CHANGE OF ACCOUNTING PERIOD

Return of Organization Exempt From Income Tax

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

Form **991** (Rev January 2020) Department of the Treasury Internal Revenue Service

A For the 2010 colondar yes

▶ Do not enter social security numbers on this form as it may be made public. ► Go to www.irs.gov/Form990 for instructions and the latest information. TAN 1 2019 and ending AUG 31

Open to Public Inspection

B 0	heck if	C Name of organization		D Employer identific	cation number			
_	¬ Addres				- •			
F	_]change ⊐Name	FUTURES IN EDUCATION		20-54963	9.2			
⊱	_ change □Initial	——————————————————————————————————————	Room/suite	E Telephone number				
\vdash	_jreturn ∏Fınal	Number and street (or P.O. box if mail is not delivered to street address) 243 PROSPECT PARK WEST	Mooninsuite	718-965-				
Ъ	_lreturn/ term:n-			0.560.044				
_	ated ∏Amend	City or town, state or province, country, and ZIP or foreign postal code BROOKLYN, NY 11215		G Gross receipts 2,568,944. H(a) Is this a group return				
\vdash	_lreturn ∏Applici			for subordinates				
L	tion pendin	SAME AS C ABOVE	1	H(b) Are all subordinates included? Yes No				
	27.070	empt status X 501(c)(3)	or 🗍 527	1 ''	list (see instructions)			
		e: WWW.FUTURESINEDUCATION.ORG	177	H(c) Group exemption	· · · · · · · · · · · · · · · · · · ·			
		organization X Corporation Trust Association Other	L Year		State of legal domicile: NY			
	rt I	Summary	•					
	1	Briefly describe the organization's mission or most significant activities THE	MISSIO	N OF FUTURES	SIN			
Governance			N EXC	ELLENT EDUCA	TION			
ā	2	Check this box If the organization discontinued its operations or dispose	ed of more	than 25% of its net ass	ets.			
Ž	3	Number of voting members of the governing body (Part VI, line 1a)		3	23			
Ğ	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	23			
80	5	Total number of individuals employed in calendar year 2019 (Part V, line 2a)		5	0			
ŧ	6	Total number of volunteers (estimate if necessary)		6	24			
Activities &	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.			
_	b	Net unrelated business taxable income from Form 990-T, line 39	1	7b	0.			
Revenue		\ /	<u> </u>	Prior Year	Current Year			
	ŀ	Contributions and grants (Part VIII, line 1h)	-	7,225,889.	1,313,084.			
		Program service revenue (Part VIII, line 2g)	<u> </u>	0.	127 200			
ě	ı	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<u> </u>	260,268.	137,300.			
-	i	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<u> </u>	-46,497.	-5,145.			
	_	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		7,439,660. 5,962,975.	1,445,239.			
	!	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	\vdash	0.	0.			
	1	Benefits paid to or for members (Part IX, column (A), line 4)	<u> </u>	0.	0.			
ės	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	-	5,000.	9,000.			
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25)	a	3,000.	<u> </u>			
X	_B			1,179,213.	799,685.			
_	''	Other expenses (Part IX, column (A), lines 11a-11d, 11f24e) RECEIVED Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25//		7,147,188.	3,960,966.			
	I	Total expenses Add lines to 17 (must educit art ix, obtaining vy, imo		292,472.	-2,515,727.			
		Revenue less expenses Subtract line 18 from line 12 3 JUL 2 0 2020	8 Ве	ginning of Current Year	End of Year			
ets o	20	Total assets (Part X, line 16)		12,190,504.	8,175,365.			
Asse Rais	20			929,594.	1,535,263.			
let /	•	Total liabilities (Part X, line 26) Net assets or fund balances Subtract line 21 from line 20 OGDEN, UT	-	11,260,910.	6,640,102.			
Pa	rt II	Signature Block	—— Í	, , , , , , , , , , , , , , , , , , , ,				
		Ities of perjury, I declare that I have examined this return, including accompanying schedules	and stateme	ents, and to the best of my	knowledge and belief, it is			
		t, and complete. Declaration of prepater (other than officer) is based on all information of wh						
		John Horas						
Sig	n	Signature of officer		Date/	1.1/2			
Her		JOHN NOTARO, EXECUTIVE DIRECTOR			14/2020			
		Type or print name and title		/	·/			
		Print/Type preparer's name Preparer's signature		Date Check	TY PTIN			
Paid	ı	GARRETT M. HIGGINS Quit m Hug		7/14/2020 self-employ	P00543209			
Prep	arer	Firm's name PKF O'CONNOR DAVIES, LLP		Fırm's EIN ▶	27-1728945			
Use	Only	Firm's address 500 MAMARONECK AVENUE			4 204 0000			
		HARRISON, NY 10528-1633		Phone no.91	4-381-8900			
May	the IF	RS discuss this return with the preparer shown above? (see instructions)			X Yes No			

4d Other program services (Describe on Schedule O)

including grants of \$ Total program service expenses

LETTERS, GREETINGS AND REPORT CARDS.

) (Revenue \$

3,396,328.

SCHOLARSHIPS TO 668 STUDENTS FOR A TOTAL AMOUNT OF \$584,929.

Form 990 (2019)

IN FY'19, THE PROGRAM AWARDED

Form 990 (2019) FUTURES IN EDUCATION
Part IV | Checklist of Required Schedules

•	•		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	<u> </u>
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
 3	"Did the örganization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for ——		 -	
	public office? If "Yes." complete Schedule C, Part I	3		_X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4_		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-197 If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes." complete Schedule D. Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9	Х	
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
-	or in quasi endowments? If "Yes." complete Schedule D. Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	ĺ	-	
	Part VI	11a		X
ь	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Х	
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25° If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and If the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			4.7
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	\vdash	Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			v
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			v
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u> </u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			v
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines		"	
	1c and 8a? If "Yes," complete Schedule G, Part II	18	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			77
	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
	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		ا با	
	domestic government on Part IX, column (A), line 19 If "Yes." complete Schedule I. Parts I and II	21	<u>X</u>	

Form	990 (2019) FUTURES IN EDUCATION 2 t IV Checklist of Required Schedules (continued)	0-5496382	<u> </u>	Page 4
_ · a.	t 1 One okiist of ricquired contenues (continues)		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		1.00	1
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	x	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's cui	rrent		
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes, " complete		-	
	Schedule J	23		X
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as	of the		
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete		ł	i
	Schedule K If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defea	se		
	any tax-exempt bonds?	240	;	
ď	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	1	Х
ь	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, a	ind		
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes." comple			
	Schedule L. Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26	1	X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employed	yee,		
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% co		1	
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Pa			X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions, for applicable filing thresholds, conditions, and exceptions)			١.
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? f	1		-
	"Yes," complete Schedule L, Part IV	28a		X
ь	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	n 🗀		
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes." complete Schedule R, Part I	33	J	X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, an	d		
	Part V, line 1	34	l	X
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled ent	tity		
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization.	nization?		
	If "Yes," complete Schedule R, Part V, line 2	36	1	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	Х	L_
Pai	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
4.	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	0		Ī

(gambling) winnings to prize winners?
932004 01-20-20

c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming

Form **990** (2019)

b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable

Form Par	990 (2019) FUTURES IN EDUCATION 20-5496 TV Statements Regarding Other IRS Filings and Tax Compliance (continued)	382	Р	age \$
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			112
	filed for the calendar year ending with or within the year covered by this return 2a 0	l .		
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	<u> </u>		
70	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		x
h	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		5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	"		
O.	any contributions that were not tax deductible as chantable contributions?	6a		x
b	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).			
·	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	X	
-	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
•	to file Form 8282?	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		X_
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	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	<u> </u>	
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter	İ	l	
а	Initiation fees and capital contributions included on Part VIII, line 12]		
ь	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities]		
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders	1		
b	Gross income from other sources (Do not net amounts due or paid to other sources against		ļ	
	amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	1		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		L	
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		ļ
	Note: See the instructions for additional information the organization must report on Schedule O.			١.
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	1		
С	Enter the amount of reserves on hand	ļ		<u> </u>
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	ļ	X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		<u> </u>
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15	<u></u>	Х

Form **990** (2019)

16

16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income?

If "Yes," see instructions and file Form 4720, Schedule N

If "Yes," complete Form 4720, Schedule O.

Form 990 (2019) FUTURES IN EDUCATION 20-5496382 Part VI | Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 23 Tai Enter the number of voting members of the governing body at the end of the tax year. If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. 23 b Enter the number of voting members included on line 1a, above, who are independent 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X 2 officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? Х Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or X more members of the governing body? 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X 8a a The governing body? X b Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the Х organization's mailing address? If "Yes," provide the names and addresses on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a X 10a Did the organization have local chapters, branches, or affiliates? b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b X 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a X X b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe Х 12c in Schedule O how this was done X 13 13 Did the organization have a written whistleblower policy? X 14 Did the organization have a written document retention and destruction policy? 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15a a The organization's CEO, Executive Director, or top management official X 15b b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a X taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶NY Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website X Another's website X Upon request Other (explain on Schedule O)

Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year

State the name, address, and telephone number of the person who possesses the organization's books and record JOHN NOTARO - 718-965-7308

243 PROSPECT PARK WEST, BROOKLYN, NY

ls			
		_	

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13616051

11215

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

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

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

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

 See instructions for the order in which to list the persons above.

X Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and title	(B) Average hours per	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					n an	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer		Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) MS. VERONICA TSANG	2.00									
CHAIRPERSON		X		X	<u> </u>	ļ	<u> </u>	ļ		
(2) MR. ROBERT B. CATELL	2.00			۱.,		ŀ				
CHAIRMAN	2 00	X	<u> </u>	Х	<u> </u>	⊢	_			
(3) MR. ROBERT F. GARTLAND VICE CHAIRMAN	2.00	x		х	l					
(4) MRS. AIDA TORRES	2.00	^		<u> </u>	-	╁──	┢			
SECRETARY	2.00	x		х		ł				
(5) MRS, NICOLE STEINWEISS	2.00	<u> </u>		-	-		\vdash			
TREASURER		х		х		1				
(6) MR. PAUL AGUGGIA	2.00									
TRUSTEE		X								
(7) MR. MARTIN COTTINGHAM	2.00									
TRUSTEE		Х				$ldsymbol{f eta}$				
(8) MOST REV. NICHOLAS DIMARZIO	2.00						l			
TRUSTEE		Х	L.			<u> </u>	_			
(9) MR. JOHN G. DUANE	2.00						ŀ			}
TRUSTEE	0.00	Х	<u> </u>		_	<u> </u>	┝			
(10) MR. THOMAS FLOOD	2.00	,,								
TRUSTEE	2.00	X	<u> </u>			_	├			
(11) MR. CHRISTIAN GARCIA TRUSTEE	2.00	x								
(12) REV. MSGR. JAMIE J. GIGANTIELLO	2.00	Λ	\vdash			╁─	\vdash			
TRUSTEE	2.00	x								
(13) MR. LOUIS GRASSI	2.00					T	\vdash			
TRUSTEE		x				l				
(14) REV. MSGR. KIERAN HARRINGTON	2.00	П								
TRUSTEE		x								
(15) MR. WILLIAM J. HOGAN	2.00									
TRUSTEE		Х								
(16) MR. JOHN LOCONSOLO	2.00									
TRUSTEE		Х								
(17) MR. JOSEPH MATTONE, SR., ESQ.	2.00	$\lfloor \rfloor$								
TRUSTEE		Х				<u> </u>	<u> </u>			5 000 (0040)

Form 990 (2019)

Section A. Onicers, Directors, Trus	iees, Key Cili	hich	ees,	ariu	1 111	yne	<u> </u>	ompensated Employee	> (continuea)				
' (A) Name and title	(B) Average hours per	box	not c , unle	Posi heck r ss per id a di	more 'son i	than s	n an	(D) Reportable compensation	(E) Reportable compensation	tion amount of			
	week (list any hours for related organizations below	tee or director	Institutional trustee			Highest compensated employee	Ė	from the organization (W-2/1099-MISC)	from related organization (W-2/1099-MI	ารู	fi org an	other pensa rom th janizat d relat anizati	tion e ion ed
	line)	Ę	nstit	Officer	(ey er		Former				- 3		
(18) MR. LESTER J. OWENS TRUSTEE	2.00	x											•
(19) MR. ALEX PEREZ	2.00												
TRUSTEE (20) MR. JOSEPH SCIAME	2.00	X	\vdash	Н			\vdash					-	
TRUSTEE	2.00	x											
(21) MR. STEVEN STELLA	2.00			П									
TRUSTEE		X	<u> </u>	Щ		L.	lacksquare						
(22) MRS. ANA OLIVEIRA TRUSTEE	2.00	x											
(23) MR, CARLO A, SCISSURA ESQ.	2.00	┢	\vdash	Н		_	<u> </u>						
TRUSTEE		x											
(24) MR. LOUIS S. MILO	2.00												
TRUSTEE THRU MAY 2019	25.00	X	_	Ш		<u> </u>	L						
(25) MR. JOHN NOTARO	35.00	ł		x									
EXECUTIVE DIRECTOR		\vdash	-			╁─	\vdash						
		<u></u>											
1b Subtotal													
c Total from continuation sheets to Part VI	I, Section A						>						
d Total (add lines 1b and 1c) 2 Total number of individuals (including but n	at limited to th		liete	d ab	-01/0	\dn	<u> </u>	equiped more than \$100	000 of reportable				
2 Total number of individuals (including but n compensation from the organization	ot iimiteo to tri	ose	uste	o ao	ove) Wri	o re	ceived more than \$100,	000 of reportable	e			
												Yes	No
3 Did the organization list any former officer,	director, trust	ee, k	ey e	mple	oye	e, or	hıg	hest compensated emp	loyee on				
line 1a? If "Yes," complete Schedule J for s							-41-		L	ŀ	3		Х
4 For any individual listed on line 1a, is the su and related organizations greater than \$150	-		-					•	ne organization	ŀ	4		X
5 Did any person listed on line 1a receive or a	-		•						dual for services	Ì			
rendered to the organization? If "Yes," con	· ·				-						5		X
Section B. Independent Contractors													
1 Complete this table for your five highest co	•	•							•	pensat	ion fro	om	
the organization Report compensation for (A)	the calendar ye	ear e	enair	ig wi	th c	or wi	tnin	the organization's tax y	ear		(0	2)	
Name and business	address	NO	ONE	C				Description of s	ervices	C		nsatio	n
							\dashv						
							\dashv	<u></u>			_		
2 Total number of independent contractors (i	ncluding but no	ot lin	nited	l to t	hos	e lıs	ted	above) who received mo	ore than				_
\$100,000 of compensation from the organic	zation												

Form **990** (2019)

Form 990 (2019) FUTURES
Part VIII Statement of Revenue

	Check if Schedule O contains a response or note to any line in this Part VIII										
					(Å) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514			
_ 1 2 2	-1	a	Federated campaigns 1a								
 , Gifts, Grants nilar Amounts		b	Membership dues 1b]			
0,0		С	Fundraising events 1c	117,672.							
ifts ar A		d	Related organizations 1d								
s, Bilis		e	Government grants (contributions) 1e	·				1			
Sign		f	All other contributions, gifts, grants, and					1			
but			similar amounts not included above 1f	1,195,412.							
Ēģ		g	Noncash contributions included in lines 1a-1f					.]			
Contributions, (h	Total. Add lines 1a-1f	>	1,313,084.]			
			B	usiness Code				1			
œ.	2	2 a						·			
ه ≧.		b									
Program Service Revenue		C									
am exe		d									
Б		e									
ď		f	All other program service revenue								
		g	Total. Add lines 2a-2f	<u> </u>							
	3	3	Investment income (including dividends, interest,	and							
			other similar amounts)		86,916.			86,916.			
	4		Income from investment of tax-exempt bond proc	eeds 🕨							
	5	•	Royatties (i) Real ((iı) Personal							
	_			(ii) Fersoriai							
	6	a	Gross rents Less rental expenses 6b								
			Less rental expenses 6b Rental income or (loss) 6c								
			Net rental income or (loss)					•			
	7		Gross amount from sales of (i) Securities	(iı) Other							
	Ī	_	assets other than inventory 7a 1,064,889.								
		b	Less cost or other basis								
e			and sales expenses 7b 1,014,505.								
len (С	Gain or (loss) 7c 50,384.					ì			
Re		d	Net gain or (loss)		50,384.			50,384.			
Other Revenue	8	a	Gross income from fundraising events (not								
B			including \$ 117,672. of								
			contributions reported on line 1c) See								
			Part IV, line 18	84,635.							
			Less direct expenses 8b	109,200							
			Net income or (loss) from fundraising events	<u> </u>	-24,565.			-24,565.			
ļ	9	a	Gross income from gaming activities. See	ŀ	İ	,	1	1			
			Part IV, line 19					1			
			Less direct expenses 9b								
	40		Net income or (loss) from gaming activities					1			
	10 a Gross sales of inventory, less returns		and allowances 10a								
		h	Less cost of goods sold 10b								
			Net income or (loss) from sales of inventory	—							
\neg				usiness Code							
snc	11	а		00099	19,420.			19,420.			
Miscellaneous Revenue	•	ь									
ella		C									
B.		d	All other revenue								
2		е	Total. Add lines 11a-11d	•	19,420.						
	12		Total revenue. See instructions	•	1,445,239.	0.	0.	132,155.			
								Earm 990 (2010)			

Form 990 (2019) FUTURES IN EDUCATION
Part IX Statement of Functional Expenses

Secti	cection 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX											
		(A)		(C)	(D)							
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII	Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses							
	Grants and other assistance to domestic organizations		- expenses	general expenses	expenses							
•	and domestic governments. See Part IV, line 21	74,852.	74,852.									
9	Grants and other assistance to domestic	2.2,002.3			i							
-	individuals See Part IV, line 22	3,077,429.	3,077,429.	1								
3	Grants and other assistance to foreign											
_	organizations, foreign governments, and foreign											
	individuals See Part IV, lines 15 and 16											
4	Benefits paid to or for members				j							
5	Compensation of current officers, directors,											
	trustees, and key employees											
6	Compensation not included above to disqualified											
	persons (as defined under section 4958(f)(1)) and			i								
	persons described in section 4958(c)(3)(B)											
7	Other salaries and wages											
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 (nonemployees)	F10 (70	21 5 5 2 7	101 050	105 274							
а	Management	512,670.	215,537.	191,859.	105,274.							
b	Legal	E0 000		59,000.								
С.	Accounting	59,000.		39,000.								
d	Lobbying	9,000.			9,000.							
e	Professional fundraising services. See Part IV, line 17	32,317.		32,317.	<u> </u>							
f	Investment management fees Other (If line 11g amount exceeds 10% of line 25,	32,317.		32,317								
g	column (A) amount, list line 11g expenses on Sch O.)	5,667.		5,667.								
12	Advertising and promotion	44,826.		3,0071	44,826.							
13	Office expenses	50,859.	12,193.	11,154.	27,512.							
14	Information technology	27,508.		27,219.	289.							
15	Royalties	·		-								
16	Occupancy	29,878.	13,151.	11,094.	5,633.							
17	Travel	2,068.	521.	28.	1,519.							
18	Payments of travel or entertainment expenses		_									
	for any federal, state, or local public officials											
19	Conferences, conventions, and meetings	2,860.	230.	2,522.	108.							
20	Interest											
21	Payments to affiliates											
22	Depreciation, depletion, and amortization	20 155		20 155								
23	Insurance	22,155.		22,155.								
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If				1							
	line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				j							
а	MAINTENANCE	9,877.	2,415.	6,427.	1,035.							
b	<u>" </u>	3,0.,0										
c												
d												
_	All other expenses											
25	Total functional expenses. Add lines 1 through 24e	3,960,966.	3,396,328.	369,442.	195,196.							
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 rf following SOP 98-2 (ASC 958-720)				000							

8,175,365. Form 990 (2019)

6,640,102.

29

30

31

32

11,260,910.

12,190,504.

29

30

31

32

and complete lines 29 through 33.

Total net assets or fund balances

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds

Form **990** (2019)

SCHEDULE A

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

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

4947(a)(1) nonexempt charitable trust.

➤ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Name of the organization

20-5496382-FUTURES-IN-EDUCATION-Reason for Public Charity Status (All organizations must complete this part) See instructions Part I The organization is not a private foundation because it is (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ)) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization f Enter the number of supported organizations Provide the following information about the supported organization(s) (iv) Is the organization listed (iii) Type of organization (v) Amount of monetary (vi) Amount of other (i) Name of supported n your governing document (described on lines 1-10 support (see instructions) support (see instructions) organization Yes No above (see instructions))

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 932021 09-25-19 Schedule A (Form 990 or 990-EZ) 2019

Total

Schedule A (Form 990 or 990-EZ) 2019 FUTURES IN EDUCATION 20-5496 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

Se	Section A. Public Support											
Cale	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total					
1	Gifts, grants, contributions, and											
	membership fees received (Do not				İ							
	include any "unusual grants ")	7204138.	7674028.	7060216.	7145671.	1313084.	<u>30397137.</u>					
2	Tax revenues levied for the organ-											
	ization's benefit and either paid to											
	or expended on its behalf											
3	The value of services or facilities											
	furnished by a governmental unit to			!								
	the organization without charge											
4	Total. Add lines 1 through 3	7204138.	7674028.	7060216.	7145671.	1313084.	30397137.					
5	The portion of total contributions											
	by each person (other than a		:									
	governmental unit or publicly											
	supported organization) included											
	on line 1 that exceeds 2% of the											
	amount shown on line 11,				'							
	column (f)						8743943.					
6	Public support. Subtract line 5 from line 4						21653194.					
	ction B. Total Support					<u> </u>						
Cale	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total					
7	Amounts from line 4	7204138.	7674028.	7060216.	7145671.	1313084.	30397137.					
8	Gross income from interest,											
	dividends, payments received on											
	securities loans, rents, royalties,											
	and income from similar sources	26,828.	94,363.	97,468.	131,303.	86,916.	436,878.					
9	Net income from unrelated business											
	activities, whether or not the											
	business is regularly carried on											
10	Other income Do not include gain											
	or loss from the sale of capital											
	assets (Explain in Part VI)	83,020.	44,084.	45,240.	56,500.	19,420.	248,264.					
11	Total support. Add lines 7 through 10						31082279.					
12	Gross receipts from related activities,	etc (see instruction	ns)			12						
13	First five years. If the Form 990 is for	the organization's	first, second, third	d, fourth, or fifth ta	x year as a section	501(c)(3)						
	organization, check this box and stop	here					▶□_					
Se	ction C. Computation of Publi	c Support Per	centage									
14	Public support percentage for 2019 (l	ine 6, column (f) di	vided by line 11, c	olumn (f))		14	69.66 %					
15	Public support percentage from 2018	Schedule A, Part	II, line 14			15	63.65 %					
16a	33 1/3% support test - 2019. If the	organization did no	t check the box or	line 13, and line 1	14 is 33 1/3% or m	ore, check this box						
	stop here. The organization qualifies	as a publicly supp	orted organization				$\triangleright X$					
b	33 1/3% support test - 2018. If the o	organization did no	t check a box on l	ne 13 or 16a, and	line 15 is 33 1/3%	or more, check the	s box					
	and stop here. The organization qual	ifies as a publicly s	supported organiza	ition			ightharpoons					
17a	10% -facts-and-circumstances test	- 2019. If the org	anization did not c	heck a box on line	13, 16a, or 16b, a	ınd line 14 is 10% i	or more,					
	and if the organization meets the "fac	ts-and-circumstand	es" test, check th	is box and stop h	i <mark>ere.</mark> Explain in Pai	rt VI how the organ	ıızatıon					
	meets the "facts-and-circumstances"	test The organizat	ion qualifies as a p	oublicly supported	organization		▶□					
Ł	10% -facts-and-circumstances test	- 2018. If the org	anızatıon did not c	heck a box on line	13, 16a, 16b, or 1	7a, and line 15 is	10% or					
	more, and if the organization meets th	ne "facts-and-circui	nstances" test, ch	eck this box and	stop here. Explain	in Part VI how the	•					
	organization meets the "facts-and-circ						ightharpoons					
18	Private foundation. If the organization	n did not check a l	box on line 13, 16a	a, 16b, 17a, or 17b	, check this box ar	nd see instructions	<u> </u>					
					Sche	dule A (Form 990	or 990-EZ) 2019					

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Part IV Supporting Organizations

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

Section	Λ	ΛII	Sunn	ortina	Orc	ıaniza	tione
Section	л.	\sim 11	Supp	orung	Org	jai iiza	110112

	tion A. All Supporting Organizations	-	Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing		103	140
•	documents? If "No," describe in Part VI how the supported organizations are designated. If designated by		1	
	class or purpose, describe the designation. If historic and continuing relationship, explain	1		
2	Did the organization have any supported organization that does not have an IRS determination of status			
	under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported			
	organization was described in section 509(a)(1) or (2)	2		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer			
	(b) and (c) below	3a		
ь	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and			
_	satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the			
	organization made the determination	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B)			
	purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use	3c		
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	4c		
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	ŀ		
	numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action,	ĺ		
	(iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action	l	İ	
	was accomplished (such as by amendment to the organizing document)	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already			
	designated in the organization's organizing document?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to			
	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		l	
	support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in			
	Part VI.	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor			
	(as 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)	7	$oxed{oxed}$	
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 79			
	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 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.	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which			'ـــــــــــــــــــــــــــــــــــــ
	the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b_		
C	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit			
	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		
0a	Was the organization subject to the excess business holdings rules of section 4943 because of section			
	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated			
	supporting organizations)? If "Yes," answer 10b below	10a_		

determine whether the organization had excess business holdings.) 932024 09-25-19

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

-		49038	<u> 4 P</u>	<u>age 5</u>
Pa	rt IV Supporting Organizations (continued)		V	A1 -
11	Has the organization accepted a gift or contribution from any of the following persons?		Yes	No
	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	_	
—- ь	- 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		
	tion 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		i	
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or	1		
	controlled the organization's activities If the organization had more than one supported organization,	1		
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported		<u> </u>	
	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 carned out the purposes of the supported organization(s) that operated,	- <u>-</u> -		<u> </u>
500	supervised, or controlled the supporting organization. tion C. Type II Supporting Organizations	2	L	l
360	tion C. Type it supporting Organizations		Yes	No
	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		165	140
1	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control		1	
	or management of the supporting organization was vested in the same persons that controlled or managed	1		
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
	,,	,	Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	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	l		
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
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	<u> </u>	<u> </u>
	tion 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 instructions	i).		
a	The organization satisfied the Activities Test Complete line 2 below			
b	The organization is the parent of each of its supported organizations. Complete line 3 below	4		
C	The organization supported a governmental entity Describe in Part VI how you supported a government entity (see ins	itructions)	Yes	No
2	Activities Test. Answer (a) and (b) below. Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		163	140
а	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				
_	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.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	<u> </u>		
	trustees of each of the supported organizations? Provide details in Part VI.	3a	L	
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	 		
	of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3b		
		000 00		

Schedule A (Form 990 or 990-EZ) 2019

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

instructions)

Distributable Amount. Subtract line 5 from line 4, unless subject to

emergency temporary reduction (see instructions)

Schedule A (Form 990 or 990-EZ) 2019

d Excess from 2018 e Excess from 2019

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No 1545-0047 Open to Public Inspection

Name of the organization

FUTURES IN EDUCATION

Employer identification number 20-5496382

- Pa	t I- —Organizations Maintaining Donor Advise	d Funds or Other Similar Funds o	r Accounts Complete if the
	organization answered "Yes" on Form 990, Part IV, Iir		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advised	l funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can be us	sed only
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose co	nferring
	impermissible private benefit?		Yes No
Pa	t II Conservation Easements. Complete if the or	ganization answered "Yes" on Form 990, Pa	rt IV, line 7
1	Purpose(s) of conservation easements held by the organization	on (check all that apply)	
	Preservation of land for public use (for example, recrea	ition or education) Preservation of a	historically important land area
	Protection of natural habitat	Preservation of a	certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form of	a conservation easement on the last
	day of the tax year		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified historic str	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired	after 7/25/06, and not on a historic structure	·
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rel	leased, extinguished, or terminated by the or	rganization during the tax
	year ▶		
4	Number of states where property subject to conservation ear	sement is located	
5	Does the organization have a written policy regarding the per	riodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements if		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing conser-	vation easements during the year
	<u> </u>		
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conservation	n easements during the year
	▶ \$		
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170(h)(
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservati		
	balance sheet, and include, if applicable, the text of the footr	note to the organization's financial statement	ts that describes the
Da	organization's accounting for conservation easements. † III Organizations Maintaining Collections of	Art Historical Treasures or Othe	er Similar Assets
Pai			er Ommar Assets.
	Complete if the organization answered "Yes" on Form		I halaman ah ash waste
1a	If the organization elected, as permitted under FASB ASC 95	•	
	of art, historical treasures, or other similar assets held for pul		nerance of public
_	service, provide in Part XIII the text of the footnote to its final		
b	If the organization elected, as permitted under FASB ASC 95		
	art, historical treasures, or other similar assets held for public	c exhibition, education, or research in further	ance of public service,
	provide the following amounts relating to these items		. .
	(i) Revenue included on Form 990, Part VIII, line 1		\$
_	(ii) Assets included in Form 990, Part X	annua an ath an anadar a saat faction	
2	If the organization received or held works of art, historical tre		ain, provide
	the following amounts required to be reported under FASB A	NOC 958 relating to these items	. .
a	Revenue included on Form 990, Part VIII, line 1		\$
<u> </u>	Assets included in Form 990, Part X		> \$

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

Schedule D (Form 990) 2019

Sche	dule D (Form 990) 2019 FUTURES	IN EDUCAT	ION			20-54	96382	2 Page 2
Par	t III Organizations Maintaining C	ollections of Ar	t, Historical Tre	asures, or Othe	er Simil	ar Asset	s (contin	ued)
3	*Using the organization's acquisition, accessicollection items (check all that apply)	on, and other record	s, check any of the f	following that make	significant	use of its		
а	Public exhibition	d	Loan or exc	hange program				
b	Scholarly research	e	—	0.0				
	Preservation for future generations							
4	Provide a description of the organization's co	ollections and explain	n how they further th	ne organization's exe	empt purp	ose in Part	XIII	
5	During the year, did the organization solicit of	-	•	=				
_	to be sold to raise funds rather than to be ma						Yes	No No
Par	t IV Escrow and Custodial Arran				n Form 99	30, Part IV,	line 9, or	
	reported an amount on Form 990, Pa	rt X, line 21						
1a	Is the organization an agent, trustee, custodi on Form 990, Part X?	an or other intermed	ary for contributions	s or other assets not	t included	Г	Yes	X No
ь	If "Yes," explain the arrangement in Part XIII	and complete the fol	lowing table					
					-	+	Amount	
C	Beginning balance				1c	-		
d	Additions during the year				1d	+		
e	Distributions during the year				1e	 		
f	Ending balance	000 Dad V line	01 for consumer or	atadial aggregative	<u>1f_</u>	T T	Yes	□ No
2a	Did the organization include an amount on F If "Yes," explain the arrangement in Part XIII		•		-	<u></u>	∐ res	X
Par								
<u> </u>	t i	(a) Current year	(b) Prior year	(c) Two years back		years back	(e) Four	years back
12	Beginning of year balance	3,855,172.	3,975,901.	3,499,889.	+	374,128.		411,792.
1a b	Contributions	-,,	,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		35,450.	†	28,250.
c	Net investment earnings, gains, and losses	429,102.	-120,729.	476,012.		90,311.		-65,914.
d	Grants or scholarships	, ,						
	Other expenditures for facilities							
·	and programs							
f	Administrative expenses							
g	End of year balance	4,284,274.	3,855,172.	3,975,901.	3,	499,889.	3,	374,128.
2	Provide the estimated percentage of the curr		e (line 1g. column (a)) held as				
а	Board designated or quasi-endowment	,	%	•				
ь	Permanent endowment > 100.00	 %	_					
c	Term endowment	%						
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.						
3a	Are there endowment funds not in the posse	ssion of the organiza	tion that are held ar	nd administered for t	he organi	zation	_	
	by							Yes No
	(i) Unrelated organizations						3a(i)	<u> </u>
	(ii) Related organizations						3a(ii)	<u> </u>
b	If "Yes" on line 3a(ii), are the related organiza	itions listed as requir	ed on Schedule R?				3b	
4	Describe in Part XIII the intended uses of the		wment funds					
Par	t VI Land, Buildings, and Equipm							
	Complete if the organization answere			•				
	Description of property	(a) Cost or o basis (investin	1 , ,	1 ' '	Accumula epreciatio	1	(d) Book	value
1a	Land							
b	Buildings							
c	Leasehold improvements							
d	Equipment							
e	Other			<u>_</u>				_
Total	. Add lines 1a through 1e (Column (d) must e	qual Form 990, Part	X. column (B). line 1	0c.)				0.

Schedule D (Form 990) 2019

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII Schedule D (Form 990) 2019

1,478,009.

(7)(8) (9)

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

Part XI Reconciliation of Revenue per Audited Financial Staten	nents With Revenue per Re		3430302 Page 4
Complete if the organization answered "Yes" on Form 990, Part IV, line 1	2a		
Total revenue, gains, and other support per audited financial statements		1	1,949,385.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12			
a Net unrealized gains (losses) on investments	2a 450,395.	1 1	
b Donated services and use of facilities			
c Recoveries of prior year grants	2c	4	
d Other (Describe in Part XIII.)	2d 53,751.	 	F04 146
e Add lines 2a through 2d		2e	504,146. 1,445,239.
3 Subtract line 2e from line 1		3	1,445,239.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1	1.1		
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	1	
b Other (Describe in Part XIII)	4b	 	0.
c Add lines 4a and 4b		4c	1,445,239.
5 Total revenue Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.) Part XII Reconciliation of Expenses per Audited Financial State	ments With Expenses per I		
Complete if the organization answered "Yes" on Form 990, Part IV, line 1:			
Total expenses and losses per audited financial statements		1	4,115,020.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25			
a Donated services and use of facilities	2a		
b Prior year adjustments	2b]	
c Other losses	2c]	
d Other (Describe in Part XIII)	2d 154,054.][
e Add lines 2a through 2d		2e	154,054.
3 Subtract line 2e from line 1		3	3,960,966.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1			
a Investment expenses not included on Form 990, Part VIII, line 7b	4a]	
b Other (Describe in Part XIII)	4b	J	
c Add lines 4a and 4b		4c	0.
5 Total expenses Add lines 3 and 4c. (This must equal Form 990. Part I. line 18.)		5	3,960,966.
Part XIII Supplemental Information.			
Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Pa		, Part)	K, line 2, Part XI,
lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any a	dditional information		
		•	
PART IV, LINE 2B:			
PART IV, DINE 2D:			
FUNDS HELD AS AGENCY ENDOWMENTS INCLUDE CON	TRIBUTIONS GIVEN B	Y II	NDIVIDUALS .
TOTAL TILLE TO THE TOTAL PROPERTY OF THE PARTY			
FOR OTHER ORGANIZATIONS THAT ARE HELD BY FU	TURES ON BEHALF OF	THO	OSE
ORGANIZATIONS.			
PART V, LINE 4:			
THE PURPOSE OF THE THROUGHT THE TO TO TO DO	UIDE INGOVE EOD ED		
THE PURPOSE OF THE ENDOWMENT FUND IS TO PROV	VIDE INCOME FOR ED	UCA:	LIONAL
COUNT ADOLLING FOR MUCCE IN NEED			
SCHOLARSHIPS FOR THOSE IN NEED.			
PART X, LINE 2:			
FUTURES RECOGNIZES THE EFFECT OF TAX POSITION	ONS ONLY WHEN THEY	ARI	E MORE
	WA DEMENSION	·	
LIKELY THAN NOT TO BE SUSTAINED. MANAGEMENT	HAS DETERMINED TH		
932054 10-02-19		Sched	iule D (Form 990) 2019

SCHEDULE G

(Form 990 of 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

Open to P

2019

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization	, to transmining or more to miner					Employer ide	ntification number
FUTURES	—IN-EDUCATION-					20=5496	3.8.2
Part I Fundraising Activities. required to complete this part	Complete if the organization answe	red "Y	es" or	Form 990, Part IV, I	ine 1	7 Form 990-EZ	filers are not
Indicate whether the organization rais	e Solicita f Solicita g Special or oral agreement with any individual art VII) or entity in connection with pi riduals or entities (fundraisers) pursui	tion of tion of fundra (includ	non-g gover using of ling of onal fu	overnment grants nment grants events ficers, directors, trus undraising services?		Yes Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have con or con contribi	ustody trol of	(iv) Gross receipts from activity	to (c	Amount paid or retained by) fundraiser ted in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No				
				_			
	-						
-							
	·						
Total 3 List all states in which the organization or licensing	n is registered or licensed to solicit o	contrib	utions	or has been notified	ıt ıs e	exempt from re	gistration
		_					
	<u> </u>			· · · · · · · · · · · · · · · · · · ·			
-		_					
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Schedule G (Form 990 or 990-EZ) 2019

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

Schedule G (Form 990 or 990-EZ) 2019 FUTURES IN EDUCATION	20-5496382 Page 3
11 Does the organization conduct gaming activities with nonmembers?	Yes No
12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other ent	ity formed
to administer charitable gaming?	Yes No
13 Indicate the percentage of gaming activity conducted in	
a The organization's facility	13a %
b An outside facility	13b %
14 Enter the name and address of the person who prepares the organization's gaming/special events boo	ks and records
Name	
Address	
15a Does the organization have a contract with a third party from whom the organization receives gaming r	evenue? Yes No
b If "Yes," enter the amount of gaming revenue received by the organization > \$	and the amount
of gaming revenue retained by the third party > \$	and the amount
c If "Yes," enter name and address of the third party	
5 II 700; Olice hallo and assessed and anno party	
Name	
Address	
16 Gaming manager information	
Name	
Gaming manager compensation > \$	
Description of services provided	
Description of Services provided	
Director/officer Employee Independent contractor	
17 Mandatory distributions	
a is the organization required under state law to make charitable distributions from the gaming proceeds	to
retain the state gaming license?	Yes No
b Enter the amount of distributions required under state law to be distributed to other exempt organization	ons or spent in the
organization's own exempt activities during the tax year 🕨 \$	
Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, column	ns (iii) and (v), and Part III, lines 9, 9b, 10b,
15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions	
	· · · · · · · · · · · · · · · · · · ·
	
	<u> </u>

Schedule G	(Form 990 or 990-EZ)	FUTURES IN	EDUCATION	20-5496382 Page 4
Part IV	(Form 990 or 990-EZ) Supplemental Infor	mation (continued)		
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	<u> </u>			

Schedule G (Form 990 or 990-EZ)

SCHEDULE I (Form 990)		G G Some	Grants and Othe Governments, and	er Assistand d Individuals answered "Yes"	and Other Assistance to Organizations, nents, and Individuals in the United States e organization answered "Yes" on Form 990, Part IV, line 21 or 22.	zations, ed States :Iv, line 21 or 22.			2019	
Department of the Treasury Internal Revenue Service				► Attach to Form 990. .gov/Form990 for the Ia	► Attach to Form 990. Go to www.rs.gov/Form990 for the latest information.	ation.		-, - <u>,</u> ,	Open to Public Inspection	
Name of the organization	on FUTURES IN EDUCATION	N EDUCATION						Employer	Employer identification number 20 - 5496382	
Part i General In	General Information on Grants and Assistance	nd Assistance								
1 Does the organiz	Does the organization maintain records to substantiate the amount	o substantiate the	amount of the grants o	or assistance, the g	rantees' eligibility	or the grants or assis	of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	6	 	
2 Describe in Part t	criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	cedures for monite	oring the use of grant fu	unds in the United	States				_	
[F]	Grants and Other Assistance to Domestic Organizations and Domestic Governments.	Omestic Organiz	ations and Domestic	Governments. Co	omplete if the orga	nization answered "Y	Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any	. IV, line 21,	for any	
recipient th	recipient that received more than \$5,000 Part II can be duplicated if additional space is needed	5,000 Part II can	be duplicated if additio	nal space is neede	P	(6) Mosthard of				
1 (a) Name and ad or gov	1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, EMV, appraisal, other)	(g) Description of noncash assistance	(1)	(h) Purpose of grant or assistance	
CATHEDRAL PREP HIGH SCHOOL	дон зсноог									
56-25 92ND STREET ELMHURST, NY 11373	3	11-2138745	501(C)(3)	50,000.	.0			EDUCATIO	EDUCATIOŅAL SCHOLARSHIPS	
CRISHO REV RECOKIVA WICH SCHOOL	NA HIGH SCHOOL									
710 EAST 37TH STREET	EET									
BROOKLYN, NY 11203	3	26-2433224 501(C)	501(C)(3)	6,000.	0			EDUCATIO	EDUCATIONAL SCHOLARSHIPS	
DESALES MEDIA GROUP INC. 1712 10TH AVENUE	UP INC.						,		***************************************	
BROOKLYN, NY 11215	5	11-2613196	501(C)(3)	6,167.	0			EDUCATIO	EDUCATIONAL SCHOLARSHIPS	
									-	
	Enter total number of section 501(c)(3) and government organization	nd government org	ganizations listed in the line 1 table	line 1 table					3.	
LHA For Paperwork	Enter total number of other organizations listed in the line 1 table. For Paperwork Reduction Act Notice, see the Instructions for Form 990.	see the Instruction	ons for Form 990.					Sched	Schedule I (Form 990) (2019)	

Schedule (Form 990) (2019) FUTURES IN EDUCATION	ATION				20-5496382 Page 2
r Assista	. Complete if the	organization answe	ared "Yes" on Form 9	90, Part IV, line 22	•
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
SPONSORSHIP PROGRAM WHERE A DONOR PAYS A PORTION OF THE STUDENT'S TUITION,	899	584,929.	.0		
PARTIAL SCHOLARSHIPS TO PAMILIES IN FINANCIAL NEED OF TUITION ASSISTANCE.	3984	2,492,500.	.0		
,					
					t
Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information	uired in Part I, lin	e 2, Part III, column	(b), and any other ac	ditional information	
PART I, LINE 2:					
FOR ALL SCHOLARSHIP PROGRAMS, FAMILIES		COMPLETE A FIN	FINANCIAL AID	APPLICATION	
TO DETERMINE ELIGIBILITY. THESE API	APPLICATIONS	ARE	PROCESSED BY A	THIRD-PARTY	
VENDOR, FACTS, WHO ASSESSES FINANCIAL	IAL NEED	BASED ON F	ON HOUSEHOLD I	INCOME AND	3
SIZE. THE RESULTS ARE STORED IN A I	DATABASE	AND TWICE	A YEAR, AT	ATTENDANCE OF	
STUDENTS IS VERIFIED BEFORE SUBMISSION	OF.	PAYMENTS.			
					-
					-
932102 10-26-19		36			Schedule I (Form 990) (2019)

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047 Open to Public Inspection

Name of the organization

FUTURES IN EDUCATION

Employer identification number 20-5496382

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
CONTINUES TO BE A VIABLE OPTION FOR FUTURE GENERATIONS OF STUDENTS IN
BROOKLYN AND QUEENS BY PROVIDING SUPPLEMENTAL FUNDING FOR TUITION
ASSISTANCE, PROGRAM SUPPORT AND CAPITAL PROJECTS TO THE NEEDIEST
CATHOLIC ELEMENTARY AND SECONDARY STUDENTS AND SCHOOLS IN THESE TWO
BOROUGHS.
THE VISION OF FUTURES IN EDUCATION IS TO ENSURE THAT ANY STUDENT IN
BROOKLYN OR QUEENS WHO WANTS TO OBTAIN A QUALITY, FAITH-BASED EDUCATION
IN THE CATHOLIC TRADITION, WILL BE ABLE TO DO SO, REGARDLESS OF HIS OR
HER FAMILY'S INCOME, RACE, RELIGION, OR BACKGROUND, BY KEEPING THE
SCHOOLS AVAILABLE AND AFFORDABLE TO FAMILIES IN THE DIOCESE.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
CAPITAL PROJECTS TO THE NEEDIEST CATHOLIC ELEMENTARY AND SECONDARY
STUDENTS AND SCHOOLS IN THESE TWO BOROUGHS.
THE VISION OF FUTURES IN EDUCATION IS TO ENSURE THAT ANY STUDENT IN
BROOKLYN OR QUEENS WHO WANTS TO OBTAIN A QUALITY, FAITH-BASED EDUCATION
IN THE CATHOLIC TRADITION, WILL BE ABLE TO DO SO, REGARDLESS OF HIS OR
HER FAMILY'S INCOME, RACE, RELIGION, OR BACKGROUND, BY KEEPING THE
SCHOOLS AVAILABLE AND AFFORDABLE TO FAMILIES IN THE DIOCESE.
FORM 990, PART VI, SECTION A, LINE 3:
FUTURES IN EDUCATION DELEGATE CONTROL OVER MANAGEMENT DUTIES TO CATHOLIC
FOUNDATION FOR BROOKLYN AND QUEENS THROUGH A MANAGEMENT SERVICES AGREEMENT.
UNDER THE AGREEMENT CATHOLIC FOUNDATION FOR BROOKLYN AND QUEENS HAVE
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2019)

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MANAGEMENT CONTROL OVER EXECUTIVE REPORTING, ORGANIZATION MANAGEMENT,

FUNDRAISING-AND-DEVELOPMENT, BUDGETS-AND-ACCOUNTING, EVENTS, AND VENDOR AND

CONTRACT MANAGEMENT. FOR THE TAX YEAR ENDING IN AUGUST 2019, FUTURES IN

EDUCATION PAID CATHOLIC FOUNDATION FOR BROOKLYN AND QUEENS \$512,670 FOR

MANAGEMENT FEE EXPENSES. THE MANAGEMENT FEE EXPENSES OF \$512,670 REPRESENTS

EXPENSES OF MANAGEMENT FEES, PAYROLL SERVICE FEES, ADVERTISING, OFFICE

EXPENSES, INFORMATION TECHNOLOGY, OCCUPANCY, TRAVEL, CONFERENCES, GRANTS,

AND INSURANCES.

IN ADDITION, JOHN NOTARO, EXECUTIVE DIRECTOR, IS REIMBURSED BY FUTURES IN

EDUCATION FOR THE MANAGEMENT SERVICES INCLUDED IN THE AGREEMENT WITH

CATHOLIC FOUNDATION FOR BROOKLYN AND QUEENS. TOTAL COMPENSATION (SALARY

PLUS MEDICAL AND OTHER BENEFITS) REIMBURSED TO JOHN NOTARO IS \$81,800. AIDA

TORRES, ASSOCIATE DIRECTOR OF OPERATION'S SALARY IS ALSO REIMBURSED BY

FUTURES IN EDUCATION. TOTAL COMPENSATION (SALARY PLUS MEDICAL AND OTHER

BENEFITS) REIMBURSED TO AIDA TORRES IS \$19,514.

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

FUTURES IN EDUCATION HAS ITS FORM 990 PREPARED BY AN OUTSIDE ACCOUNTING

FIRM AND HAS ESTABLISHED THE FOLLOWING REVIEW PROCESS TO ENSURE THAT THE

INFORMATION REPORTED IS COMPLETE AND ACCURATE. WHEN THE FORM 990 HAS BEEN

PREPARED, REVIEWED BY MANAGEMENT AND IS READY TO BE FILED WITH THE INTERNAL

REVENUE SERVICE, IT IS ELECTRONICALLY SENT TO THE BOARD MEMBERS OF THE

ORGANIZATION FOR ANY COMMENTS. ANY COMMENTS ARE THEN GROUPED, SUMMARIZED

AND PROVIDED TO THE OUTSIDE ACCOUNTANTS. EACH ISSUE IS DOCUMENTED AND

ADDRESSED UNTIL THE RETURN IS FINALIZED AND APPROVED FOR FILING.

FORM 990, PART VI, SECTION B, LINE 12C:

ANY DIRECTOR, PRINCIPAL OFFICER, OR MEMBER OF A COMMITTEE WITH GOVERNING BOARD DELEGATED POWERS, WHO HAS A DIRECT OR INDIRECT FINANCIAL INTEREST. ONCE A YEAR, EACH TRUSTEE MUST SIGN THAT HE/SHE IS AWARE OF AND UNDERSTANDS THE POLICY. THE POLICY IS REVIEWED ON AN ANNUAL BASIS. AN INTERESTED PERSON MAY MAKE A PRESENTATION AT THE GOVERNING BOARD OR COMMITTEE MEETING, BUT AFTER THE PRESENTATION, HE/SHE SHALL LEAVE THE MEETING DURING THE DISCUSSION OF, AND THE VOTE ON, THE TRANSACTION OR ARRANGEMENT INVOLVING THE POSSIBLE CONFLICT OF INTEREST. THE CHAIRPERSON OF THE GOVERNING BOARD OR COMMITTEE SHALL, IF APPROPRIATE, APPOINT A DISINTERESTED PERSON OR COMMITTEE TO INVESTIGATE ALTERNATIVES TO THE PROPOSED TRANSACTION OR ARRANGEMENT. AFTER EXERCISING DUE DILIGENCE, THE GOVERNING BOARD OR COMMITTEE SHALL DETERMINE WHETHER THE CORPORATION CAN OBTAIN WITH REASONABLE EFFORTS A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT FROM A PERSON OR ENTITY THAT WOULD NOT GIVE RISE TO A CONFLICT OF INTEREST. IF A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT IS NOT REASONABLY POSSIBLE UNDER CIRCUMSTANCES NOT PRODUCING A CONFLICT OF INTEREST, COMMITTEE SHALL DETERMINE BY A DISINTERESTED DIRECTORS WHETHER THE GOVERNING BOARD OR MAJORITY VOTE OF THE TRANSACTION OR ARRANGEMENT IS IN OWN BENEFIT, AND THE CORPORATION'S BEST INTEREST, FOR WHETHER IT IS FAIR AND REASONABLE. IN CONFORMITY WITH THE ABOVE DETERMINATION IT SHALL MAKE ITS DECISION AS TO WHETHER TO ENTER INTO THE TRANSACTION OR ARRANGEMENT.

FORM 990, PART VI, SECTION B, LINE 15:

THE BOARD OF DIRECTORS, AT TIMES, USED THE SERVICES OF AN OUTSIDE

CONSULTANT TO SEARCH FOR KEY PERSONNEL. CERTAIN MEMBERS OF THE BOARD

INTERVIEW POTENTIAL CANDIDATES AND SELECT A FINAL CANDIDATE. A WRITTEN

EMPLOYMENT CONTRACT IS THEN PREPARED WHICH INCLUDES SALARY, BONUS POTENTIAL

AND FRINGE BENEFITS. THIS CONTRACT IS THEN SIGNED BY THE CHAIRMAN OF THE

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Schedule O (Form 990 or 990-EZ) (2019)

Schedule O (Form 990 or 990-EZ) (2019) Page 2 **Employer identification number** Name of the organization 20-5496382 FUTURES IN EDUCATION BOARD. IN FEBRUARY 2013 THE BOARD APPROVED THE HIRING OF AN OUTSIDE CONSULTANT FIRM, WHICH PRESENTED AN OVERALL STRATEGIC PLAN FOR THE ORGANIZATION. PART OF THAT PLAN WAS AN EXECUTIVE COMPENSATION ANALYSIS AND COMPARISON TO DETERMINE THE AVERAGE SALARY FOR AN EXECUTIVE AT COMPARABLE ORGANIZATIONS. THE STRATEGIC PLAN HAS BEEN APPROVED BY THE BOARD. THIS PROCESS WAS LAST UNDERTAKEN IN JANUARY 2013. FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION'S FORM 990 IS AVAILABLE FOR PUBLIC INSPECTION AS REQUIRED UNDER SECTION 6104 OF THE INTERNAL REVENUE CODE. IT IS POSTED ON THE GUIDESTAR.ORG WEBSITE AND OTHER SIMILAR WEBSITES. THE ORGANIZATION'S FORM 990. GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON WRITTEN REQUEST AT THE ORGANIZATION'S BUSINESS ADDRESS DURING NORMAL BUSINESS HOURS AT 243 PROSPECT_PART_WEST, BROOKLYN, NY 11215. FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS: CHANGE IN INTEREST IN NET ASSETS OF CATHOLIC FND. FOR BROOKLYN & QUEENS 44,827. WRITE-OFF OF UNCOLLECTIBLE PLEDGES -2,600,303.TOTAL TO FORM 990, PART XI, LINE 9 -2,555,476. FORM 990, PART XII, LINE 2C: THE ORGANIZATION HAS A COMMITTEE THAT ASSUMES RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT OF ITS FINANCIAL STATEMENTS AND SELECTION OF AN

YEAR.

INDEPENDENT ACCOUNTANT. THIS PROCESS DID NOT CHANGE FROM THE PRIOR