

**COMPACT FOR AMERICA EDUCATIONAL  
FOUNDATION INC**

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance

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

**PART I, LINE 2:**

THE COMMISSIONERS SUBMIT REQUESTS FOR REIMBURSEMENT OF SPECIFIC TRAVEL EXPENSES.

**PART II, LINE 1, COLUMN (H):**

**NAME OF ORGANIZATION OR GOVERNMENT:**

COMPACT FOR A BALANCED BUDGET COMMISSION

**(H) PURPOSE OF GRANT OR ASSISTANCE: FUND ACTIVITIES OF THE COMMISSION**

AND THE COMMISSIONERS, PRIMARILY TRAVEL EXPENSES TO EDUCATE STATE