ships across the region. The SELI summer began in late May with a three-day Orientation held in Atlanta, Georgia where fellows engaged and dialogued with outstanding sector leadership through panels and small work group activities. Fellows examined regional education policy trends from pk-16, the history of public education finance in the American South, and explored various strategies for improving public education policy and practice. They then worked full-time for eight weeks at their placement sites under the supervision of leading activists. Fellows researched ways to incorporate mental health services and wrap arounds supports into public schools in Georgia, contributed to research studies and publications focused on improving developmental education opportunities at minority serving institutions, examined school finance and financial aid trends in Georgia, assessed the impact of laws passed during Texas legislative session on Latino and English as a Second Language students, conducted intensive training, research, organizing, communications and analysis for mentoring programs within Mami, Florida juvenile detentions centers, developed research on poverty and community schools across the Southern region, supported cross-sector coalitions to address South Carolinas school-to-prison pipeline, developed communications tools and resources to support advocates and organizers across the South working on education justice issues, and developed strategic plans for improving early childhood education access and equity with community groups in rural Arkansas. At the end of the summer, the fellow's were brought back to a Closing Meeting in Atlanta where they formally presented on what they had been working on, and the lessons they learned from this experience. The focus of the meeting was t

Return Reference	Explanation
PART VI, LINE	The 990 is reviewed by the Finance, Audit, and Administration Committee, the CEO and the CFO After all questions and
11A	concerns are addressed a copy of the 990 is presented to each Board member and the 990 is then filed

Return Reference	Explanation
PART VI, LINE 12C	Annually, each Trustee and SEF staff member execute a disclosure form identifying any relationships, positions or circumstances in which he/she is involved that could contribute to a real or perceived conflict of interest. Any information regarding business interest of a Trustee is treated as confidential and is generally made available to the Chair, the President, and any committee appointed to address conflicts of interest, except to the extent additional disclosure is necessary in connection with the implementation of this policy. Trustees do not vote on any matter in which they believe there is duality of interest and may, if asked, be called upon to share with fellow. Trustees such information related to the duality of interest as may be necessary and appropriate. The minutes of Board meetings will show that the Trustee having a duality of interest disclosed same and abstained from voting on related matters. A copy of this policy is furnished to each person who is or becomes a member of the Board of Trustees or staff. Each such person is required to review a copy of this policy and acknowledge in writing that he or she has done so

Return Reference	Explanation
PART VI, LINE 15	IN ORDER TO DETERMINE STAFF COMPENSATION LEVELS FOR ITS SMALL STAFF AND CONSERVATIVE MODEST RESOURCES, SEF CONSULTS SOURCES SUCH AS THE ANNUAL COMPENSATION SURVEY PUBLISHED BY THE COUNCIL ON FOUNDATIONS, REPORTS IN THE CHRONICLE OF PHILANTHROPY, AND THE CHRONICLE OF HIGHER EDUCATION, RATHER THAN HIRING INDEPENDENT CONSULTANTS TO CONDUCT DETAILED COMPENSATION SURVEYS AND AUDITS SEF BOARD MEMBERS AND STAFF, AS A PPROPRIATE, ALSO CONSULT WITH PEER ORGANIZATIONS TO A SCERTAIN A PPROPRIATE COMPENSATION RANGES FOR STAFF MANY SEF BOARD MEMBERS SERVE, AS WELL, ON OTHER NON-PROFIT ORGANIZATIONAL BOARDS AND BRING THAT KNOWLEDGE AND PERSPECTIVE TO BEAR IN SETTING COMPENSATION FOR SEF STAFF SEF'S FINANCE, AUDIT AND ADMINISTRATION COMMITTEE REVIEWS COMPENSATION AS PART OF THE ANNUAL BUDGET-SETTING CYCLE AND DETERMINES COMPENSATION OF THE PRESIDENT BASED UPON AN ANNUAL A PPRAISAL OF PERFORMANCE THAT A PPRAISAL CONSIDERS ALL A SPECTS OF THE PRESIDENT'S WORK INCLUDING FUNDRAISING, MANAGEMENT, PROGRAM DEVELOPMENT AND IMPLEMENTATION, GOVERNANCE AND COMMUNICATIONS SEF'S PRESIDENT A PPRAISES THE PERFORMANCE OF OTHER SUBORDINATE SEF STAFF ANNUALLY ALL SEF STAFF ARE PART OF A MERIT PAY PROGRAM IN WHICH THERE ARE NO AUTOMATIC OR COST OF LIVING INCREASES

Explanation
Il SEF public documents are available upon request. Once a request is received the documents can be sent either lectronically or through the US postal system. The 2015 CPA audit, conflict of interest policy and whistleblower policy can look be found on the SEF wieb site in the "Public Documents Listing".
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