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DLN: 93493105006039

OMB No 1545-0047

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

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

Open to Public Inspection

			endar year, or tax year b C Name of organization	eginning 07-01-2017 , an	d ending 06	-30-2018			
	ck if app	plicable	INSTITUTE FOR QUALITY EDU	CATION INC			D Employ	er identif	ication number
	dress ch me chai	-					35-183	6687	
	tial retu	_	Doing business as						
		terminated							
□ Am	ended i	return		x if mail is not delivered to street a	address) Room/	'suite	E Telepho	ne number	
□ App	olication	n pending	101 W OHIO ST SUITE 700				(317) 9	951-8781	
				, country, and ZIP or foreign posta	l code				
			INDIANAPOLIS, IN 46204				G Gross r	eceipts \$ 12	2,306,102
			F Name and address of pri	ncıpal officer		H(a)	Is this a group re	eturn for	
		I	BETSY WILEY			` `	subordinates?		□Yes ☑No
			101 W OHIO ST SUITE 700 INDIANAPOLIS, IN 46204			Н(b)	Are all subordina	tes	☐ Yes ☐No
Tax	(-exem	pt status [✓ 501(c)(3)	\ 4 (,) \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	, D		included?	L-6 /	
) ◀ (insert no)	.) or $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$	H(c)	If "No," attach a Group exemption	•	•
W	ebsite	::► www	/ I4QED ORG			(c)	Group exemption	number	
						I Voar	of formation 1991	M State	of legal domicile IN
Forn	n of org	anization l	Corporation Trust	Association ✓ Other ►		Litedia	or formation 1991	I'I State	or legal dofficile 114
Dа	rt I	Summ	arv						
		•		ion or most significant activiti					
				LOW-INCOME FAMILIES FOR		SECOND	ARY EDUCATION		
2									
₹	_								
ב ע	_								
aovemance				on discontinued its operations					1 -
				erning body (Part VI, line 1a)				3	9
č	4 1	lumber of	independent voting membe	ers of the governing body (Par	t VI, line 1b)			4	9
ACHAINES &	5 ⊺	otal numb	er of individuals employed	ın calendar year 2017 (Part V	, line 2a) 🛚 .			5	10
(6 ⊺	otal numb	er of volunteers (estimate	ıf necessary)				6	9
Ĭ	7 a ⊺	otal unrela	ated business revenue from	Part VIII, column (C), line 12	2			7a	0
	Ь≀	let unrelat	ed business taxable income	e from Form 990-T, line 34 .				7b	8,800
							Prior Year		Current Year
	8 0	Contributio	ns and grants (Part VIII, lir	ne 1h)			10,572	950	12,155,802
en c				ne 2g)			100,		100,000
Rəvenue		_	·	(A), lines 3, 4, and 7d)			100,	0	0
æ							10	-	
				lines 5, 6d, 8c, 9c, 10c, and 1	•		10,683	501	50,300 12,306,102
			-	(must equal Part VIII, colum					
				: IX, column (A), lines 1–3).			7,673		9,055,573
	14 B	Benefits pa	id to or for members (Part	IX, column (A), line 4)				0	0
&	15 S	Salaries, ot	ther compensation, employ	ee benefits (Part IX, column (A), lines 5–10)	472,	579	1,038,788
Expenses	16 a F	Professiona	al fundraising fees (Part IX,	column (A), line 11e)				0	0
9	b⊤	otal fundrais	sing expenses (Part IX, column	(D), line 25) ▶46,219					
ū	17 C	Other expe	nses (Part IX, column (A),	lines 11a-11d, 11f-24e) .			944,	399	869,275
	18 ⊺	otal exper	nses Add lines 13-17 (mus	t equal Part IX, column (A), lı	ne 25)		9,090	608	10,963,636
	19 R	Revenue le	ss expenses Subtract line	18 from line 12			1,592	843	1,342,466
ν Σ (2)			<u> </u>			Beg	jinning of Current		End of Year
Net Assets of Fund Balances							=		
35.6	20 ⊺	otal assets	s (Part X, line 16)				9,845,	744	11,155,040
2 2	21 T	otal liabilit	ties (Part X, line 26)				49	546	16,376
Ę			or fund balances Subtract				9,796	198	11,138,664
Dar	t II		ure Block						
				examined this return, including	d accompanyii	na schedu	les and statement	s and to	the hest of my
				plete Declaration of preparer					
ny ki	nowled	dge							
		*****					2019-03-20		
		Signature	e of officer				Date		
Sign Here		, N ====================================	NEW PRESIDENT						
1010	'		ILEY PRESIDENT print name and title						
		y		Dronaror's stanstone		Date		DTIN	
. .			it/Type preparer's name SSE TATE	Preparer's signature CASSE TATE		Date 2019-03-2		PTIN P01271193	3
Paic		F	o's name - VCM BLISTNESS (EEDVICES INC		<u> </u>	self-employed	_2122202	
_	oarei	- Err	n's name KSM BUSINESS S n's address PO BOX 40857	DELIATORS TIME			Firm's EIN ► 35		
Jse	Only	y 「'''					Phone no (317)	360-2000	
			INDIANAPOLIS, I	N 462400857				_	
1ay t	he IRS	discuss th	ns return with the preparer	shown above? (see instruction	ns)			. 🗹 Y	res 🗆 No
or D	200511	ork Bodu	iction Act Notice, see the	s constate instructions			: No 11282Y		Form 990 (2017)

Form	990 (2	017)				Page 2
Par	t III	Statement of Program Se	rvice Accomplis	hments		_
		Check if Schedule O contains a r	esponse or note to	any line in this Part III		🗹
1	Briefly	describe the organization's missi				
ANAL MAN	DURAGE LYSIS A Y FORM	S ALL SCHOOLS TO IMPROVE BY BOUT THE PRIMARY (K-12) EDUC	INTRODUCING COM ATIONAL SYSTEM IN TES AND ELSEWHE	IPETITION INTO THE SY NINDIANA INCLUDING I RE, AND EDUCATES TH	EVES AS A MODEL FOR RESEARCH A STEM THE ORGANIZATION CONDU BUT NOT LIMITED TO SCHOOL CHO E GENERAL PUBLIC AND, IN PARTIC	JCTS RESEARCH AND DICE AS IT EXISTS IN
	Did th	e organization undertake any sigr	uficant program ser	vices during the year wh	arch were not listed on	
2		ior Form 990 or 990-EZ?		- ·		☐ Yes ☑ No
	•	s," describe these new services or				
3		e organization cease conducting,		changes in how it condu	icts, any program	
		es [?]	-			☐ Yes 🗹 No
		s," describe these changes on Sch				
4	Descri Sectio	be the organization's program sei	vice accomplishmer zations are required	to report the amount o	largest program services, as measu f grants and allocations to others, t	
4a	(Code) (Expenses \$	10,220,447	including grants of \$	9,055,573) (Revenue \$	150,300)
	See Ad	lditional Data				
4b	(Code) (Expenses \$		including grants of \$) (Revenue \$)
4c	(Code) (Expenses \$		including grants of \$) (Revenue \$)
4d	Other	program services (Describe in Sc	hedule O)			
	(Expe	nses \$	including grants of	\$) (Revenue \$)
4e	Total	program service expenses ►	10,220,4	47		

or X as applicable

Checklist of Required Schedules

Section 501(c)(3) organizations.

Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year?

Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right

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

Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments,

c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its

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

Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D. Part X 🕏

Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses

the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 🛸

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🕏

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

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

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

b Was the organization included in consolidated, independent audited financial statements for the tax year?

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

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

14a Did the organization maintain an office, employees, or agents outside of the United States? . . .

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)

complete Schedule G, Part III

foreign organization? If "Yes," complete Schedule F, Parts II and IV

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV

Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total

permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🕏 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX,

5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,

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 🛸 . . . Did the organization maintain collections of works of art, historical treasures, or other similar assets?

assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🛸

to provide advice on the distribution or investment of amounts in such funds or accounts?

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10?

12a Did the organization obtain separate, independent audited financial statements for the tax year?

assessments, or similar amounts as defined in Revenue Procedure 98-19?

Yes

Page 3

Nο

No

Nο

Nο

Nο

Nο

Νo

Nο

No

Nο

Form **990** (2017)

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Yes

Yes

Yes

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Par	t IV Checklist of Required Schedules (continued)			
			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic	21	Yes	

government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX. column (A), line 2? If "Yes," complete Schedule I, Parts I and III

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,"

24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and

b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . .

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . .

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

28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

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

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

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

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

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

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

Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?

Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member

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

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

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

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

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

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

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

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

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2

is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 🛸

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

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

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

instructions for applicable filing thresholds, conditions, and exceptions)

22 23

24a

24b

24c

24d

25a

25b

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28a

28b

28c

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35a

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Yes

Yes

Form 990 (2017)

Yes

Page 4

Νo

Νo

No

Nο

Νo

Nο

orm	990 (2017)			Page
Par				_
	Check if Schedule O contains a response or note to any line in this Part V			Ш
	Fortraths around an Day 2 of Forms 1000 Fortra O. Arothornological July 1		Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 13 Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3а	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
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		No
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		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
	, ·····, ·· - ··· ·· · · · · · · · · · · · ·	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6 a		No
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			
_	required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
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		
9a	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		
0	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
1	Section 501(c)(12) organizations. Enter			
а	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)			
2~	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	124		
.3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
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			
С	Enter the amount of reserves on hand			
_	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
.4a	- '''			

OHIII	990 (2	517)					Page C
Par		Governance, Management, and DisclosureFor each "Yes" response to lines 2 t 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedi			" respo	nse to li	nes
		Check if Schedule O contains a response or note to any line in this Part VI					✓
Se	ction	A. Governing Body and Management					
						Yes	No
1a	Enter t	the number of voting members of the governing body at the end of the tax year	1a	9			
	body,	e are material differences in voting rights among members of the governing or if the governing body delegated broad authority to an executive committee or committee, explain in Schedule O					
b	Enter t	the number of voting members included in line 1a, above, who are independent	1b	9			
2		y officer, director, trustee, or key employee have a family relationship or a busines , director, trustee, or key employee?	ss rela	tionship with any other	2		No
3		e organization delegate control over management duties customarily performed by ters, directors or trustees, or key employees to a management company or other p			3		No
4	Did the	e organization make any significant changes to its governing documents since the	prior F	orm 990 was filed?	4		No
5	Did the	e organization become aware during the year of a significant diversion of the organ	nizatio	n's assets?	5		No.
6		e organization have members or stockholders?			6		No
		e organization have members, stockholders, or other persons who had the power t	n elec	t or appoint one or more	H		
		ers of the governing body?			7a		No
b		y governance decisions of the organization reserved to (or subject to approval by) is other than the governing body?	mem	bers, stockholders, or	7 b		No
8	Did the	e organization contemporaneously document the meetings held or written actions (lowing	undert	aken during the year by			
а	The go	overning body?			8a	Yes	
b	Each c	ommittee with authority to act on behalf of the governing body?			8 b	Yes	
9	Is ther organi	re any officer, director, trustee, or key employee listed in Part VII, Section A, who e zation's mailing address? <i>If "Yes," provide the names and addresses in Schedule C</i>	canno	t be reached at the	9		No
Se	ction	B. Policies (This Section B requests information about policies not requi	ıred b	y the Internal Revenu	e Code	⊋.)	
						Yes	No
		e organization have local chapters, branches, or affiliates?			10a		No
b		i," did the organization have written policies and procedures governing the activitie anches to ensure their operations are consistent with the organization's exempt pu			10b		
11a	Has th form?	e organization provided a complete copy of this Form 990 to all members of its go	vernin •	g body before filing the	11a		No
b	Descri	be in Schedule O the process, if any, used by the organization to review this Form	990				
12a	Did the	e organization have a written conflict of interest policy? If "No," go to line 13			12a	Yes	
b	Were o	officers, directors, or trustees, and key employees required to disclose annually int ts?	erests • •	that could give rise to	12b	Yes	
С		e organization regularly and consistently monitor and enforce compliance with the ule O how this was done	policy •	? If "Yes," describe in	12c	Yes	
13	Did the	e organization have a written whistleblower policy?	•		13	Yes	
14	Did the	e organization have a written document retention and destruction policy?			14	Yes	
15	Did the persor	e process for determining compensation of the following persons include a review a is, comparability data, and contemporaneous substantiation of the deliberation and	and ap	proval by independent sion?			
а	The or	ganization's CEO, Executive Director, or top management official			15a	Yes	
b	Other	officers or key employees of the organization			15b	Yes	
	If "Yes	" to line 15a or 15b, describe the process in Schedule O (see instructions)					
	taxabl	e organization invest in, contribute assets to, or participate in a joint venture or sir e entity during the year?			16a		No
b	ın join	," did the organization follow a written policy or procedure requiring the organizati t venture arrangements under applicable federal tax law, and take steps to safegu with respect to such arrangements?	ard th				
					16b		
		C. Disclosure					
17	List th	e States with which a copy of this Form 990 is required to be filed► IN					
18		n 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990 ole for public inspection Indicate how you made these available. Check all that app		990-T (501(c)(3)s only)			
	□ o	wn website 🔲 Another's website 🗹 Upon request 🔲 Other (explain in Sc	hedul	e O)			
19		be in Schedule O whether (and if so, how) the organization made its governing doc		•			
20		and financial statements available to the public during the tax year		la baalia ee laa			
20		the name, address, and telephone number of the person who possesses the organi BY WILEY 101 WEST OHIO ST SUITE 700 INDIANAPOLIS, IN 46204 (317) 951-87		's pooks and records			

Part VII

 \checkmark

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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations
- List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

(A) Name and Title	(B) Average hours per week (list any hours		ne b	ox, ι n of	t ch unle: ficer	ss pers	son	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the organization and	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	related organizations	
(1) BETSY WILEY PRESIDENT	24 00 16 00			х				163,333	4,667	9,437	
(2) AL HUBBARD CO-CHAIR	1 00	х		х				0	0	0	
(3) DAN ELSENER CO-CHAIR	1 00	х		x				0	0	0	
(4) ROBERT ENLOW BOARD MEMBER	1 00	х						0	0	0	
(5) HEATHER WILEY BOARD MEMBER	1 00	х						0	0	0	
(6) CHRIS LOWERY BOARD MEMBER	1 00	х						0	0	0	
(7) NEIL PICKETT BOARD MEMBER	1 00	Х						0	0	0	
(8) GINA FLEMING BOARD MEMBER	1 00	х						0	0	0	
(9) JOHN MUTZ BOARD MEMBER	1 00	Х						0	0	0	
(10) SCOTT BESS BOARD MEMBER	1 00	Х						0	0	0	
										Form 990 (2017)	

Part VII

(F)

Page 8

	(A) Name and Title	Name and Title Average hours per week (list any hours for related to the compensation was any hours for related to the compensation was also both an officer and a director/trustee) Average hours generated than one box, unless person week (list any hours director/trustee) Position (do not check more than one box, unless person generation was also both an officer and a director/trustee) Reportable compensation compensation was also both an officer and a director/trustee) 2/(1000 MISC)				(E) Reportable compensation from related organizations (V	v-	(F) Estimated amount of other compensation from the organization and						
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated emptoxee	Former	2/1093	MI3C)	2/1039-1113C)		relat organiza	ed
С	Sub-Total Total from continuation sheets to P	-	nΑ.				 		1	63,333	4,667	7		9,437
2	Total number of individuals (including of reportable compensation from the	g but not limited	to thos				e) who	rec	eıved mor	e than \$1	00,000			
3	Did the organization list any former line 1a? <i>If "Yes," complete Schedule</i>											3	Yes	No No
4	For any individual listed on line 1a, is organization and related organization individual										n the	4	Yes	
5	Did any person listed on line 1a recei services rendered to the organization											5		No
5 1	ection B. Independent Contract Complete this table for your five high		d indep	ender	nt co	ontra	actors	that	received	more than	\$100,000 of com	pens	ation	
	from the organization Report compe	(A) and business addre	alendar	year	end	ling	with o	r wit	thin the oi	ganızatıor	(B) ription of services		(C Comper	
	Traine										,			

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

compensation from the organization \blacktriangleright 0

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

	VIII Statement of Re	evenue					
	Check if Schedule O		onse or note to any	line in this Part VIII			🗆
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
	1a Federated campaigns	1a		I	revenue		312 311
nts	b Membership dues .	. 1b	61,000				
Gra nou	c Fundraising events .	. 1c					
S. A	d Related organizations	1d					
ei Bar	e Government grants (contri	butions) 1e					
S. E	f All other contributions, gift	<u> </u>					
Contributions, Gifts, Grants and Other Similar Amounts	and similar amounts not in above		12,094,802				
혈	g Noncash contributions	ıncluded					
	ın lınes 1a-1f \$						
چ چ	h Total. Add lines 1a-1f .		<u> </u>	12,155,802			
<u> </u>	T		Business	Code			
۲۶	2a PROGRAM REVENUE - MIND	TRUST		611710 10	00,000 100	,000	
Service Revenue	b						
Z K	с ———						
3	d ————						
an	e —						
Program	f All other program servic	e revenue	1	00,000		1	-
<u>~</u>	9 Total. Add lines 2a-2f .		•				
	3 Investment income (inclu similar amounts)		interest, and other				
	4 Income from investment						
	5 Royalties						
		(ı) Real	(II) Personal				
	6a Gross rents	12,00					
	b Less rental expenses)	-			
	c Rental income or (loss)	12,00					
	d Net rental income or (ic	oss)		12,000	12,000		
		(ı) Securities	(II) Other				
	7a Gross amount from sales of]			
	assets other than inventory						
	h Less cost or			4			
	other basis and sales expenses						
	C Gain or (loss)			1			
	d Net gain or (loss)		>	1			
•	8a Gross income from fundi (not including \$						
nue	contributions reported o	n line 1c)					
₹	See Part IV, line 18 .			1			
ά	b Less direct expenses . c Net income or (loss) from]			
Other Revenue	9a Gross income from gami		vents •	1			
ŏ	See Part IV, line 19						
		a		1			
	b Less direct expenses . c Net income or (loss) from		L	J			
	10aGross sales of inventory		ties >				
	returns and allowances]				
				1			
	b Less cost of goods sold		•	J			
	Net income or (loss) from		Business Code				
	11aMANAGEMENT FEE INCO		900099	27,600	27,600		
	b MISCELLANEOUS INCOM	ME	900099	10,700	10,700		
	1113CEEEANNEOOS INCOM						
	с		 	1			
	d All other revenue		+	1			
	e Total. Add lines 11a-11		•				
	12 Total revenue. See Ins			38,300			
	otal revenue: See IIIS		• • • •	12,306,102	150,300		0 0 Form 990 (2017)
							FULLI 990 [ZU1/]

Forr	n 990 (2017)				Page 10
	rt IX Statement of Functional Expenses				
Sec	tion 501(c)(3) and 501(c)(4) organizations must complete all co	3	•	` ,	
	Check if Schedule O contains a response or note to any	line in this Part IX .			<u> U</u>
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	9,055,573	9,055,573		
2	Grants and other assistance to domestic individuals See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	182,046	120,624	56,636	4,786
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	856,742	567,678	266,540	22,524
8	Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
a	Management	76,275	50,540	23,730	2,005
ı	Legal	2,961		2,961	
	Accounting	93,070		93,070	
	Lobbying	54,000		54,000	
	Professional fundraising services See Part IV, line 17				
	Investment management fees				
	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion	336,297	222,831	104,625	8,841
	Office expenses	165,883	109,159	52,304	4,420
	Information technology				· · · · · · · · · · · · · · · · · · ·
	Royalties				
	Occupancy	95,305	63,149	29,650	2,506
	Travel	40,825	27,051	12,701	1,073
	Payments of travel or entertainment expenses for any	2,239	2,239	,	
	federal, state, or local public officials . Conferences, conventions, and meetings	2,233	2,203		
	Interest				
	<u> </u>				
	Payments to affiliates	2,420	1,603	753	64
	Depreciation, depletion, and amortization	2,420	1,003	733	
	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
	a				
	b				
	с				
	d				
	e All other expenses				
25	Total functional expenses. Add lines 1 through 24e	10,963,636	10,220,447	696,970	46,219
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Check here ▶ ☐ If following SOP 98-2 (ASC 958-720)

23

24

25

26

27

28

29

31

32

33

34

Fund Balances

Assets or 30

Net

22 23

24

25

26

27

28

29

30

31

32

33

34

16,376

2.857.613

8.281.051

11,138,664

11.155.040

Form **990** (2017)

49.546

2.388.049

7,408,149

9,796,198

9.845.744

Page **11**

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

		Beginning of year		End of year
1	Cash-non-interest-bearing	9,571,141	1	11,050,628
2	Savings and temporary cash investments		2	
3	Pledges and grants receivable, net	245,000	3	75,000

4 Accounts receivable, net . Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part 5 II of Schedule L

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) 6 voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L . . . Notes and loans receivable, net . Inventories for sale or use . 8

Assets 14.502 9 18.815 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other 10a 20,180 basis Complete Part VI of Schedule D

18.658 3.942 1,522 b Less accumulated depreciation 10b 10c 11 Investments—publicly traded securities . 11 12 12 Investments—other securities See Part IV, line 11 . 13 13 Investments—program-related See Part IV, line 11

14 14 Intangible assets 15 11,159 15 9.075 Other assets See Part IV, line 11 . 9.845.744 11,155,040 16 **Total assets.**Add lines 1 through 15 (must equal line 34) . . . 16 17 Accounts payable and accrued expenses 49.546 17 16,376

18 18 Grants payable . . . 19 19 Deferred revenue . . .

20 Tax-exempt bond liabilities 20

21 Escrow or custodial account liability Complete Part IV of Schedule D 21 Liabilities 22 Loans and other payables to current and former officers, directors, trustees,

key employees, highest compensated employees, and disqualified

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties .

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here 🕨 🗹 and

persons Complete Part II of Schedule L .

and other liabilities not included on lines 17-24)

complete lines 27 through 29, and lines 33 and 34.

Organizations that do not follow SFAS 117 (ASC 958), check here

and complete lines 30 through 34.

Capital stock or trust principal, or current funds

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Total liabilities. Add lines 17 through 25 .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances

Unrestricted net assets

Page **12**

Nο

No

Form 990 (2017)

2a

2b

2c

3a

3b

Yes

Yes

Form 990 (2017)

Schedule O

☐ Separate basis

consolidated basis, or both ✓ Separate basis

Audit Act and OMB Circular A-133?

separate basis, consolidated basis, or both

8 Other changes in net assets or fund balances (explain in Schedule O) 9

10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 10 Part XII **Financial Statements and Reporting**

11,138,664 ~ Check if Schedule O contains a response or note to any line in this Part XII

Yes No ☐ Cash ☑ Accrual ☐ Other 1 Accounting method used to prepare the Form 990 If the organization changed its method of accounting from a prior year or checked "Other," explain in

☐ Both consolidated and separate basis

☐ Both consolidated and separate basis

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

Consolidated basis

Consolidated basis

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

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

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

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

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

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

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

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Additional Data

Software ID:

Software Version: **EIN:** 35-1836687

Name: INSTITUTE FOR QUALITY EDUCATION INC

Form 990 (2017)

Form 990, Part III, Line 4a: SCHOLARSHIP GRANTING ORGANIZATION. WHICH IS CERTIFIED BY THE INDIANA DEPARTMENT OF EDUCATION. GRANTS SCHOOL SCHOLARSHIPS TO CHILDREN TO

ASSIST IN TUITION AND FEES FOR THE YEAR ENDED 6/30/2018 4,263 STUDENTS RECIEVED SCHOLARSHIPS

efile GRAPHIC print - DO NOT PROCESS								DLN: 9:	3493105006039
	HED m 990	ULE A	_		Charity Statu			ort	OMB No 1545-0047
(FUI 990I		U UI	Con	iplete if the oi	rganization is a sect 4947(a)(1) nonexe			r a section	2017
Depart	ment of	the Treasury	▶ Infe	ormation abou	► Attach to Form to Schedule A (Form	990 or Form 99	0-EZ.	ıctions is at	Open to Public Inspection
Nam	e of th	ne organiza DR QUALITY ED						Employer identific	ation number
111211	IOIEFC	JR QUALITI EL	OCATION INC					35-1836687	
	rt I				us (All organization			See instructions.	
_	rganiz		•		it is (For lines 1 thro	5 ,	,	/A>/:>	
1		·		•	sociation of churches				
2		A school de	scribed in se	ction 170(b)(1)(A)(ii). (Attach Sch	nedule E (Form 9	90 or 990-EZ))		
3		·	•	·	vice organization desc			•	
4		name, city,	and state _		ed in conjunction with				
5		(b)(1)(A)	(iv). (Comple	ete Part II)	t of a college or unive				oed in section 170
6		•	•	_	governmental unit de				
7	\checkmark	-		mally receives ((vi). (Complete	a substantial part of it Part II)	s support from a	governmental u	init or from the genera	al public described in
8		A communi	ty trust desc	ribed in section	170(b)(1)(A)(vi)	(Complete Part I	I)		
9					escribed in 170(b)(1) ee instructions Enter				ege or university or a
10		An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III)							
11		An organiza	ation organize	ed and operated	d exclusively to test fo	r public safety S	ee section 509	(a)(4).	
12		more public	ly supported	organizations of	d exclusively for the be described in section 5 the type of supporting	09(a)(1) or se d	ction 509(a)(2). See section 509(a	
а		Type I. A so	supporting or n(s) the pow	ganızatıon oper	ated, supervised, or componit or elect a major	ontrolled by its s	upported organi	zation(s), typically by	
b		Type II. A	supporting o	rganization sup	ervised or controlled i ation vested in the sar				
C		Type III f	unctionally i		supporting organizatio				ted with, its
d		Type III n functionally	on-function integrated	ally integrated The organization	ons) You must com d. A supporting organi n generally must satis	ization operated fy a distribution i	ın connection wi requirement and	th its supported orgar	
e		Check this	box if the org	anızatıon receiv	't IV, Sections A and /ed a written determir	nation from the II		pe I, Type II, Type II	I functionally
f	Enter:			on-functionally lorganizations	integrated supporting	organization			
g				_	ipported organization(c)			
		lame of support organization	orted	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document? (vi) Amount of monetary support other support (see instructions) instructions			
					•	Yes	No		
					-				
Tota	l		tion Act Not			Cat No 11285		 Schedule A (Form 9	

instructions

Page 2

 B. I.P. C
III. If the organization fails to qualify under the tests listed below, please complete Part III.)
(Complete only if you checked the box on line 5, 7, 8, or 9 of Part I or if the organization failed to qualify under Part
(b)(1)(A)(ix)

	III. If the organization fa						to quamy	under rait
_	Section A. Public Support			<u> </u>	<u> </u>			
	Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2	2017	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant")	8,302,723	8,590,703	9,511,303	10,572,950	1.	2,155,802	49,133,481
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
3	The value of services or facilities furnished by a governmental unit to the organization without charge							
4 5	Total. Add lines 1 through 3 The portion of total contributions by	8,302,723	8,590,703	9,511,303	10,572,950	1.	2,155,802	49,133,481
5	each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)							725,728
6	Public support. Subtract line 5 from line 4							48,407,753
	Section B. Total Support							
	Calendar year (or fiscal year beginning in) ▶	(a)2013	(b) 2014	(c)2015	(d)2016	(e)2	:017	(f) Total
7		8,302,723	8,590,703	9,511,303	10,572,950	1.	2,155,802	49,133,481
8	Gross income from interest, dividends, payments received on	, ,	, ,	, ,	1,000	12,000		13,000
	securities loans, rents, royalties and income from similar sources				1,000			
9	Net income from unrelated business activities, whether or not the business is regularly carried on							
10	Other income Do not include gain or loss from the sale of capital				9,501		38,300	47,801
11	assets (Explain in Part VI) Total support. Add lines 7 through 10							49,194,282
12	Gross receipts from related activities,	etc (see instructio	ns)	<u>'</u>	•	12		200,000
13	First five years. If the Form 990 is for	or the organization'	s first, second, thi	rd, fourth, or fifth	tax year as a sect	ion 501(c)(3) organ	nization,
	check this box and stop here						▶□	
_	Section C. Computation of Publi							
14	Public support percentage for 2017 (li	ne 6, column (f) dı	rided by line 11, c	olumn (f))		14		98 400 %
15	Public support percentage for 2016 Sc	hedule A, Part II, l	ne 14			15		98 810 %
16	33 1/3% support test—2017. If the	e organization did n	ot check the box o	on line 13, and line	e 14 is 33 1/3% or	more, c	heck this b	ox
ŀ	and stop here. The organization qual 33 1/3% support test—2016. If the				ind line 15 is 33 1/	3% or m	iore, check	▶ ✓ this
17a	box and stop here. The organization a 10%-facts-and-circumstances tes is 10% or more, and if the organization in Part VI how the organization meets	t— 2017. If the org	anization did not o and-circumstance	check a box on line s" test, check this	box and stop her	r e. Expla	ain	▶□
Ŀ	organization 10%-facts-and-circumstances tes 15 is 10% or more, and if the organiz Explain in Part VI how the organization	zation meets the "fa	acts-and-circumsta	ances" test, check	this box and stop	here.		▶ □
	supported organization							ightharpoons

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

Р	Support Schedule for						
	(Complete only if you cl the organization fails to						er Part II. If
Se	ection A. Public Support	quality under t	ine tests listed i	below, please co	ompiete Part II.,)	
	Calendar year	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
_	(or fiscal year beginning in) ▶	(a) 2013	(0) 2014	(6) 2015	(4) 2016	(e) 2017	(I) Iotai
1	Gifts, grants, contributions, and membership fees received (Do not						
	include any "unusual grants ")						
2	Gross receipts from admissions,						
	merchandise sold or services						
	performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are						
	not an unrelated trade or business						
4	under section 513 Tax revenues levied for the						
-	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3						
	received from other than disqualified persons that exceed the greater of						
	\$5,000 or 1% of the amount on line						
	13 for the year						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
S	from line 6) ection B. Total Support						
	Calendar year						
	(or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9							
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and income from similar sources						
ь	Unrelated business taxable income						
	(less section 511 taxes) from						
	businesses acquired after June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is						
12	regularly carried on Other income Do not include gain or						
12	loss from the sale of capital assets						
	(Explain in Part VI)						
13	Total support. (Add lines 9, 10c,						
14	11, and 12) First five years. If the Form 990 is for	l r the organization	l 's first, second, th	L urd, fourth, or fift	l lax vear as a sec	ction 501(c)(3) o	l rganization
	check this box and stop here			,,	,		▶ □
Se	ection C. Computation of Public S	Support Perce	ntage				
15	Public support percentage for 2017 (lin			column (f))		15	
16	Public support percentage from 2016 S	chedule A, Part II	II, line 15			16	
Se	ction D. Computation of Investr	nent Income	Percentage				
17	Investment income percentage for 201	7 (line 10c, colur	nn (f) divided by	lıne 13, column (f	·))	17	
18	Investment income percentage from 20	016 Schedule A, I	Part III, line 17			18	
	331/3% support tests—2017. If the	organization did n	ot check the box	on line 14, and lir	ne 15 is more than		e 17 is not
	more than 33 1/3%, check this box and s						ightharpoons
	33 1/3% support tests—2016. If the						. —
_	not more than 33 1/3%, check this box	-			· ·		ightharpoons
20	Private foundation. If the organization	-	-				ightharpoons

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

Yes

5b

5c

7

9b

9с

10a

10b

Schedule A (Form 990 or 990-EZ) 2017

No

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	1	İ	
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)			
	in section 309(a)(1) or (2)	2		
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)			
	below	3a	İ	
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the			
	determination	3b		

b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the	·			
	determination				
С	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 ın 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				

				3.	
c	Did the organization ensure that all support to such organizations was used exclusively for section $170(c)(2)(B)$ purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use	-			
		3с			
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you				
	checked 12a or 12b ın 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		$\overline{}$		
	supervised by or in connection with its supported organizations				
С	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				
	to the foleight supported organization has ased exclusively to section 170(e)(2) purposes				
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and				

			, ,		
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	4a			
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported				
	organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	4b			
С	Did the organization support any foreign supported organization that does not have an IRS determination 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)				

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)			

Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the

Substitutions only. Was the substitution the result of an event beyond the organization's control?

which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

organization's organizing document?

10a

answer line 10b below

organization had an interest? If "Yes," provide detail in Part VI.

the organization had excess business holdings)

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)	8	
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as		i

```
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.
```

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

```
9a
Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting
```

Pa	rt IV Supporting Organizations (continued)			-9	
			Yes	No	
11	Has the organization accepted a gift or contribution from any of the following persons?				
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a			
b	A family member of a person described in (a) above?	11b			
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	11c			
	ection B. Type I Supporting Organizations				
			Yes	No	
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year				
_		1			
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization				
5	ection C. Type II Supporting Organizations				
	cetion c. Type 11 Supporting Organizations		Yes	No	
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the				
	supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1			
S	ection D. All Type III Supporting Organizations				
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		Yes	No	
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)				
		2			
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard	3			
s	ection E. Type III Functionally-Integrated Supporting Organizations				
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruct The organization satisfied the Activities Test. Complete line 2 below The organization is the parent of each of its supported organizations. Complete line 3 below The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see		ctions)		
2	Activities Test Answer (a) and (b) below.		Yes	No	
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	2a			
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement	2b			
3	Parent of Supported Organizations Answer (a) and (b) below.				
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	3a			
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI.</i> the role played by the organization in this regard	3b			

Schedule A (Form 990 or 990-EZ) 2017

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 (explain in Part VI) See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E (A) Prior Year (B) Current Year Section A - Adjusted Net Income (optional)

Page 6

Schedule A (Form 990 or 990-F7) 2017

1 Net short-term capital gain 1 Recoveries of prior-year distributions 2 3 Other gross income (see instructions) 3 4 4 Add lines 1 through 3 Depreciation and depletion 5 5 Portion of operating expenses paid or incurred for production or collection of gross 6 income or for management, conservation, or maintenance of property held for production of income (see instructions) 7 Other expenses (see instructions)

Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) 8 (A) Prior Year (B) Current Year Section B - Minimum Asset Amount (optional) Aggregate fair market value of all non-exempt-use assets (see instructions for short 1 tax year or assets held for part of year) a Average monthly value of securities 1a **b** Average monthly cash balances **1**b c Fair market value of other non-exempt-use assets 1c 1d d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI)

2 2 Acquisition indebtedness applicable to non-exempt use assets 3 Subtract line 2 from line 1d 3 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see 4 instructions) 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 6 6 Multiply line 5 by 035 7 Recoveries of prior-year distributions 7 Minimum Asset Amount (add line 7 to line 6) 8 8

Section C - Distributable Amount Current Year Adjusted net income for prior year (from Section A, line 8, Column A) 1 2 Enter 85% of line 1 3 Minimum asset amount for prior year (from Section B, line 8, Column A) Enter greater of line 2 or line 3 4 5 Income tax imposed in prior year 6

2 4 5 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) 7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

details in Part VI) See instructions Distributable amount for 2017 from Section C, line 6 (ii) (iii)

10 Line 8 amount divided by Line 9 amount Section E - Distribution Allocations (see (i) Underdistributions Distributable instructions) **Excess Distributions** Pre-2017 Amount for 2017 1 Distributable amount for 2017 from Section C, line

2 Underdistributions, if any, for years prior to 2017

(reasonable cause required-- explain in Part VI)

See instructions		
3 Excess distributions carryover, if any, to 2017		
a		
b From 2013		
c From 2014		
d From 2015		
e From 2016		
f Total of lines 3a through e		
g Applied to underdistributions of prior years		
h Applied to 2017 distributable amount		
 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		
<u> \$ </u>		
Applied to underdistributions of prior years		

b Applied to 2017 distributable amount c Remainder Subtract lines 4a and 4b from 4

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

5 Remaining underdistributions for years prior to 2017, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI

6 Remaining underdistributions for 2017 Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI See instructions 7 Excess distributions carryover to 2018. Add lines

c Excess from 2015.

See instructions

d Excess from 2016. Excess from 2017.

31 and 4c 8 Breakdown of line 7 a Excess from 2013. **b** Excess from 2014.

Schedule A ((Form 990 or 990-EZ) 2	:017 Pa	age 8				
Part VI	Section A, lines 1, 2, 3 Part IV, Section D, line	mation. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part I 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line es 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information (See					
Facts And Circumstances Test							
990 Sched	dule A, Supplemen	tal Information					
Ret	turn Reference	Explanation					
SCHEDIIIE	A DART IT LINE 10	DEIMBLIDSEMENT DENTAL - 2016 AMOUNT & 9 501 2017 AMOUNT & 0 MANAGEMENT EEE INCOME - 201					

SCHEDULE A, PART II, LINE 10, REIMBURSEMENT RENTAL - 2016 AMOUNT \$ 9,501 2017 AMOUNT \$ 0 MANAGEMENT FEE INCOME - 201

EXPLANATION OF OTHER 7 AMOUNT \$ 27,600 MISCELLANEOUS INCOME - 2017 AMOUNT \$ 10,700

INCOME

SCHEDULE C

• Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C

Political Campaign and Lobbying Activities

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

DLN: 93493105006039

Open to Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

EZ)

(Form 990 or 990-

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

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

Inspection

f the s f the f f f f f	Section 527 organizations Complet corganization answered "Yes" or Section 501(c)(3) organizations that Section 501(c)(3) organizations that	n Form 990, Part IV, Line 4, or Form 9 thave filed Form 5768 (election under s thave NOT filed Form 5768 (election ur n Form 990, Part IV, Line 5 (Proxy Tax s), then	90-EZ, Part VI, III ection 501(h)) Conder section 501(h	ne 47 (Lobb omplete Part	y ing Activit i :II-A Do not e Part II-B D	i es), com o no	plete Part II- t complete P	art II-A
Nar	me of the organization TITUTE FOR QUALITY EDUCATION INC	•			mployer id	enti	fication nur	nber
Par	t I-A Complete if the orga	nization is exempt under section	n 501(c) or is		35-1836687 527 organ	niza	ition	
1	Provide a description of the organ	ization's direct and indirect political can						
_	"political campaign activities")	(_			
2 3	Political campaign activity expend Volunteer hours for political camp				•	≯.		
		nization is exempt under section	n 501(c)(3).					
1	-	ex incurred by the organization under se						
2	<i>'</i>	ex incurred by organization managers u			•	Ψ. \$		
3	·	tion 4955 tax, did it file Form 4720 for t		,	•	Ψ.		
	Was a correction made?	,,	, , , , , , , , , , , , , , , , , , , ,				☐ Yes	∐ No
4a							∐ Yes	∐ No
b Para	If "Yes," describe in Part IV t I-C Complete if the organ	nization is exempt under section	n 501(c) eve	ent sectio	n 501(c)(3	31		
1	-	ed by the filing organization for section		-				
2	·	anization's funds contributed to other o	•			⊅.		
2	function activities	anization's funds contributed to other o	rganizations for si	ection 527 e.	xempt ▶	\$.		
3	Total exempt function expenditure	es Add lines 1 and 2 Enter here and or	n Form 1120-POL,	, lıne 17b	>	\$		
4	Did the filing organization file For	m 1120-POL for this year?					Yes	□ No
5	organization made payments For of political contributions received fund or a political action committe	employer identification number (EIN) of each organization listed, enter the amo that were promptly and directly deliver see (PAC) If additional space is needed,	ount paid from the ed to a separate p	e filing organ political orga	iization's fund nization, such	ds A	Iso enter the	
	(a) Name	(b) Address	(c) EIN	filing or funds If	unt paid from ganization's none, enter -0-		(e) Amount contribution and prom directly delirectly delirectly delirectly delirectly delirectly separate organization enter	s received ptly and vered to a political n If none,
1								
2								
3								
4								
5								
								

c	Total lobbying expenditures (add lines 1a and 1b)		80,097	80,097
d	Other exempt purpose expenditures		10,883,539	10,943,304
е	Total exempt purpose expenditures (add lines 1c and	10,963,636	11,023,401	
f	Lobbying nontaxable amount Enter the amount from columns	n the following table in both	698,182	701,170
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
g	Grassroots nontaxable amount (enter 25% of line 1f)	174,546	175,293
h	Subtract line 1g from line 1a If zero or less, enter -0	0-	C	0

	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000			
	Over \$17,000,000	\$1,000,000			
	Canada a carta car			174 546	175 203
9	Grassroots nontaxable amount (enter 25% of line 1f)		174,546	175,293
h	Subtract line 1g from line 1a If zero or less, enter -0)-		0	0
i	Subtract line 1f from line 1c If zero or less, enter -0	-		0	0
j	If there is an amount other than zero on either line 1 section 4911 tax for this year?	h or line 1i, did the organization file Form 472	0 reporting]	☐ Yes ☐ No

4-Year Averaging Period Under section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five

columns below. See the separate instructions for lines 2a through 2f.) Lobbying Expenditures During 4-Year Averaging Period

(a) 2014

(b) 2015

569,849

11,298

142,462

(c) 2016

640,640

56,369

160,160

(d) 2017

701,170

80,097

175,293

1,009 Schedule C (Form 990 or 990-EZ) 2017

(e) Total

1,911,659

2,867,489

147,764

477,915

716,873

Calendar year (or fiscal year

beginning in)

Lobbying nontaxable amount

(150% of line 2a, column(e))

Total lobbying expenditures

Grassroots ceiling amount

Grassroots nontaxable amount

(150% of line 2d, column (e))

Grassroots lobbying expenditures

Lobbying ceiling amount

Schedule C (Form 990 or 990-EZ) 2017

Return Reference

activity

(b)

Amount

(a)

No

Yes

During the year, did the filing organization attempt to influence foreign, national, state or local legislation, 1 including any attempt to influence public opinion on a legislative matter or referendum, through the use of Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements? Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? Total Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Yes No Were substantially all (90% or more) dues received nondeductible by members? 1 1 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 Did the organization agree to carry over lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6)Part III-B and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes." Dues, assessments and similar amounts from members 1 1 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 2a Current year 2b Carryover from last year С Total 2c 3 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 4 5 Taxable amount of lobbying and political expenditures (see instructions) Part IV Supplemental Information Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1 Also, complete this part for any additional information

Explanation

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying

TY 2017 Affiliated Group Schedule

Name: INSTITUTE FOR QUALITY EDUCATION INC

0

0

EIN: 35-1836687

Affiliated Group Business Name: HOOSIERS FOR QUALITY EDUCATION INC

Address. Either US or Foreign Type: 101 WEST OHIO SUITE 700

INDIANAPOLIS, IN 46204

EIN: 26-1280876

Electing Organization Checkbox:

Total Grassroots Lobbying:

Total Direct Lobbying: 0

Total Lobbying Expenditures: 0

Other Exempt Purpose Expenditures: 60,088

Total Exempt Purpose Expenditures: 60,088

Lobbying Nontaxable Amount: 12,018

Grassroots Nontaxable Amount: 3,005

Tot Lobbying Grassroot Minus Non 0
Tx:

Tot Lobby Expend Mns Lobbying Non

Share Of Excess Lobbying: 0

Affiliated Group Business Name: INSTITUTE FOR QUALITY EDUCATION INC

Address. Either US or Foreign Type: 101 WEST OHIO SUITE 700

INDIANAPOLIS, IN 46204

EIN: 35-1836687

Electing Organization Checkbox:

Total Grassroots Lobbying: 1,009

Total Direct Lobbying: 79,088

Total Lobbying Expenditures: 80,097 **Other Exempt Purpose Expenditures:** 10,883,541

Total Exempt Purpose Expenditures: 10,963,638

Lobbying Nontaxable Amount: 698,182

Grassroots Nontaxable Amount: 174,546
Tot Lobbying Grassroot Minus Non 0
Tx:

Tot Lobby Expend Mns Lobbying Non 0
Tx:

Share Of Excess Lobbying:

efile GRAPHIC print - DO NOT PROCESS As Filed Data -SCHEDULE D

following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1

Revenue included on Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

Supplemental Financial Statements

▶ Attach to Form 990.

▶ 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.

DLN: 93493105006039 OMB No 1545-0047

> Open to Public Inspection

Department of the Treasury Internal Revenue Service

(Form 990)

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Name of the organization **Employer identification number** INSTITUTE FOR QUALITY EDUCATION INC 35-1836687 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? 🗌 Yes 🗌 No Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 🕨 Number of states where property subject to conservation easement is located ▶ 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(II)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the

Assets included in Form 990, Part X For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 52283D Schedule D (Form 990) 2017

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the

following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

For	<u> </u>	Organizations Ma	aintaining Coi	ections o	or Art,	HISTORI	<u>cai ir</u>	<u>eası</u>	ires, or	Otner	<u>Similar A</u>	ssets (co	intinued)	
3		the organization's acq (check all that apply)	uisition, accessior	n, and other	records	s, check	any of t	he fo	llowing tl	hat are a	significant	use of its	collection	
а		Public exhibition				d		Loan	or excha	nge prog	ırams			
b		Scholarly research				e		Othe	r					
С		Preservation for future	e generations											
4	Provi Part	de a description of the XIII	organization's col	lections and	l explain	how the	y furth	er the	e organiz	ation's ex	kempt purp	ose in		
5		ng the year, did the orga s to be sold to raise fur									nılar	☐ Yes		No
Pa	rt IV	Escrow and Cust Complete if the ord X, line 21.			" on Fo	rm 990	, Part	IV, lı	ne 9, or	reporte	ed an amo	unt on Fo	orm 990	, Part
1a		e organization an agent ded on Form 990, Part)		an or other	ınterme	diary for	contrib	ution	s or othe	r assets	not	☐ Yes		No
ь	If "Ye	es," explain the arrange	ement in Part XIII	and comple	ete the f	ollowina	table		Γ			Amount		_
c		nning balance							ŀ	1c				_
d	-	ions during the year							Ī	1d				_
е		butions during the year	r						Ī	1e				_
f		ng balance							Ī	1f				
2a	Dıd tl	he organization include	an amount on Fo	rm 990, Pa	rt X, lıne	21, for	escrow	or cu	stodial a	ccount lia	ability?	☐ Yes		— No
b	If "Ye	es," explain the arrange	ement in Part XIII	Check her	e if the e	explanati	on has	been	provided	d in Part)	XIII			
Pa	rt V	Endowment Fund				•			•					
				(a)Currer			nor year			ears back			e) Four ye	ars back
1 a	Beginn	ning of year balance .												
b	Contrib	outions												
С	Net inv	vestment earnings, gair	ns, and losses											
d	Grants	or scholarships												
е		expenditures for facilitie ograms	es											
f	Admın	istrative expenses .												
g	End of	year balance												
2	Provi	de the estimated percei	ntage of the curre	ent year end	d balance	e (line 1	g, colur	nn (a)) held as	s				
а	Board	d designated or quasi-e	ndowment 🟲											
b	Perm	anent endowment 🟲												
c	Temp	orarily restricted endov	wment ►											
	The p	percentages on lines 2a	, 2b, and 2c shou	ld equal 10	0%									
3а		here endowment funds nization by	not in the posses	sion of the	organıza	ition that	are he	ld an	d admini	stered fo	r the		Yes	No.
	-	nrelated organizations										3a(No
		elated organizations .		•				•				3a(+
b		es" on 3a(II), are the rel		ıs lısted as ı	equired	on Sche	dule R	•				. 31		
4	Desci	ribe in Part XIII the inte	ended uses of the	organizatio	n's endo	wment f	unds							
Pa	rt VI	Land, Buildings,												
	D	Complete of the or	ganization answ (a) Cost or oth										10. Book val	
	Descri	iption of property	(a) Cost or oth		(b) Cos	t or other	Dasis (O	tner)	(C) Acci	umulated t	lepreciation	(a) BOOK VAI	ue
1a	Land													
b	Buildin	igs												
c	Leaseh	nold improvements												
d	Equipn	nent					2	0,180			18,658			1,522
е	Other													
Tota	ıl. Add	lines 1a through 1e (Co	olumn (d) must ed	qual Form 9	90, Part	X, colur	nn (B),	line .	10(c) .		>			1,522

	See Form 990, Part X, line 12.	anızat					
	(a) Description of security or category (including name of security)		(b) Book value	C		od of valuation -year market value	
	al derivatives						
2) Closely- 3)Other	held equity interests	<u>·</u>					
4)							
3)							
E)							
))							
≣)							
:)							
5)							
٦)							
otal. (Colum	in (b) must equal Form 990, Part X, col (B) line 12)	•					
art VIII	Investments—Program Related. Complete if the organization answered 'Yes' on Form 9	90, P	art IV, lı	ne 11c. See	Form 990,	Part X, line 13.	
			ok value		(c) Metho	od of valuation -year market value	
L)					USE OF ENU-OF	real market value	
2)							
3)							
4)							
5)							
5)							
7)							
8)							
9)							
otal. (Colum	n (b) must equal Form 990, Part X, col (B) line 13)						
otal. (Colum Part IX	Other Assets. Complete if the organization answered 'Yes' of	on Form	n 990, Pa	rt IV, line 11d	See Form 9		value
Part IX		on Forr	n 990, Pa	rt IV, line 11d	i See Form 9	990, Part X, line 15 (b) Book	value
Part IX	Other Assets. Complete if the organization answered 'Yes' of	on Form	n 990, Pa	rt IV, line 11d	See Form 9		value
Part IX 1)	Other Assets. Complete if the organization answered 'Yes' of	on Forn	n 990, Pa	rt IV, line 11d	See Form 9		value
Part IX (1) (2) (3) (3)	Other Assets. Complete if the organization answered 'Yes' of	on For	n 990, Pa	rt IV, line 11d	1 See Form 9		value
2) 3) (1)	Other Assets. Complete if the organization answered 'Yes' of	on Forn	m 990, Pa	rt IV, line 11d	See Form 9		value
Part IX	Other Assets. Complete if the organization answered 'Yes' of	on Form	m 990, Pa	rt IV, line 11d	See Form 9		value
Part IX (1) (2) (3) (3) (3) (4) (4) (5) (5) (5) (5) (6) (6) (6) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7	Other Assets. Complete if the organization answered 'Yes' of	on Form	n 990, Pa	rt IV, line 11d	See Form 9		value
Part IX (1) (2) (3) (3) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4	Other Assets. Complete if the organization answered 'Yes' of	on Form	n 990, Pa	rt IV, line 11d	See Form 9		value
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Part IX (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	Other Assets. Complete if the organization answered 'Yes' (a) Description		n 990, Pa		See Form 9		value
Part IX 2) 3) 4) 5) 7) otal. (Colu	Other Assets. Complete if the organization answered 'Yes' (a) Description (a) Description (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization answered 'Yes' (a) Description					(b) Book	value
Part IX 22) 33) 4) 55) 77) otal. (Colu	Other Assets. Complete if the organization answered 'Yes' (a) Description (a) Description		es' on Fo			(b) Book	value
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Part IX 2) 3) 4) 5) b) potal. (Columnation (Columna	Other Assets. Complete if the organization answered 'Yes' (a) Description (a) Description Imm (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization answer See Form 990, Part X, line 25. (a) Description of liability		es' on Fo	 rm 990, Par		(b) Book	value
Part IX 2) 3) 4) 5) 6) 7) Part X - .) Federal (2)	Other Assets. Complete if the organization answered 'Yes' (a) Description (a) Description Imm (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization answer See Form 990, Part X, line 25. (a) Description of liability		es' on Fo	 rm 990, Par		(b) Book	value
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Part IX 2) 3) 4) 5) 6) 7) 6) 9) otal. (Columnation of the columnation of the col	Other Assets. Complete if the organization answered 'Yes' (a) Description (a) Description Imm (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization answer See Form 990, Part X, line 25. (a) Description of liability		es' on Fo	 rm 990, Par		(b) Book	value
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Part IX 1) 2) 3) 4) 5) 7) otal. (Colu Part X	Other Assets. Complete if the organization answered 'Yes' (a) Description (a) Description Imm (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization answer See Form 990, Part X, line 25. (a) Description of liability		es' on Fo	 rm 990, Par		(b) Book	value
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Net unrealized gains (losses) on investments

Donated services and use of facilities

Schedule D (Form 990) 2017

Part XI

2

b

Schedule D (Form 990) 2017

Page 4

е	Add lines 2a through 2d	2e	309,637
3	Subtract line 2e from line 1	3	12,306,102
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		

2a

2b

2c

2d

309.637

Add lines 4a and 4b . 4c 5

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) 5 Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

12,306,102 1 10,963,636 2 Amounts included on line 1 but not on Form 990, Part IX, line 25

Donated services and use of facilities . . . 2a 2b 2c Other (Describe in Part XIII) 2d d

Add lines 2a through 2d . . 2e Subtract line 2e from line 1 3 10,963,636 3 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . . . 4a

4b Add lines **4a** and **4b** 4c 5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) 5 10.963.636 Part XIII Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part Return Reference Explanation

XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information See Additional Data Table

Page 5		Schedule D (Form 990) 2017		
	ormation (continued)	Part XIII Supplemental Info		
	Explanation	Return Reference		

Schedule D (Form 990) 2017

Additional Data

Software ID: Software Version:

EIN: 35-1836687

Name: INSTITUTE FOR QUALITY EDUCATION INC

Supplemental Information

- app	
Return Reference	Explanation
PART X, LINE 2	THE INSTITUTE IS EXEMPT FROM INCOME TAXES UNDER SECTION 501 OF THE INTERNAL REVENUE CODE A ND A SIMILAR PROVISION OF STATE LAW HOWEVER, THE INSTITUTE IS SUBJECT TO FEDERAL INCOME T AX ON ANY UNRELATED BUSINESS TAXABLE INCOME THE INSTITUTE FILES TAX RETURNS IN THE U S F EDERAL JURISDICTION

Supplemental Information	
Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS	CONTRIBUTION FROM NETWORK FOR QUALITY EDUCATION (NQE) 309,637 COMBINED ACTIVITIES RECOGNIZED ON 990 FOR FYE 6 30 17

efile GRAPHIC print - DO NOT PROCESS As Filed Data DLN: 93493105006039 OMB No 1545-0047 Schedule I **Grants and Other Assistance to Organizations,** (Form 990) Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Open to Public Attach to Form 990. Department of the Inspection ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Treasury Internal Revenue Service Name of the organization **Employer identification number** INSTITUTE FOR QUALITY EDUCATION INC. 35-1836687 Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and ✓ Yes Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part III Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed (c) IRC section (a) Name and address of (b) EIN (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant (if applicable) (book, FMV, appraisal, noncash assistance organization grant cash or assistance or government assistance other) (1) See Additional Data (3) (5) (6)(7) (8)(9)(10)(11)(12)Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . 156 For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50055P Schedule I (Form 990) 2017

Page **2**

Schedule I (Form 990) 2017

(3) (4)

(5)

Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

THE ORGANIZATION VERIFIES THAT SCHOLARSHIP/GRANT RECIPIENTS MEET THE REQUIREMENTS THROUGH THE FOLLOWING MEANS 1) ALL RECIPIENTS MUST PROVIDE COPIES OF TAX DOCUMENTS TO THE TRUST 2) SCHOOLS VERIFY CONTINUTED ENROLLMENT BI-MONTHLY PRIOR TO ACCEPTING PAYMENTS FROM

(6) (7)

Schedule I (Form 990) 2017

Part IV

Return Reference PART I, LINE 2

Explanation

INSTITUTE FOR QUALITY EDUCATION

Additional Data

SCHOOL

5401 S MADISON AVENUE ANDERSON, IN 46013

Software ID: **Software Version: EIN:** 35-1836687 Name: INSTITUTE FOR QUALITY EDUCATION INC

Form 990,Schedule 1, Part	rm 990,Schedule 1, Part 11, Grants and Other Assistance to Domestic Organizations and Domestic Governments.											
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	, (3)	(h) Pu or assi					
ABOITE CHRISTIAN SCHOOL	35-2141010	501(C)(3)	500				EDUCAT					

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ABOITE CHRISTIAN SCHOOL 14615 WINTERS ROAD ROANOKE, IN 46783	35-2141010	501(C)(3)	500				EDUCATION
ANDERSON CHRISTIAN	35-1391408	501(C)(3)	2,000				EDUCATION

or government				assistance	
ABOITE CHRISTIAN SCHOOL 14615 WINTERS ROAD ROANOKE, IN 46783	35-2141010	501(C)(3)	500		
ANDERSON CHRISTIAN	35-1391408	501(C)(3)	2.000		

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

BISHOP CHATARD SCHOOL 5885 NORTH CRITTENDEN INDIANAPOLIS, IN 46220	35-1063332	501(C)(3)	434,369		EDUCATION
BREBEUF JESUIT SCHOOL	35-1062640	501(C)(3)	21,500		EDUCATION

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

2801 W 86TH STREET INDIANAPOLIS, IN 46268

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance CALVARY CHRISTIAN SCHOOL 35-0966883 501(C)(3) 5.500 EDUCATION INDY 3639 S KEYSTONE AVENUE INDIANAPOLIS, IN 46227

CARDINAL RITTER HIGH 35-1096103 501(C)(3) 14.000 EDUCATION SCHOOL

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

3360 W 30TH ST INDIANAPOLIS, IN 46222

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 35-6254955 501(C)(3) 1.487.584 CATHEDRAL HIGH SCHOOL IFDUCATION 5225 E 56TH ST INDIANAPOLIS, IN 46226

70,000

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

501(C)(3)

CENTRAL CATHOLIC SCHOOL

1155 E CAMERON INDIANAPOLIS, IN 46203

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance CENTRAL CHRISTIAN SCHOOL 20-2081612 501(C)(3) 3 300 FULCATION

		(-/(-/			
- FT WAYNE			·		
5801 SCHWARTZ ROAD					
FORT WAYNE, IN 46835					
CHRIST THE KING EVANSVILLE	46-5370917	501(C)(3)	15,000		EDUCATION

3101 BAYARD PARK DRIVE EVANSVILLE, IN 47714

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 35-0876359 501(C)(3) 4.500 CHRIST THE KING SCHOOL EDUCATION 5858 CRITTENDEN AVENUE INDIANAPOLIS, IN 46220 EDUCATION

27-3275509 501(C)(3) 500 CICERO SEVENTH DAY ADVENTIST SCHOOL 24089 SR 19

CICERO, IN 460349550

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 35-1747325 501(C)(3) 8.500 EDUCATION COLUMBUS CHRISTIAN SCHOOL

7.000

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

501(C)(3)

3170 INDIANA AVENUE COLUMBUS IN 47201 COMMUNITY CHRISTIAN 35-1653794 SCHOOL

500 FLKES ROAD RICHMOND, IN 47374

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 35-1472473 501(C)(3) 2.000 CORNERSTONE BAPTIST EDUCATION ACADEMY 10701 F 56TH STREET

12.000

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

501(C)(3)

10701 E 56TH STREET
INDIANAPOLIS, IN 46235
CORPUS CHRISTI SCHOOL

5530 HOGUE ROAD EVANSVILLE, IN 47712

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 35-1957191 501(C)(3) 6.394 EDUCATION COVENANT CHRISTIAN SCHOOL INDY 7525 W 21ST ST INDIANAPOLIS, IN 46214

23.000

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

501(C)(3)

7525 W 21ST ST INDIANAPOLIS, IN 4621 COVENANT CHRISTIAN SCHOOL MISHAWAKA

54790 FIR ROAD MISHAWAKA, IN 46545

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 35-1913045 501(C)(3) 6.500 EDUCATION CROWN POINT CHRISTIAN SCHOOL 10550 PARK PLACE

5.000

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

501(C)(3)

10550 PARK PLACE ST JOHN, IN 46373 DELAWARE CHRISTIAN ACADEMY

8400 E 400 N MUNCIE, IN 47303

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance DEMOTTE CHRISTIAN SCHOOL 35-6001340 501(C)(3) 6.000 IFDUCATION

DEMOTTE CHRISTIAN SCHOOL 35-6001340 501(C)(3) 6,000 EDUCATION PO BOX 430 DEMOTTE, IN 46310 EMAN SCHOOLS 90-0504254 501(C)(3) 10,703 EDUCATION

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

11965 ALLISONVILLE ROAD FISHERS, IN 46038

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance EVANSVILLE CHRISTIAN 31-0017078 501(C)(3) 228 500 FULCATION

SCHOOL 4400 LINCOLN AVE EVANSVILLE, IN 47714	31 001/0/0	301(0)(3)	220,500		
EVANSVILLE DAY SCHOOL	35-1020931	501(C)(3)	187,934		EDUCATION

3400 N GREEN RIVER ROAD EVANSVILLE, IN 47715

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 35-2150264 501(C)(3) 21.400 EDUCATION FAITH CHRISTIAN SCHOOL LAFAYETTE 5526 STATE ROAD 26 F

5.000

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

501(C)(3)

GOOD SHEPHERD CATHOLIC

2301 N STOCKWELL ROAD EVANSVILLE, IN 47715

SCHOOL

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 35-6000571 501(C)(3) 12.500 GOOD SHEPHERD CHRISTIAN EDUCATION ACADEMY 209 W WASHINGTON STREET GREENSBURG, IN 47240

GRANGER CHRISTIAN SCHOOL 35-1280890 501(C)(3) 2.000

52025 GUMWOOD GRANDER, IN 46530

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

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 35-1185540 501(C)(3) 235.500 EDUCATION HASTEN HEBREW ACADEMY OF INDIANAPOLIS 6602 HOOVER RD INDIANAPOLIS, IN 46260 35-0898393 501(C)(3) 10.000 HIGHLAND CHRISTIAN EDUCATION

SCHOOL

3040 RIDGE ROAD HIGHLAND, IN 46322

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 27-1010344 501(C)(3) 105.500 EDUCATION HOLY ANGELS CATHOLIC SCHOOL 2822 DR MARTIN LUTHER KING JR ST

9,000

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

501(C)(3)

INDIANAPOLIS, IN 46208 HOLY CROSS - ANDERSON

2825 LINCOLN STREET ANDERSON, IN 46016

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 27-1010344 501(C)(3) 171.000 EDUCATION HOLY CROSS CATHOLIC SCHOOL

125 N ORIENTAL ST INDIANAPOLIS, IN 46202 HOLY CROSS SCHOOL FORTH 35-0965616 501(C)(3) 5.500 EDUCATION BRANCH

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

202 SOUTH CHURCH STREET FORT BRANCH, IN 47648

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 35-1086874 501(C)(3) 10.000 EDUCATION HOLY FAMILY SCHOOL NEW ALBANY

129 W DATSY LANE NEW ALBANY, IN 47150 HOLY NAME CATHOLIC 35-0874514 501(C)(3) 13.323

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

BEECH GROVE, IN 46107

EDUCATION SCHOOL 21 N 17TH AVE

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance 35-0988805 501(C)(3) 9.500 EDUCATION HOLY REDEEMER SCHOOL EVANSVILLE

918 W MILL ROAD
EVANSVILLE, IN 47710

HOLY ROSARY SCHOOL 35-0988711 501(C)(3) 9,000
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Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

1303 S GREEN RIVER ROAD EVANSVILLE, IN 47715

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 35-0988729 501(C)(3) 7.807 EDUCATION HOLY SPIRIT CATHOLIC SCHOOL 7241 F 10TH ST INDIANAPOLIS, IN 46226

30.280

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

501(C)(3)

HOLY SPIRIT SCHOOL

1760 S LODGE AVENUE EVANSVILLE, IN 47714

EVANSVILLE

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 47-2188278 501(C)(3) 30.000 EDUCATION HOLY TRINITY CATHOLIC SCHOOL 1385 W 6TH ST JASPER. IN 47546 HORIZON CHRISTIAN 27-3273211 501(C)(3) 2.100 EDUCATION

ACADEMY FT WAYNE 2000 N WELLS STREET FORT WAYNE, IN 46808

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance IMMACULATE HEART SCHOOL 35-0868020 501(C)(3) 12.000 IFDUCATION 317 E 57TH ST

3,000

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

501(C)(3)

INDIANA ACADEMY

24815 STATE ROAD 19 CICERO, IN 46034

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 35-1734027 501(C)(3) 4.000 EDUCATION INDIANA HORIZON ACADEMY 9803 COLORADO STREET SUITE B CROWN POINT, IN 46307 35-2144235 501(C)(3) 1.500 INDIANAPOLIS JUNIOR EDUCATION

ACADEMY

2910 E 62ND STREET INDIANAPOLIS, IN 46220

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 38-3797161 501(C)(3) 5.500 EDUCATION INDIANAPOLIS SOUTHSIDE CHRISTIAN ACADEMY 4801 SHELBYVILLE ROAD INDIANAPOLIS, IN 46237 INTERNATIONAL SCHOOL OF 35-1887161 501(C)(3) 27.000 EDUCATION

INDIANA

4330 N MICHIGAN ROAD INDIANAPOLIS, IN 46208

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 46-4244600 501(C)(3) 11.000 EDUCATION ISLAMIC ACADEMY OF TNIDTANIADOLIC

INDIANAPOLIS, IN 46241 ISLAMIC SCHOOL OF	46-3161688	501(C)(3)	3,000		EDUCATION
711 SOUTH HIGH SCHOOL ROAD					

2183 STANLEY ROAD PLAINFIELD, IN 46168

LION PLAINFIELD

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance KINGS ACADEMY 35-2132842 501(C)(3) 1.500 EDUCATION

1201 S WATER STREET JONESBORO, IN 46938		(-)(-)	-,		
KINGSWAY CHRISTIAN SCHOOL AVON 7979 E COUNTYROAD 100 N	35-1313028	501(C)(3)	10,000		EDUCATION

AVON, IN 46123

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 35-1376312 501(C)(3) 258.976 LAFAYETTE CATHOLIC SCHOOL EDUCATION

2410 SOUTH 9TH STREET LAFAYETTE, IN 47901 LAFAYETTE CHRISTIAN 35-6004522 501(C)(3) 14,000 EDUCATION SCHOOL

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

525 N 26TH ST LAFAYETTE, IN 47904

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 35-2013196 501(C)(3) 5.500 EDUCATION LAKEVIEW CHRISTIAN SCHOOL MARION EDUCATION

5316 S WESTERN AVE MARION, IN 46953 LEGACY LEARNING CENTER 47-2584604 501(C)(3) 6.000 INC 1102 ROOSEVELT AVE

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

INDIANAPOLIS, IN 46202

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance LITTLE FLOWER CATHOLIC 20-8934132 501(C)(3) 3 000 FDUCATION

SCHOOL		·		
1401 N BOSART AVENUE				
INDIANAPOLIS, IN 46201				

32,500

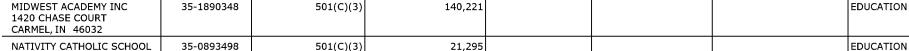
Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

MATER DEI HIGH SCHOOL

1300 HARMONY WAY EVANSVILLE, IN 47720

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 35-1890348 140.221 IFDUCATION



3310 S MEADOW DRIVE INDIANAPOLIS, IN 46239

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 35-2018725 501(C)(3) 2.000 EDUCATION NORTH LIBERTY CHRISTIAN SCHOOL 65225 SR 23 NORTH LIBERTY, IN 46554 NORTH STAR MONTESSORI 35-2126527 501(C)(3) 1.000 EDUCATION

SCHOOL

2320 MIDWAY STREET COLUMBUS, IN 47201

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 35-2050595 501(C)(3) 61.750 OAKS ACADEMY EDUCATION 2301 N PARK AVENUE INDIANAPOLIS, IN 46205

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

OLDENBURG, IN 47036

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

ORCHARD SCHOOL 615 W 64TH ST INDIANAPOLIS, IN 46260	35-0909975	501(C)(3)	1,380		EDUCATION
OUR LADY OF GRACE	35-1009271	501(C)(3)	137,212		EDUCATION

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

9900 E 191ST STREET NOBLESVILLE, IN 46060

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 501(C)(3) 34.250 OUR LADY OF GREENWOOD 35-0992120 EDUCATION 335 S MERIDIAN ST GREENWOOD, IN 46143 OUR LADY OF LOURDES 35-0929982 501(C)(3) 10,000 EDUCATION

CATHOLIC SCHOOL 30 S DOWNEY AVE INDIANAPOLIS, IN 46219

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 35-0919342 501(C)(3) 18.000 EDUCATION NEW ALBANY, IN 47150

OUR LADY OF PERPETUAL HELP 1752 SCHELLAR LANE

21.900

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

501(C)(3)

OUR LADY OF PROVIDENCE

707 PROVIDENCE WAY CLARKSVILLE, IN 47129

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 35-0909976 501(C)(3) 27.843 PARK TUDOR SCHOOL EDUCATION 7200 NORTH COLLEGE

3.750

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

501(C)(3)

7200 NORTH COLLEGE						
AVENUE						
INDIANAPOLIS, IN 46240						

POPE JOHN FLEMENTARY

305 WEST STATE STREET MADISON, IN 47250

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 20-3585867 501(C)(3) 1,300,512 EDUCATION PROVIDENCE CRISTO REY HIGH SCHOOL 75 N BELLEVIEW PLACE INDIANAPOLIS, IN 46222

118.750

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

501(C)(3)

27-1480068

REITZ MEMORIAL HIGH

1500 LINCOLN AVE EVANSVILLE, IN 47714

SCHOOL

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 35-1085859 501(C)(3) 8.500 IFDUCATION



3300 PRAGUE ROAD INDIANAPOLIS, IN 46227

RONCALLI HIGH SCHOOL 35-1153685 501(C)(3) 281,984 EDUCATION

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 501(C)(3) 12.000 SACRED HEART SCHOOL 35-1015552 EDUCATION 607 N WASHINGTON AVENUE FOWLER, IN 47944

FOWLER, IN 47944

SACRED HEART SCHOOL 35-0992122 501(C)(3) 21,500

JEFFERSONVILLE
1840 E 8TH STREET

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

JEFFERSONVILLE, IN 47130

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 27-1010344 501(C)(3) 118.500 EDUCATION SAINT ANTHONY CATHOLIC

349 N WARMAN AVENUE INDIANAPOLIS, IN 46222			·		
SAINT BENEDICT CATHEDRAL SCHOOL	35-0909977	501(C)(3)	76,873		EDUCATIO

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

EVANSVILLE, IN 47714

530 S HARLAN AVENUE

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 35-0877565 501(C)(3) 7.771 EDUCATION SAINT CHRISTOPHER CATHOLIC SCHOOL 5335 W 16TH ST INDIANAPOLIS, IN 46224

SAINT JOAN OF ARC CATHOLIC 35-0901290 501(C)(3) 18.000 EDUCATION SCHOOL

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

500 F 42ND ST

INDIANAPOLIS, IN 46205

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 35-1052777 501(C)(3) 10.859 EDUCATION SAINT JUDE CATHOLIC SCHOOL 5375 MCFARLAND RD INDIANAPOLIS, IN 46227 SAINT LAWRENCE CATHOLIC 35-0919344 501(C)(3) 17.500 EDUCATION

SCHOOL 6950 E 46TH ST INDIANAPOLIS, IN 46226

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 35-0868027 501(C)(3) 45.250 EDUCATION SAINT MARK CATHOLIC SCHOOL 541 F EDGEWOOD AVE INDIANAPOLIS, IN 46227 SAINT MATTHEW CATHOLIC 35-6006650 501(C)(3) 28.260 EDUCATION SCHOOL

4100 E 56TH ST

INDIANAPOLIS, IN 46220

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 35-1009268 501(C)(3) 7.462 SAINT MONICA CATHOLIC EDUCATION SCHOOL 6131 N MICHIGAN RD

INDIANAPOLIS, IN 46208

120,475

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

501(C)(3)

SAINT PHILIP NERI

545 EASTERN AVENUE INDIANAPOLIS, IN 46201

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 20-1167452 501(C)(3) 80.000 SAINT RICHARDS SCHOOL EDUCATION 33 E 33RD STREET INDIANAPOLIS, IN 46205

35-0896894 501(C)(3) 20,500 EDUCATION SAINT THOMAS AOUINAS CATHOLIC SCHOOL

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

4600 N ILLINOIS STREET INDIANAPOLIS, IN 46208

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

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SCECINA HIGH SCHOOL 5000 NOWLAND AVE	35-0979238	501(C)(3)	459,800			EDUCATION
INDIANAPOLIS, IN 46201						

18,000

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

501(C)(3)

SCHOOL OF KNOWLEDGE

2846 COLD SPRING RD INDIANAPOLIS, IN 46222

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 30-0036396 501(C)(3) 7.500 EDUCATION SETON CATHOLIC

ELEMENTARY SCHOOL
801 W MAIN ST
RICHMOND, IN 47374

SEYMOUR CHRISTIAN 35-1502333 501(C)(3) 1,500

EDUCATION

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

5707 N SANDY CREEK DRIVE SEYMOUR, IN 47274

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 35-0941134 501(C)(3) 3.500 EDUCATION SHAW MEMORIAL HIGH SCHOOL 201 W STATE STREET

201 W STATE STREET
MADISON, IN 47250

SOUTH BEND HEBREW DAY
SCHOOL
206 W 8TH ST

BDUCATION

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

MISHAWAKA, IN 46544

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 35-6030791 501(C)(3) 2.150 SOUTH BEND JR ACADEMY EDUCATION 1910 ALTGELD STREET SOUTH BEND, IN 46614

SOUTHPORT PRESBYTERIAN 35-1751931 501(C)(3) 1,500 EDUCATION CHRISTIAN SCHOOL

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

7525 MCFARLAND BLVD INDIANAPOLIS, IN 46237

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 35-0869043 501(C)(3) 13.000 EDUCATION ST AMBROSE CATHOLIC SCHOOL SEYMOUR

301 S CHESTNUT STREET SEYMOUR. IN 472742329 35-0941128 501(C)(3) 17.000 ST ANTHONY OF PADUA EDUCATION

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

CLARKSVILLE 320 N SHERWOOD AVE CLARKSVILLE, IN 47129

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance ST AUGUSTINE SCHOOL 35-0957097 501(C)(3) 9.000 IFDUCATION 328 N MCKINLEY AVE

19,500

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

501(C)(3)

RENSSELAER, IN 47978
ST BARNABAS SCHOOL

8300 RAHKE ROAD INDIANAPOLIS, IN 46217

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance ST BARTHOLOMEW SCHOOL 35-0868940 501(C)(3) 25,000 IFDUCATION 1306 27TH STREET

11,000

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

501(C)(3)

COLUMBUS, IN 47201 ST BERNARD SCHOOL

207 N 6TH STREET ROCKPORT, IN 47635

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 35-0867994 501(C)(3) 18.000 ST CHARLES CATHOLIC EDUCATION SCHOOL 2224 F THIRD STREET BLOOMINGTON, IN 47401

11.800

ST FRANCES & CLARE

5901 OLIVE BRANCH ROAD GREENWOOD, IN 46143

35-1988350

501(C)(3)

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 35-0893496 501(C)(3) 6.000 EDUCATION ST GABRIEL SCHOOL

CONNERSVILLE
224 W 9TH STREET
CONNERSVILLE, IN 47331

ST JAMES CATHOLIC SCHOOL
HAUBSTADT

ST-0693430

ST-069340

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

12394 40 W

HAUBSTADT, IN 47639

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 35-1957455 501(C)(3) 7.200 EDUCATION ST JOAN OF ARC & PATRICK SCHOOL

3155 CR S200 WEST KOKOMO. IN 46902

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

SELLERSBURG, IN 47172

ST JOHN PAUL II CATHOLIC 35-0992257 501(C)(3) 8.500 EDUCATION SCHOOL SELLERSBURG 105 ST PAUL STREET

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 35-0921704 501(C)(3) 1.000 EDUCATION ST JOHN THE BAPTIST SCHOOL NEWBURGH

725 FRAME ROAD NEWBURGH, IN 47630 ST JOSEPH CATHOLIC SCHOOL 35-0867999 501(C)(3) 22.250 EDUCATION CORYDON

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

512 N MUI BERRY STREET CORYDON, IN 47112

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 35-0921036 501(C)(3) 15.500 EDUCATION ST JOSEPH CATHOLIC SCHOOL

EVANSVILLE 6130 W ST JOSEPH ROAD EVANSVILLE, IN 47720 ST JOSEPH CATHOLIC SCHOOL 35-0941131 501(C)(3) 2.500 EDUCATION PRINCETON

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

427 S STORMONT STREET PRINCETON, IN 47670

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 35-0908988 501(C)(3) 13.522 EDUCATION ST JOSEPH SCHOOL SHELBYVILLE 127 F BROADWAY STREET

4.500

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

501(C)(3)

127 E BROADWAY STREET SHELBYVILLE, IN 46176 ST LAWRENCE CATHOLIC SCHOOL LAWRENCEBURG

LAWRENCEBURG, IN 47025

524 WAI NUT ST

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 35-0929984 501(C)(3) 17.250 ST LAWRENCE CATHOLIC EDUCATION SCHOOL MUNCIE 2801 F 16TH ST MUNCIE, IN 47302 STIQUIS DE MONTFORT 35-1460853 501(C)(3) 50.000 EDUCATION

11421 HAGUE ROAD FISHERS, IN 46038

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 35-0883491 501(C)(3) 53.363 ST LOUIS SCHOOL EDUCATION BATESVILLE 17 F SAINT LOUIS PLACE BATESVILLE, IN 46260

STILUKE CATHOLIC SCHOOL 35-1044326 501(C)(3) 84.350

7650 N ILLINOIS STREET INDIANAPOLIS, IN 46260

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

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 35-1044319 501(C)(3) 2.500 ST MALACHY SCHOOL EDUCATION 7410 N CR 1000 EAST

10 N CK 1000 EAST | BROWNSBURG, IN 46112 | ST MARY CATHOLIC SCHOOL | 35-0868942 | 501(C)(3) | 28,700 | EDUCATION | GREENSBURG | 1331 E HUNTER ROBBINS WAY

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

GREENSBURG, IN 47240

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 35-6033616 501(C)(3) 26.000 EDUCATION ST MARY OF THE KNOBS CATHOLIC SCHOOL 3033 MARTIN ROAD FLOYD KNOBS, IN 47119

14.500

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

501(C)(3)

ST MARY SCHOOL

820 W MADISON STREET ALEXANDRIA, IN 46001

ALEXANDRIA

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 35-0867991 501(C)(3) 3.000 ST MARY SCHOOL AURORA EDUCATION 211 4TH STREET AURORA, IN 47001

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

CROWN POINT, IN 46037

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 35-1092626 501(C)(3) 49.323 ST MARY SCHOOL MUNCIE EDUCATION 2300 W JACKSON ST MUNCIE, IN 47303

2300 W JACKSON ST
MUNCIE, IN 47303

ST MARY SCHOOL NORTH 35-0985952 501(C)(3) 7,000
VERNON

EDUCATION

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

209 WASHINGTON STREET NORTH VERNON, IN 47265

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 35-0876366 501(C)(3) 9.500 ST MARY SCHOOL RUSHVILLE EDUCATION 226 E 5TH ST

2,000

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

501(C)(3)

RUSHVILE, IN 46173 ST MATTHEW CATHOLIC SCHOOL MT VERNON 401 MULBERRY STREET

MOUNT VERNON, IN 47620

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 35-1096103 501(C)(3) 1.500 EDUCATION ST MICHAEL GABRIEL CATHOLIC SCHOOL 3360 W 30TH ST INDIANAPOLIS, IN 46222 ST MICHAEL CATHOLIC 35-1052349 501(C)(3) 31.305 EDUCATION

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

SCHOOL GREENFIELD 515 JEFFERSON BLVD GREENFIELD, IN 46140

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 35-0867996 501(C)(3) 1.500 EDUCATION ST MICHAEL SCHOOL BROOKVILLE

STOCKVILLE | 275 HIGH STREET | BROOKEVILLE, IN 47012 | ST NICHOLAS SCHOOL | 35-0868061 | 501(C)(3) | 6,500 | EDUCATION | SUNMAN | EDUCATION | SUNMAN | EDUCATION Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

6459 E ST NICHOLAS DRIVE SUNMAN, IN 47041

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance ST PATRICK SCHOOL TERRE 35-0868064 501(C)(3) 21.450 EDUCATION HAUTE

449 S 19TH STREET TERRE HAUTE, IN 47803

108.314

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

501(C)(3)

ST PAUL PARISH SCHOOL

1009 W KERN ROAD MARION, IN 46952

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 35-0877564 501(C)(3) 500 ST PETER AND PAUL SCHOOL EDUCATION 210 N VINE STREET HAUBSTADT, IN 476390812

210 N VINE STREET
HAUBSTADT, IN 476390812

ST PHILIP CATHOLIC SCHOOL
MT VERNON
3420 ST PHILIP ROAD S

EDUCATION

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

MOUNT VERNON, IN 47620

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

ST PIUS X SCHOOL 7200 SARTO DRIVE INDIANAPOLIS, IN 46240	35-0981797	501(C)(3)	58,730		EDUCATION
ST ROCH CATHOLIC SCHOOL	35-0976758	501(C)(3)	9,500		EDUCATION

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

3603 S MERIDIAN ST INDIANAPOLIS, IN 46217

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 91-0729991 501(C)(3) 6.500 EDUCATION ST ROSE OF LIMA CATHOLIC SCHOOL 114 LANCELOT DR FRANKLIN, IN 46131

ST SIMON THE APOSTLE 35-1062869 501(C)(3) 34.500 EDUCATION SCHOOL

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

8155 OAKLANDON DRIVE INDIANAPOLIS, IN 46236

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 35-0942845 501(C)(3) 26.658 ST SUSANNA EDUCATION 1212 E MAIN STREET PLAINFIELD, IN 46168

35-2103486 501(C)(3) 342,753 EDUCATION ST THEODORE GUERIN HIGH SCHOOL

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

15300 GRAY ROAD NOBLESVILLE, IN 46062

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 94-3033873 501(C)(3) 23.052 ST VINCENT DE PAUL SCHOOL EDUCATION 923 18TH STREET

923 18TH STREET
BEDFORD, IN 47421

ST WENDEL SCHOOL
4725 ST WENDEL-CYNTHIANA
ROAD

EDUCATION

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

WADESVILLE, IN 47638

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 35-1019540 501(C)(3) 47.236 STANLEY CLARK SCHOOL EDUCATION 3123 MIAMI STREET

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

MARTINSVILLE, IN 46151

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance THE CROSSING NATIONAL INC 26-0588186 501(C)(3) 168.000 IFDUCATION 2930 S NAPPANEE STREET

EDUCATION

14,000

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

501(C)(3)

TROY CENTER

709 W BUSINESS 30 COLUMBIA CITY, IN 46725 46-0656583

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 35-2146788 501(C)(3) 2.500 VICTORY CHRISTIAN SCHOOL EDUCATION 3805 LAPORTE AVENUE VALPARAISO, IN 46383 VINCENNES CATHOLIC 35-1172625 501(C)(3) 17,500 EDUCATION

SCHOOL

210 BARNETT STREET VINCENNES, IN 47591

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 35-1043361 501(C)(3) 3.500 WARSAW CHRISTIAN SCHOOL EDUCATION 909 S BUFFALO STREET WARSAW, IN 46580

EDUCATION

121,000

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

501(C)(3)

WARSAW, IN 46580
WASHINGTON CATHOLIC SCHOOLS

201 NE SECOND ST WASHINGTON, IN 47501 12-7130551

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 35-1813849 501(C)(3) 6.000 WESTSIDE CATHOLIC SCHOOL EDUCATION

EDUCATION

24.960

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

501(C)(3)

	EVANSVILLE
	1620 GLENDALE AVE
	EVANSVILLE, IN 47712
_	

YESHIVA OF SOUTH BEND

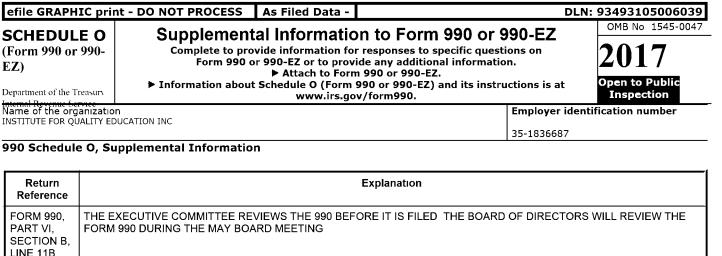
3207 SOUTH HIGH STREET SOUTH BEND, IN 46614 26-3073821

efil	e GRAPHIC pr	rint - DO NOT PROCESS	DLN: 9349	310	5006	039
Sch	edule J	Compensation Information	ОМВ	No	1545-()047
(For	n 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest				
		Compensated Employees ► Complete if the organization answered "Yes" on Form 990, Part IV, line 23.	. 7	20	17	7
		▶ Attach to Form 990.				
•	tment of the Treasury al Revenue Service	► Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990 .			o Pul ectio	
Nar	ne of the organiza		er identificatio			
INS	TITUTE FOR QUALIT	Y EDUCATION INC 35-1836	687			
Pa	rt I Questi	ons Regarding Compensation				
					Yes	No
1a		opiate box(es) if the organization provided any of the following to or for a person listed on Forn Section A, line 1a Complete Part III to provide any relevant information regarding these items	n			
	First-class	s or charter travel Housing allowance or residence for personal	use			
	_	r companions \square Payments for business use of personal reside	nce			
		nification and gross-up payments \square Health or social club dues or initiation fees				
	☐ Discretion	nary spending account \square Personal services (e g , maid, chauffeur, che	r)			
b		ixes in line 1a are checked, did the organization follow a written policy regarding payment or re all of the expenses described above? If "No," complete Part III to explain		1b		
2		ation require substantiation prior to reimbursing or allowing expenses incurred by all		2		
	directors, truste	ees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?				
3		If any, of the following the filing organization used to establish the compensation of the				
		CEO/Executive Director Check all that apply Do not check any boxes for methods ed organization to establish compensation of the CEO/Executive Director, but explain in Part III				
		eation committee				
		of other organizations Of other organizations Approval by the board or compensation comi	mittee			
4	During the year related organiza	r, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing orga ation	nization or a			
а	_	rance payment or change-of-control payment?		4a		No
a b		or receive payment from, a supplemental nonqualified retirement plan?	_	4b		No
c	•	or receive payment from, an equity-based compensation arrangement?		4c		No
	If "Yes" to any o	of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III				
_		3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. ed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any				
5		contingent on the revenues of				
а	The organization	n?		5a		No
b	Any related orga	anization?		5b		No
	If "Yes," on line	s 5a or 5b, describe in Part III				
6		ed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any contingent on the net earnings of				
а	The organization	n?		6a		No
b	Any related orga	anization?	L	6b		No
	•	e 6a or 6b, describe in Part III				
7		ed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed lescribed in lines 5 and 6? If "Yes," describe in Part III		7		No
8		ints reported on Form 990, Part VII, paid or accured pursuant to a contract that was nitial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe				
9		8, did the organization also follow the rebuttable presumption procedure described in Regulation	ons section	9		No_
For E		uction Act Notice, see the Instructions for Form 990. Cat. No. 50053T	Schedule 1 (000)	2017

Schedule J (Form 990) 2017 Page 2 Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. Part II For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII Note. The sum of columns (B)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual (A) Name and Title (B) Breakdown of W-2 and/or 1099-MISC compensation (D) Nontaxable (C) Retirement and (E) Total of columns (F) Compensation in column (B) reported other deferred benefits (B)(i)-(D)(i) Base (ii) Bonus & incentive (iii) Other compensation as deferred on prior compensation compensation reportable Form 990 compensation 1 BETSY WILEY 163,333 (i) 0 2.091 5,870 171,294 PRESIDENT 4,667 1,467 6,143 (ii)

Schedule J (Form 990) 2017 Page 3 Part III Supplemental Information Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information Return Reference Explanation

Schedule 1 (Form 990) 2017



Return

FORM 990, PART VI, SECTION B, LINE 12C NOTE: The institute's directors and employees shall have the continuing, affirmative dut y to report any personal ownership, interest, or other relationship that might affect her or his ability to exercise impartial, ethical, and business-based judgments in fulfilling responsibilities to the institute the failure of the institute's, its board of directors, or any or all of its directors or employees to comply with the conflict of interest polic y shall not invalidate, cancel, void, or make voidable any contract, relationship, grant, action, transaction, debt, commitment, or obligation of the institute that otherwise is value and conflict, he or she abst and specific points.	Reference	
TAME TO MEDICOCCIONANTO VOTINO ON THE CONTRICTED HEM	PART VI, SECTION B,	Y TO REPORT ANY PERSONAL OWNERSHIP, INTEREST, OR OTHER RELATIONSHIP THAT MIGHT AFFECT HER OR HIS ABILITY TO EXERCISE IMPARTIAL, ETHICAL, AND BUSINESS-BASED JUDGMENTS IN FULFILLING RESPONSIBILITIES TO THE INSTITUTE THE FAILURE OF THE INSTITUTE'S, ITS BOARD OF DIRECTORS, OR ANY OR ALL OF ITS DIRECTORS OR EMPLOYEES TO COMPLY WITH THE CONFLICT OF INTEREST POLIC Y SHALL NOT INVALIDATE, CANCEL, VOID, OR MAKE VOIDABLE ANY CONTRACT, RELATIONSHIP, GRANT, ACTION, TRANSACTION, DEBT, COMMITMENT, OR OBLIGATION OF THE INSTITUTE THAT OTHERWISE IS VA

Explanation

Return Explanation
Reference

FORM 990, PART VI, SECTION B, LINE 15

Return Explanation
Reference
FORM 990. THE DOCUMENTS ARE AVAILABLE UPON REQUEST

LINE 19

FORM 990, THE DOCUMENTS ARE AVAILABLE UPON REQUEST PART VI, SECTION C,

Return Explanation

Reference	
FORM 990,	THE ORGANIZATION IS NO LONGER ISSUING W-2S FOR EMPLOYEES THE ORGANIZATION IS USING THE PE
PART V,	O MODEL FOR PAYROLL REPORTING EXPENSES AND COMPENSATION ARE BEING REPORTED AS PROVIDED BY
LINE 2A	THE PEO

Return Explanation
Reference

FORM 990, PART XII, LINE 2

efile GRAPHIC print - DO NOT PROCESS As Filed Data -**SCHEDULE R**

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Open to Public

Inspection

DLN: 93493105006039 OMB No 1545-0047

Department of the Treasury Internal Revenue Service

(Form 990)

► Attach to Form 990. ▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization NSTITUTE FOR QUALITY EDUCATION INC	Employer identification number									
Part I Identification of Disregarded Entities Complete	te if the organization	answered "Ye	s" on Form	990, Part	[V, line 3	35-1836687 3.				
(a) Name, address, and EIN (if applicable) of disregarded entity	Pr	(b) rimary activity	Legal dom	c) Icile (state In country)	(d) Total inc	ome End-of-ye	e) ar assets	(f) Direct cor enti	itrolling ty	
Part II Identification of Related Tax-Exempt Organizations during the tax years.	ar.	ne organization			-		because			
(a) Name, address, and EIN of related organization	(b) Primary activi		(c) mıcıle (state gn country)	(d) Exempt Code section		(e) Public charity statu (if section 501(c)(3		(f) rect controlling entity	Section (13) co ent	ntrolled
(1)HOOSIERS FOR QUALITY EDUCATION INC 101 WEST OHIO SUITE 700 INDIANAPOLIS, IN 46204	ECONOMIC EDUCAT	ION	IN	501(C)(4)			N/A		Yes	No No
(2)HOOSIERS FOR QUALITY EDUCATION POLITICAL ACTION COMMITTEE 101 WEST OHIO SUITE 700	POLITICAL ACTION COMMITTEE		IN	527				ERS FOR QUALITY TION INC		No
INDIANAPOLIS, IN 46204 27-5275552									_	_
									_	
For Paperwork Reduction Act Notice, see the Instructions for Fo	rm 990.		at No 5013	 			Sch	nedule R (Form	990) 20	017

(a) Name, address, and EIN of related organization		(b) Primary do ((d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of e end-of-year assets					aging of	(k) Percenta ownersh
								Yes	No		Yes	No	
												\perp	
												-	
												_	
Identification of Related Organizates because it had one or more related o						ation answ	vered "Yes	" on Fo	orm 99	90, Part IV,	line :	34	
(a) Name, address, and EIN of related organization	(b) Primary activity	L do (state	(c) egal micile or foreign	Direct	(d) controlling Type entity (C co	(e) e of entity rp, S corp, r trust)	(f) Share of total Income		(g) of end-o year assets	of- Percei owne	ntage	[(13)	(ı) tion 5) cont entity
												. I Y∉	es
		со	untry)										
		со	untry)										
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		со	untry)									+	
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		со	untry)									 - -	
		со	untry)									 - - -	

I Performance of services or membership or fundraising solicitations for related organization(s) . . .

n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) . . .

Name of related organization

Reimbursement paid to related organization(s) for expenses . . .

Reimbursement paid by related organization(s) for expenses .

r Other transfer of cash or property to related organization(s) . . .

(1)HOOSIERS FOR QUALITY EDUCATION INC

(2)HOOSIERS FOR QUALITY EDUCATION INC
(3)HOOSIERS FOR QUALITY EDUCATION INC

(4)HOOSIERS FOR QUALITY EDUCATION INC

m Performance of services or membership or fundraising solicitations by related organization(s)

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.			
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or(iv) rent from a controlled entity	1a		No
b Gift, grant, or capital contribution to related organization(s)	1b		No
c Gift, grant, or capital contribution from related organization(s)	1c		No
d Loans or loan guarantees to or for related organization(s)	1d	Yes	
e Loans or loan guarantees by related organization(s)	1e		No
f Dividends from related organization(s)	1f		No
g Sale of assets to related organization(s)	1 g		No
h Purchase of assets from related organization(s)	1h		No
i Exchange of assets with related organization(s)	11		No
j Lease of facilities, equipment, or other assets to related organization(s)	1 j		No
k lease of facilities equipment or other assets from related organization(s)	1k	_	No

(b)

Transaction

type (a-s)

Ν

D

Amount involved

9,075

27,600

FMV

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

Page 3

1 Yes

1m

1n

1r

Schedule R (Form 990) 2017

(d)

Method of determining amount involved

Yes

Yes

No

No No

No

No

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-	01	(e) re all partners section 501(c)(3) rganizations?	(f) Share of total Income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?	ate	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General d managin partner	g l	(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
													_
	•		•			•				Schedul	e R (Forn	າ 99	0) 2017

Schedule R (Form 990) 2017 Part VII Supplemental Information Provide additional information for responses to questions on Schedule R (see instructions) Schedule R (Form 990) 2017