Chip DeMoss - Compact for America

From: Sent: To: Subject: CCH-ReturnNotification@wolterskluwer.com Monday, August 03, 2015 9:35 AM CHIP.DEMOSS@COMPACTFORAMERICA.ORG 2014 Electronic Return Accepted by the IRS

COMPACT FOR AMERICA EDUCATIONAL FOUNDATION INC,

You are receiving this e-mail on behalf of HAM LANGSTON & BREZINA LLP.

Your electronically filed Exempt federal income tax return for tax year 2014 has been acknowledged as accepted for processing by the IRS on 08/03/2015.

Your return was sent to the Ogden Service Center.

Your SubmissionID is 76398420152150329e60. Your Client ID is 9772.

Do not mail the paper copy of your tax return to the IRS. It is for your use only.

PLEASE DO NOT REPLY TO THIS E-MAIL.

We generate this e-mail automatically from your request to be notified when your return or extension is accepted by the taxing authority. We do not monitor this e-mail address for incoming e-mail traffic. If you need assistance or have a question, please contact the firm preparing this return for you. Thank you.

Form	88	79)-	E	0	
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Department of the Treasury

IRS e-file Signature Authorization for an Exempt Organization

OMB No. 1545-1878

For calendar year 2014, or fiscal year beginning <u>APR 24</u>, 2014, and ending <u>DEC 31</u>, 20 <u>14</u> **Do not send to the IRS. Keep for your records.**

Information about Form 8879-EO and its instructions is at www.irs.gov/form8879eo.

Internal Revenue Service Name of exempt organization

Employer identification number

COMPACT FOR AMERICA EDUCATIONAL

FOUNDA.	L.T.C	JN INC	
Name and title	of of	ficer	
HAROLD	R	DEMOSS	III
CEO			

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line **1a**, **2a**, **3a**, **4a**, or **5a**, below, and the amount on that line for the return being filed with this form was blank, then leave line **1b**, **2b**, **3b**, **4b**, or **5b**, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than 1 line in Part I.

1a	Form 990 check here b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b	235,362.
2a	Form 990-EZ check here b Total revenue, if any (Form 990-EZ, line 9)	2b	
За	Form 1120-POL check here b Total tax (Form 1120-POL, line 22)	3b	
4a	Form 990-PF check here b Tax based on investment income (Form 990-PF, Part VI, line 5)	4b	
5a	Form 8868 check here b Balance Due (Form 8868, Part I, line 3c or Part II, line 8c)	5b	

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2014 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

X lauthorize HAM, LANGSTON & BREZINA, L	LP	to enter my PIN 77034
ERO firm name	I	Enter five numbers, bu do not enter all zeros
as my signature on the organization's tax year 2014 electronical is being filed with a state agency(ies) regulating charities as part enter my PIN on the return's disclosure consent screen.	-	
As an officer of the organization, I will enter my PIN as my signat indicated within this return that a copy of the return is being filed program, I will enter my PIN on the return's disclosure consent s	d with a state agency(ies) regulating cha screen.	2
Officer's signature	Date	
Part III Certification and Authentication		
ERO's EFIN/PIN. Enter your six-digit electronic filing identification		
number (EFIN) followed by your five-digit self-selected PIN.	76398411550 do not enter all zeros	
I certify that the above numeric entry is my PIN, which is my signature on t confirm that I am submitting this return in accordance with the requiremen <i>e-file</i> Providers for Business Returns.		
ERO's signature 🕨	Date 🕨 07,	/31/15
ERO Must Retain This Do Not Submit This Form To the	Form - See Instructions	
	s ind offiess nequested to Do	
LHA For Paperwork Reduction Act Notice, see instructions.		Form 8879-EO (2014)

LHA For Paperwork Reduction Act Notice, see instructions. 423051 09-29-14

Form 8879-EO	IRS e-file Signature Authorization for an Exempt Organization		OMB No. 1545-1878
	For calendar year 2014, or fiscal year beginning $ { m APR} 24$, 2014, and ending $ { m DEC} 31$,20 14	2014
Dependence of the Transver	Do not send to the IRS. Keep for your records.	· <u> </u>	2014
Department of the Treasury Internal Revenue Service	Information about Form 8879-EO and its instructions is at www.irs.gov/form8	3879eo	
Name of exempt organization		Employer iden	tification number
COMPACT FOR A	MERICA EDUCATIONAL		
FOUNDATION IN	C		
Name and title of officer HAROLD R DEMO CEO	SS III		
	Return and Return Information (Whole Dollars Only)		
on line 1a, 2a, 3a, 4a, or 5 whichever is applicable, bl than 1 line in Part I.	rn for which you are using this Form 8879-EO and enter the applicable amount, if any, fr a, below, and the amount on that line for the return being filed with this form was blank, ank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicab	, then leave line ole line below. D	1b, 2b, 3b, 4b, or 5b, o not complete more
1a Form 990 check here		1b	235,362.
2a Form 990-EZ check he	re 🕨 🛄 🔄 b Total revenue, if any (Form 990-EZ, line 9)	2b	
3a Form 1120-POL check		3b	
4a Form 990-PF check he	······································	4b	
5a Form 8868 check here	b Balance Due (Form 8868, Part I, line 3c or Part II, line 8c)	5b	
Part II Declarat	ion and Signature Authorization of Officer		
(a) an acknowledgement of the date of any refund. If a debit) entry to the financia return, and the financial in 1-888-353-4537 no later th processing of the electron payment. I have selected a	der, transmitter, or electronic return originator (ERO) to send the organization's return to f receipt or reason for rejection of the transmission, (b) the reason for any delay in proce- pplicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an I institution account indicated in the tax preparation software for payment of the organiz stitution to debit the entry to this account. To revoke a payment, I must contact the U.S an 2 business days prior to the payment (settlement) date. I also authorize the financial ic payment of taxes to receive confidential information necessary to answer inquiries an a personal identification number (PIN) as my signature for the organization's electronic re electronic funds withdrawal.	essing the return electronic fund zation's federal 5. Treasury Finar I institutions invo nd resolve issue	n or refund, and (c) s withdrawal (direct taxes owed on this ncial Agent at olved in the s related to the
Officer's PIN: check one	box only		
X lauthorize HA	M, LANGSTON & BREZINA, LLP	to enter my PI	N 77034
	ERO firm name		Enter five numbers, but
is being filed wit enter my PIN on As an officer of t indicated within	on the organization's tax year 2014 electronically filed return. If I have indicated within the a state agency(ies) regulating charities as part of the IRS Fed/State program, I also auther return's disclosure consent screen. The organization, I will enter my PIN as my signature on the organization's tax year 2014 this return that a copy of the return is being filed with a state agency(ies) regulating charter my PIN on the return's disclosure consent screen.	uthorize the afor	ementioned ERO to led return. If I have
Officer's signature 🕨	Date 🕨		
	tion and Authentication		
	ur six-digit electronic filing identification	0	
number (EFIN) followed by	your five-digit self-selected PIN. 76398411550 do not enter all zeros		
	neric entry is my PIN, which is my signature on the 2014 electronically filed return for th ng this return in accordance with the requirements of Pub. 4163 , Modernized e-File (Mef ss Returns.		

	Date 🕨	07/31/15				
ERO Must Retain This Form - See Instructions Do Not Submit This Form To the IRS Unless Requested To Do So						

LHA For Paperwork Reduction Act Notice, see instructions. 423051 09-29-14 Form 8879-EO (2014)

ERO's signature 🕨

	0	on	Return of Organization Exempt Fron			OMB No. 1545-0047
Form JJU Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private founda					ations)	2014
	Do not enter social security numbers on this form as it may be made public.					Open to Public
	Internal Revenue Service Information about Form 990 and its instructions is at <u>www irs gov/form990</u> A For the 2014 calendar year, or tax year beginning APR 24, 2014 and ending DEC 31, 2014				1 /	Inspection
_						
BCa	heck if pplicab		forganization ACT FOR AMERICA EDUCATIONAL	D Employer ider	ntificat	ion number
	Addre		DATION INC			
	Name chang		usiness as			
x	nitial return		and street (or P.O. box if mail is not delivered to street address) Room/s	uite E Telephone nur	nher	
	Final	2323	CLEAR LAKE CITY BLVD, STE 180-19			5-8311
	termi	n-	own, state or province, country, and ZIP or foreign postal code	G Gross receipts \$		235,362.
	Amen		TON, TX 77062	H(a) Is this a grou	p retur	
	Appli	F Name a	nd address of principal officer: HAROLD R DEMOSS III	for subordina		
	pendi	^{ing} 2323	CLEAR LAKE CITY BLVD, STE 180-190, HO			
				527 If "No," attac	h a list	. (see instructions)
			COMPACTFORAMERICA.ORG	H(c) Group exem		
	_			/ear of formation: 201	4 м St	ate of legal domicile: ${f T}{f X}$
Pa	art I	Summary				
<u>e</u>	1	Briefly describ	be the organization's mission or most significant activities: TO EDUCA	TE PUBLIC O	FFIC	IALS,
and			S AND RESIDENTS OF THE UNITED STATES			
Governance	2		x L if the organization discontinued its operations or disposed of r	1		
Go	3				3	4
8	4		dependent voting members of the governing body (Part VI, line 1b)		4 5	4
Activities &	5		of individuals employed in calendar year 2014 (Part V, line 2a) of volunteers (estimate if necessary)	[5 6	10
ctivi	79		of volunteers (estimate if necessary) d business revenue from Part VIII, column (C), line 12		7a	0.
A			business taxable income from Form 990-T, line 34		7b	0.
	Ĩ	Not annoiated		Prior Year	<u></u>	Current Year
Ð	8	Contributions	and grants (Part VIII, line 1h)			235,362.
Revenue	9		ice revenue (Part VIII, line 2g)			0.
eve	10		come (Part VIII, column (A), lines 3, 4, and 7d)			0.
œ	11	Other revenue	e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			0.
	12	Total revenue	- add lines 8 through 11 (must equal Part VIII, column (A), line 12)			235,362.
	13	Grants and si	milar amounts paid (Part IX, column (A), lines 1-3)			0.
	14		to or for members (Part IX, column (A), line 4)		\square	0.
ses			r compensation, employee benefits (Part IX, column (A), lines 5-10)			0.
Expense			undraising fees (Part IX, column (A), line 11e)			0.
Exp			ing expenses (Part IX, column (D), line 25) 155.			02 407
_			es (Part IX, column (A), lines 11a-11d, 11f-24e)			93,497.
	18		es. Add lines 13-17 (must equal Part IX, column (A), line 25)		_	93,497. 141,865.
SS	19	Revenue less	expenses. Subtract line 18 from line 12	Beginning of Current Ye		End of Year
Net Assets or Fund Balances	20	Total accote //	Part X, line 16)	beginning of ourrelit re	,ai	181,765.
Asse	20		Part X, line 16) ; (Part X, line 26)		+	39,900.
Net	21		fund balances. Subtract line 21 from line 20		+	141,865.
Pa	art II			1		,
Und	er pen	_	I declare that I have examined this return, including accompanying schedules and sta	atements, and to the best (of my kn	owledge and belief, it is
			. Declaration of preparer (other than officer) is based on all information of which prep			J,
		<u> </u>	,			

Sign Here	Signature of officer HAROLD R DEMOSS III, C	EO		Date			
	Type or print name and title						
	Print/Type preparer's name	Preparer's signature	Date	Check X	PTIN		
Paid	STAN LANGSTON		07/31	/15 ^{if} self-employed	P00670526		
Preparer	Firm's name HAM , LANGSTON &	BREZINA, LLP		Firm's EIN 🛌 7	6-0448495		
Use Only	Firm's address 11550 FUQUA, SUI	TE 475					
	HOUSTON, TX 7703	4		Phone no.281-	481-1040		
May the I	May the IRS discuss this return with the preparer shown above? (see instructions)						
432001 11-0	32001 11-07-14 LHA For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2014)						

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

	COMPACT FOR AMERICA EDUCATIONAL	
	n 990 (2014) FOUNDATION INC	Page 2
Pa	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	X
1	Briefly describe the organization's mission: TO EDUCATE PUBLIC OFFICIALS, CITIZENS AND RESIDENTS OF THE UN	רשייה
	STATES AND THE SEVERAL STATES OF THE USE OF AN INTERSTATE COM	
	AGREEMENT AND COUNTERPART FEDERAL LEGISLATION TO COORDINATE T	
	ARTICLE V OF THE US CONSTITUTION BY STATE LEGISLATURES AND TH	
2	Did the organization undertake any significant program services during the year which were not listed on	
-	the prior Form 990 or 990-EZ?	Yes X No
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes X No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured	oy expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total	expenses, and
	revenue, if any, for each program service reported.	
4a)
	THE FOUNDATION'S EDUCATION TEAM ORGANIZED AND MADE EDUCATIONA	
	PRESENTATIONS AND FORUMS ADVANCING THE FOUNDATION'S MISSION A	
	POLICY AND PHILOSOPHICAL CONFERENCES IN LAS VEGAS, NV AND WAS	
	TO WHICH THE GENERAL PUBLIC WAS INVITED TO PARTICIPATE OR REG WHICH WERE ATTENDED BY PUBLIC OFFICIALS, POLICY ANALYSTS, EDU	
	CITIZENS, AND RESIDENTS. THE FOUNDATION'S EDUCATIONAL TEAM A	
	RESEARCHED AND WROTE NONPARTISAN EDUCATIONAL POLICY PAPERS AN	
	PIECES TO ADVANCE THE FOUNDATION'S MISSION, WHICH WERE WIDELY	
	DISTRIBUTED.	
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
		,
4d	Other program services (Describe in Schedule O.)	
40	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses 89,319.	/
		Form 990 (2014)
43200 11-07-		1 0111 200 (2014)
	2	
530	0731 742224 9772 2014.04010 COMPACT FOR AMERICA EDUCAT	I 9772 1

15530731 742224 9772

2014.04010 COMPACT FOR AMERICA EDUCATI 9772_

Form	990 (2014) FOUNDATION INC		Р	age 3
Pa	rt IV Checklist of Required Schedules			<u> </u>
			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	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
-	public office? If "Yes," complete Schedule C, Part I	3		х
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	х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	· ·		
•	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	-		
Ŭ	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	–		
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>	-		
Ŭ	•	8		x
9	Schedule D, Part III	- -		
9	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
		9		x
10	If "Yes," complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
10	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		x
	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
11				
	as applicable. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
а		440		x
h	Part VI	11a		- 23
D	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	4.4h		х
	assets reported in Part X, line 16? /f "Yes," complete Schedule D, Part VII	11b		- 23
C	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	440		x
4		11c		- 23
a	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			x
	Part X, line 16? /f "Yes," complete Schedule D, Part IX	11d		X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		~
т	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			x
40-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	11f		~
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		v	
	Schedule D, Parts XI and XII	12a	X	
D	Was the organization included in consolidated, independent audited financial statements for the tax year?	401-		x
40	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		~
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			x
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		~
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
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? /f "Yes," complete Schedule F, Parts /// and /V	16		X
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? /f "Yes," complete Schedule G, Part /	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			v
	1c and 8a? If "Yes," complete Schedule G, Part II	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
		Form	990	(2014)

432003 11-07-14

	rt IV Checklist of Required Schedules (continued)		Pa	age 4
Га			V	No
~ 1	Did the examination report more than #5,000 of grants or other equiptones to any demostic examination or		Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If</i> "Yes," <i>complete Schedule I, Parts I and II</i>	21		х
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	21		
22	Det IV Lee (A) For 20 (CIV Lee - Lee Only Detailed Detailed Detailed U	22		х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
20	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		х
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 defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25 a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			v
	of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
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):			х
	A current or former officer, director, trustee, or key employee? <i>If</i> "Yes," <i>complete Schedule L, Part IV</i>	28a		X
	A family member of a current or former officer, director, trustee, or key employee? <i>If</i> "Yes," <i>complete Schedule L, Part IV</i> An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	28b		А
C		28c	х	
29	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	20		
	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?/f "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		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35 a		х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	1		
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		v	
	Note. All Form 990 filers are required to complete Schedule O	38	X 990	
		Form	22 U (2014

432004 11-07-14

UNDATION INC

Form	990 (2014) FOUNDATION INC		P	age 5					
Par									
	Check if Schedule O contains a response or note to any line in this Part V								
			Yes	No					
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 2								
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0								
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming								
	(gambling) winnings to prize winners?	1c	Х						
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,								
	filed for the calendar year ending with or within the year covered by this return 2a								
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	х						
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)								
За	3a Did the organization have unrelated business gross income of \$1,000 or more during the year?								
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	Зb							
	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)?								
b	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		Х					
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х					
с	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								
	any contributions that were not tax deductible as charitable 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).								
а	a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?								
b	b If "Yes," did the organization notify the donor of the value of the goods or services provided?								
	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 7d								
е									
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х					
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		Х					
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							
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:								
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								
11	Section 501(c)(12) organizations. Enter:								
а	Gross income from members or shareholders 11a								
b	Gross income from other sources (Do not net amounts due or paid to other sources against								
	amounts due or received from them.) 11b								
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 12b								
13	Section 501(c)(29) qualified nonprofit health insurance issuers.								
а	Is the organization licensed to issue qualified health plans in more than one state?	1 3a							
	Note. See the instructions for additional information the organization must report on Schedule O.								
b	Enter the amount of reserves the organization is required to maintain by the states in which the								
	organization is licensed to issue qualified health plans 13b								
С	Enter the amount of reserves on hand 13c								
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		х					
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b							

Form **990** (2014)

432005 11-07-14

COMPACT FOR AMERICA EDUCATIONAL FOUNDATION INC

Form 990 (2014)

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

	Check if Schedule O contains a response or note to any line in this Part VI			
ect	tion A. Governing Body and Management			Т
_			Yes	╉
1 a	Enter the number of voting members of the governing body at the end of the tax year 1a	±		I
	If there are material differences in voting rights among members of the governing body, or if the governing			I
	body delegated broad authority to an executive committee or similar committee, explain in Schedule 0.			
	Enter the number of voting members included in line 1a, above, who are independent 1b	4		
	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		
	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		
	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		
	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		
	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			
	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		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		
ect	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
		_	Yes	
l0a	Did the organization have local chapters, branches, or affiliates?	10a		
	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		
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c	x	
13	Did the organization have a written whistleblower policy?	13		
	Did the organization have a written document retention and destruction policy?	14		
	Did the process for determining compensation of the following persons include a review and approval by independent	14		
0				
_	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	45-		
	The organization's CEO, Executive Director, or top management official	15a		_
D	Other officers or key employees of the organization	15b		
IC -	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	10		
	taxable entity during the year?	16a		Ī
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
	tion C. Disclosure			
	List the states with which a copy of this Form 990 is required to be filed NONE			
8	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	availab	ble	
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website I Upon request Other (explain in Schedule O)			
9	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	nd finan	cial	
	statements available to the public during the tax year.			
	State the name, address, and telephone number of the person who possesses the organization's books and records:			
20				1
20	HAROLD R DEMOSS III - 281-235-8311			
20				

Page 6

COMPACT	FOR	AMERICA	EDUCATIONAL	
FOUNDAT	ION [INC		

Form 990 (2014)

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

• List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

 List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

1) KEVIN RC GUTZMAN IRECTOR 2) THOMAS C PATTERSON	week (list any hours for related organizations below line)			nd a d	lirecto	or/trus	tee)			amount of
IRECTOR	line)	Individual trust	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
	5.00	x						0.	0.	0.
	10.00						-			
HAIRMAN		x						Ο.	Ο.	0.
3) LAWRENCE REED	5.00									
IRECTOR		х						Ο.	Ο.	0.
4) JULIANNE THOMPSON	20.00									
IRECTOR		х						0.	0.	0.
5) HAROLD R DEMOSS III	40.00									_
ICE CHAIRMAN/CEO				х				0.	0.	0.
6) JEFFREY S UTSCH	25.00									
XECUTIVE VP-DEVELOPMENT	10.00		_	х	<u> </u>			0.	0.	0.
7) NICHOLAS C DRANIAS	40.00								0	0
RESIDENT				X				0.	0.	0.
		-			\vdash	\vdash				
					\vdash	\vdash				
					<u> </u>					
						1				

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432007 11-07-14

Form 990 (2014)

Page 7

_		T FOR AME	RI	CA	ED	U	CAT	ΓI	ONAL				-	
	t VII Section A. Officers, Directors,	TION INC Trustees, Kev Em	volar	/ees	and	1 Hi	ahe	st (Compensated Employe	es (continued)			Р	age 8
	(A) Name and title	(B) Average hours per week	(do box	not c	POSI heck n ss per	tion more	than	one th an	(D) Reportable	(E) Reportable compensation from related	ו	an	(F) timate nount other	of
		(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MIS		com fr org an	pensa om th anizat d relat	ation le tion ted
									0	-				
1b	Sub-total			I					0.		0.			0.
	Total from continuation sheets to Pa Total (add lines 1b and 1c)								0.		0.			0.
2	Total number of individuals (including b	out not limited to t				pove	e) wł	ho r	received more than \$100	,000 of reportable	э			_
	compensation from the organization		-										Yes	0 No
з	Did the organization list any former off													77
4	line 1a? If "Yes," complete Schedule J For any individual listed on line 1a, is th											3		X
	and related organizations greater than	\$150,000? If "Yes	, " co	mple	ete S	che	edule	e J	for such individual	-		4		X
5	Did any person listed on line 1a receive rendered to the organization? <i>If "Yes,"</i>					-			-			5		x
Sec	tion B. Independent Contractors													
1	Complete this table for your five highes the organization. Report compensation										pens	ation	rom	
	(A)								(B)			(0		
	Name and busir	less address	N	ONI	5				Description of s	services		ompe	Isatio	
2	Total number of independent contractor \$100,000 of compensation from the or		not li	mite	d to i		se li: 0	steo	d above) who received n	nore than				
43200 11-07	8											Form	990 (2014)

COMPACT	FOR	AMERICA	EDUCATIONAL	
FOUNDATI	ON 1	INC		

		2014) FOUNDATION INC				Page 9
Pa	rt VII					
		Check if Schedule O contains a response or note to any line	e 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
Contributions, Gifts, Grants and Other Similar Amounts	b c d e f	Federated campaigns1aMembership dues1bFundraising events1cRelated organizations1dGovernment grants (contributions)1eAll other contributions, gifts, grants, and similar amounts not included above1f235,362.				
nd to	-		225 262			
90	n	Total. Add lines 1a-1f	235,362.			
Ð	0.0	Business Code				
, ż	2 a b					
Ser	c					
Program Service Revenue	d					
^{og} u	е					
۲,	f	All other program service revenue				
	g	Total. Add lines 2a-2f				
	3	Investment income (including dividends, interest, and				
		other similar amounts)				
	4 5	Income from investment of tax-exempt bond proceeds Royalties				
	5	(i) Real (ii) Personal				
	6 a	Gross rents				
		Less: rental expenses				
		Rental income or (loss)				
		Net rental income or (loss)				
	7 a	Gross amount from sales of (i) Securities (ii) Other				
		assets other than inventory				
	b	Less: cost or other basis				
		and sales expenses				
		Gain or (loss)				
le		Net gain or (loss) Gross income from fundraising events (not				
Other Revenue		including \$ of contributions reported on line 1c). See Part IV, line 18 a				
đ		Less: direct expenses b				
		Net income or (loss) from fundraising events				
	9 a	Gross income from gaming activities. See				
	h	Part IV, line 19 a a b				
		Net income or (loss) from gaming activities				
		Gross sales of inventory, less returns				
		and allowances a				
	b	Less: cost of goods sold b				
		Net income or (loss) from sales of inventory				
		Miscellaneous Revenue Business Code				
	11 a					
	b					
	С					
		All other revenue				
		Total Add lines 11a-11d	235,362.	0.	0.	0.
43200 11-07-		Total revenue. See instructions.	233,302.	0.	0.	Form 990 (2014)

11-07-14

COMPACT FOR AMERICA EDUCATIONAL FOUNDATION INC

	t IX Statement of Functional Expense				Page IU
	on 501(c)(3) and 501(c)(4) organizations must com		or organizations must o	amplete column (A)	
3601	Check if Schedule O contains a respon	nse or note to any line in	this Part IX	Simplete column (A).	
	Check if Schedule O contains a respon	(A)	(B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations		CAPONOCO	gonoral expenses	CAPONOCO
	and domestic governments. See Part IV, line 21				
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, lines 15 and 16				
4	Benefits paid to or for members				
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				
	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 (non-employees):				
а	Management	44,900.	44,900.		
b	Legal				
с	Accounting				
d	Lobbying				
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch 0.)				
12	Advertising and promotion				
13	Office expenses	2,692.		2,692.	
14	Information technology	2,092.		2,092.	
15	Royalties				
16	Occupancy	24,568.	24,568.		
17	Travel Payments of travel or entertainment expenses	24,500.	24,500.		
18	for any federal, state, or local public officials	~			
19	Conferences, conventions, and meetings	10,033.	10,033.		
20					
20 21	Interest Payments to affiliates				
21	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A)				
	amount, list line 24e expenses on Schedule 0.)	9,068.	9,068.		
a	PRINTING OTHER EXPENSES	9,008. 1,486.	9,008.	1,331.	155.
b	EDUCATIONAL COMMUNICATI	1,480.	750.	т, ээт.	100.
c	BOCATIONAL COMMONICATI	/50.	/50.		
d	All other expenses				
	All other expenses	93,497.	89,319.	4,023.	155.
25 26	Joint costs. Complete this line only if the organization	55,457.	05,515.	-,023.	T22.
20	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				

432010 11-07-14

Check here

Form 990 (2014)

15530731 742224 9772

if following SOP 98-2 (ASC 958-720)

10 2014.04010 COMPACT FOR AMERICA EDUCATI 9772___1

Form 990 (2014)

15530731 742224 9772

Net Assets or Fund Balances

Form 990 (2014)

Assets

Liabilities

COMPACT FOR AMERICA EDUCATIONAL FOUNDATION INC Part X Balance Sheet

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

			Degining of year		Lifu of year
1	Cash - non-interest-bearing			1	130,358.
2	Savings and temporary cash investments			2	
3	Pledges and grants receivable, net			3	51,407.
4	Accounts receivable, net			4	
5	Loans and other receivables from current and former officers, di				
	trustees, key employees, and highest compensated employees.	Complete			
	Part II of Schedule L	-		5	
6	Loans and other receivables from other disqualified persons (as				
	section 4958(f)(1)), persons described in section 4958(c)(3)(B), a	nd contributing			
	employers and sponsoring organizations of section 501(c)(9) vol	untary			
	employees' beneficiary organizations (see instr). Complete Part	I of Sch L		6	
7	Notes and loans receivable, net			7	
8	Inventories for sale or use			8	
9	Prepaid expenses and deferred charges			9	
10a	Land, buildings, and equipment: cost or other				
	basis. Complete Part VI of Schedule D 10a				
b	Less: accumulated depreciation 10b			10c	
11	Investments - publicly traded securities			11	
12	Investments - other securities. See Part IV, line 11			12	
13	Investments - program-related. See Part IV, line 11			13	
14	Intangible assets			14	
15	Other assets. See Part IV, line 11			15	
16	Total assets. Add lines 1 through 15 (must equal line 34)		0.	16	181,765.
17	Accounts payable and accrued expenses			17	39,300.
18	Grants payable			18	
19	Deferred revenue			19	
20	Tax-exempt bond liabilities			20	
21	Escrow or custodial account liability. Complete Part IV of Sched			21	
22	Loans and other payables to current and former officers, director				
	key employees, highest compensated employees, and disqualif	-			
~	Complete Part II of Schedule L			22	
23	Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties			23	600.
24				24	000.
25	Other liabilities (including federal income tax, payables to related parties, and other liabilities not included on lines 17-24). Complete				
				25	
26	Total liabilities. Add lines 17 through 25		0.	26	39,900.
 20	Organizations that follow SFAS 117 (ASC 958), check here	X and		20	
	complete lines 27 through 29, and lines 33 and 34.				
27	Unrestricted net assets			27	141,865.
28	Temporarily restricted net assets			28	
29	Permanently restricted net assets			29	
	Organizations that do not follow SFAS 117 (ASC 958), check	here			
	and complete lines 30 through 34.				
30	Capital stock or trust principal, or current funds			30	
31	Paid-in or capital surplus, or land, building, or equipment fund			31	
32	Retained earnings, endowment, accumulated income, or other f			32	
33	Total net assets or fund balances		0.	33	141,865.
34	Total liabilities and net assets/fund balances		0.	34	181,765.
					Earm 000 (0014)

Page 11

(B) End of year

Form 990 (2014)

(A) Beginning of year

COMPACT	FOR	AMERICA	EDUCATIONAL	

	COMPACT FOR ANALYTICA EDUCATIONAL				
	1990 (2014) FOUNDATION INC			Pa	ge 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
				- -	60
1	Total revenue (must equal Part VIII, column (A), line 12)	1		5,3	
2	Total expenses (must equal Part IX, column (A), line 25)	2		$\frac{3,4}{1}$	
3	Revenue less expenses. Subtract line 2 from line 1	3	14	1,8	-
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			0.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			0.
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,		1 /	1,8	65
Da	column (B))	10	14	1,0	05.
га	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII			Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			100	110
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedul	• •			
00			2a		x
Za	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a	2a		
	separate basis, consolidated basis, or both:	uuna			
	Separate basis, consolidated basis, of both.				
h	Were the organization's financial statements audited by an independent accountant?		2b	x	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separa		20		
	consolidated basis, or both:	10 0000,			
	X Separate basis Consolidated basis Both consolidated and separate basis				
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of t	he audit			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	x	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sc				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the S				
	Act and OMB Circular A-133?	-	3a		х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the req				
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
			Form	990	(2014)

432012 11-07-14

SC	HEDULE A		Dublic Cho	rity Status on		alia Si	unnort		OMB No. 1545-0047			
(Fo	rm 990 or 990-E Z)			rity Status an nization is a section 50					2014			
			•	47(a)(1) nonexempt cha			or a section		2014			
	tment of the Treasury al Revenue Service			Attach to Form 990 or I					Open to Public Inspection			
	e of the organizati			(Form 990 or 990-EZ) and			ww.irs.gov/fo		identification number			
Nali	le of the organizati		DATION INC	ERICA EDUCAT	TONAL			Employer	Identification number			
Pa	rt I Reason			All organizations must co	omplete th	is part.) Se	ee instruction	S.				
The				(For lines 1 through 11, o								
1	A church, co	nvention of ch	nurches, or associatio	on of churches describe	d in sectio	on 170(b)(*	1)(A)(i).					
2	A school des	cribed in sect	tion 170(b)(1)(A)(ii). (Attach Schedule E.)								
з	A hospital or	a cooperative	hospital service org	anization described in s e	ection 170)(b)(1)(A)(i	ii).					
4	A medical res	search organiz	zation operated in co	njunction with a hospita	l described	d in sectio	on 170(b)(1)(A	(iii). Enter	the hospital's name,			
	city, and stat											
5	-	-		llege or university owne	d or opera	ted by a g	overnmental	unit describ	oed in			
_		section 170(b)(1)(A)(iv). (Complete Part II.)										
6 7	[•• •]	, 0	5	mental unit described in			• •	the general	public described in			
'	5		omplete Part II.)	intial part of its support	ironi a gov	emmenta		the general	public described in			
8	`			(1)(A)(vi). (Complete Par	t II.)							
9				than 33 1/3% of its sur		contributi	ons, member	ship fees, a	nd gross receipts from			
	-			ct to certain exceptions,	-			•	-			
				(less section 511 tax) fr					-			
	See section	509(a)(2). (Co	mplete Part III.)									
10	An organizat	ion organized	and operated exclus	ively to test for public sa	afety. See	section 50	09(a)(4).					
11				ively for the benefit of, to								
				ed in section 509(a)(1) o					heck the box in			
_		0		of supporting organization		•						
а				supervised, or controlled gularly appoint or elect								
			complete Part IV, Se		a majority			ees of the s	upporting			
b			•	d or controlled in connect	tion with it	ts support	ed organizati	on(s), by ha	vina			
	••			anization vested in the s								
			st complete Part IV,									
с	Type III fui	nctionally inte	egrated. A supportin	g organization operated	in connec	tion with,	and functiona	ally integrate	ed with,			
	its support	ed organizatio	on(s) (see instructions	s). You must complete	Part IV, Se	ections A,	D, and E.					
d	Type III no	n-functionall	y integrated. A supp	orting organization oper	rated in co	nnection v	with its suppo	orted organi	zation(s)			
		-	-	zation generally must sa	-		-	d an attent	iveness			
		•		nplete Part IV, Section								
e		-		written determination fro			a Type I, Type	ell, Type III				
	Enter the number	-		nally integrated support	ing organi	zation.						
			n about the supporte	ed organization(s)								
9	(i) Name of supp		(ii) EIN	(iii) Type of organization		rganization	(v) Amount o	f monetary	(vi) Amount of			
	organization	ı		(described on lines 1-9 above or IRC section		in your document?	support		other support (see			
				(see instructions))	Yes	No	Instruct	tions)	Instructions)			
Tota												
	For Paperwork Re n 990 or 990-EZ.		Notice, see the Instr	ructions for			Schee	dule A (For	m 990 or 990-EZ) 2014			

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Schedule	A (Form 990 or 990-EZ) 2014 FOUNDATION
Part II	Support Schedule for Organizations

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	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")					235,362.	235,362.
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					235,362.	235,362.
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)						
6	Public support. Subtract line 5 from line 4.						235,362.
Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7	Amounts from line 4					235,362.	235,362.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						235,362.
12	Gross receipts from related activities,	etc. (see instructi	ons)			12	
13	First five years. If the Form 990 is for	the organization's	s first, second, thir	rd, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)	
_	organization, check this box and stop	here					► X
	ction C. Computation of Publi						
	Public support percentage for 2014 (lin					14	%
	Public support percentage from 2013					15	%
1 6a	33 1/3% support test - 2014. If the or	-					
	stop here. The organization qualifies a						
b	33 1/3% support test - 2013. If the or	•					
	and stop here. The organization qualif						
1 7a	10% -facts-and-circumstances test						
	and if the organization meets the "fact						
	meets the "facts-and-circumstances" t						
b	10% -facts-and-circumstances test						
	more, and if the organization meets the						.
	organization meets the "facts-and-circ						▶⊣
18	Private foundation. If the organization) did not check a	box on line 13, 16	a, 16b, 17a, or 17b			
					Sche	dule A (Form 990	or 990-EZ) 2014

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

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

Gifts grants, contributions, and membership besires received. (0) not include any "unusual grants.") Grass receipts from adversessions, from adversessions, and the service of adversession of the service of the service of adversession of the service	Section A. Publi	ic Support						
membership fees received. (Do not include any "numusing ants"). Image: Section 2000 (Section 2000) (Section 20	alendar year (or fisca	l year beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
include any "unusual grants ")	1 Gifts, grants, co	ntributions, and						
2 Gross receipts from admissions, memorhandles add or services approximate handles and or services and a membrane and a membra	membership fee	es received. (Do not						
merchandles edd or services par- formed, or facilities furnished in any activity that is related to the organization's taxecempt purpose 3 Gross receipts from activities that are not an unrelated trade or bus- iness under section 513 4 Tax revenues level for the organization is behalf for any activity that is related to the organization is behalf or expended on its behalf for any activity is benefit and either paid to or expended on its behalf for expended on its behalf for expended on its behalf a street level of services or facilities furnished by a governmental unit to the organization without change and noom thoutded on level 1.2, and a received from disqualitied persons the measure of 18,000 fb in the relation of 10,000 fb and noom from disqualities persons hat exceed the grade of 18,000 fb in the relation of 10,000 fb and noom from interest, dividendis, payments received on and noom fro	include any "un	usual grants.")						
are not an urrelated trade or bus- iness under section 513 1 Tax revenues levied for the organ- ization's benefit and eithor paid to or expended on its behalf 5 The value of services or facilities furrished by a governmental unit to the organization without charge 6 Total. Add lines 1 through 5 7 Ta Amounts included on lines 1, 2, and 3 received from disgualified persons b Amounts included on lines 1, 2, and 3 received from disgualified persons b Amounts included on lines 1, 2, and 3 received from disgualified persons b Amounts included on lines 1, 2, and 3 received from disgualified persons b Amounts included on lines 1, 2, and 3 received from disgualified persons b Amounts included on lines 1, 2, and 3 received from disgualified persons b Amounts included on lines 1, 2, and 3 received grant be the year exceed the grant without the the to amounts included on lines 1, 2, and 3 received grant be the year exceed the grant be the year exceed the grant persons b Amounts from line 6 G Grass income from lines 1 dig Grass income from lines 1 dig Grass income from similar sources (less section 511 Taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 1 Net income from unrelated business and activations not nucled a line 10b, migrainly run of the 10 ab 3 rol 11 apport, persons 4, bit, 11, and 12) 1 Net income from unrelated business and activations not nucled a line 10b, migrainly run of a line 10b, migrain run and 10b 1 Net in come percentage for 2014 (line 10c, column (l) divided by line 13, column (l) line 1 1 Investment lincome percentage for 2013 Schedule A, Part II, line 17 1 Investment lincome percentage for	merchandise so formed, or facilit any activity that	ld or services per- ties furnished in is related to the						
iness under section 513 4 Tax revenues levied for the organization's break to the organization's break to the organization without charge 1 Tax revenues levied for the organization without charge 1 5 Total Additions 1 through 5 1 7.2 A mouths included on lines 1, 2, and 3 1 1 5 Total Additions 71, 2, and 3 1 1 5 Total Additions 71, 2, and 3 1 1 1 5 Anounts included on lines 1, 2, and 3 1 1 1 1 6 Additions 73 and 70 1 1 1 1 1 1 6 Additions 74 and 70 1<	3 Gross receipts f	rom activities that						
A Tax revenues levied for the organization is benefit and either paid to or expended on its behalf or expended on	are not an unrel	ated trade or bus-						
ization's benefit and either paid to or expended on its behalf image: image								
furnished by a governmental unit to the organization without charge 5 Total. Add lines 1 through 5 a received from disqualified persons b Amouth included on lines 1, 2, and a received from disqualified persons b Amouth includes on lines 2 and 2 received from the manqualified persons that acceed the gene of second 7 is gene of second 7 is a received from disqualified persons that acceed the gene of second 7 is conditioned to the second 7 is a received from disqualified persons that acceed the gene of second 7 is conditioned and 7 is conditioned to the second 7 is a received from disqualified persons that acceed the gene of second 7 is conditioned and 7 is conditioned and 7 is conditioned from second 1 is a received from disqualified persons that acceed the gene of second 7 is a received from disqualified persons that acceed the gene of second 7 is a received from disqualified persons that acceed the gene of second 7 is a received from disqualified persons that acceed the gene of second 7 is a received from disqualified persons that acceed the gene of second 7 is a received from disqualified persons that acceed the gene of second 7 is a received from disqualified persons that acceed the gene of second 7 is a received from disqualified persons that acceed the gene of second 7 is a received from disqualified persons that acceed the gene of second 7 is a received from disqualities that acceed a received from disqualities as a rule from gene acceed gene acceed the rule acceed from disqualities as a rule	ization's benefit	and either paid to						
the organization without charge 3 Total. Add lines 1 through 5 4 Amounts included on lines 1, 2, and 3 received from disqualified persons b Amounts included on lines 1, 2, and 3 received from disqualified persons b Amounts included on lines 1, 2, and 3 received from disqualified persons b Amounts fine bits the year concert the guilts of \$5.000 r W of the womand on line 1 bits the year c Add lines 7 and 7 0 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from interest, dividends, payments received on securities loans, rents, royalties and income from interest, dividends, payments received on securities loans, rents, royalties and income from interest, dividends, payments received on securities loans, rents, royalties and income from interest, dividends, payments received on securities loans, rents, royalties and income from interest, dividends, payments received on securities loans, rents, royalties and income from interest, dividends, payments received on securities loans, rents, royalties and income from interest, dividends, payments received on securities loans, rents, royalties and income from interest, dividends, payments received on securities loans, rents, royalties and income from interest, dividends, payments received on securities loans at 0b. 5 Net negative from unrelated business is regularly carried on 0 other income. Do not income the etomo C. Computation of Public Support Percentage 5 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f)) 1 1 1 Instant income percentage for 2014 (line 10c, column (f) divided by line 13, column (f)) 1 7 1 Investment income percentage for 2014 (line 10c, column (f) divided by line 14, and line 15 is mot than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 1 Private foundation. If the organization did not check a box on line 14, and l	5 The value of ser	vices or facilities						
a Total. Add lines 1 through 5 Image: Construction of the state		•						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons that exceed the grade of lines 2 and 2 received from disqualified persons that exceed the grade of lines 2 and 2 received from distribution line 15 for the year Image:	-							
b Amounts included on lines 2 and 3 received tom other than its druck have a Add lines 7 a and 7b 3 Public support (adduction First, dividends, payments received on securities loans, rents, royalties and income from interest, dividends, payments received on securities loans, rents, royalties and income from interest, dividends, payments received on securities loans, rents, royalties and income from interest, dividends, payments received on securities loans, rents, royalties and income from interest, dividends, payments received on securities loans, rents, royalties and income from interest, dividends, payments received on securities loans, rents, royalties and income from unrelated businesses acquired after June 30, 1975 c Add lines 10a and 10b 1 Net income from unrelated businesses acquired after June 30, 1975 c Add lines 10a and 10b 1 Net income prom sublet or businesses acquired after June 30, 1975 c Add lines 10a and 10b 1 Net income prom unrelated business activities not include gain or loss from the sale of capital assets (Eyblain in ParVI), and t2 1 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f)). 1 Interest the source of 11 Received for 2013 Schedule A, Part III, line 15 1 Interest of 2014 (line 10c, column (f) divided by line 13, column (f)). 1 Interest of 2013 Schedule A, Part III, line 15 1 Interest of 2013 Schedule A, Part III, line 17 1 Interest of 2013 Schedule A, Part III, line 17 1 Interest of 2013 Schedule A, Part III, line 17 1 Interest of 2013 (line organization did not check the box on line 14 and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization. 2 Private foundation. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization. 2 Private foundation. If the organization	7a Amounts includ	ed on lines 1, 2, and						
c Add lines 7a and 7b	b Amounts included on from other than disque exceed the greater of	lines 2 and 3 received alified persons that \$5,000 or 1% of the						
8 Public support (Subtratine 7chm line 6) ection B. Total Support (a) 2010 (b) 2011 (c) 2012 (d) 2013 (e) 2014 (f) T 9 Amounts from line 6 (a) 2010 (b) 2011 (c) 2012 (d) 2013 (e) 2014 (f) T 9a Gross income from interest, dividends, payments received on securities loans, rents, royatiles and income from similar sources (b) Unrelated businesses acable income (lines 10a and 10b (lines 10a and 10b)								
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Da Gross income from interest, divideds, payments received on securities loans, rents, royalties and income from similar sources Image: Comparison of the securities loans, rents, royalties and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Image: Comparison of the securities loans, rents, royalties and 10b c Add lines 10a and 10b Image: Comparison of the securities of capital assets (Explain in Part VI) Image: Comparison of the securities of capital assets (Explain in Part VI) 2 Other income. Do not include gain or loss for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ection C. Computation of Public Support Percentage 5 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f)) Image: Column (f) 9 Public support percentage for 2013 Schedule A, Part III, line 17 Image: Column (f) 2 as 1/3%, support tests - 2014. If the organization (di not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 3 1/3% support tests - 2013. If the organization did not check a box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 3 1/3% support tests - 2013. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1			(4) 2010	((4) 2010	(0) 2011	(1) 10101
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1 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Image: Strength Stre	•							
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1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

Yes

No

Schedule A (Form 990 or 990 EZ) 2014 FOUNDATION INC Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

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16 2014.04010 COMPACT FOR AMERICA EDUCATI 9772 1

Schedule A (Form 990 or 990-EZ) 2014

	edule A (Form 990 or 990 EZ) 2014 FOUNDATION INC		Pa	age 5
Pa	rt IV Supporting Organizations _(continued)			-
			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		L
	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		
Sec	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			
	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.	2		
Sec	etion C. Type II 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		
Sec	etion D. 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, (1) a written notice describing the type and amount of support provided during the prior tax			
	year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	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		
Sec	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,):		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b				
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see ins	structions	s).	
2	Activities Test. Answer (a) and (b) below.		Yes	No
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				
	trustees of each of the supported organizations? Provide details in <i>Part VI.</i>	3a		
b				
	of its supported organizations? If "Yes," describe in part vi the role played by the organization in this regard.	3b		1

432025 09-17-14

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Schedule A (Form 990 or 990-EZ) 2014

17

2014.04010 COMPACT FOR AMERICA EDUCATI 9772___1

Page	5
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che	dule A (Form 990 or 990-EZ) 2014 FOUNDATION INC			Pag
	t V Type III Non-Functionally Integrated 509(a)(3) Supporting	g Org	anizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	g trust o	on Nov. 20, 1970. See instr	uctions. All
	other Type III non-functionally integrated supporting organizations must co	mplete	Sections A through E.	
ect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
5	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
ect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1 a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
ect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional	y-integr	ated Type III supporting or	ganization (see

Schedule A (Form 990 or 990-EZ) 2014

432026 09-17-14 instructions).

Sche	dule A (Form 990 or 990-EZ) 2014 FOUNDATION IN	C		Page 7
Par	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Org	anizations (continued)	
Secti	on D - Distributions		, ,	Current Year
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organization	าร	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the	he organization is responsiv	е	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2014 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1	Distributable amount for 2014 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2014			
	(reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2014:			
а				
b				
с				
d				
е	From 2013			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2014 distributable amount			
i	Carryover from 2009 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2014 from Section D,			
	line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2014 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2014, if			
	any. Subtract lines 3g and 4a from line 2 (if amount			
	greater than zero, see instructions).			
6	Remaining underdistributions for 2014. Subtract lines 3h			
	and 4b from line 1 (if amount greater than zero, see			
	instructions).			
7	Excess distributions carryover to 2015. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
а				
b				
С				
d	Excess from 2013			
e	Excess from 2014			

Schedule A (Form 990 or 990-EZ) 2014

432027 09-17-14

	COMPACT	FOR	AMERICA	EDUCATIONAL
Schedule A (Form 990 or 990-EZ) 2014	FOUNDAT	ION I	INC	

Page 8

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

SHORT YEAR RETURN

15

FORM 990 FOR 2014 IS THE SHORT YEAR INITIAL RETURN.

32028 09-17-14	Schedule A (Form 990 or 990-EZ) 20
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Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

Schedule of Contributors

 Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990 . OMB No. 1545-0047

2014

Employer identification number

Name of the organization

COMPACT FOR AMERICA EDUCATIONAL

FOUNDATION INC

Filers of:	Section:
Form 990 or 990-E Z	X 501(c)(3) (enter number) organization
	4947(a)(1) nonexempt charitable trust not treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**. **Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year for an *exclusively* set is the set of the parts unless the set of the

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Employer identification number

Name of organization COMPACT FOR AMERICA EDUCATIONAL FOUNDATION INC

Part I	Contributors (see instructions). Use duplicate copies of Part I if additiona	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contributio
1	JOHN DOE DONOR #1 CONFIDENTIALITY REQUESTED BASED ON FEAR OF POLITICAL RETALIATION/PRIVACY CONCERNS	\$20,000.	Person X Payroll Noncash (Complete Part II for noncash contributions
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contributio
2	JOHN DOE DONOR #2 CONFIDENTIALITY REQUESTED BASED ON FEAR OF POLITICAL RETALIATION/PRIVACY CONCERNS	\$ 150,000.	Person X Payroll Noncash (Complete Part II for noncash contributions
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contributio
3		\$20,000.	Person X Payroll Noncash (Complete Part II for noncash contributions
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contributio
4	JOHN DOE DONOR #4 CONFIDENTIALITY REQUESTED BASED ON FEAR OF POLITICAL RETALIATION/PRIVACY CONCERNS, CA 94105	\$20,000.	Person X Payroll Noncash (Complete Part II for noncash contributions
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contributio
5	JOHN DOE DONOR #5 CONFIDENTIALITY REQUESTED BASED ON FEAR OF POLITICAL RETALIATION/PRIVACY CONCERNS	\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contributio
6	JOHN DOE DONOR #6 CONFIDENTIALITY REQUESTED BASED ON —FEAR OF POLITICAL RETALIATION/PRIVACY CONCERNS	\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions

Name of organization

COMPACT FOR AMERICA EDUCATIONAL FOUNDATION INC

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		- - - _ \$	
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		- - _ \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		- - - _ \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		- - - _ \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		- - - _ \$	990, 990-EZ, or 990-PF)

Employer identification number

15530731 742224 9772

2014.04010 COMPACT FOR AMERICA EDUCATI 9772___1

Page 4

Name of orga	anization TFOR AMERICA EDUCATI	ONAL	Employer identification number
	TION INC	ontributions to organizations describ te columns (a) through (e) and the fol	ed in section 501(c)(7), (8), or (10) that total more than \$1,000 for llowing line entry. For organizations
	Use duplicate copies of Part III if additi		Chiess for the year. (Enter this into, once.)
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		-	
		(e) Transfer of g	jift
	Transferee's name, address	, and ZIP + 4	Relationship of transferor to transferee
(-) N-			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_		(e) Transfer of g	gift
	Transferee's name, address	, and ZIP + 4	Relationship of transferor to transferee
(a) No.			
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-		(e) Transfer of g	niff
	Transferee's name, address		Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-		(e) Transfer of g	
-	Transferee's name, address	, and ZIP + 4	Relationship of transferor to transferee
23454 11-05-	14	1	Schedule B (Form 990, 990-EZ, or 990-PF) (20

24 2014.04010 COMPACT FOR AMERICA EDUCATI 9772___1

4)

SCHEDULE C (Form 990 or 990-EZ)	омв №. 1545-0047				
Department of the Treasury Internal Revenue Service		e if the organization is describe bout Schedule C (Form 990 or 990-f			CDPEN to Public Inspection
 Section 501(c)(3) org Section 501(c) (other Section 527 organization If the organization answ Section 501(c)(3) org Section 501(c)(3) org If the organization answ 	anizations: Con than section 5 tions: Complet vered "Yes," to anizations that anizations that vered "Yes," to	Form 990, Part IV, line 3, or For nplete Parts I-A and B. Do not con 01(c)(3)) organizations: Complete e Part I-A only. Form 990, Part IV, line 4, or For have filed Form 5768 (election un have NOT filed Form 5768 (election Form 990, Part IV, line 5 (Proxy	mplete Part I-C. Parts I-A and C below. rm 990-EZ, Part VI, lin nder section 501(h)): Co on under section 501(h	Do not complete Part I-B. te 47 (Lobbying Activities) omplete Part II-A. Do not co i)): Complete Part II-B. Do r), then omplete Part II-B. not complete Part II-A.
Name of organization	or (6) organiza COMPACT FOUNDAT	tions: Complete Part III. FOR AMERICA EDU ION INC ganization is exempt und			oyer identification number
 Provide a descriptio Political expenditure 	n of the organiz	zation's direct and indirect politica	al campaign activities ir	n Part IV.	
Part I-B Comple	ete if the org	ganization is exempt und	er section 501(c)(3).	
 2 Enter the amount of 3 If the organization in 4a Was a correction matrix 	any excise tax neurred a section ade?	incurred by the organization und incurred by organization manage on 4955 tax, did it file Form 4720 t	ers under section 4955 for this year?		
b If "Yes," describe in Part I-C Comple	Part IV. ete if the ord	ganization is exempt und	er section 501(c),	except section 501(c)(3).
 Enter the amount di Enter the amount of exempt function act 	rectly expended the filing organ ivities	d by the filing organization for sec nization's funds contributed to oth s. Add lines 1 and 2. Enter here a	ction 527 exempt functions for se	ion activities \$ sction 527	
				N .	
 4 Did the filing organiz 5 Enter the names, ac made payments. Fo contributions receiv 	zation file Form Idresses and er r each organiza ed that were pr	1120-POL for this year? mployer identification number (EII ation listed, enter the amount pair omptly and directly delivered to a additional space is needed, provi	N) of all section 527 pol I from the filing organiz a separate political orga	itical organizations to whic ation's funds. Also enter th anization, such as a separa	e amount of political
(a) Name		(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
					1

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. LHA 432041 10-21-14

Schedule C (Form 990 or 990-EZ) 2014

25

0	dule C (Form 990 or 990-E Z) 2014			TNC	DUCATIONAL		D •
	t II-A Complete if the org	anizatio	n is eve	mpt under secti	on 501(c)(3) and fil	ed Form 5768 (e	Page 2
1 4	section 501(h)).	Jamzario					
		tion bolon	no to on off	iliated group (and list	in Part IV each affiliated	group mombor's pom	a addraga FIN
A U		-	-		In Part IV each anniateu	group member s nam	e, address, Eli n ,
	expenses, and sha						
BCI	heck 🕨 🛄 if the filing organiza	ITION CHECK	ed box A a	nd "limited control" p	rovisions apply.		
			oying Expe eans amou	nditures unts paid or incurred	i.)	(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influ	uence pub	lic opinion ((grass roots lobbying)		0.	
	Total lobbying expenditures to influ		-			0.	
	Total lobbying expenditures (add li					0.	
	Other exempt purpose expenditure					93,497.	
	Total exempt purpose expenditure		93,497.				
	Lobbying nontaxable amount. Enter		18,699.				
i	If the amount on line 1e, column (a) of			bying nontaxable ar	A		
	Not over \$500,000			the amount on line 1			
		0.000					
	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.						
I	Over \$17,000,000		\$1,000,	000.			
	Oracerceta pentavable emount (er	tor OEN/ of	flipe 1fl			4,675.	
-	Grassroots nontaxable amount (er					<u> </u>	
	h Subtract line 1g from line 1a. If zero or less, enter -0-						
	Subtract line 1f from line 1c. If zero			P. 42 P.141		0.	
1	If there is an amount other than ze		r line 1h or	line 11, did the organi	zation file Form 4720	Г	¬., ¬.,
	reporting section 4911 tax for this					L	Yes No
	(Some organizations t	hat made a	a section 5	eraging Period Unde 501(h) election do no rate instructions for l	t have to complete all o	of the five columns b	elow.
		Lobb	ying Expe	nditures During 4-Ye	ear Averaging Period		
	Calendar year (or fiscal year beginning in)	(a) 2	2011	(b) 2012	(c) 2013	(d) 2014	(e) Total
-	Lobbying nontaxable amount						
b	Lobbying ceiling amount (150% of line 2a, column(e))						
c	Total lobbying expenditures						
ا م	Grassroots nontaxable amount						
	Grassroots ceiling amount						
	(150% of line 2d, column (e))						
f	Grassroots lobbying expenditures						

Schedule C (Form 990 or 990-EZ) 2014

432042 10-21-14

Schedule C (Form 990 or 990-EZ) 2014 FOUNDATION INC

Page 3

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

For e	each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description			(b)	
of the	e lobbying activity.	Yes	No	Amo	ount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements?				
d	Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities?				
j	Total. Add lines 1c through 1i				
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b	If "Yes," enter the amount of any tax incurred under section 4912				
с	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?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section	on 501(c)(5), or se	ection	
	501(c)(6).				
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?				
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?		3		
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section				
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered	"No," OR	(b) Par	t III-A, lir	ne 3, is
	answered "Yes."		-		
1	Dues, assessments and similar amounts from members		. 1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic	cal			
	expenses for which the section 527(f) tax was paid).				
	Current year				
	Carryover from last year				
-	Total				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		. 3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc				
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p				
_	expenditure next year?		. 4		
	Taxable amount of lobbying and political expenditures (see instructions)		. 5		
	t IV Supplemental Information	lint), Dent II A	lings	and O faar	
PIOV	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	nist), Part II-A	, ines 1 a	and 2 (see	

instructions); and Part II-B, line 1. Also, complete this part for any additional information.

PART I-A, LINE 1:

15530731 742224 9772

NO POLITICAL CAMPAIGN ACTIVITIES TOOK PLACE DURING THE YEAR.

Schedule C (Form 990 or 990-EZ) 2014

(Forr	HEDULE D n 990)	OMB No. 1545-0047				
	ment of the Treasury I Revenue Service	Information about Schedule D (For	Attach to Form m 990) and its i	990. nstructions is at _{www.irs.gov/1}	form99	
Nam	e of the organizat		A EDUCAT	IONAL	Emp	ployer identification number
Der		FOUNDATION INC	d Funda an (Alber Cinciler Frinde en A		
Pa		ations Maintaining Donor Advise		other Similar Funds of A	CCOL	Ints. Complete if the
	organizatio	on answered "Yes" to Form 990, Part IV, lin		r advised funds	b) Fun	ids and other accounts
1	Total number at e	nd of year	(1) 2 0 1 1			
2		of contributions to (during year)				
3		of grants from (during year)				
4		at end of year				
5		on inform all donors and donor advisors in			lds	
	are the organization	on's property, subject to the organization's	exclusive legal of	ontrol?		Yes No
6	Did the organizati	on inform all grantees, donors, and donor a	dvisors in writing	g that grant funds can be used o	only	
	for charitable purp	poses and not for the benefit of the donor of	r donor advisor,	or for any other purpose confer	rring	
Der	impermissible priv					Yes No
Pa		vation Easements. Complete if the org			line 7.	
1		servation easements held by the organizat			impo	tent land area
		n of land for public use (e.g., recreation or e of natural habitat	ducation)	Preservation of a historically Preservation of a certified historically		
		n of open space	L	Preservation of a certified fit	ISTOLIC	structure
2		through 2d if the organization held a quali	fied conservation	contribution in the form of a co	nsorv	ation easement on the last
-	day of the tax yea		ice conscivation			ation casement on the last
		••				Held at the End of the Tax Year
а	Total number of c	onservation easements			2a	
b					2b	
с	Number of conser	rvation easements on a certified historic str	ucture included	in (a)	2c	
d		rvation easements included in (c) acquired				
		nal Register			2d	
3		rvation easements modified, transferred, re	leased, extinguis	hed, or terminated by the organ	nization	n during the tax
	year ►					
4		where property subject to conservation ea				
5	-	ation have a written policy regarding the pe forcement of the conservation easements i				Yes No
6		er hours devoted to monitoring, inspecting,		onservation easements during t		
7		ses incurred in monitoring, inspecting, and				
8		rvation easement reported on line 2(d) above	-			·
	and section 170(h	ı)(4)(B)(ii)?	-			Yes No
9		be how the organization reports conservati				
	include, if applical	ble, the text of the footnote to the organiza	tion's financial s	atements that describes the or	ganiza	tion's accounting for
_	conservation ease					
Pa		ations Maintaining Collections o	-	•	Simil	ar Assets.
		f the organization answered "Yes" to Form				
па		elected, as permitted under SFAS 116 (AS				
		s, or other similar assets held for public ex tnote to its financial statements that descr			public	service, provide, in Part XIII,
h		elected, as permitted under SFAS 116 (AS			alance	a sheet works of art historical
		r similar assets held for public exhibition, e				
	relating to these it	-	ducation, or rese		100,1	provide the following amounts
	-	uded in Form 990, Part VIII, line 1				\$
		ed in Form 990, Part X				\$
2		received or held works of art, historical tre				
	-	unts required to be reported under SFAS 1		_		
а		in Form 990, Part VIII, line 1				\$
		n Form 990, Part X				\$
LHA 43205		eduction Act Notice, see the Instruction	s for Form 990.			Schedule D (Form 990) 2014
10-01-	14					
			28			

15530731 742224 9772

2014.04010 COMPACT FOR AMERICA EDUCATI 9772___1

	COMPACT H			CA E	DUCATI	IONAL						
_	dule D (Form 990) 2014 FOUNDATIO											age 2
Par	t III Organizations Maintaining Col											
3	Using the organization's acquisition, accession (check all that apply):	, and othe	er record	ls, checl	cany of the	e followin	g that are a	significant	use of its	collectio	n item	IS
а	Public exhibition		d		Loan or ex	change p	rograms					
b	Scholarly research		е		Other							
с	Preservation for future generations											
4	Provide a description of the organization's colle	ections an	d explai	n how th	ey further	the orgar	nization's ex	empt purp	ose in Par	t XIII.		
5	During the year, did the organization solicit or re-	eceive do	nations (of art, hi	storical trea	asures, o	r other simil	ar assets	_	_	_	_
	to be sold to raise funds rather than to be main	tained as	part of t	he orga	nization's c	ollection	?		L	Yes		No
Par	t IV Escrow and Custodial Arrange reported an amount on Form 990, Part X		Comple	ete if the	organizati	on answe	ered "Yes" to	o Form 99	0, Part IV,	line 9, or		
1 a	Is the organization an agent, trustee, custodian		intermed	liary for	contributio	ns or oth	er assets no	t included				
	on Form 990, Part X?			-					·	Yes		No
b	If "Yes," explain the arrangement in Part XIII an	d comple	te the fo	llowing t	able [.]							
~		a comple		lio tring t	abio.					Amoun	t	
c	Beginning balance							1c		,	-	
	Additions during the year											
	Distributions during the year											
f	Ending balance											
2a	Did the organization include an amount on Form									Yes		No
	If "Yes," explain the arrangement in Part XIII. Cl						· · · · · · · · · · · · · · · · · · ·					Ī
Par												
		a) Curren			rior year		years back		years back	(e) Four	vears	back
1 a	Beginning of year balance			(-7)			,	(-7	,	(-/		
b	Contributions											
c	Net investment earnings, gains, and losses											
d	Grants or scholarships											
	Other expenditures for facilities											
	and programs											
f	Administrative expenses											
	End of year balance											
2	Provide the estimated percentage of the current	nt vear en	d balanc	e (line 1	a. column ((a)) held a	IS:					
а	Board designated or quasi-endowment			%	5,							
b	Permanent endowment	%		7								
с	Temporarily restricted endowment		%									
	The percentages in lines 2a, 2b, and 2c should	equal 10	0%.									
за	Are there endowment funds not in the possess			ation tha	at are held a	and admi	inistered for	the organ	ization			
	by:		0					0]	Yes	No
	(i) unrelated organizations									3a(i)		
	(ii) related organizations											
b	If "Yes" to 3a(ii), are the related organizations lis	sted as re	quired o	n Scheo	lule R?					3b		
4	Describe in Part XIII the intended uses of the or	r										
Par	t VI Land, Buildings, and Equipme	¥										
	Complete if the organization answered "		orm 990	, Part IV	, line 11a. S	See Form	990, Part X	, line 10.				
	Description of property		ost or o			t or othe		Accumulat	ed	(d) Boo	k valu	e
			(investn			(other)		epreciation		.,		
1 a	Land											
	Buildings											
	Leasehold improvements											
	Equipment											
	Other											
-	Add lines 1a through 1e. (Column (d) must equ		90, Part	X, colun	nn (B), line	10c.)			. 🕨			0.

Schedule D (Form 990) 2014

432052 10-01-14

COMPACT	FOR	AMERICA	EDUCATIONAL
FOUNDATI	ION	INC	

	(Form 990) 2014	FOUNDATION	INC		Page 3
Part VII		Other Securities.			
				ne 11b. See Form 990, Part X,	
(a) Descrip	otion of security or categ	JOTY (including name of security)	(b) Book value	(c) Method of valuatio	n: Cost or end-of-year market value
	held equity interests				
(3) Other					
(A)					
(B)					
(C)					
(D)					
(E)					
(F)					
(G)					
(H)					
), Part X, col. (B) line 12.) 🕨			
Part VIII	Investments -	Program Related.			
	Complete if the org	anization answered "Yes'	to Form 990, Part IV, li	ne 11c. See Form 990, Part X,	line 13.
	(a) Description of	investment	(b) Book value	(c) Method of valuatio	n: Cost or end-of-year market value
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)			1		
(8)					
(9)					
Total. (Col. (I	b) must equal Form 990), Part X, col. (B) line 13.) 🕨			
Part IX	Other Assets.				
	Complete if the org	anization answered "Yes'	to Form 990, Part IV, li	ne 11d. See Form 990, Part X,	line 15.
		(a)	Description		(b) Book value
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Total. (Colu	ımn (b) must equal Fo	orm 990, Part X, col. (B) lir	ne 15.)		
Part X	Other Liabilitie	IS.			•
	Complete if the org	anization answered "Yes'	to Form 990, Part IV, li	ne 11e or 11f. See Form 990, F	Part X, line 25.
1.	(a) De	escription of liability		(b) Book value	
(1) Fed	leral income taxes				
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
	ımn (b) must eauəl Fa	orm 990, Part X, col. (B) lir	e 25.)		
-				e to the organization's financia	al statements that reports the
					note has been provided in Part XIII
	in the second		y		Schedule D (Form 990) 2014

	COMPACT FOR AMERICA EDUC.	ATIONAL			
Sche	dule D (Form 990) 2014 FOUNDATION INC				Page 4
Pa	t XI Reconciliation of Revenue per Audited Financial State	ements With	Revenue per R	eturn.	
	Complete if the organization answered "Yes" to Form 990, Part IV, line 1	12a.			
1	Total revenue, gains, and other support per audited financial statements			1	256,362.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b	21,000.		
С	Recoveries of prior year grants				
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	21,000.
3	Subtract line 2e from line 1			3	235,362.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
с	Add lines 4a and 4b			4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	235,362.
Pa	t XII Reconciliation of Expenses per Audited Financial Stat	ements With	n Expenses per	Retur	n.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 1	12a.			
1	Total expenses and losses per audited financial statements			1	114,497.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a	21,000.		
b	Prior year adjustments	2b			
С	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	21,000.
3	Subtract line 2e from line 1			3	93,497.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
с	Add lines 4a and 4b			4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	93,497.
Pa	t 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 XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

	Tra Complete if the or ► Information about	28b, or 28c, o ► Atta	swered "Yes or Form 990 ch to Form	s" on F -EZ, Pa 990 or	orm 990, Par art V, line 38a Form 990-E2	t IV, or Z.	, line 25a, 25b, 2 40b.			0	AB No. 20 pen T spect	1 4	ŀ
•	COMPACT F		CA EDU	CAT:	IONAL			Em	ployer	ident	ificati	on nu	mber
	FOUNDATIO)1(c)(3), sect	tion 501	(c)(4), and 50)1(c)	(29) organizatior	ls only	/) .				
Complete if the	organization answ	vered "Yes" on I	Form 990, Pa	art IV, li	ne 25a or 25t	o, or	Form 990-EZ, P	art V,	line 40	Db.			
1 (a) Name of disqualified	person (b) R	elationship betw person and or		lified	(0	:) D€	escription of tran	sactio	n			Corre es	cted? No
											+		
 2 Enter the amount of tax section 4958 3 Enter the amount of tax, 		-	-						► \$ ► \$		_		
Complete if the	d/or From Inte organization answ punt on Form 990, (b) Relationship	vered "Yes" on f Part X, line 5, 6 (c) Purpose	Form 990-EZ		/, line 38a or f) Original		n 990, Part IV, lin) Balance due	(g)) In	ne orga (h) App by bo	proved	(i) V	/ritten
interested person	with organization	of loan	organization? To From	-	ipal amount			defa Yes	No	comm Yes		agree Yes	ment?
	ssistance Ben												
	interes		-orm 990, Pa between on and ation	(0	ne 27. Amount of assistance		(d) Type assistan				(e) Purpose of assistance		
LHA For Paperwork Reduc	tion Act Notice	see the Instruc	tions for Fo	orm 990	or 990-F 7		Sch	edule	L (Fo	rm 990) or 9	00-F7	2014

	T FOR AMERICA EDUCA	TIONAL			
Schedule L (Form 990 or 990-EZ) 2014 FOUNDA Part IV Business Transactions Involv	TION INC				Page 2
Complete if the organization answered	•	8b, or 28c.			
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sha organiz reven	
				Yes	No
NICK DRANIAS LAW & POLICY UMAT RESOURCES LLC	ORGANIZATION'S PRES ORGANIZATION'S VICE		MANAGEMENT MANAGEMENT		X X
OMAI RESOURCES LLC	ORGANIZATION 5 VICE	24,000.	MANAGEMENT		~
Part V Supplemental Information					
Provide additional information for respo	nses to questions on Schedule L (see	instructions).			
SCH L, PART IV, BUSINESS T	RANSACTIONS INVOLVI	NG INTEREST	ED PERSONS:		
(A) NAME OF PERSON: NICK D	RANIAS LAW & POLICY	ANALYSIS I	LC		
(B) RELATIONSHIP BETWEEN I	NTERESTED PERSON AN	D ORGANIZAT	'ION:		
ORGANIZATION'S PRESIDENT C	ONTROLS NICK DRANIA	S LAW & POI	ICY ANALYSI	S LL	С
(D) DESCRIPTION OF TRANSAC	TION: MANAGEMENT CO	MPENSATION			
(A) NAME OF PERSON: UMAT R	ESOURCES LLC				
(B) RELATIONSHIP BETWEEN I	NTERESTED PERSON AN	D ORGANIZAI	'ION:		
ORGANIZATION'S VICE CHAIRM	AN/CEO CONTROLS UMA	T RESOURCES	LLC		
(D) DESCRIPTION OF TRANSAC	TION: MANAGEMENT CO	MPENSATION			
SCHEDULE L, PART IV					
ACCRUED EXPENSES ON THE BA	LANCE SHEET ON DECE	MBER 31, 20	14 INCLUDES		
ACCRUED COMPENSATION OF \$1	5,300 PAYABLE TO NI	CK DRANIAS	LAW & POLIC	Y	
ANALYSIS LLC AND \$24,000 A	CCRUED COMPENSATION	PAYABLE TO	UMAT RESOU	RCES	
LLC.					

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on

Form 990 or 990-EZ or to provide any additional information. ▶ Attach to Form 990 or 990-EZ. ▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990



Employer identification number

FOUNDATION INC

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

COMPACT FOR AMERICA EDUCATIONAL

OF THE USE OF AN INTERSTATE COMPACT AGREEMENT AND COUNTERPART FEDERAL

LEGISLATION TO COORDINATE THE USE OF ARTICLE V OF THE US CONSTITUTION

BY STATE LEGISLATURES AND THE US CONGRESS TO ORIGINATE, PROPOSE AND

RATIFY CONSTITUTIONAL AMENDMENTS.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

CONGRESS TO ORIGINATE, PROPOSE AND RATIFY CONSTITUTIONAL AMENDMENTS.

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

THE FORM 990 WAS PRESENTED TO THE BOARD OF DIRECTORS FOR REVIEW BEFORE

FILING.

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

EACH DIRECTOR, PRINCIPAL OFFICER AND MEMBER OF A COMMITTEE WITH GOVERNING BOARD DELEGATED POWERS SHALL ANNUALLY SIGN A STATEMENT WHICH AFFIRMS SUCH PERSON HAS RECEIVED A COPY OF THE CONFLICT OF INTEREST POLICY, HAS READ AND UNDERSTANDS THE POLICY, AND AGREES TO COMPLY WITH THE POLICY.

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY,

FINANCIAL STATEMENTS AND FORMS 990 ARE AVAILABLE FOR INSPECTION UPON

34

REQUEST AT THE ORGANIZATION'S PLACE OF BUSINESS.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 432211 08-27-14

Schedule O (Form 990 or 990-EZ) (2014)

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