EXTENDED TO NOVEMBER 15, 2018 2949332807308

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Department of the Treasury Internal Revenue Service

Do not enter social security numbers on this form as it may be made public. ► Go to www.irs.gov/Form990 for instructions and the latest information

Open to Public

A F	or the	2017 calendar year, or tax year beginning and	ending	titionii.	mapection
B	heck if	C Name of organization		D Employer identific	cation number
а	pp!icable				
	Addres	HURST WOOD EDUCATION FOUNDATION INC			
	Name change			20-2	697232
F	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite		
一	Final	1 683 W 850 C	HOOMINSURE	E Telephone number	489-2001
	leturn/ termin		<u> </u>	·	
	ated Amend	City or fown, state or province, country, and ZIP or foreign postal code OREM, UT 84058		G Gross receipts \$	395,596.
<u> </u>	⊒return]Applica Ition			H(a) Is this a group re	
L	Lition pendin	F Name and address of principal officer BRENT WOOD		for subordinates	
		V course la course	<u> </u>	H(b) 4re all subordinates in	
		empt status: X 501(c)(3)	lor) /527	-	list. (see instructions)
		e: WWW.CLEARHORIZONSACADEMY.ORG		H(c) Group exemption	
,		organization: X Corporation	L Year	of formation. ZUIU N	State of legal domicile: UT
Ра		Summary			
ø	1	Briefly describe the organization's mission or most significant activities: $\overline{{ m TO}}$	RANSFO	RM, THROUGH	EDUCATION,
auc		THE LIVES OF CHILDREN WITH AUTISM AND TH		Ha ' ' - khaa	
Governance	2	Check this box 🕨 📖 if the organization discontinued its operations or dispo	osed of more	than 25% of its net as	
ò	3	Number of voting members of the governing body (Part VI, line 1a)		3	10
	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	10
Se	5	Total number of individuals employed in calendar year 2017 (Part V, line 2a)		5	0
Ę	6	Total number of volunteers (estimate if necessary)	_	6	0
Activities &	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.
Q.	ь	Net unrelated business taxable income from Form 990-1, Time 94-	<u> </u>	7b	0.
		I RECEIVE		Prior Year	Current Year
e)	8	Contributions and grants (Part VIII, line 1h)	$U \parallel$	447,950.	240,211.
Revenue	9	Program service revenue (Part VIII, line 2g)	70	89,938.	0.
eve		Investment income (Part VIII, column (A), lines 3, 4, and 7¢)	8 S	21,091.	20,108.
œ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 96, 10c, and 11e)		30,435.	<56,581.>
		Total revenue - add lines 8 through 11 (must equal Part VIII, Column (A); time 12).		589,414.	203,738.
****		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		363,710.	250,000.
	I	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
vs.		Salanes, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	0.
Expenses		Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
ber		Total fundraising expenses (Part IX, column (D), line 25)	599.		
X	1	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		259,023.	36,650.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		622,733.	286,650.
		Revenue less expenses. Subtract line 18 from line 12		<33,319.	> <82,912.>
200		Nevertue less expenses, Subtracture to normine 12	Be	eginning of Current Year	End of Year
t Assets or lad Balances	00	Total assets (Part X, line 16)		7,820,180.	7,683,286.
SSE	20	Total liabilities (Part X, line 26)		1,075,819.	1,021,838.
Net A	21		-	6,744,361.	6,661,448.
		Net assets or fund balances. Subtract line 21 from line 20			<u> </u>
P	art II	lities of perjury, I declare that I have examined this return, including accompanying schedu	les and staten	nents, and to the best of m	v knowledge and belief, it is
Una	er pena	ct, and complete. Declaration of preparer (other than officer) is based on all information of v	which prepare	r has any knowledge	
πue	, corre	th, and complete Declaration of preparer (other than officer) is based on an anomalous		11//	5/18
		Signature of officer		Date	
Sig		BRENT WOOD, OFFICER		16/1	5/18
He	re	Type or print name and litle			
				Date Check	PTIN
		Tring type property a manual	ŀ	11/15/18 t self-emplo)	P00448694
Pai		DESCRIPTION OF THE PROPERTY OF	Д	Firm's EIN	45-0250958
	parer	100 T 0 000 T D 0 DOV 07191	0		
Use	Only	Firm's address 1095 S. 800 E., P.O. BOX 97181 OREM, UT 84097-1810	-	Phone no.80	1-224-1900
_					X Yes No
Ma	y the l	RS discuss this return with the preparer shown above? (see instructions)			Form 990 (2017)

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



- <mark>òṛm</mark>	990 (2017) HURST WOOD EDUCATION FOUNDATION INC 20-2697232 Page 2
Par	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1 ,	Briefly describe the organization's mission
	TO TRANSFORM, THROUGH EDUCATION, THE LIVES OF CHILDREN WITH AUTISM AND
	THE LIVES OF THEIR FAMILIES.
	· ·
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
•	If "Yes," describe these changes on Schedule O
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses
•	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported
4a	(Code ') (Expenses \$ 257,748 · including grants of \$ 250,000 ·) (Revenue \$ 91,350 ·)
70	TO EDUCATE CHILDREN WITH AUTISM SPECTRUM DISORDERS THROUGH CLASSROOM
	INSTRUCTION AND EXPERIENCES IN COORDINATION WITH THE UTAH AUTISM
	ACADEMY, A 501(C)(3) ORGANIZATION.
	ACADEMI, A JUI/C/(J) ONGANIDATION:
· ` ` ·	
4b	(Code) (Expenses \$ including grants of \$) (Revenue \$)
	· · · · · · · · · · · · · · · · · · ·
4c	(Code) (Expenses \$ Including grants of \$) (Revenue \$)
	,
٠,	
4.2	Other was a series (Decomb a in Sebadula O.)
4d	Other program services (Describe in Schedule O) (Expenses \$ including grants of \$) (Revenue \$)
4-	055 540
<u>4e</u>	Total program service expenses ► 257,748.
	10111000 (2017

Form 990 (2017) HURST WOOD E.

| Part | V | Checklist of Required Schedules

			Yes	Na.
	le the expensation described in restrant 501(a)(2) as 4047(a)(4) (ather these a private formulation)?		res	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		X	
^	·	1	X	 -
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	_	ŀ	v
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	١.		х
_	during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			٠,,
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
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_		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,]		
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		х
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		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	
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	*	1.34	
	as applicable		25	9
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		ľ	•
	Part VI	11a	Х	
b	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	İ	X
С	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	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	_X_	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	İ		
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			_
	Schequle D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		<u>X</u>
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u>X</u> _
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		<u>X</u> _
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to		İ	
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u>X</u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		<u>X</u>
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		_ <u>X</u> _
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			7.5
	complete Schedule G, Part III	19	000	<u>X</u>
		Form	990 (2017)

Form 990 (2017) HURST WOOD EDUCATION FOUNDATION INC Part IV Checklist of Required Schedules (continued)

20a bit the organization operate one or more hospital facilities? If "Yes," complete Schedule II. 20b bit "Yes" to live 20b, aid the organization attach a copy of its audied infrancial statements to this return? 21 bit the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic organization or domestic 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 IP, Part I and II organization or domestic organization or domestic organization or domestic organization or domestic organization or domestic organization and organization and organization and organization and organization and organization and organization and organization have a tax exempt bond sause with an outstanding principal amount of more than \$100,000 as of the last day of the veganization invest are proceeded of tax-exempt bonds such as a first organization and organization and organization and organization and organization and organization and organization and organization and organization and organization and organization and organization and organization and organization and organization and organization and organization and organization and organization and organization and organization and organization and organization and organization and organization and organization and organization and organization and organization and organization and organization and organization and organization and organization and organization and organization and organization and organization and organization and organization and organization and organization and organization and organization and organization and organization and organization and organization and organization and organization and organization and organization and organization and organization and organization and organization and organizatio				Yes	
21 Dut the organization report more shan \$5,000 of grants or other assistance to any domestic organization or domestic government or Part IX, column (A), line 17 II "Pies", complete Schodule (J. Parts I and III) 22 Dut the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 27 II "Pies", complete Schodule (J. Parts I and III) 23 Dut the organization newer "Yes" to Part IVI, Section A), line 3, 4, or 8 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schodule K II "No", go to line 25a Schodule K II "No", go to line 25a Schodule K II "No", go to line 25a Schodule K II "No", go to line 25a Schodule K II "No", go to line 25a Schodule K II "No", go to line 25a Schodule K II "No", go to line 25a Schodule K II "No", go to line 25a Schodule K II "No", go to line 25a Schodule K II "No", go to line 25a Schodule K II "No", go to line 25a Schodule K II "No", go to line 25a Schodule K II "No", go to line 25a Schodule K II "No", go to line 25a Schodule K II "No", go to line 25a Schodule K II "No", go to line 25a Schodule K II "No", go to line 25a Schodule K II "No", go to line 25a Schodule K II "No", go to line 25a Schodule K II "No", go to line 25a Schodule L, Part II "Schodule L, Part II "Schodule L, Part II "Schodule L, Part II" Is the organization environment of schodule L, Part II "Schodule L, Part II" Schodule L, Part II "Schodule L, Part II" Schodule L, Part III Schodule L, Part II" Schodule L, Part II" Schodule L, Part III Schodule L, Part III Schodule L, Part III Schodule L, Part III Schodule L, Part III Schodule L, Part III Schodule L, Part III Schodule L, Part III Schodule L, Part III Schodule L, Part III Schodule L, Part III Schodule L, Part III Schodule L, Part III Schodule L, Part III Schodule L, Part III Schodule L, Part III Schodule L, Part	20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
domestic government on Part IX. column (A), line 17 if If Yes, "complete Schedule I, Parts I and II 21	b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
2 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 2 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 Issisting of the year. In this was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No", go to line 25a 2 Did the organization martisian an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 2 Did the organization martisian an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 3 Did the organization martisian an escrow account other than a refunding escrow at any time during the year? 4 Did the organization martisian an escrow account other than a refunding escrow at any time during the year? 5 Did the organization martisian an escrow account other than a refunding escrow at any time during the year? 5 Did the organization and the secretary of the organizations, but the organization environment of the organization and excess benefit transaction with a disqualified person appear and excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization fromes of the organization provide a grant or other assistance to an officer, director, trustee, in expendite Schedule L, Part II 5 Did the organization provide a grant or other assistance to an officer, director, trustee, or they employee or any of these persons? If "Yes," complete Schedule L, Part III 5 Did the organization provide a grant or other assistance to an officer, director, trustee, or they employee? If "Yes," complete Schedule L, Part III 5 Did the organization receive contributions of ar	21	· · · · · · · · · · · · · · · · · · ·			
Part X. column (A), line 2? If "Yes," complete Schedule I, Parts I and III 2 Did the organization assers "Yes" to Part VIII, 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 I, Part II and the organization invest any proceeds of 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 have 25a by the Complete Schedule K. Part II and the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24d			21	<u>X</u> _	<u> </u>
and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J 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 I" No", go to line 25a 24b 2 b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 2 c Did the organization marks an an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 3 d Did the organization are as an "on behalf of" issuer for bonds outstanding at any time during the year? 4 d Did the organization are as an "on behalf of" issuer for bonds outstanding at any time during the year? 4 d Did the organization ware that the regaged in an excess benefit transaction with a disqualified person and provide a Schedule L, Part I is 1 the organization ware state that engaged in an excess benefit transaction with a disqualified person in a prory year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I is 1 the organization reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part II' is 2. Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contribution or employees thereof a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part IV instructions for applicable lining thresholds, conditions, and exceptions) a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV instructions for applicable lining thresholds, conditions, and exceptions? b A family member of a current or former officer, director, trustee, or key employee? If "Ye	22		22		Х
Schedule / 24 Det 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 Det the organization maintain an eight of the several proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an eight of the several proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an eight of the several proceeds of tax-exempt bonds outstanding at any time during the year? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Did the organization with a disqualified person during the year? If "Res," complete Schedule L, Part II "Est organization with a disqualified person with a disqualified person in a prior year, and that the transaction has not been reported on any of the organizations provide a government of the organization provide a grant or other assistance to an officer, director, trustee, key employees, substantial conhibutor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part IV institutions for applicable ling thresholds, conditions, and exceptions) A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV institutions for applicable ling thresholds, conditions, and exceptions) A current or former officer, director, trustee, or key employee (or a family member thereod) was an officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV institutions? If "Yes," complete Schedule L, Part IV institutions? If "Yes," complete Schedule L, Part IV institutions? If "Yes," complete Schedule L, Part IV insti	23	· · · · · · · · · · · · · · · · · · ·			
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 "Pes," answer lines 24b through 24d and complete Schedule It. Part II is a few than a refunding escrive at any time during the year to defease any tax-exempt bonds? Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d. 24d. 24d. 24d. 24d. 24d. 25d. 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 in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction with one of the following portion or government or former officers, directors, trustee, we employee a grant or other assistance to an officer, director, trustee, we proplyee, substantial conhibitor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV instructions for applicable fining thresholds, conditions, and exceptions) a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV instructions for applicable fining thresholds, conditions, and exceptions in the properties					
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Schedule K. If "No", go to line 25a Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization minest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization minest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24d	24a				
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c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 X 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 X 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 32 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 33 Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, Iine 1 34 Was the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, Iine 2 35 Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, Iine 2 36 Section, 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, Iine 2 36 Section, 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, Iine 2 36 Section, 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, Iine 2 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership f	а				
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Form 990 (2017)	HURST	WOOD	EDUCATION	FOUNDATION	INC
Part V Statements R	egarding	Other II	RS Filings and	Tax Compliance	

	Check if Schedule O contains a response or note to any line in this Part V		_	
_ •			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 0			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b. 0		}	
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	-	_	
	(gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 0			
þ	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
þ	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b_		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)		-	
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
þ		5b		Х
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			7.7
٠.	any contributions that were not tax deductible as charitable contributions?	6a		X
Ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	۵.		
-	were not tax deductible?	6b_		
7	Organizations that may receive deductible contributions under section 170(c).	-	•	X
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	The same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the sa	7c		х
~ 1	to file Form 8282? If "Yes." indicate the number of Forms 8282 filed during the year 7d	76		
d		70	-	
e f	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7e 7f		
9	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		-
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter.			
a	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
a	Gross income from members or shareholders	,		
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them)		-	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
þ	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
a	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
•	organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand	10-		х
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		
<u>a</u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b Form	990	(2017
		. 51111		

Form 990 (2017) HURST WOOD EDUCATION FOUNDATION INC

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a 8b or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions

	to line 6a, 6b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See Institu	icuons			
	Check if Schedule O contains a response or note to any line in this Part VI				X
<u>Sec</u>	tion A. Governing Body and Management				
		ام م		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a	10			
	If there are material differences in voting rights among members of the governing body, or if the governing				
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	4.0			
ь	Enter the number of voting members included in line 1a, above, who are independent 1b	10			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any	other			
_	officer, director, trustee, or key employee?		_2_	Х	
3	Did the organization delegate control over management duties customarily performed by or under the direct su	pervision			v
	of officers, directors, or trustees, or key employees to a management company or other person?	10	3	X	Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was file	ed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		5		X
6	Did the organization have members or stockholders?		6_		
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one	or			v
L	more members of the governing body?		7a		X
D	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholder	s, or	76		X
0	persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the folion	no:	7b		A
8		owing.	0-	х	
a	The governing body?		8a 8b	X	
9 9	Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	_	CD		
9	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	=	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Cod	de l			
	tion Divideo (mis decitor broquests information about politica fiet required by the internal foreign deci			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	1	10a		X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, aff	iliates.			
	and branches to ensure their operations are consistent with the organization's exempt purposes?		10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before fill	ng the form?	11a	X	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990	•			
	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a	X	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	' [12b	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," described	be			
	ın Schedule O how this was done		12c	Х	
13	Did the organization have a written whistleblower policy?		13	Х	
14	Did the organization have a written document retention and destruction policy?		14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent	endent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			ļ	
a	The organization's CEO, Executive Director, or top management official		15a		X
b	Other officers or key employees of the organization		15b		Х
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).				
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a				v
_	taxable entity during the year?		16a		X
þ	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its partic	ipation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's	,			
	exempt status with respect to such arrangements?		16b		
	tion C. Disclosure				
17 10	List the states with which a copy of this Form 990 is required to be filed UT Section 5134 requires an exposuration to make its Forms 1033 (or 1034 if applicable), 990, and 990.1 (Section 5	01(0)(2\0.00000	Vailah	ما	
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 5 for public inspection, Indicate how you made these available. Check all that apply	or(c)(a)s only) a	vallaD	ıc	
	for public inspection. Indicate how you made these available. Check all that apply Own website Another's website X Upon request Other (explain in Schedule)	le O)	-		
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest of the conflict of interest of the conflict of interest of the conflict of the conflict of interest of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the conflict of the		finan	cial	
	statements available to the public during the tax year				
20	State the name, address, and telephone number of the person who possesses the organization's books and rec	cords [.]			
	BRENT WOOD - 801-437-0490				
	1875 S GENEVA ROAD, OREM, UT 84058				

Form	990	(2017)	

HURST WOOD EDUCATION FOUNDATION INC

20-2697232

Page 7

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

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

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

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

List persons in the following order individual trustees or directors, institutional trustees; officers; key employees, highest compensated employees, and former such persons

Check this box if neither the organization n		orga	anıza			mpe	nsat	ted any current officer, o	director, or trustee	
` (A) [']	(B)			((C)			(D)	(E)	(F)
Name and Title	Average	(do		Pos heck		than	опе	Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	rson	is bot or/trus	h an	compensation	compensation	amount of
	week	<u> </u>	Cer ai	10 4 0	reci	77408	100,	from	from related	other
	(list any	Individua) trustee or director						the	organizations	compensation
	hours for related	o o	ee			sated		organization (W-2/1099-MISC)	(W-2/1099 MISC)	from the organization
	organizations	ruster	Institutional trustee			Highest compensated employee		(VV-2 /1099-WIGC)		and related
The state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the s	below	ıl feni	lei on		ge	is as	_		• • •	organizations
the second second	line)	divid	sttu	Officer .	Key emptoyee	age m	Богте			Organizations
(1) BILL BRIDGES	3.00	=	=	╚	×	Ξ 6,	-			
ACTING PRESIDENT	- 3.00	x		į	ļ			0.	0.	0.
(2) BRAD ADAMSON	1.00	_			Н					
BOARD MEMBER		X.						0.	0.	0.
(3) HENRY WHIFFEN	0.00									
BOARD MEMBER		Х						0.	0.	0.
(4) J BRENT WOOD	5.00									·
SECRETARY		Х		<u> </u>				0.	0.	0.
(5) KATHRYN P WGOD	2.00									
TREASURER		Х		L				0.	0.	0.
(6) TIFFANY WOOD-MCCARTHY	0.00									
BOARD MEMBER		X						0.	0.	0.
(7) BRANDON NIELSON	0.00							_		
BOARD MEMBER		X					L_	0.	0.	. 0.
(8) TERESA CARDON	2.00								_	_
BOARD MEMBER		X		L				0.	.0.	0.
(9) DANA LAYTON	0.00									•
BOARD MEMBER		X		_				0.	0.	0.
(10) ADAM ROBERTSON	0.00	,,								0
BOARD MEMBER	ļ	X				<u> </u>		0.	0.	0.
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. 0	Section A. Officers, Directors, Iru	stees, Key Em	pio	<u>/ees</u>	<u>, an</u>	a H	ighe	St C	ompensated Employe	es (continuea)				
	(A) Name and title	Name and title Average (do not ch box, unles				rson	than is bo	lh an	(D) Reportable compensation	(E) Reportable compensate			(F) stimate nount	
		week (list any hours for related	trustee or director		nd a d		sated or/pros	Ĺ	from the organization	from relate organization (W-2/1099-MI	าร	f	other pensa rom th	ation ie
:		organizations below line)	Individual trustee	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)		:	an	janizat d relat anizati	ted
	·											,		
									_					
				3.										
Ä.	1. Daniel Committee		, ,,, ,			,			,	,	1			*
	. '											,		
1b	Sub-total Sub-total							>	0.		0.			0.
q	Total from continuation sheets to Part V Total (add lines 1b and 1c)	II, Section A						▶	0.	· · · · · · · · · · · · · · · · · · ·	0.			0.
2	Total number of individuals (including but compensation from the organization	not limited to th	ose	liste	ed al	bove	e) wl	no re	eceived more than \$100	0,000 of reportab	ole			0
													Yes	Nο
3	Did the organization list any former officer line 1a? If "Yes," complete Schedule J for	such individual					-					3		х
4	For any individual listed on line 1a, is the sand related organizations greater than \$15	0,000? If "Yes,	" co	mp!	ete S	Sche	edule	e J f	or such individual	_		4		х
5 	Did any person listed on line 1a receive or rendered to the organization? If "Yes," cor							elat	ed organization or indiv	idual for services	3	5		Х
Sec	tion B. Independent Contractors													
1	Complete this table for your five highest compensation. Report compensation for										npens	ation	from	
	(A) Name and busines:	s address	N	INC	3				(B) Description of s	ervices	O	ompe	c) nsatio	n
							-							,
			•				-		,					
														,
		*****	•						ı	. ,				
2	Total number of independent contractors \$100,000 of compensation from the organ	-	ot lu	mıte	d to		se lis	sted	above) who received m	nore than		•		1

		Check of Schedule O contains a	response of note to any in	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	, b c d	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contributions) All other contributions, gifts, grants, and similar amounts not included above Noncash contributions included in lines 1a-1f \$	1f 150,211.	ugger er stand a c		erm A ar wakin ar	, , , , , , additist to
<u>ŏ</u> <u>ĕ</u>	h	Total. Add lines 1a-1f	>	240,211.			
Program Service Revenue	2 a		Business Code			,	
	, ,						
-11 -	3 4 5	, Investment income (including divide other similar amounts) Income from investment of tax-exem Royalties	. ▶	20,108.			20,108.
•	6 a	Gross rents Less, rental expenses) Real (II) Personal 91,250. 191,858. 100,608.		,		
	7 a	Net rental income or (loss) Gross amount from sales of assets other than inventory Less cost or other basis and sales expenses	ecurities (ii) Other	<100,608.	> <100,608.	>	
· .	1	Gain or (loss)	>				,
Other Revenue	8 a		of ee a b		-	•	,
	9 a	Gross income from gaming activities Part IV, line 19 Less direct expenses Net income or (loss) from gaming ac	s See a b	-		त्त्र घटनाः ग्रीवयास्य स	
	10 a	Gross sales of inventory, less return and allowances Less. cost of goods sold Net income or (loss) from sales of in	s	•			-
		Miscellaneous Revenue	Business Code	42 027	-		A3 927
	t c			43,927.	100.		43,927.
	٥			44,027.		 	
		Total. Add lines 11a-11d Total revenue. See instructions.	▶	203,738.	<100,508.	· 0.	64,035.

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX (A) Total expenses (**D**) Fundraising Do not include amounts reported on lines 6b, Management and general expenses Program service 7b, 8b, 9b, and 10b of Part VIII. expenses expenses' Grants and other assistance to domestic organizations 250,000. 250,000. and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 10 Payroll taxes: Fees for services (non-employees): a Management b Legal. 18,001. 18,001 c Accounting **d** Lobbying e Professional fundraising services. See Part IV, line 17 3,877. 3,877. Investment management fees q Other (If line 11g amount exceeds 10% of line 25, 300. 300. column (A) amount, list line 11g expenses on Sch O.) 946. 12 Advertising and promotion 13 Office expenses 14 Information technology 15 Royalties 16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 20 Interest · 21 Payments to affiliates 22 Depreciation, depletion, and amortization 23 Other expenses Itemize expenses not covered 24 above. (List miscellaneous expenses in line 24e If line 24c amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) 7,748. CLEANING 7,748. 744. **OPERATIONS** 774. 3,030 100 STORAGE UNIT 1,100. d CREDIT CARD PROCESSING 555 555. 295 54. 349. All other expenses 257,748. 25,203. 3,699. Total functional expenses Add lines 1 through 24e 286,650. 25 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)

Pa	rt X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		. (B) End of year
	1	Cash - non-interest-bearing	311,361.	1	416,396.
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net	<u></u>	3	
,	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors,			,
		trustees, key employees, and highest compensated employees. Complete			,
		Part II of-Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under			
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary	-		
ţ		employees' beneficiary organizations (see instr) Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		7	226.
⋖	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, pulldings, and equipment cost or other			
		basis. Complete Part VI of Schedule D Less accumulated depreciation 10a 6,436,837. 10b 825,303.	04-		5 644 534
	b	Less accumulated depreciation 10b 825,303.	5,753,215.	10c	5,611,534.
,	1,1	Investments - publicly traded securities	648,538.	11	5,611,534. 798,470. 5,000.
	12	Investments other securities See Part IV, line 11	5,000.	12	5,000.
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets	1 100 066	14	051 660
	15	Other assets See Part IV, line 11	1,102,066. 7,820,180.	15	851,660. 7,683,286.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	7,820,180.	16 17	7,663,280.
	17	Accounts payable and accrued expenses	047.		40.
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to current and former officers, directors, trustees,			
Ē		key employees, highest compensated employees, and disqualified persons.		22	•
Lia		Complete Part II of Schedule L	1,075,170.	23	1,021,798.
	23 24	Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties	2/0/3/2/00	24	2,022,1201
	1	Other liabilities (including federal income tax, payables to related third			·
	25	parties, and other liabilities not included on lines 17-24) Complete Part X of			
	1	Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	1,075,819.	26	1,021,838.
	20	Organizations, that follow SFAS 117 (ASC 958), check here ▶ X and			
ဖွာ	1	complete lines 27 through 29, and lines 33 and 34.	•		•
JC	27	Unrestricted net assets	3,940,899.	27	3,857,986.
ala	28	Temporarily restricted net assets	978,462.	28	978,462.
В В	29	Permanently restricted net assets	1,825,000.	29	1,825,000.
Ë		Organizations that do not follow SFAS 117 (ASC 958), check here			
ō		and complete lines 30 through 34.	•	١,	
ts	30	Capital stock or trust principal, or current funds		30	
SSe	31	Paid-in or capital surplus, or land, building, or equipment fund	· · · · · · · · · · · · · · · · · · ·	31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds		32	
ž	33	Total net assets or fund balances	6,744,361.	33	6,661,448.
	34	Total liabilities and net assets/fund balances	7,820,180.	34	7,683,286.
					Form 990 (2017)

Form	HURST WOOD EDUCATION FOUNDATION INC	20-26	97232	Pac	_{ge} 12
***	rt XI Reconciliation of Net Assets				dr
	Check if Schedule O contains a response or note to any line in this Part XI				
	Officer is deficiently a respective of free to any into in this vary				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	20	3,7	38.
2	Total expenses (must equal Part IX, column (A), line 25)	2	28	6,6	50.
3	Revenue less expenses Subtract line 2 from line 1	3	<82	2,9	<u>12.</u> >
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	6,74		
5	Net unrealized gains (losses) on investments	5	· ·	_ <u></u> -	
6	Donated services and use of facilities	6		-	
7	Investment expenses	7			
		8			
8	Prior period adjustments	9			0.
9	Other changes in net assets or fund balances (explain in Schedule O)	-			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,	10	6,66	1 4	49.
Pa	column (B)) rt XII Financial Statements and Reporting	10	0,00.	-,-	
					
	Check if Schedule O contains a response or note to any line in this Part XII			Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both		-		
	Separate basis Consolidated basis X Both consolidated and separate basis				, .
þ	Were the organization's financial statements audited by an independent accountant?		2b		X
•	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			
	consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
.c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt,	1 1		
	review, or compilation of its financial statements and selection of an independent accountant?		- 2c		X
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si				
	Act and OMB Circular A-133?		3a		X
ь	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	ired audit			
	are audite purplem where Schedule O and decambe any stone taken to undergo such guidite		35		

Form **990** (2017)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

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

4947(a)(1) no security charity of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first of the first

Attach to Form 990 or Form 990-EZ.
 Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

OMB No 1545-0047

Name of the organization

Employer identification number

HURST WOOD EDUCATION FOUNDATION INC 20-2697232 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 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ)) 2 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 X An organization that normally receives. (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or 12 more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization f Enter the number of supported organizations g Provide the following information about the supported organization(s) (iv) Is the organization listed (vi) Amount of other (v) Amount of monetary (iii) Type of organization (i) Name of supported (ir) EIN n your governing documi (described on lines 1-10 support (see instructions) support (see instructions) organization above (see instructions)) Total

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	ction A. Public Support	siow, picase comp	Siete r art ir j			***	
	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
	Gifts, grants, contributions, and						
	membership fees received (Do not			ļ			
	include any "unusual grants.")				447,950.	240,211.	688,161.
2	Gross receipts from admissions,						
	merchandise sold or services per-	•	,				
	formed, or facilities furnished in any activity that is related to the]			
	organization's tax-exempt purpose				125,959.	91,250.	217,209.
3	Gross receipts from activities that						•
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization'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				573,909.	331,461.	905,370.
77	Amounts included on lines 1, 2, and						
	3 received from disqualified persons		,		228,886.	90,000.	318,886.
ŧ	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that exceed the greater of \$5,000 or 1% of the	, ,			1		_
	amount on line 13 for the year						0.
c	Add lines 7a and 7b				228,886.	90,000.	318,886.
	Public support. (Subtract line 7c from line 6.)			L			586,484.
	ction B. Total Support		,		-		
Cale	indar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016 573, 909.	(e) 2017 331, 461.	(f) Total 905,370.
	Amounts from line 6		ļ <u> </u>		5/3,909.	331,461.	905,370.
10a	Gross income from interest, dividends, payments received on					1	
	securities loans, rents, royalties,				01 001	20 100	41 100
	and income from similar sources				21,091.	20,108.	41,199.
t	Unrelated business taxable income	ı					
	(less section 511 taxes) from businesses			ļ			
	acquired after June 30, 1975		<u></u>		01 001	20 100	/1 100
	Add lines 10a and 10b				21,091.	20,108.	41,199.
11	Net income from unrelated business activities not included in line 10b,	1	İ				
	whether or not the business is						
40	regularly carried on .			 			
12	Other income. Do not include gain or loss from the sale of capital						
	assets (Explain in Part VI)		<u> </u>		505 000	351,569.	946,569.
	Total support. (Add lines 9, 10c, 11, and 12)					L	
14	First five years. If the Form 990 is for	the organization's	s tirst, secona, tnii	ra, tourth, or titth	tax year as a section	n 50 r(c)(3) organiz	ation,
20	check this box and stop here ction C. Computation of Publi	ic Support Pe	rcentage	, , ,			
	Public support percentage for 2017 (li			column (fl)		15	61.96 %
	Public support percentage from 2016		· ·	column (i))		16	. %
	ction D. Computation of Inves					1.91	······
_	Investment income percentage for 20					17	4.35 %
	Investment income percentage from 2			,		18	%
	33 1/3% support tests - 2017. If the			on line 14, and lir	ne 15 is more than 3	33 1/3%, and line 1	7 is not
.56	more than 33 1/3%, check this box as						\mathbf{X}
ŀ	33 1/3% support tests - 2016. If the						
•	line 18 is not more than 33 1/3%, che						, ▶□
20	Private foundation. If the organization						<u> </u>

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I If you checked 12a of Part I, complete Sections A and B- If you checked 12b of Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below
- **b** Did the ofganization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?
 If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI.**
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI**.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

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Sche	edule	A (Form 990 or 990-EZ) 2017 HURST WOOD EDUCATION FO	UNDAT	ION INC	20-2697232 Page 6
Pai		Type III Non-Functionally Integrated 509(a)(3) Supporting			
1		Check here if the organization satisfied the Integral Part Test as a qualifying	trust on	Nov. 20, 1970 (explain in	Part VI.) See instructions. A
		other Type III non-functionally integrated supporting organizations must co	mplete Se	ctions A through E.	
Sect	ion A	A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net	short-term capital gain	1		
2		overies of prior-year distributions	2		
3		er gross income (see instructions)	3		
4		lines 1 through 3	4		
5	Dep	preciation and depletion	5		
6		tion of operating expenses paid or incurred for production or			
		ection of gross income or for management, conservation, or			
•		ntenance of property held for production of income (see instructions)	6		
7		er expenses (see instructions)	7		
8		usted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect		3 - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Agg	regate fair market value of all non-exempt-use assets (see			
		ructions for short tax year or assets held for part of year).			
a		rage monthly value of securities	1a		
		rage monthly cash balances	1b		
		market value of other non-exempt-use assets	1c		
		al (add lines 1a, 1b, and 1c)	1d	<u>.</u>	
		count claimed for blockage or other			, kv
		ors (explain in detail in Part VI)			İ
2		uisition indebtedness applicable to non-exempt-use assets	2		
3		stract line 2 from line 1d	3		,
4		sh deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,			
-		instructions)	4		•
5		value of non-exempt-use assets (subtract line 4 from line 3)	5		•
6		tiply line 5 by .035	6		
7		coveries of prior year distributions	7		
8		imum Asset Amount (add line 7 to line 6)	8		
Sect		C - Distributable Amount			Current Year
1	Adıı	usted net income for prior year (from Section A, line 8, Column A)	1		
2		er 85% of line 1	2		
3		imum asset amount for prior year (from Section B, line 8, Column A)	3		1. \
4		er greater of line 2 or line 3	4		
5		ome tax imposed in prior year	5		•
6		tributable Amount, Subtract line 5 from line 4, unless subject to			

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see

Schedule A (Form 990 or 990-EZ) 2017

emergency temporary reduction (see instructions)

instructions)

	dule A (Form 990 or 990 EZ) 2017 HURST WOOD ED	UCATION FOUNDA		0-2697232 Page 7
	Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations (continued)	
Sect	ion D - Distributions			Current Year
· <u>1</u>	Amounts paid to supported organizations to accomplish exe			· · · · · · · · · · · · · · · · · · ·
2	Amounts paid to perform activity that directly furthers exempt	ot purposes of supported	r - e	,
	organizations, in excess of income from activity	*		<u> </u>
3	Administrative expenses paid to accomplish exempt purpos	es of supported organization	ns .	
4	Amounts paid to acquire exempt-use assets	· · · · · · · · · · · · · · · · · · ·		*
	Qualified set-aside amounts (prior IRS approval required)	· '		· · · · · · · · · · · · · · · · · · ·
6	Other distributions (describe in Part VI). See instructions	·		
7	Total annual distributions. Add lines 1 through 6		•	No. 3
8	Distributions to attentive supported organizations to which t	he örganization is responsive	e * * * * * *	, , , ,
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2017 from Section C, line 6	<i>i</i>		
<u> 10 </u>	Line 8 amount divided by line 9 amount		-	
<u>پ</u> ر ر		(i) ' *	(ii)	(iii)
Sect	ion E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2017	Distributable Amount for 20,17
·		Trade Care and a contraction for the Albania conductific tradition of	uat-politic seption duals albert skylle a cali et attende des attitutions	
<u>1</u>	Distributable amount for 2017 from Section C, line 6	Control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the contro		AND REAL PROPERTY AND PROPERTY OF SECTION AND
2	Underdistributions, if any, for years prior to 2017 (reason-		,	
	able cause required- explain in Part VI). See instructions.		4	
3	Excess distributions carryover, if any, to 2017			
a				
b	From 2013	Trickly of Recording 1900		erichenter der er eine er eine er
С	From 2014			
٠d	From 2015			
· e	From 2016			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years		3	
h	Applied to 2017 distributable amount			4)
i	Carryover from 2012 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2017 from Section D,			
•	line 7: \$			
а	Applied to underdistributions of prior years	Liener fretens	\$	
b	Applied to 2017 distributable amount			
С	Remainder Subtract lines 4a and 4b from 4.	,		
5	Remaining underdistributions for years prior to 2017, if			
	any Subtract lines 3g and 4a from line 2. For result greater		•	
	than zero, explain in Part VI. See instructions		u ,	
6	Remaining underdistributions for 2017 Subtract lines 3h			. •
	and 4b from line 1. For result greater than zero, explain in			
•	Part VI. See instructions			-
7	Excess distributions carryover to 2018. Add lines 3	,		
	and 4c.			
8	Breakdown of line 7:			
а	Excess from 2013		AND THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPER	
	Excess from 2014			
	Excess from 2015			
	Excess from 2016	Carried and Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control o	180 1/45022 2602220 48772 10 10 4 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6	
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Schedule A (Form 990 or 990-EZ) 2017

e Excess from 2017

Schedule A	(Form 990 or 990-EZ)	2017 HURST	WOOD	EDUCATION	FOUNDATION	INC	20-2697232	Page 8
	Supplemental I Part IV, Section A, Ii line 1; Part IV, Section	Information. P nes 1, 2, 3b, 3c, 4 on D, lines 2 and 3	rovide the b, 4c, 5a, 6 3; Part IV, 9	explanations require 6, 9a, 9b, 9c, 11a, 1 Section E, lines 1c, 2	ed by Part II, line 10, Pa Ib, and 11c; Part IV, S a, 2b, 3a, and 3b; Part Also complete this part	art II, line 17a or ection B, lines 1 V, line 1; Part V,	17b; Part III, line 12, and 2; Part IV, Sectior Section B, line 1e, Pa	ı C.
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SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

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.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047 **Open to Public** Inspection

Name of the organization

HURST WOOD EDUCATION FOUNDATION INC

Employer identification number 20-2697232

Pa			s or Accounts.Complete if the
	organization answered "Yes" on Form 990, Part IV, lin		(6) []
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advis	
	are the organization's property, subject to the organization's	exclusive legal control?	└─ Yes └─ No
6	Did the organization inform all grantees, donors, and donor a	advisors in writing that grant funds can be	used only
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose	conferring
	impermissible private benefit?		Yes No
Pa	t II Conservation Easements. Complete if the org	ganization answered "Yes" on Form 990, l	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organizat	ion (check all that apply)	
	Preservation of land for public use (e.g., recreation or e		orically important land area
	Protection of natural habitat	Preservation of a cert	ified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form	of a conservation easement on the last
	day of the tax year		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
C	Number of conservation easements on a certified historic str	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired	after 7/25/06, and not on a historic struct	ure
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by the	e organization during the tax
	year ▶		
4	Number of states where property subject to conservation ea	sement is located >	
5	Does the organization have a written policy regarding the pe		
	violations, and enforcement of the conservation easements	rt holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	, handling of violations, and enforcing con	servation easements during the year
	>		
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conserva	ation easements during the year
	▶ \$		
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170)(h)(4)(B)(i)
	and section 17.0(h)(4)(B)(ii)?		└─ Yes └─ No
9	In Part XIII, describe how the organization reports conservat	ion easements in its revenue and expense	e statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organiza	ition's financial statements that describes	the organization's accounting for
	conservation easements.		
Pai	t III Organizations Maintaining Collections o	of Art, Historical Treasures, or O	ther Similar Assets.
	Complete if the organization answered "Yes" on Form	n 990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (AS		
	historical treasures, or other similar assets held for public ex	hibition, education, or research in furthera	ince of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descri	ribes these items.	
b	If the organization elected, as permitted under SFAS 116 (AS	SC 958), to report in its revenue statemen	t and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of pu	blic service, provide the following amounts
	relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		> \$
	(ii) Assets included in Form 990, Part X		► \$ ► \$
2	If the organization received or held works of art, historical tre	easures, or other similar assets for financia	
-	the following amounts required to be reported under SFAS 1		
а	Revenue included on Form 990, Part VIII, line 1	· -	> \$
	Assets included in Form 990, Part X		▶ \$
	For Paperwork Reduction Act Notice, see the Instruction	s for Form 990.	Schedule D (Form 990) 2017

	EDUCATION FO	DUNDATION IN	C20-	2697232 Page
Part VII Investments - Other Securities.				
Complete if the organization answered "Yes"				
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of v	aluation: Cost or end-	of year market value
(1) Financial derivatives				· · · · · · · · · · · · · · · · · · ·
(2) Closely-held equity interests	 			
(3) Other				
(A)				
(B)				·
(C)				<u> </u>
(D)				Y -
(E)		_		
(F)			-	
(G)				
(H)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)				
Part VIII Investments - Program Related.	. 			
Complete if the organization answered "Yes"	on Form 990. Part IV. I	ine 11c See Form 990.	Part X, line 13	
(a) Description of investment	(b) Book value	(c) Method of v	aluation: Cost or end-	of-year market value
(1)				
(2)				
(3)				
(4)			_	
(5)				· · · · · · · · · · · · · · · · · · ·
(6)			 	· · · · · · · · · · · · · · · · · · ·
(7)				
(8)				
(9)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets.				·
	on Form 000 Dort IV I	una 11d Can Form 000	Part V line 15	
Complete if the organization answered "Yes"	Description	ine 110. See Form 990,	rait A, lille 15.	(b) Book value
55665 TARES ALAIT 11011 ALIE				851,660
	KENI	·		031,000
(2)				
(3)				
(4)				
(5)				
(6)	 			
(7)				
(8)				
(9)				0E1 660
Total. (Column (b) must equal Form 990, Part X, col (B) lin	ne 15)		<u></u>	851,660
Part X Other Liabilities.				
Complete if the organization answered "Yes"	on Form 990, Part IV, I		n 990, Part X, line 25	
1. (a) Description of liability		(b) Book value		
(1) Federal income taxes				
(2)				
(3)				
(4)				
(5)				•
(6)				•
(7)				
(8)				•
(9)				· a
Total. (Column (b) must equal Form 990, Part X, col (B) lin	ne 25)			

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

	edule D (Form 990) 2017 HURST WOOD EDUCATION FOL		20-269/232 Pag	<u>e 4</u>
Pa	t XI Reconciliation of Revenue per Audited Financial Stat		nue per Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line	12a.		
1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.	1 1		
а	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
С	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d			
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:]	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
С	Add lines 4a and 4b		4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			
Pa	rt XII Reconciliation of Expenses per Audited Financial Sta	tements With Exp	enses per Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line	12a.		
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
С	Other losses	2c		
d	Other (Describe in Part XIII.)	2d	<u> </u>	
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1.			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
С	Add lines 4a and 4b		4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.	<u>) </u>	5	
_	rt XIII Supplemental Information.	D. + IV 1 4 b 4 Ob	Dark V. Iran A. Bark V. Iran O. Bark VI.	—
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4		, Part V, line 4; Part X, line 2; Part XI,	
lines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide an	y additional information		
				—
				—
				—
				—
	· · · · · · · · · · · · · · · · · · ·	 		
			<u> </u>	—
			<u> </u>	
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				—
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SCHEDULE 1 (Form 990)

Department of the Treasury Internal Revenue Service
Name of the organization

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

► Go to www.irs.gov/Form990 for the latest information.

Vame of the organization HITRST WOOD FINICATION	D EDITCATI	ON FOUNDATION	ON INC				Employer identification number 20-2697232
Part I General Information on Grants and Assistance	nd Assistance						
1 Does the organization maintain records to substantiate the amount of the grants or assistance, and the selection	to substantiate the	e amount of the grants	s or assistance, the	grantees' eligibility	y for the grants or ass	stance, and the selec	
criteria used to award the grants or assistance?	stance?						Yes X No
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	ocedures for monr	toring the use of grant	funds in the Unite	d States			
Part II Grants and Other Assistance to Domestic Organizations and	Domestic Organi	zations and Domesti	c Governments. C	complete if the orga	anization answered "Y	Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any	. IV, line 21, for any
1 (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of (e) or government (a) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein (f) Ein	(b) EIN	(if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
JTAH AUTISM ACADEMY 1434 SOUTH STATE STREET IIDVALE, UT 84047	46-4197992	501(C)	250,000.	.0			EDUCATE AUTISM STUDENT
1	and government o	rganizations listed in tl	he line 1 table				
-1	is listed in the line	1 table					
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.	e, see the Instruct	tions for Form 990.					Schedule I (Form 990) (2017)

Schedule I (Form 990) (2017) (f) Description of noncash assistance (e) Method of valuation (book, FMV, appraisal, other) Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information. (d) Amount of non-cash assistance (c) Amount of cash grant 31 (b) Number of recipients (a) Type of grant or assistance 732102 11-01-17

Page 2

20-2697232

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

HURST WOOD EDUCATION FOUNDATION INC

Schedule I (Form 990) (2017)

Part III

SCHEDULE 0 (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on

Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ. ▶ Go to www.irs.gov/Form990 for the latest information. Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

HURST WOOD EDUCATION FOUNDATION INC

Employer identification number 20-2697232

Schedule O (Form 990 or 990-EZ) (2017)

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
LIVES OF THEIR FAMILIES.
FORM 990, PART VI, SECTION A, LINE 2:
TIFFANY WOOD-MCCARTHY BOARD MEMBER
BRENT WOOD SECRETARY
FAMILY RELATION
KATHRYN WOOD TREASURER
BRENT WOOD SECRETARY
SPOUSE
FORM 990, PART VI, SECTION A, LINE 4:
THE FOUNDATION WAS ORGANIZED AS A NON-PROFIT SCHOOL PROVIDING SERVICES TO
FAMILIES IMPACTED BY AUTISM SPECTRUM DISORDERS (ASD). UNTIL JUNE 1,
2015 THE FOUNDATION OPERATED A SCHOOL OFFERING EDUCATIONAL AND SOCIAL
LEARNING OPPORTUNITIES FOR CHILDREN IN PRESCHOOL AND ELEMENTARY GRADES WITH
ASD. ON JUNE 1, 2015 THE FOUNDATION ENTERED INTO AN AGREEMENT WITH UTAH
AUTISM ACADEMY (UAA), A 501(C)(3)ORGANIZATION, IN WHICH THE FOUNDATION
LEASES THE SCHOOL FACILITIES TO UAA AND UAA CARRIES OUT ALL SCHOOL
OPERATIONS AND CARE SUPPORT FOR THE PRESCHOOL AND ELEMENTARY GRADE CHILDREN
WITH ASD. THE FOUNDATION IS PROVIDING SUBSTANTIAL ONGOING FINANCIAL
SUPPORT TO UAA FOR ALL OF THE EDUCATION OPERATIONS.
FORM 990, PART VI, SECTION B, LINE 11B:
SEVERAL MEMBERS OF THE BOARD REVIEW THE RETURN PRIOR TO FINALIZING. THEY

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

Name of the organization HURST WOOD EDUCATION FOUNDATION INC	Employer identification number 20-2697232
COMPARE NUMBERS ON THE TAX RETURN WITH THE BOOKS OF THE F	OUNDATION WHICH
HAVE PREVIOUSLY BEEN REVIEWED BY THE BOARD EXECUTIVE COMM	ITTEE.
FORM 990, PART VI, SECTION B, LINE 12C:	
REVIEWED ANNUALLY BY BOARD	
FORM 990, PART VI, SECTION C, LINE 19:	
A COPY OF THE IRS FORM 990 IS KEPT IN THE OFFICE AND MADE	AVAILABLE TO ANY
MEMBER OF THE PUBLIC UPON REQUEST.	
	
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