Eorm **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2013

Open to Public

Department of the Treasury Internal Revenue Service

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

▶ Do not enter Social Security numbers on this form as it may be made public.

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

<u>A</u>	for the	ে salendar year, or tax year beginning	, 2013, a	ınd ending			, 20						
В	Check if a	oplicable: C Name of organization THE ABILENE I	DUCATION FOUNDATION			D Employer identification number							
Ш	Address o	hange Doing Business As					31-1741496						
	Name cha	Number and street (or P.O. box if mail is r	ot delivered to street address)	Room/suite		E Telepho	ne number						
	Initial retu	n P.O. BOX 1999				325-677-8589							
	Terminate	City or town, state or province, country, a	nd ZIP or foreign postal code	L			323-017-8303						
	Amended	return ABILENE, TX 79604-1999				G Gross ra	acointe ¢ TOO E4.						
	Applicatio	pending F Name and address of principal officer:			-	G Gross receipts 790,514							
		Buddy Napier; P.O. Box ↑399; Abile	ne. TX 79604-1999		Į.	a) Is this a group return for subordinates? Yes Vo No b) Are all subordinates included? Yes No							
ī	Tax-exem			527	If "No	uooromates a " attach a	s included / L. Yes L. No a list. (see instructions)						
J	Website: MWW abilanceducation foundation over												
K	Form of or	ganization: Corporation Trust Association	Other ▶ I. Yea	r of formation		1							
	arti	Summary	Liea	ir or iormation	2000	IM State	of legal domicile: TX						
March invest		riefly describe the organization's mission o	r most significant activities:	TO DOOM	AOTE AND		T CYCLE THE						
é	F	DIICATION FOR THE STUDENTS OF THE AR	ENE INDEPENDENT COLOR	TO PRON	TOTE AND	ENHANC	E EXCELLENCE IN						
Governance	1	EDUCATION FOR THE STUDENTS OF THE ABILENE INDEPENDENT SCHOOL DISTRICT (AISD) THROUGH ENRICHMENT OF ITS PROGRAMS.											
ern		heck this box ▶☐ if the organization disco	entinued its operations or dis			050/							
٥ ٥	3 1	lumber of voting members of the governing	body (Dort VI. line 4.)	sposed of r	more than		its net assets.						
જ	4	lumber of independent voting members of	the governing hady (Dort VI	Barrell V	• • •	3	18						
es	5 7	otal number of individuals employed in cale	and governing body (Part VI,	line 1b) .		4	18						
Activities	6 7	otal number of valuations (actimate if acre	endar year 2013 (Part V, line	2a)		5							
∤ cti	7a	otal number of volunteers (estimate if nece	****			6	200						
`	b N	otal unrelated business revenue from Part	/III, column (C), line 12 .	· · · ·		7a	0						
	- <u> </u>	let unrelated business taxable income from	Form 990-1, line 34			7b	0						
	8 (Contributions and suggests (Dest VIIII (Co. 41)			Prior Yea	ir	Current Year						
Revenue		contributions and grants (Part VIII, line 1h).			1,	315,111	675,885						
		rogram service revenue (Part VIII, line 2g)		0	0								
æ	10 li	vestment income (Part VIII, column (A), line	es 3, 4, and 7d)			29,712	86,559						
	11 (ther revenue (Part VIII, column (A), lines 5,	6d, 8c, 9c, 10c, and 11e) .			-6,148	-5,803						
	12	otal revenue—add lines 8 through 11 (must e	equal Part VIII, column (A), lin	e 12)	1,	338,675	756,641						
	13	rants and similar amounts paid (Part IX, co	lumn (A), lines 1–3)			251,624	340,927						
	14	enefits paid to or for members (Part IX, coli	ımn (A), line 4)		0								
es	15 S	alaries, other compensation, employee benef	ts (Part IX, column (A), lines 5	5–10)		113,372	112,312						
Expenses	16a ⊬	rofessional fundraising fees (Part IX, colum	n (A), line 11e)			0	0						
χĎ	b T	otal fundraising expenses (Part IX, column	(D), line 25) ▶1	7,949		72.88							
ш	17	ther expenses (Part IX, column (A), lines 11	a-11d, 11f-24e)			112,259	143,567						
	18 T	otal expenses. Add lines 13-17 (must equa	Part IX, column (A), line 25)			477,255	596,806						
	19 F	evenue less expenses. Subtract line 18 from	m line 12			861,420	159,835						
Assets or 1 Balances				Beg	inning of Curr		End of Year						
set		otal assets (Part X, line 16)			1.4	477,568	1,639,223						
nd A		otal liabilities (Part X, line 26)				11,102	12,923						
Net/ Fund	22 N	et assets or fund balances. Subtract line 21	from line 20		1 /	466,466	1,626,300						
LE	idll .	Signature Block				100,100	1,020,300						
Unc	der penaltie	s of perjury, I declare that I have examined this return,	ncluding accompanying schedules	and statemen	ts, and to the	hest of m	v knowledge, and holiof it is						
true	e, correct, a	nd complete. Declaration of preparer (other than officer	is based on all information of which	h preparer has	s any knowled	lge.	if into medge and belief, it is						
		If the				11/5	-/14						
Sign		Signature of officer		//	Date	- 1 1 3							
Her	e	E.B. DOTSON TT TAGAS											
	ł j	Type or print name and title											
Pai		Print/Type preparer's name Preparer	rer's signature	Date			7 PTIN						
	eparer	LINDA F. SISSEL, CPA	I Dirse CPA		5.14	Check ∠ self-empl	실병						
	e Only	Firm's name LINDA F. SISSEL, CPA					1 00713337						
US	Unity	Firm's address ► 425 CYPRESS STREET; ABI	I FNF TY 79601 5101			EIN >	45-4477088						
May	the IRS	discuss this return with the preparer shown	above? (see instructions)		Phone	? no.	325-677-8589						
		k Reduction Act Notice, see the separate inst			· · · ·	· · ·	· · VYes No						

The state of the state of	n 990 (2013)	THE ABILENE EDUCATION FOUNDATION	31-1741496	Page 2
	Part III	Statement of Program Service Accomplishments		rage 2
- 1	Driofly al	Check if Schedule O contains a response or note to any line in this Part III	· · · · · · · · · · · · · · · · · · ·	X
•	TO PRO	escribe the organization's mission: MOTE AND ENHANCE EXCELLENCE IN EDUCATION FOR THE STUDENTS OF THE ABILEN L DISTRICT (AISD) THROUGHT ENRICHMENT OF ITS PROGRAMS.	E INDEPENDENT	
	Did tho c	veccolization undertails		
	If "Yes,"	organization undertake any significant program services during the year which were not listed on Form 990 or 990-EZ?	Yes	X No
3	SCIVICES	rganization cease conducting, or make significant changes in how it conducts, any program 2	Yes	X No
4	Describe expenses	the organization's program service accomplishments for each of its three largest program services. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and aexpenses, and revenue, if any, for each program service reported.	es, as measured by flocations to others,	
4a	() (Expenses \$ 285,253 including grants of \$) (Reven	ue \$	
	AEF COO	The Abilene COOL Program have in 2007		
	bionias ic	our counselors (added two counselors in July 2012), two on each AISD high school campus		
	additiona	to assisting students in the completion of college applications, the COOL are arranged to the cool are a second to the co	********	
	organizes	s field trips to college campuses and helps students to find scholarships and funds for During 2013, the program received contributions of \$366,383 (\$353,633 to be received contributions of \$366,383 (\$353,633 to be received contributions).		
	over a for	or year period) and incurred expenses of \$285,253. In 2012, the program received		
	contribution of \$230,2	ons of \$767,775 (\$600,000 to be received over a four year period) and incurred expenses		
4b	(Code:) (Expenses \$ 66,145 including grants of \$) (Reven	ue\$	
	AEF Teac	her Grants (STAR & GIFT) - The AEF raises money each year to honor outstanding AISD		
	teachers	with classroom and instruction grants. These STAR (Supporting Teachers with Academic		
	Resource	s) grants are provided to teachers after submission of grant request to fund school		
	education	al projects. 61 awards were provided to teachers during September 2013 to fund the		
	education	al projects of the school year for a total of \$54,426. The Judy Dudley GIFT (Giving to		
	riist-time	Teachers) grants are awarded to AISD employees who are teaching for the first time		
	Grant lund	is are for additional classroom materials to enhance those provided by the school		
	district. 6	GIFT grants were awarded during August 2013 for a total of \$10,350.		

	~		*	
4c	(Code:	\		
40) (Expenses \$ 15,592 including grants of \$) (Revenue	ie \$)
	etudente o	y masters Frogram - The AEF Young Masters Juried Art Exhibition for Advanced Placement Art		/
	in artistic s	elebrates young master artists and their dedicated teachers for demonstrating excellence		
	the curren	and addition are exhibition. The round Masters exhibition extends		
	uie suppoi	migrow of the rule multiple and will impact the intrine of not only the etudente		
	selected to			
	opportuniti	es for acceptance into higher education art programs. A-P studio art students and art		
	from Ft Wo	Offin. IX. resulting in 5 scholarships being award for a total of the 750		
4d	Other prog	ram services. (Describe in Schedule O.)		
	(Expenses		0.)	
4e	Total progr	am service expenses	0)	

Form 990 (2013) Part IV C) THE ABILENE EDUCATION FOUNDATION Checklist of Required Schedules

1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A.		Ye	s No
2	Is the organization required to complete Schedule B. Schedule of Contributors (see instructions)?	1 2		
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.			`
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.	3		X
5	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,	4		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	5		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? <i>If "Yes," complete Schedule D, Part II</i> .	6	-	X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.	7	-	X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	8		X
10	endowments, permanent endowments, or quasi-endowments? If "Yes " complete School to D. Bart M.	9		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.	10		A S
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			
b	Did the organization report an amount for investments—other securities in Bort V. line 40 the 15 500	11a	X	
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII. 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.	11b		X
	reported in Part X, line 16? If "Yes." complete Schedule D. Part IX	11c		X
e f	Did the organization's separate or consolidated financial statements for the tay year include a factory of the day year included a factory of the day year.	11d 11e	X	
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	11f		X
	Was the organization included in consolidated, independent audited financial statement of	12a	Х	
13	and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional. Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E.	12b		X
14a	and the organization maintain an office, employees, or agents outside of the United States 2	13 14a		X
b	fundraising, business, investment, and program service activities outside the United State	140		
15	Did the organization report on Part IX. column (A) line 3. more than \$5,000 of greats and IV.	14b		X
16	rol dry foreign organization? If res, complete Schedule F Parts II and IV	15		Х
17	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i> .	16		Х
	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G. Part I (see instructions)	17		
18	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G. Part II	18	Х	<u>X</u>
	If "Yes," complete Schedule G. Part III		^	
	The area of garnes and operate one of more hospital pacific by the state of the sta	19 20a		<u>X</u>
<u> </u>	17 700 to line 20d, did the organization attach a conv of its audited financial statements to the	20b		

Checklist of Required Schedules (continued) Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or 21 Χ Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States 22 Χ 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated 23 Χ 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 24a **b** Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b Did the organization maintain an escrow account other than a refunding escrow at any time during the year 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction Χ 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 Χ 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 Χ 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 27 Χ Was the organization a party to a business transaction with one of the following parties (see Schedule L, 28 Part IV instructions for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a Χ A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Χ An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) Χ Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M. 29 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified 30 30 Χ Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, 31 Χ 31 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? Х 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33 Χ Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, 34 34 Χ 35a **b** If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related Х Did the organization conduct more than 5% of its activities through an entity that is not a related organization 37 and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part 37 Χ Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O. Form 990 (2013)

િંદા	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			X
		•	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	dia.	495	2.42
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c	Χ	Table 1
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	320	int.	
	Statements, filed for the calendar year ending with or within the year covered by this return	240.4		
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 e-file. (see instructions)	XXX		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		Х
b	If "Yes," enter the name of the foreign country:			
E o	See instructions for filing requirements for FinCen Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a b	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<u>5a</u>	<u> </u>	X
C	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
6a	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		L
oa	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?			
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	6a		X
	gifts were not tax deductible?			
7	Organizations that may receive deductible contributions under section 170(c).	6b	- Mark 1144	456457
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods		1	
	and services provided to the payor?	3.55		220
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7a	X	-
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	7b	X	
	required to file Form 8282?	7c		V
d	If "Yes," indicate the number of Forms 8282 filed during the year	70		X
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	a drab	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		^
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	NEW Y	17.45	P.
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8	20000	499400
9	Sponsoring organizations maintaining donor advised funds.		175	H.
а	Did the organization make any taxable distributions under section 4966?	9a	F-36(2) P3 (42)44	A55,844.4M
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:		300	
a	Initiation fees and capital contributions included on Part VIII, line 12			
b 14	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		8 3 44 7 76	
11	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders			
a b				
D	Gross income from other sources (Do not net amounts due or paid to other sources			
12a	against amounts due or received from them.)		a Amada	
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	3050474:2457	70819-05401 h
ь 13	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	4979LD0 071	o jengova -
b	Note. See the instructions for additional information the organization must report on Schedule O.		旅戲	
IJ	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
С		130	推翻	
4a	Did the organization receive any payments for indoor tanning services during the tax year?	Party.	0000	
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14a 14h		X
		14n i	- 1	

Part VI

Sec	tion A. Governing Body and Management				·	
1a	Enter the number of voting members of the governing body at the end of the tax year	1.		n um s	Yes	No
14	If there are material differences in voting rights among members of the governing body, or	1a	18			
	if the governing body delegated broad authority to an executive committee or similar		7			
	committee, explain in Schedule O.		5			
b		1	100	1.4.9		
2	Did any officer, director, trustee, or key employee have a family relationship.	1b	_18			
~	Did any officer, director, trustee, or key employee have a family relationship or a business relation	ship with		11.00		
3	any other officer, director, trustee, or key employee?		_	2		X
J	Did the organization delegate control over management duties customarily performed by or under	the direct			ĺ	
4	supervision of officers, directors, or trustees, or key employees to a management company or other plants and provided the organization make any cignificant changes to its appropriate the organization make any cignificant changes to its appropriate the organization make any cignificant changes to its appropriate the organization make any cignificant changes to its appropriate the organization make any cignificant changes to its appropriate the organization make any cignificant changes to its appropriate the organization make any cignificant changes to its appropriate the organization make any cignificant changes to its appropriate the organization make any cignificant changes to its appropriate the organization make any cignificant changes to its appropriate the organization make any cignificant changes to the organization make any cignificant changes the organization make any cignificant changes the organization of the organization make any cignificant changes the organization of the organization make any cignificant changes the organization of the organization make any cignificant changes the organization of t	er person?	·	3		X
5	Did the organization make any significant changes to its governing documents since the prior Form 990 w	as filed?		4		Χ
6	Did the organization become aware during the year of a significant diversion of the organization's	assets?		5		X
	Did the organization have members or stockholders?			6		Χ
7a	Same and the power to elect the	appoint				
h	one or more members of the governing body?			7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members	S,				
	stockholders, or persons other than the governing body?			7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertake	n during				
_	the year by the following:		10			
a b	The governing body?		_	8a	X	
9	Each committee with authority to act on behalf of the governing body?		_	8b	Х	
3	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reat the organization's mailing address? If "You " provide the page 2014 of the cannot be read to the control of t	eached			Ì	
Sec	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.	<u> </u>	<u>. </u>	9		X
000	tion B. Policies (This Section B requests information about policies not required by the	<u>Internal Revenu</u>	e Cc	ode.	T	
10a	Did the organization have local chapters, branches, or affiliates?		г		Yes	No
b	If "Yes," did the organization have written policies and procedures governing the activities of such		-	10a		X
	affiliates, and branches to ensure their operations are consistent with the organization's exempt pu	unapiers,				
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before	rposes?	-		N/A	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	ine uning the torm?.	_	11a	557 S 686 1	X
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		13			
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could	rive rise to conflicts		12a	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If	give noe to conflicts: "Vae "	´ <u>'</u>	12b	X	
	describe in Schedule O how this was done			12c		
13	Did the organization have a written whistleblower policy?			13	X	
14	Did the organization have a written document retention and destruction policy?		<u> </u>	14	$\frac{\hat{x}}{x}$	
15	Did the process for determining compensation of the following persons include a review and appro	val by	100			295.6 M
	independent persons, comparability data, and contemporaneous substantiation of the deliberation	and decision?	a l	130		
а	The organization's CEO, Executive Director, or top management official.		1	5a	x	custi
b	Other officers or key employees of the organization		-	5b	$\frac{\hat{x}}{x}$	
	If "Yes" (5 line 15a or 15b, describe the process in Schedule O (see instructions).		18	Milk I	Jala i	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangements	ement				
	with a taxable entity during the year?		1	6a	STREAT .	X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evalu	ate its	34	1969/6 e	SOME I	
	participation in joint venture arrangements under applicable federal tax law, and take steps to safe	ruard				
	the organization's exempt status with respect to such arrangements?			6b	schilderfanah: 14	riedskieler (Gel
	tion C. Disclosure					
17 10	List the states with which a copy of this Form 990 is required to be filed ► NONE					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990)-T (Section 501(c)	(3)s	only))	
	available for public inspection. Indicate how you made these available. Check all that apply.					
10	X Own website Another's website X Upon request Other (ex	plain in Schedule ())			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, of	conflict of interest p	olicy,	and	ł	
20	financial statements available to the public during the tax year.					
LU	State the name, physical address, and telephone number of the person who possesses the books					
	organization: E. B. DOTSON III, CPA 425 CYPRESS STREET, ABILENE, TX 79601-5101	325-677-8	589	 -		
	723 OTT NESS STREET, ABILENE, TX /9601-5101					

31-1741496

Page 7

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

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

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(do box	not c unle	Pos heck ss pe	C) sition more erson firect	than both steep is or/true Highest compensated	one an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) BUDDY NAPIER	4.0	~								
PRESIDENT		X		X	<u> </u>					
(2) LISA CHAVEZ-OWENS	2.0	- }				į į				
VICE PRESIDENT		X	ļ	X						
(3) KAY HARTGRAVES	1.0	-		l						
SECRETARY (4) TERRY BULL		X	-	X						
(4) IERRY BULL	1.0	-1								
(5) KEVIN CAMPBELL	2.0	X	 	-	_					
Of the viry of the bell		X اي								
(6) JASON DARBY	2.0		╁┈							
		_ X								
(7) MIKE DUNNAHOO	1.0		 	-						
		_ X								
(8) JAY HARDAWAY	1.0		1							
		_ X								
(9) JENNIFER HARPER	1.00)								
		X								
(10) MELODY HUNT	2.00	כ								
		X								
(11) TIFFANY LAMB	1.00	<u>ַ</u>								
	•	X								
(12) LAUREN LONG	1.00	Σ								
		X	<u> </u>							
(13) LAURA MOORE	1.00	-1								
		X								
(14) LINDA ROARK	2.00	~								
		<u> </u>								

Section A. Officers, Directors, 110	istees, Key Em	pioye	ees,	and	H C	ghes	t Co	ompensated Em	i ployees (contir	ued)
(A) Name and title	(B) Average hours per	box, unless person is both an Reportable Rep							(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below dotted line)	Individual trustee or director		Officer		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
(15) NANCY ROBERTS	1.00		ļ			ed.				
(16) LYNDA SHARP		X								
	1.00	X								
(17) MIKE YOUNG	1.50	Х							., ., ., ., ., ., ., ., ., ., ., ., ., .	
(18) DARYL ZELLER	1.00									
(19) E.B. DOTSON, III	5.00	X								
TREASURER (20) JEAN McMILLON	40.00			Χ					***	
EXECUTIVE DIRECTOR	40.00				х			58,833		
(21)										
(22)										
(23)										
(24)										
(25)				_						
				ļ						
1b Sub-total c Total from continuation sheets to Part VII, Se	ction A			. ,			A	58,833	0	0
d Total (add lines 1b and 1c)							▶	58 833	0	0
2 Total number of individuals (including but not lim reportable compensation from the organization	ited to those list	ted al	bove)		ho r	eceiv	ed	more than \$100,	000 of	
3 Did the organization list any former officer, direct employee on line 1a? <i>If</i> "Yes," complete Schedu	ctor, or trustee, k	ey er	mplo	oyee						Yes No
For any individual listed on line 1a, is the sum of the organization and related organizations great	f reportable com er than \$150,00	pens	atio	n ar s," c	nd o	ther c	om	pensation from edule J for such		3 X
individualDid any person listed on line 1a receive or accru		· ·				٠.				4 X
for services rendered to the organization? If "Ye	s," complete Scl	hedul	e J	for s	such	pers	on .	nization of individ	duai 	5 X
Complete this table for your five highest comper compensation from the organization. Report con year.	nsated independ npensation for th	ent c	ontr lend	acto	ors t ear	hat re endir	cei	ved more than \$ vith or within the	100,000 of organization's ta	эх
(A) Name and business addre	ess							(B) Description of service	ces C	(C) ompensation
										0
										0
										0
2 Total number of independent contractors (includi more than \$100,000 of compensation from the o	ing but not limite rganization	d to t	hos	e lis	ted	abov 0	e) v	vho received		

1321	3VIII	Statement of Revenue	DNIODNDANC	/11			31-1/41	496 Page 9
	LEBAU.	Check if Schedule O contains	s a response or	note to any line i	n this Part VIII			
	I				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts its	1a	Federated campaigns						
tributions, Gifts, Grants Other Similar Amounts	b	Membership dues						
fts, rAn	d	Fundraising events	<u>1c</u> 1d					
s, Gi Hila	e	Government grants (contribution	s) 1e					
ion:	f	All other contributions, gifts, gran	its and					Example 1
ribut		similar amounts not included abo		675,885				
Contributions, Gifts, and Other Similar An	g	Noncash contributions included in I		26,162				
	h	Total. Add lines 1a-1f	<u> </u>	.	675,885	5	3/10/19	FA
Service Revenue	2a b			Business Code	(and the other management and the second	
vice Vice	C				(
	d		*		(
Program	e	All other program consists assured			(
Prog	q	All other program service revenu Total. Add lines 2a–2f			(DESCRIPTION OF SECURITION OF SECURITION OF	Charles Astrona Salar	
	3	Investment income (including divother similar amounts)		and ▶	86,559	**************************************		
	5	Income from investment of tax-ex Royalties	kempt bond prod	ceeds	(TELERA DE ARGANILO DOS COMO	SEASON BAR SET SEE SE SEASON SE
	6a	Gross rents	(//	(ii) (Greenar			Jenson Francisco	for the same of th
	b	Less: rental expenses						
	С	Rental income or (loss)	0	0				
	d	Net rental income or (loss)			0		and deliminated the state of th	Same of the same o
	7a	Gross amount from sales of	(i) Securities	(ii) Other	10 To			15.752 (15.962) 15.752 (15.962)
İ		assets other than inventory	0	0				
	b	Less: cost or other basis	_					
		and sales expenses	0	0		The same		
	c d	Gain or (loss)	0	0		a salas para salas properties de la companya de la	A CONTRACTOR OF THE SECOND	
ne	8a	Gross income from fundraising						r verde (4. july 1997) 1 july 1997
Other Revenue		events (not including \$ of contributions reported on line 1 See Part IV, line 18	c).	28,070			Marie	
the	b	Less: direct expenses		33,873			1995	
0	С	Net income or (loss) from fundrai			-5,803		tareeds the removed delication of a land.	rescues and tool who also as the
	9a	Gross income from gaming activities See Part IV, line 19.	ties. a	0		Traffic	17	
	b	Less: direct expenses		0				
	с 10а	Net income or (loss) from gaming	activities	<u> ▶</u>	0	of what he had been a fine a		
	IUa	Gross sales of inventory, less returns and allowances		0				
	b	Less: cost of goods sold		0				
		Net income or (loss) from sales or		0		and the second s	lii ikidada	Baladaposis Isla
		Miscellaneous Revenue	inivernory	Business Code		Algorithm Sairt	ist was a state of the saids.	esta a dinicular
	11a				0		Street, and the street, and th	
	b				0			
	c	·- 			0			
	d	All other revenue			0	OMBIG TO SOCIO COSTO		
	e 12	Total revenue See instructions			. 0		工作。 解析 注意与注	
	14	Total revenue. See instructions	<u> </u>	<u> ▶ </u>	756,641	86,559	0	0

31-1741496

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
	Grants and other assistance to governments and		expenses	general expenses	expenses
•	organizations in the United States. See Part IV, line 21	196,205	196,205		
2	Grants and other assistance to individuals in the	190,203	190,203	The state of the s	BACTORES E ATRAGAMINA A CARACTER DE LA COMPANION DE LA COMPANI
2	United States. See Part IV, line 22	144 700	144 700		Attaileante Alan
3	Grants and other assistance to governments,	144,722	144,722		
J					
	organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members	0			and the second second
4	·	0			
5	Compensation of current officers, directors,	50,000	4.4.407	44.500	2 222
^	trustees, and key employees	58,833	14,437	41,508	2,888
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	0	07.100		
7	Other salaries and wages	45,498	27,420	13,439	4,639
8	Pension plan accruals and contributions (include				
_	section 401(k) and 403(b) employer contributions)	0			
9	Other employee benefits	7,981	3,202	4,203	576
10	Payroll taxes	0			
11	Fees for services (non-employees):				
а	Management	0			
b	Legal	0			
С	Accounting	28,538		28,538	
d	Lobbying	0	Manager of the control of the contro		
е	Professional fundraising services. See Part IV, line 17		Market Street	表示这个主要的意思	
f	Investment management fees	2,914		2,914	
g	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O.)	136	61	75	
12	Advertising and promotion	24,692	15,879		8,813
13	Office expenses	11,653	10,078	1,575	
14	Information technology	6,523	6,523		
15	Royalties	0			
16	Occupancy	7,834	2,268	5,566	
17	Trave!	16,888	16,888		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	0			
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	5,518	0	5,518	0
23	Insurance	1,218		1,218	
24	Other expenses. Itemize expenses not covered				(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)
	above (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)	d to the company of the period		A habit was about	7 (1 () () () () () () () () ()
а	Program and Event Supplies	11,338	11,338		
b	Dues, Memberships and Subscriptions	1,130	1,130		
С	Honorariums	950	300	650	
d	Fees: Bank & Credit Card	1,115		82	1,033
e	All other expenses Pass-Thru Program Supplies	23,120	23,120	52	1,000
25	Total functional expenses. Add lines 1 through 24e	596,806	473,571	105,286	17,949
26	Joint costs. Complete this line only if the	333,300	,, 0,011	100,200	17,040
	organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation. Check here				
	following SOD 09.2 (ASC 059.720)				

Part X Balance Sheet

8 inventories for sale or use. 9 Prepaid expenses and deferred charges. 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D b Less: accumulated depreciation. 11 Investments—publicly traded securities. 12 Investments—program-related. See Part IV, line 11. 13 Investments—program-related. See Part IV, line 11. 14 Intangible assets. 15 Other assets. See Part IV, line 11. 16 Total assets. See Part IV, line 11. 17 Accounts payable and accrued expenses. 18 Grants payable and accrued expenses. 19 Deferred revenue. 20 Tax-exempt bond liabilities. 21 Escrow or custodial account liability. Complete Part IV of Schedule D. 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part IV of Schedule D. 21 Secured mortgages and notes payable to unrelated third parties. 22 Unsecured notes and loans payable to unrelated third parties. 23 Secured mortgages and notes payable to unrelated third parties. 24 Unsecured notes and loans payable to unrelated third parties. 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D. 26 Total liabilities, Add lines 17 through 25. 27 Total liabilities, Add lines 17 through 25. 28 Degraph that follows SRAS 417 (ASC 050) when the lability and the liabilities (Including SRAS 417 (ASC 050) when the lability and the liabilities (Including SRAS 417 (ASC 050) when the lability and the labilities (Including SRAS 417 (ASC 050) when the lability and liability and liabi			Check if Schedule O contains a response or	note to a	ny line in this	Part X	(
1 Casis—non-inferest-bearing 96,696 1 94,46		-								
2 Survings and cerebrotary cash investments 367,743 2 288,920		1	Cash—non-interest-bearing		96,636	3 1				
Pledges and grants receivable, net			Savings and temporary cash investments							
4 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule I. 6 Loans and other receivables from other discontified persons (as defined under section 4988((1)I), persons described in section 4988((1)II), and complete Part II of Schedule L. 7 Notes and loans receivable, net. 9 Prepared expenses and deferred charges. 10 Prepared expenses. 10 Prepared expenses. 10 Prepared expenses. 11 Prepared expenses. 12 Secure motivations and deferred charges. 13 Secure motivations and deferred charges. 14 Secure motivations and deferred charges. 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 17 through 15 Lines 11 Prepared the parties. 17 Secure motivations and deferred charges. 18 Fern porarily restricted on an expensible to u		1 .	Pledges and grants receivable, net				608,588	3		
Section Sec		1	Accounts receivable, net						701,10	
Complete Part II of Schedule L. 6 Loans and other reex subles from other disqualified persons (as defined under section 498(N)(1)), persons described in section 498(N)(3), B), and contributing employers and sections (as in section 498(N)(3), B), and contributing employers and sections (see instructions). Complete Part II of Schedule L. 7 Notes and loans receivable, net. 8 inventiones for sale or use. 9 Prepaid expenses and decired charges. 10a Land, buildings, and equipment cost or other basis. Complete Part IV of Schedule D. 1 Less: accumulated depreciation. 1 Investments—publicly traded securities. See Part IV, line 11. 1 Investments—other securities. See Part IV, line 11. 2 Investments—other securities. See Part IV, line 11. 3 Investments—other securities. See Part IV, line 11. 4 Intangible assets. 4 Intangible assets. 5 Other assets. See Part IV, line 11. 5 Other assets. See Part IV, line 11. 6 Total assets. Add lines 1 through 15 (must equal line 34). 1 1 Accounts payable and accrued expenses. 1 1 7 Accounts payable and accrued expenses. 1 1 7 Accounts payable and accrued expenses. 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		5	Loans and other receivables from current and for		1000					
6 Loans and other receivables from other disqualified persons (as defined under section 493(N/I)), persons described in section 493(e)(3)(8), and contributing employers and scensoring organizations of section 501(e/8) voluntary employees beneficiary organizations (see instructions). Complete Part II of Schedule L. 6 7 Notes and Idoans receivable, net 6 9 Proposid expenses and deferred charges. 9 9 9 9 9 9 9 9 9			trustees, key employees, and highest compensa Complete Part II of Schedule L	ated empl	oyees.			5		
496(f(f(f)) persons described in section 4958(c(s)(8); and contributing employers and soonsening organizations of section 50 (c)(9); voluntary employers beneficiary organizations (see instructions). Complete Part II of Schedule L.		6	Loans and other receivables from other disqualified perso	ons (as defir	ned under section	n .		1 3		
sconsoring organizations of sections 501(c)(8) voluntary employees beneficiary organizations (see instructions). Complete Part II of Schedule L			4958(f)(1)), persons described in section 4958(c)(3)(B), ar	nd contribu	ting employers a	ınd				
organizations (see instructions). Complete Part II of Schedule L. 0. 77 7 Notes and loans receivable, net. 0. 77 8 inventories for sale or use. 9 9 Prepaid expenses and deferred charges. 9 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D. 10a 34.811 10b Less: accumulated depreciation. 10b 27.294 13,005 10c 7.51 11 Investments—publicly traded securities. 10b 27.294 13,005 10c 7.51 12 Investments—other securities. See Part IV, line 11 0. 12 13 Investments—organ=related. See Part IV, line 11 0. 12 14 Intangible assets. See Part IV, line 11 391,569 16 483,83 15 Other assets. See Part IV, line 11 391,569 16 16 1,639,92 17 Accounts payable and accrued expenses 177 18 Crants payable. 170 19 Deferred revenue 18 20 Tax-exempt bond liabilities. 199 10 Leans and other payables to current and former officers, directors, trustees, key emplyoves, highest compensated employees, and disqualified persons. Complete Part IV of Schedule D. 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D. 21 22 Secured mortgages and notes payable to unrelated third parties. 0 23 (11) 23 Secured mortgages and notes payable to unrelated third parties. 0 23 (11) 24 Uncestured notes and loans payable to unrelated third parties. 0 24 (11) 25 Other liabilities including federal income tax, payables to related third parties. 0 24 (11) 26 Other liabilities and follow SFAS 117 (ASC 958), check here 11, 102 26 12, 927 27 Total liabilities. Add lines 17 through 25. 11, 102 26 12, 927 28 Terporarily restricted net assets. 973, 394 28 1, 136, 827 29 Permanently restricted net assets. 973, 394 28 1, 136, 827 30 Capital stock or trust principal, or current funds. 30 Permanently restricted net assets. 973, 94 28 1, 136, 827 31 Total liabilities, endowners, accumulated income, or other funds. 31 Total inet assets or fund balances. 1, 466, 466 33 1, 626, 303 31 Total inet assets or fund balances. 1, 466, 466 33 1, 626, 303			sponsoring organizations of section 501(c)(9) voluntary er	mployees' t	eneficiary					
9 Prepaid expenses and deferred charges 9	ets		organizations (see instructions). Complete Part II of Sched	dule L			and the state of the control of the said the state of the said		Market Consistency and American States	
9 Prepaid expenses and deferred charges 9	SS	7	Notes and loans receivable, net							
9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D 10a 34.811 34.	⋖	8	inventories for sale or use			•			0	
10a		9	Prepaid expenses and deferred charges							
b Less: accumulated depreciation. 10b 27,294 13,035 10c 7,51 11 Investments—publicly traded securities		10a	Land, buildings, and equipment: cost or				A CONTRACTOR OF THE PROPERTY.		The same of the same of the same	
10 27,294 13,035 10c 7,51		1	other basis. Complete Part VI of Schedule D	10a	3	4.811				
11		b			2	7.294	- company of the contract of t	100	7 547	
12		11	Investments—publicly traded securities				1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		7,517	
13 Investments—program-related. See Part IV, line 11 0 14 14 16 15 16 16 16 16 16 16		12	Investments—other securities. See Part IV, line	11					0	
14		13	Investments—program-related. See Part IV, line			0				
Total assets. See Part IV, line 11. Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses. 18 Grants payable. 19 Deferred revenue. 20 Tax-exempt bond liabilities. 21 Escrow or custodial account liability. Complete Part IV of Schedule D. 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L. 23 Secured mortgages and notes payable to unrelated third parties. 24 Unsecured notes and loans payable to unrelated third parties. 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D. 26 Total liabilities. Add lines 17 through 25. 27 Total liabilities. Add lines 17 through 25. 28 Temporarily restricted net assets. Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets. Organizations that do not follow SFAS 117 (ASC958), check here complete lines 30 through 34. 29 Permanently restricted net assets. Organizations that do not follow SFAS 117 (ASC958), check here complete lines 30 through 34. Capital stock or trust principal, or current funds. 30 Capital stock or trust principal, or current funds. 31 Paid-in or capital surplus, or land, building, or equipment fund. 32 Retained earnings, endowment, accumulated income, or other funds. 33 Total net assets or fund balances. 1,466,466 33 1,626,300		i	Intangible assets		+	0				
Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities Escrow or custodial account liability. Complete Part IV of Schedule D. 21 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualfied persons. Complete Part II of Schedule L. 23 Secured mortgages and notes payable to unrelated third parties. 24 Unsecured notes and loans payable to unrelated third parties. 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D. 26 Total liabilities. Add lines 17 through 25. 27 Total liabilities and the sasets. 28 Temporarily restricted net assets. 29 Permanently restricted net assets. 29 Permanently restricted net assets. 30 Capital stock or trust principal, or current funds. 30 Capital stock or trust principal, or current funds. 31 Paid-in or capital surplus, or land, building, or equipment fund. 32 Retained earnings, endowment, accumulated income, or other funds. 31 Total liabilities and nat assets fund halances. 1,466,466 33 Total liabilities and accrued expenses. 1,466,466 1,639,22 17 17 18 18 19 18 19 18 19 18 19 19			Other assets. See Part IV, line 11		+					
Accounts payable and accrued expenses. Grants payable Deferred revenue Tax-exempt bond liabilities Escrow or custodial account liability. Complete Part IV of Schedule D Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L Secured mortgages and notes payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D Total liabilities. Add lines 17 through 25. Organizations that follow SFAS 117 (ASC 958), check here omplete lines 27 through 29, and lines 33 and 34. Unrestricted net assets Femporarily restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here omplete lines 30 through 34. Organizations that do not follow SFAS 117 (ASC 958), check here omplete lines 30 through 34. Capital stock or trust principal, or current funds The paid-in or capital surplus, or land, building, or equipment fund. Capital stock or frust principal, or current funds The paid-in or capital surplus, or land, building, or equipment fund. Capital stock or frust principal, or current funds The paid-in or capital surplus, or land, building, or equipment fund. Capital liabilities and net assets fund balances. The paid-in or capital surplus, or land, building, or equipment fund. Capital stock or frust principal, or current funds. The paid-in or capital surplus, or land, building, or equipment fund. Capital liabilities and net assets fund balances. The paid-in or capital surplus, and net assets fund balances. The paid-in or capital surplus, and net assets fund balances. The paid-in or capital surplus, and net assets fund balances. The paid-in or capital surplus, and net assets fund balances. The paid-in or capital surplus and net assets fund balances. The paid-in or capital surplus and net assets fund balances. The paid-in or capital surplus and ne			Total assets. Add lines 1 through 15 (must equa	I line 34)						
Tax-exempt bond liabilities Tax-exempt bond liabilities Tax-exempt bond liability. Complete Part IV of Schedule D. Escrow or custodial account liability. Complete Part IV of Schedule D. Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L. Secured mortgages and notes payable to unrelated third parties. Unsecured notes and loans payable to unrelated third parties. Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D. Total liabilities. Add lines 17 through 25. Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets. Temporarily restricted net assets. Temporarily restricted net assets. Temporarily restricted net assets. Organizations that do not follow SFAS 117 (ASC958), check here complete lines 30 through 34. Capital stock or trust principal, or current funds. Capital stock or trust principal, or current funds. Retained earnings, endowment, accumulated income, or other funds. Total liabilities and net assets/fund belances. Total liabilities and net assets/fund belances.		!	Accounts payable and accrued expenses						1,000,220	
Deferred revenue		l	Grants payable							
Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D. 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L. 23 Secured mortgages and notes payable to unrelated third parties 0 23 (Insecured notes and loans payable to unrelated third parties) 0 24 (Insecured notes and loans payable to unrelated third parties) 0 24 (Insecured notes and loans payable to unrelated third parties) 0 24 (Insecured notes) 25 (Insecured notes) 26 (Insecured notes) 27 (Insecured notes) 28 (Insecured notes) 29 (Insecu			Deferred revenue							
Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L. 23 Secured mortgages and notes payable to unrelated third parties. 24 Unsecured notes and loans payable to unrelated third parties. 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D. 26 Total liabilities. Add lines 17 through 25. Crganizations that follow SFAS 117 (ASC 958), check here part X and complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets. 28 Permanently restricted net assets. 29 Permanently restricted net assets. 29 Permanently restricted net assets. 30 Organizations that do not follow SFAS 117 (ASC958), check here complete lines 30 through 34. 30 Capital stock or trust principal, or current funds. 31 Paid-in or capital surplus, or land, building, or equipment fund. 31 Retained earnings, endowment, accumulated income, or other funds. 31 Total liabilities and net assets (fund balances. 32 Total liabilities and net assets (fund balances. 33 Total liabilities and net assets (fund balances. 34 Total liabilities and notes payable to unrelated third parties. 30 22 22 22 22 22 22 22 22 22 22 22 22 22			Tax-exempt bond liabilities		20					
Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L. 23 Secured mortgages and notes payable to unrelated third parties. 24 Unsecured notes and loans payable to unrelated third parties. 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D. 26 Total liabilities. Add lines 17 through 25. Corganizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets. 28 Permanently restricted net assets. 29 Permanently restricted net assets. Organizations that do not follow SFAS 117 (ASC958), check here complete lines 30 through 34. 30 Capital stock or trust principal, or current funds. 31 Paid-in or capital surplus, or land, building, or equipment fund. 32 Retained earnings, endowment, accumulated income, or other funds. 33 Total liabilities and net assets fund balances. 44 Occapital stock or trust principal, or current funds. 31 Total liabilities and net assets fund balances. 45 Total liabilities and net assets fund balances. 46 Total liabilities and net assets fund balances. 47 Total liabilities and net assets fund balances. 48 Total liabilities and net assets fund balances. 49 Paid-in or capital surplus, or land, building, or equipment fund. 30 Capital stock or trust principal, or current funds. 31 Total liabilities and net assets fund balances. 40 Capital stock or fund balances. 40 Capital stock or fund balances. 41 Capital stock or fund balances. 41 Capital stock or fund balances. 42 Capital stock or fund balances. 43 Total liabilities and net assets fund balances. 44 Capital stock or fund balances. 45 Capital stock or fund balances. 46 Capital stock or fund balances. 47 Capital stock or fund balances. 48 Capital stock or fund balances. 49 Capital stock or fund balances. 40 Capi			Escrow or custodial account liability. Complete P	scrow or custodial account liability. Complete Part IV of Schedule D.						
Unsecured notes and loans payable to unrelated third parties. Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D. Total liabilities. Add lines 17 through 25. Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets. Temporarily restricted net assets. Organizations that do not follow SFAS 117 (ASC958), check here complete lines 30 through 34. Organizations that do not follow SFAS 117 (ASC958), check here complete lines 30 through 34. Capital stock or trust principal, or current funds. Retained earnings, endowment, accumulated income, or other funds. Total liabilities and net assets (fund balances. Total liabilities and net assets (fund balances. 1,466,466 33 1,626,300	ies	22	Loans and other payables to current and former	officers, c	lirectors,					
Unsecured notes and loans payable to unrelated third parties. Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D. Total liabilities. Add lines 17 through 25. Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets. Temporarily restricted net assets. Organizations that do not follow SFAS 117 (ASC958), check here complete lines 30 through 34. Organizations that do not follow SFAS 117 (ASC958), check here complete lines 30 through 34. Capital stock or trust principal, or current funds. Retained earnings, endowment, accumulated income, or other funds. Total liabilities and net assets (fund balances. Total liabilities and net assets (fund balances. 1,466,466 33 1,626,300	Ħ		trustees, key employees, highest compensated e	employee	s, and					
Unsecured notes and loans payable to unrelated third parties. Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D. Total liabilities. Add lines 17 through 25. Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets. Temporarily restricted net assets. Organizations that do not follow SFAS 117 (ASC958), check here complete lines 30 through 34. Organizations that do not follow SFAS 117 (ASC958), check here complete lines 30 through 34. Capital stock or trust principal, or current funds. Retained earnings, endowment, accumulated income, or other funds. Total liabilities and net assets (fund balances. Total liabilities and net assets (fund balances. 1,466,466 33 1,626,300	iat		disqualified persons. Complete Part II of Schedul	le L			· 化二甲基二甲基二甲基二甲基二甲基二甲基二甲基二甲基二甲基二甲基二甲基二甲基二甲基二	22	Marie and the first the second of the second	
Other liabilities (including federal income tax, payables to related third parties. Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D. Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets Permanently restricted net assets Permanently restricted net assets O 24 (Capital stock or trust principal, or current funds) Total liabilities and tonor follow SFAS 117 (ASC 958), check here complete lines 30 through 34. Total net assets or fund balances Total liabilities and part assets (fund balances) Total liabilities and other liabilities and ont follow SFAS 117 (ASC 958), check here complete lines 30 through 34. Total liabilities and other liabilities and ont follow SFAS 117 (ASC 958), check here complete lines 30 through 34. Total liabilities and other liabil	-		Secured mortgages and notes payable to unrelat	ted third p	oarties	[0	23	0	
Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D. Total liabilities. Add lines 17 through 25. Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets. Temporarily restricted net assets. Permanently restricted net assets. Organizations that do not follow SFAS 117 (ASC958), check here complete lines 30 through 34. Capital stock or trust principal, or current funds. Paid-in or capital surplus, or land, building, or equipment fund. Retained earnings, endowment, accumulated income, or other funds. Total liabilities and net assets fund balances. 11,102 25 12,923 11,102 26 12,923 143,024 27 74,762 973,394 28 1,136,820 350,048 29 414,718 370 30 30 30 30 30 30 30 30 30 30 30 30 30			Unsecured notes and loans payable to unrelated	third part	ties	[0	24	0	
Part X of Schedule D. 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 28 Temporarily restricted net assets 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC958), check here complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 33 Total net assets or fund balances 34 Total liabilities and net assets (fund balances) 11,102 26 12,923 143,024 27 74,762 973,394 28 1,136,820 350,048 29 414,718 30 30 31 31 32 31 32 34 Total liabilities and net assets (fund balances) 1,466,466 33 1,626,300		25	Other liabilities (including federal income tax, pay	yables to i	related third				<u> </u>	
Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets Temporarily restricted net assets Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here complete lines 30 through 34. Capital stock or trust principal, or current funds Retained earnings, endowment, accumulated income, or other funds Retained earnings, endowment, accumulated income, or other funds Total liabilities and net assets/fund halances 11,102 26 12,923 11,102 26 12,923 143,024 27 74,762 973,394 28 1,136,820 350,048 29 414,718 30 Capital stock or trust principal, or current funds 30 31 Retained earnings, endowment, accumulated income, or other funds 31 Total net assets or fund balances 1,466,466 33 1,626,300			parties, and other liabilities not included on lines	17-24). C	omplete					
Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets Temporarily restricted net assets Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC958), check here complete lines 30 through 34. Organizations that do not follow SFAS 117 (ASC958), check here complete lines 30 through 34. Capital stock or trust principal, or current funds Capital stock or trust principal, or current funds Retained earnings, endowment, accumulated income, or other funds Total liabilities and net assets/fund halances		00	Part X of Schedule D			[11,102	25	12.923	
Complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets Temporarily restricted net assets Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC958), check here complete lines 30 through 34. Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds Total net assets or fund balances Total liabilities and net assets/fund balances Total liabilities and net assets/fund balances		26					11,102	26	12,923	
34 Total liabilities and net assets/fund balances 1,466,466 33 1,626,300	ses		Organizations that follow SFAS 117 (ASC 958) complete lines 27 through 29, and lines 33 and	, check h d 34	ere 🕨 🛚	and			100 A	
34 Total liabilities and net assets/fund balances 1,466,466 33 1,626,300	an	27				6		THE PARTY		
34 Total liabilities and net assets/fund balances 1,466,466 33 1,626,300	Ba	28	Temporarily restricted net assets			٠ . ا				
34 Total liabilities and net assets/fund balances 1,466,466 33 1,626,300	힐	29	Permanently restricted net assets							
34 Total liabilities and net assets/fund balances 1,466,466 33 1,626,300	ᆵᅵ					1	350,048	29	414,718	
34 Total liabilities and net assets/fund balances 1,466,466 33 1,626,300	s or		complete lines 30 through 34.		L	İ				
34 Total liabilities and net assets/fund balances 1,466,466 33 1,626,300	sel		Capital stock or trust principal, or current funds .			.	n er vor er en stationetten kontre kontre kontre kontre kalle kalle kalle kalle kalle film film film film film Kalle kalle film film film film film f	30	reservant of the first state of the second	
34 Total liabilities and net assets/fund balances 1,466,466 33 1,626,300	As		Paid-in or capital surplus, or land, building, or equ	uipment fu	und	. [
34 Total liabilities and net assets/fund balances 1,466,466 33 1,626,300	ē		Retained earnings, endowment, accumulated inco	ome, or o	ther funds.	[
34 Total liabilities and net assets/fund halances	_		Total net assets or fund balances	. ,			1,466,466		1 626 300	
		34	Total liabilities and net assets/fund balances	<u></u>	<u> </u>	<u>. </u>		34		

Form '	990 (2013) THE ABILENE EDUCATION FOUNDATION	31-174	1496	Pag	e 12
Par	Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI			. [
1	Total revenue (must equal Part VIII, column (A), line 12)	1		756	,641
2	Total expenses (must equal Part IX, column (A), line 25)	2		596	,806
3	Revenue less expenses. Subtract line 2 from line 1	3		159	,835
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		1,466	,466
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			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			-1
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
territori pe	column (B))	10		1,626	,300
LEU	Financial Statements and Reporting			r	
	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:				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in		2000	1,72,7	
•	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	X	1.00 (\$185ge 20)
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis			2	
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both:			A AND	
	X Separate basis			1	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of				
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in			Tan	
	Schedule O.		SAM		(Carl
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits			N/A	
			Form	990 ((2013)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Name of the organization

Attach to Form 990 or Form 990-EZ. Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

THE ABILENE EDUCATION FOUNDATION 31-1741496 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described 5 in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public X 7 described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross 9 receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the 11 purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. Type I Type III-Functionally integrated **d** Type III-Non-functionally integrated Type II c By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting Since August 17, 2006, has the organization accepted any gift or contribution from any of the g following persons? A person who directly or indirectly controls, either alone or together with persons described in (ii) Yes and (iii) below, the governing body of the supported organization? No 11g(i) (ii) 11g(ii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s). h (i) Name of supported (ii) EIN (iii) Type of organization (iv) Is the organization (v) Did you notify (vi) Is the (vii) Amount of monetary organization (described on lines 1-9 in col. (i) listed in your the organization in organization in col support above or IRC section governing document? col. (i) of your (i) organized in the (see instructions)) support? Yes No Yes No (A) (B) (C) (D) (E)

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🛾 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and					1	
	membership fees received. (Do not						
	include any "unusual grants.")	320,134	461,603	287,267	131,511	675,885	1,876,400
2	Tax revenues levied for the organization's	, , , , , , , , , , , , , , , , , , , ,				070,000	1,070,100
	benefit and either paid to or expended on	1					
	its behalf						0
3	The value of services or facilities						U
	furnished by a governmental unit to the						
	organization without charge						0
4	Total. Add lines 1 through 3	320,134	461,603	287,267	131,511	675,885	1,876,400
5	The portion of total contributions by each		101,000	201,201	101,011	27 J, 003	1,070,400
	person (other than a governmental unit						
	or publicly supported organization)	Trade (12			WATE		
	included on line 1 that exceeds 2%				建筑 为6万分		
	of the amount shown on line 11,					15 - 1 × 1 × 1 × 1 × 1 × 1 × 1 × 1 × 1 × 1	
	column (f)				PERCENT.		
6	Public support. Subtract line 5 from line 4.	10.1947			Control of the	PROTEIN CONTRACTOR	1,876,400
	tion B. Total Support	The street with the street of the street	調整ないおけれたとうなど、質性などのとなる意味	CANCEL PRESCRIPTION OF THE SEC.	96, 1227 N.J. 127 12, 2011	<u> </u>	1,070,400
	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(a) 2012	(f) T-1-1
7					- included the second	(e) 2013	(f) Total
8		320,134	461,603	287,267	131,511	675,885	1,876,400
0	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties and income from similar	00.500	10.010				
9	Sources	20,523	16,010	19,664	29,712	86,559	172,468
9	Net income from unrelated business						
	activities, whether or not the business is						
40	regularly carried on						0
10	Other income. Do not include gain or						
	loss from the sale of capital assets						
44	(Explain in Part IV.)		-9,533	-9,988	-6,148	-5,803	-31,472
11						(2) (2) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1	2,017,396
12	Gross receipts from related activities, etc. (se	e instructions).				12	
13	First five years. If the Form 990 is for the org	ganization's first	, second, third,	fourth, or fifth t	ax year as a se	ection 501(c)(3)	
	organization, check this box and stop here.		· · · · · ·				▶ 📘
	tion C. Computation of Public Support						
14	Public support percentage for 2013 (line 6, co					14	93.01%
15	Public support percentage from 2012 Schedu					15	96.40%
16a	33 1/3% support test—2013. If the organizate	tion did not che	ck the box on li	ne 13, and line	14 is 33 1/3% (or more, check to	his box
	and stop here . The organization qualifies as	a publicly suppo	orted organizati	ion			▶ X
b	33 1/3% support test—2012. If the organizate	tion did not che	ck a box on line	e 13 or 16a, and	l line 15 is 33 1	/3% or more, ch	eck this
	box and stop here. The organization qualifies	s as a publicly s	upported orgar	nization			
17a	10%-facts-and-circumstances test—2013.	If the organizati	on did not chec	k a box on line	13, 16a, or 16b	, and line 14	
	is 10% or more, and if the organization meets	s the "facts-and-	circumstances	" test, check thi	s box and stop	here. Explain in	า
	Part IV how the organization meets the "facts	-and-circumsta	nces" test. The	organization qu	ualifies as a pul	olicly supported	
	organization						
b	10%-facts-and-circumstances test—2012.	If the organizati	on did not chec	k a box on line	13, 16a, 16b, c	or 17a, and line	
	15 is 10% or more, and if the organization me	eets the "facts-a	nd-circumstand	ces" test, check	this box and s	top here. Expla	in in
	Part IV how the organization meets the "facts	-and-circumstai	nces" test. The	organization or	ualifies as a nut	olicly	
	supported organization						
18	Private foundation. If the organization did no						
-	instructions						, [
							 >

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.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")			1			0
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities furnished						
	in any activity that is related to the						
	organization's tax-exempt purpose						0
3	Gross receipts from activities that are not an unrelated trade or business under section 513.						0
4	Tax revenues levied for the organization's benefit and either paid to or expended on						
	its behalf						0
5	The value of services or facilities						
	furnished by a governmental unit to the			1			
	organization without charge						0
6	Total. Add lines 1 through 5	0	0	0	0	0	0
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						0
b	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						0
С	Add lines 7a and 7b	0	0	0	0	0	0
8	Public support (Subtract line 7c from						
<u> </u>	line 6.)		No.		n jaki istori kini kini k	21 31 12 mg 3	0
	tion B. Total Support ndar year (or fiscal year beginning in)	(-) 0000	(1) 0040				
Cale	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	Amounts from line 6	0	0	0	0	0	0
10a	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties and income from similar sources						0
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b		0				0
11	Net income from unrelated business		U	0	0	0	0
	activities not included in line 10b, whether						
	or not the business is regularly carried on					ĺ	0
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part IV.)				}		0
13	Total support. (Add lines 9, 10c, 11, and 12.)	0	. 0	0	0	0	0
14	First five years. If the Form 990 is for the organization	ation's first, secor	nd, third, fourth, o			:)(3)	
	organization, check this box and stop here						
Sect	ion C. Computation of Public Support	Percentage					
15	Public support percentage for 2013 (line 8, column					15	0.00%
16	Public support percentage from 2012 Schedule A,	Part III, line 15 .			<u>.</u>	16	0.00%
Sect	ion D. Computation of Investment Inco	ome Percenta	ige				
17	Investment income percentage for 2013 (line 10c,	column (f) divided	by line 13, colu	mn (f))		17	0.00%
18	Investment income percentage from 2012 Schedul	e A, Part III, line 1	17		[18	0.00%
19a	33 1/3% support tests—2013. If the organization						
	not more than 33 1/3%, check this box and stop he	e re. The organiza	ition qualifies as	a publicly suppo	rted organization		🕨 🔲
b	33 1/3% support tests—2012. If the organization	did not check a b	ox on line 14 or	line 19a, and line	e 16 is more than	33 1/3%, and	
	line 18 is not more than 33 1/3%, check this box ar						
20	Private foundation. If the organization did not che	ck a box on line	14, 19a, or 19b,	check this box ar	nd see instruction	ns,	

Schedule A (Forn	1 990 or 990-EZ) 2013	THE ABILEN	E EDUCATION FO	UNDATION		31-17	'41496 Page 4
Part IV	Supplemental	Information.	Provide the exp	lanations requ	ired by Part II,	line 10: Part II. Ii	ne 17a or 17b
	and Part III, Iin	e 12. Also com	nplete this part fo	or any addition	al information.	. (See instruction	s).
~~~					***		
				**************	**		
			~				
	~						
						**************	
	~~~~~~~~						
				~			

******				********			
	• • • • • • • • • • • • • • • • • • • •						
			· 				
**							

SCHEDULE D (Form 990)

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

1141110	or the organization		Employer identification number
	ABILENE EDUCATION FOUNDATION		31-1741496
Par			
	Complete if the organization ansi	vered "Yes" to Form 990, Part IV,	line 6.
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year).		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and d	onor advisors in writing that the assets	s held in donor advised
	funds are the organization's property, subject		
6	Did the organization inform all grantees, dor		
•	used only for charitable purposes and not fo		
	purpose conferring impermissible private be	nafit?	risor, or for any other
		ione:	Yes No
Par			
	Complete if the organization answ	vered "Yes" to Form 990, Part IV,	line 7.
1	Purpose(s) of conservation easements held	by the organization (check all that app	oly).
	Preservation of land for public use (e.g., rec	reation or education) Prese	ervation of an historically important land area
	Protection of natural habitat		ervation of a certified historic structure
	Preservation of open space		a validit of a continea filotone stracture
2		Along had a small control of the state of th	
2	Complete lines 2a through 2d if the organiza	tion held a qualified conservation con	2001 1504 W
_	easement on the last day of the tax year.		Held at the End of the Tax Year
a	Total number of conservation easements .		
b	Total acreage restricted by conservation eas		
C	Number of conservation easements on a ce		
d	Number of conservation easements included		
	historic structure listed in the National Regis		
3	Number of conservation easements modified	d, transferred, released, extinguished,	or terminated by the organization
	during the tax year		
4	Number of states where property subject to		•
5	Does the organization have a written policy	egarding the periodic monitoring, insp	pection, handling of
	violations, and enforcement of the conserva-		
6	Staff and volunteer hours devoted to monito	ing, inspecting, and enforcing conser-	vation easements during the year
	D		g ,
7	Amount of expenses incurred in monitoring,	inspecting, and enforcing conservation	n easements during the year
	▶ \$, J	g we your
8	Does each conservation easement reported	on line 2(d) above satisfy the requirer	ments of section
	170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization re		
	balance sheet, and include, if applicable, the		
	the organization's accounting for conservation		The invarious statements that describes
Par	Organizations Maintaining Coll		ures or Other Similar Assets
	Complete if the organization answ	vered "Yes" to Form 990 Part IV	line 8
4 -			
1a	If the organization elected, as permitted und	er SFAS 116 (ASC 958), not to report	in its revenue statement and balance sheet
	works of art, historical treasures, or other sir		
	of public service, provide, in Part XIII, the tex		
b	If the organization elected, as permitted und		
	works of art, historical treasures, or other sir		education, or research in furtherance
	of public service, provide the following amou	nts relating to these items:	
	(i) Revenues included in Form 990, Part VII	, line 1	▶ \$ ▶ \$
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of		
	following amounts required to be reported ur	ider SFAS 116 (ASC 958) relating to t	hese items:
а	Revenues included in Form 990, Part VIII, Iir	e 1	▶ \$
b	Assets included in Form 990, Part X		<u> </u>

Complete if the organization answered "Yes" to Form 990, Part IV, line 10

	Complete ii the organization	answered res	to Form 990, Par	t iv, line iv.		
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a	Beginning of year balance	391,558	70,557	28,597	15,317	12,689
b	Contributions	30,102	301,180	43,723	10,949	0
С	Net investment earnings, gains,					
	and losses	67,769	23,414	-1,457	2,475	2,710
d	Grants or scholarships	2,694	1,600		0	0
е	Other expenditures for facilities					
	and programs	2,913	1,993	306	144	82
f	Administrative expenses					
g	End of year balance	483,822	391,558	70,557	28,597	15,317
_						

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a	Board	designated	f or quasi-end	lowment	₽	89

b Permanent endowment ► 76%

c Temporarily restricted endowment ► 16%

The percentages in lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the

Describe in Part XIII the intended uses of the organization's endowment funds.

art VI	Land,	Buildings,	and	Equipment.
--------	-------	------------	-----	------------

Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10

	Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a	Land	0	0	A Charles Services	0
b	Buildings	0	0	0	0
С	Leasehold improvements	0	0	0	0
d	Equipment [0	34,811	27,294	7,517
<u>e</u>	Other	0	0	0	0
Tota	I. Add lines 1a through 1e. (Column (d) must ed	qual Form 990, Part X, c	olumn (B), line 10(c).) <u></u>	7,517

Yes

No

Part VII	Investments—Other Securities		Dort IV line 11h See Form 000 Part V line 12
	Description of security or category		O, Part IV, line 11b. See Form 990, Part X, line 12. (c) Method of valuation:
(a)	(including name of security)	(b) Book value	Cost or end-of-year market value
(1) Financial	derivatives	0	
(2) Closely-he	eld equity interests	0	
(3) Other	***		
(A)			
			·
(C)	~~~~~~~~~~~~		
(D)	·		
	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		
(F)			
(G) (H)			
	must equal Form 990, Part X, col. (B) line 12.)	0	
Part VIII	Investments—Program Rela		Hard Makes A (Association of Control of the Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of Control of
			0, Part IV, line 11c. See Form 990, Part X, line 13.
	(a) Description of investment	(b) Book value	(c) Method of valuation:
March to the March	(a) Description of investment	(b) Book value	Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(4)			
(4)		1	
(5) (6)			
(5) (6) (7)			
(5) (6) (7) (8)			
(5) (6) (7) (8) (9)	must equal Form 990, Part X, col. (B) line 13.)	0	
(5) (6) (7) (8) (9)	Other Assets. Complete if the organization a	nswered "Yes" to Form 99	0, Part IV, line 11d. See Form 990, Part X, line 15.
(5) (6) (7) (8) (9) Total. (Column (b) Part IX	Other Assets. Complete if the organization a	<u></u>	0, Part IV, line 11d. See Form 990, Part X, line 15.
(5) (6) (7) (8) (9) Total. (Column (b)  Part IX  (1) Deposit	Other Assets. Complete if the organization a	nswered "Yes" to Form 99	0, Part IV, line 11d. See Form 990, Part X, line 15. (b) Book value
(5) (6) (7) (8) (9) Total. (Column (b) Part IX  (1) Deposit (2) AEF En	Other Assets. Complete if the organization a	nswered "Yes" to Form 99	0, Part IV, line 11d. See Form 990, Part X, line 15. (b) Book value
(5) (6) (7) (8) (9) Total. (Column (b) Part IX  (1) Deposit (2) AEF En. (3)	Other Assets. Complete if the organization a	nswered "Yes" to Form 99	0, Part IV, line 11d. See Form 990, Part X, line 15. (b) Book value
(5) (6) (7) (8) (9) Total. (Column (b) Part IX  (1) Deposit (2) AEF En (3) (4)	Other Assets. Complete if the organization a	nswered "Yes" to Form 99	0, Part IV, line 11d. See Form 990, Part X, line 15. (b) Book value
(5) (6) (7) (8) (9) Total. (Column (b) Part IX  (1) Deposit (2) AEF En (3) (4) (5)	Other Assets. Complete if the organization a	nswered "Yes" to Form 99	0, Part IV, line 11d. See Form 990, Part X, line 15. (b) Book value
(5) (6) (7) (8) (9) Total. (Column (b)  Part IX  (1) Deposit (2) AEF En (3) (4) (5) (6)	Other Assets. Complete if the organization a	nswered "Yes" to Form 99	0, Part IV, line 11d. See Form 990, Part X, line 15. (b) Book value
(5) (6) (7) (8) (9) Total. (Column (b)  Part IX  (1) Deposit (2) AEF En. (3) (4) (5) (6) (7)	Other Assets. Complete if the organization a	nswered "Yes" to Form 99	0, Part IV, line 11d. See Form 990, Part X, line 15. (b) Book value
(5) (6) (7) (8) (9) Total. (Column (b)  Part IX  (1) Deposit (2) AEF En (3) (4) (5) (6) (7) (8)	Other Assets. Complete if the organization a	nswered "Yes" to Form 99	0, Part IV, line 11d. See Form 990, Part X, line 15. (b) Book value
(5) (6) (7) (8) (9) Total. (Column (b)  Part IX  (1) Deposit (2) AEF En (3) (4) (5) (6) (7) (8) (9)	Other Assets. Complete if the organization a - Safe Deposit Box Key dowment Fund Held by CFA	nswered "Yes" to Form 99	0, Part IV, line 11d. See Form 990, Part X, line 15.  (b) Book value  1 483,82
(5) (6) (7) (8) (9) Total. (Column (b) Part IX  (1) Deposit (2) AEF En (3) (4) (5) (6) (7) (8) (9) Total. (Column	Other Assets. Complete if the organization a	nswered "Yes" to Form 99	0, Part IV, line 11d. See Form 990, Part X, line 15.  (b) Book value  1 483,82
(5) (6) (7) (8) (9) Total. (Column (b)  Part IX  (1) Deposit (2) AEF En (3) (4) (5) (6) (7) (8) (9)	Other Assets. Complete if the organization as a safe Deposit Box Key adowment Fund Held by CFA  The safe Deposit Box Key adowment Fund Held by CFA  The safe Deposit Box Key adownent Fund Held by CFA  The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Bo	nswered "Yes" to Form 99 (a) Description  ol. (B) line 15.)	0, Part IV, line 11d. See Form 990, Part X, line 15.  (b) Book value  1 483,82
(5) (6) (7) (8) (9) Total. (Column (b) Part IX  (1) Deposit (2) AEF En (3) (4) (5) (6) (7) (8) (9) Total. (Column	Other Assets. Complete if the organization as a safe Deposit Box Key adowment Fund Held by CFA  The safe Deposit Box Key adowment Fund Held by CFA  The safe Deposit Box Key adownent Fund Held by CFA  The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Box Key and The safe Deposit Bo	nswered "Yes" to Form 99 (a) Description  ol. (B) line 15.)	0, Part IV, line 11d. See Form 990, Part X, line 15.  (b) Book value  1 483,82
(5) (6) (7) (8) (9) Total. (Column (b) Part IX  (1) Deposit (2) AEF En (3) (4) (5) (6) (7) (8) (9) Total. (Column	Other Assets. Complete if the organization as a safe Deposit Box Key adowment Fund Held by CFA  The man (b) must equal Form 990, Part X, complete if the organization a	nswered "Yes" to Form 99 (a) Description  ol. (B) line 15.)	0, Part IV, line 11d. See Form 990, Part X, line 15.  (b) Book value  1 483,82
(5) (6) (7) (8) (9) Total. (Column (b)  Part IX  (1) Deposit (2) AEF En. (3) (4) (5) (6) (7) (8) (9) Total. (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (C) (C) (C) (C) (C) (C) (C) (C) (C) (C	Other Assets. Complete if the organization as a safe Deposit Box Key adowment Fund Held by CFA  The same of the organization as a safe Deposit Box Key adowment Fund Held by CFA  The same of the organization as a line 25.	nswered "Yes" to Form 99 (a) Description  ol. (B) line 15.)	0, Part IV, line 11d. See Form 990, Part X, line 15.  (b) Book value  1, 483,82  483,83  0, Part IV, line 11e or 11f. See Form 990, Part X,
(5) (6) (7) (8) (9) Total. (Column (b)  Part IX  (1) Deposit (2) AEF En. (3) (4) (5) (6) (7) (8) (9) Total. (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (Column (c) (C) (C) (C) (C) (C) (C) (C) (C) (C) (C	Other Assets. Complete if the organization as a safe Deposit Box Key adowment Fund Held by CFA  mn (b) must equal Form 990, Part X, or Other Liabilities. Complete if the organization a line 25. (a) Description of liability Income taxes	nswered "Yes" to Form 99 (a) Description  ol. (B) line 15.)	0, Part IV, line 11d. See Form 990, Part X, line 15.  (b) Book value  1 483,82  0, Part IV, line 11e or 11f. See Form 990, Part X,
(5) (6) (7) (8) (9) Total. (Column (b) Part IX  (1) Deposit (2) AEF En (3) (4) (5) (6) (7) (8) (9) Total. (Column Part X  1. (1) Federal (2) Payroll	Other Assets. Complete if the organization as a safe Deposit Box Key adowment Fund Held by CFA  mn (b) must equal Form 990, Part X, or Other Liabilities. Complete if the organization a line 25. (a) Description of liability Income taxes	nswered "Yes" to Form 99 (a) Description  ol. (B) line 15.)	0, Part IV, line 11d. See Form 990, Part X, line 15.  (b) Book value  1 483,82  483,83  0, Part IV, line 11e or 11f. See Form 990, Part X,
(5) (6) (7) (8) (9) Total. (Column (b) Part IX  (1) Deposit (2) AEF En (3) (4) (5) (6) (7) (8) (9) Total. (Column Part X  1. (1) Federal (2) Payroll	Other Assets. Complete if the organization as a safe Deposit Box Key adowment Fund Held by CFA  min (b) must equal Form 990, Part X, complete if the organization a line 25.  (a) Description of liability  Lincome taxes  Liabilities	nswered "Yes" to Form 99 (a) Description  ol. (B) line 15.)  nswered "Yes" to Form 99  (b) Book value  0 2,423	0, Part IV, line 11d. See Form 990, Part X, line 15.  (b) Book value  1 483,82  483,83  0, Part IV, line 11e or 11f. See Form 990, Part X,
(5) (6) (7) (8) (9) Total. (Column (b)  Part IX  (1) Deposit (2) AEF End (3) (4) (5) (6) (7) (8) (9) Total. (Column Part X  1. (1) Federal (2) Payroll (3) Profess	Other Assets. Complete if the organization as a safe Deposit Box Key adowment Fund Held by CFA  min (b) must equal Form 990, Part X, complete if the organization a line 25.  (a) Description of liability  Lincome taxes  Liabilities	nswered "Yes" to Form 99 (a) Description  ol. (B) line 15.)  nswered "Yes" to Form 99  (b) Book value  0 2,423	0, Part IV, line 11d. See Form 990, Part X, line 15.  (b) Book value  1 483,82  483,83  0, Part IV, line 11e or 11f. See Form 990, Part X,
(5) (6) (7) (8) (9) Total. (Column (b)  Part IX  (1) Deposit (2) AEF En. (3) (4) (5) (6) (7) (8) (9) Total. (Column (c)  Part X  1. (1) Federal (2) Payroll (3) Profess (4)	Other Assets. Complete if the organization as a safe Deposit Box Key adowment Fund Held by CFA  min (b) must equal Form 990, Part X, complete if the organization a line 25.  (a) Description of liability  Lincome taxes  Liabilities	nswered "Yes" to Form 99 (a) Description  ol. (B) line 15.)  nswered "Yes" to Form 99  (b) Book value  0 2,423	0, Part IV, line 11d. See Form 990, Part X, line 15.  (b) Book value  1 483,82  483,83  0, Part IV, line 11e or 11f. See Form 990, Part X,
(5) (6) (7) (8) (9) Total. (Column (b)  Part IX  (1) Deposit (2) AEF En. (3) (4) (5) (6) (7) (8) (9) Total. (Column (c) Part X  1. (1) Federal (2) Payroll (3) Profess (4) (5)	Other Assets. Complete if the organization as a safe Deposit Box Key adowment Fund Held by CFA  min (b) must equal Form 990, Part X, complete if the organization a line 25.  (a) Description of liability  Lincome taxes  Liabilities	nswered "Yes" to Form 99 (a) Description  ol. (B) line 15.)  nswered "Yes" to Form 99  (b) Book value  0 2,423	0, Part IV, line 11d. See Form 990, Part X, line 15.  (b) Book value  1 483,82  483,83  0, Part IV, line 11e or 11f. See Form 990, Part X,
(5) (6) (7) (8) (9) Total. (Column (b) Part IX  (1) Deposit (2) AEF En (3) (4) (5) (6) (7) (8) (9) Total. (Column Part X  1. (1) Federal (2) Payroll (3) Profess (4) (5) (6) (7) (8)	Other Assets. Complete if the organization as a safe Deposit Box Key adowment Fund Held by CFA  min (b) must equal Form 990, Part X, complete if the organization a line 25.  (a) Description of liability  Lincome taxes  Liabilities	nswered "Yes" to Form 99 (a) Description  ol. (B) line 15.)  nswered "Yes" to Form 99  (b) Book value  0 2,423	0, Part IV, line 11d. See Form 990, Part X, line 15.  (b) Book value  1 483,82  483,83  0, Part IV, line 11e or 11f. See Form 990, Part X,
(5) (6) (7) (8) (9) Total. (Column (b) Part IX  (1) Deposit (2) AEF En (3) (4) (5) (6) (7) (8) (9) Total. (Colum Part X  1. (1) Federal (2) Payrell (3) Profess (4) (5) (6) (7) (8) (9)	Other Assets. Complete if the organization as a safe Deposit Box Key adowment Fund Held by CFA  min (b) must equal Form 990, Part X, complete if the organization a line 25.  (a) Description of liability  Lincome taxes  Liabilities	nswered "Yes" to Form 99 (a) Description  ol. (B) line 15.)  nswered "Yes" to Form 99  (b) Book value  0 2,423	0, Part IV, line 11d. See Form 990, Part X, line 15.  (b) Book value  11  483,82:  0, Part IV, line 11e or 11f. See Form 990, Part X,

organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII.

hedule D (Form	990) 2013	THE ABILEN	E EDUCATION F	OUNDATION			31-1741496	Page <b>5</b>
art XIII	Supple	emental Infor	mation (contin	nued)				
`								
PR 99 99 99 98 10 10 00 00 PR PR 10 00 00					 			
THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PART OF THE PA					 			
					 er en ten en our en ver en en te ta an un sa	the ten pro do you do see the see and		
			:		 			
•								
e lake han ban wat and 'to mak mak mak han ban war -					 en de der der den den den den den den den den den den			
a decidencia, per las per escribes per des sen enc.					 			
					 			****
					 		***	

#### **SCHEDULE G** (Form 990 or 990-EZ)

# Supplemental Information Regarding Fundraising or Gaming Activities

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

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

OMB No. 1545-0047

	of the organization					Employer identificat	on number
THE	ABILENE EDUCATION FOUNDATION					31-17-	41496
Pa	Form 990-EZ filers are no	Complete if the	organizat	ion answe	ered "Yes" to For	m 990, Part IV, Iir	ie 17.
1	Indicate whether the organization	raised funds thro	ompiete tr	ils part.	a notivition Charle	all that and	
a	Mail solicitations	raisca idrias tiric	e S	olicitation c	of non-government of	ali that apply.	
b	Internet and email solicitations	3			of government grant		
С	Phone solicitations				raising events	5	
d	In-person solicitations		<b>g</b> [ 3	beciai iuiiu	raising events		
2a	Did the organization have a writter	n or oral agreeme	ent with any	individual	(including officers of	directors touches	_
	key employees listed in Form 990	, Part VII) or entit	y in connec	tion with pr	ofessional fundraisi	ng services?	Yes No
b	If "Yes," list the ten highest paid in to be compensated at least \$5,000	D by the organiza	es (fundrais tion.	sers) pursu:	ant to agreements ι	ınder which the fund	draiser is
	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	custody o	draiser have r control of utions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
			Yes	No			
1					_		
2	<u> </u>				0	0	0
	:				0	0	0
		·			0	0	0
4					O	0	0
5					0	0	0
6					0	0	
7							0
8					0	0	0
9		:			0	0	0
10					0	0	0
		1			0	0	0
Total	· · · · · · · · · · · · · · · · · · ·			🌬	0	0	0
3	List all states in which the organizate registration or licensing.	ation is registered	l or licensed	I to solicit o	contributions or has	been notified it is ex	kempt from
		· 					
· <b>-</b>					***		
							• • • • • • • • • • • • • • • • • • • •

Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported

31-1741496 Page **2** 

		•	fundraising event contr ipts greater than \$5,00	•	come on Form 990-E2	Z, lines 1 and 6b. List
		events war grees reec	(a) Event #1  CRAWFISH BOIL	(b) Event #2	(c) Other events NONE	(d) Total events (add col. (a) through
(I)			(event type)	(event type)	(total number)	col. (c))
Revenue	1	Gross receipts	81,330		0	81,330
œ	2	Less: Contributions	53,260		0	53,260
		minus line 2)	28,070		0	28,070
	4	Cash prizes			0	0
S	5	Noncash prizes			0	0
ense	6	Rent/facility costs	4,301		0	4,301
Direct Expenses	7	Food and beverages	17,050		0	17,050
Dire	8	Entertainment			0	0
	9	Other direct expenses	12,522		0	12,522
	10 11	Direct expense summary. Add Net income summary. Subtract				( 33,873) -5,803
Ē	III EST	Gaming. Complete if t	the organization answe	red "Yes" to Form 990	0, Part IV, line 19, or re	eported more
		than \$15,000 on Form	990-EZ, line 6a.			
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Re	1	Gross revenue				- 0
ses	2	Cash prizes				0
Direct Expenses	3	Noncash prizes				0
Direct	4	Rent/facility costs				0
	5	Other direct expenses				0
	6	Volunteer labor	Yes % No	Yes %	Yes % No	
	7	Direct expense summary. Add	l lines 2 through 5 in colun	nn (d)	· ·	( 0)
	8	Net gaming income summary.	Subtract line 7 from line	I, column (d)		0
	a Is	nter the state(s) in which the orestee to op "No," explain:	erate gaming activities in	each of these states?.		Yes No
10		Vere any of the organization's ga		uspended or terminated	during the tax year?	

	and 5 (1 5111 555 of 555-12) 2013 THE ABILENE EDUCATION FOUNDATION	31	-1741496	Page 3
11	Does the organization operate gaming activities with nonmembers?		Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?		Yes	□ No
13	Indicate the percentage of gaming activity operated in:		163	,,,,,
а	The organization's facility	13a		%
b	An outside facility	13b		
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			70
	Name ▶			
	Address ▶			
15a	Does the organization have a contract with a third party from whom the organization receives gaming			
	revenue?	ſ	Ves	No
b	amount of gaming revenue received by the organization amount of gaming revenue retained by the third party \bigs\tau \\$	[	103 [	140
С	If "Yes," enter name and address of the third party:			
	Name ▶			~~~~~~~
	Address •			
16	Gaming manager information:			
	Name ▶			
	Gaming manager compensation ► \$0			
	Description of services provided			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license?	. Г	Yes	No
b	Error the amount of distributions required under state law to be distributed to other exempt organizations	, r		
Part	or spent in the organization's own exempt activities during the tax year   \$\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sq}\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sq}\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sq}\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sq}\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sq}\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sq}\sqrt{\sqrt{\sqrt{\sqrt{\sqrt{\sq}\sqrt{\sq}\sqrt{\sqrt{\sq}\sq}\sqrt{\sq}\sqrt{\sqrt{\sq}\sq}\sqrt{\sqrt{\sqrt{\sqrt{\sq}\sq}\s			0
	Supplemental Information. Provide the explanations required by Part I, line 2b, columns Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to pradditional information (see instructions).	(III) a ovide	nd (v), ar any	nd

# SCHEDULEI (Form 990)

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

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

OMB No. 1545-0047
-------------------

Open to Public Inspection

Employer identification number 31-1741496 X Yes No

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and

General Information on Grants and Assistance

THE ABILENE EDUCATION FOUNDATION

Department of the Treasury Internal Revenue Service Name of the organization

the selection criteria used to award the grants or assistance? .

7	Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	zation's proced	ures for monitoring	the use of grant funds in	n the United States.			
Part	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990 Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	ssistance to	Governments a	its and Organizations in the United States. Complete if the organization more than \$5,000. Part II can be duplicated if additional space is needed.	the United State can be duplicated	s. Complete if the orgif additional space is	janization answered needed.	1 "Yes" to Form 990
1 (a)	1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) Abi	(1) Abilene Indep. School District PO Box 981 Abilene TX 79604			196.205				Campus Counselors
(2)								
(3)								
(4)								
(5)								
(9)								
(7)								
(8)								
(6)								
(10)								
(11)				And the second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second s				
(12)								
2	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.	501(c)(3) and g	overnment organiza	ations listed in the line 1	table.			
~	Enter total number of other organizations listed in the line 1	- i vicinationalist	od in the line 1 table				<b>A</b>	

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

Schedule I (Form 990) (2013)

Continuation Sheet for Schedule I (Form 990)

(h) Purpose of grant or assistance Employer identification number (g) Description of non-cash assistance 31-1741496 (f) Method of valuation (book, FMV, appraisal, other) Continuation of Grants and Other Assistance to Governments and Organizations in the United States (e) Amount of noncash assistance (d) Amount of cash (c) IRC section if applicable (b) EIN THE ABILENE EDUCATION FOUNDATION (a) Name and address of organization or government Name of the organization (29) Part (21) (13) (14) (15) (16) (17) (18) (19) (20) (22) (23) (24) (25) (28) (36) (27)

31-1741496

Schedule I (Form 990) (2013)

Page 2 Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. Part III

(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
Scholarships 1	1	44.400			
STAR Teacher Grants	61	54,426			
GIFT New Teacher Grants	69	10,350			
Teachers In the Limelight Grants	44	13.800			
Achievement Grants	=	12.972			
History Education Grant 6		2.040			
PASS for Success	15	3,234			
Part IV. Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), a Part I Line 2 Grant and assistance in the United States that are granted to the Abilene Independent School District (AISD) are	the information re	equired in Part I, line he Abilene Independen	t School District (AISI	Part III, column (b), and any other additional information.	ional information.
monitored by wage and benefits approval of the four on-campus co	-campus college cor	lege counselors, first by AISD and then reviewed and acceptance by	and then reviewed an	d acceptance by	
AEF. Comparative analysis is performed with similar schools whenever adjustments are recommended.	jools whenever adju	ustments are recommer	nded.		
Part I Line 2 Grant and assistance in the United States that are granted to high school students via the numerous programs offered by	that are granted to h	igh school students vie	the numerous progra	ıms offered by	
AEF is by committee selection, grant writing: review and approval, or judged art competition, it is monitored by writing checks	approval, or judged	d art competition, it is m	nonitored by writing ch	ecks	
directly to the appropriate college of the awarded student. Campus		counselors follow up on awarded students as to their status and	ed students as to thei	status and	
needs. AEF has a strong desire to keep students in college and monitors their status and progress through graduation.	ege and monitors the	eir status and progress	through graduation.		
Part I Line 2 Grant and assistance in the United States that are awarded to teachers are by grant writing and committee review and	that are awarded to	teachers are by grant v	vriting and committee	review and	
selection based on available funds. New teachers receiving the one		time GIFT grant are identified and verified by school officials as	and verified by schoo	officials as	
to their status which qualifies them for the grant.					

í	$\overline{}$
Ċ	3
(	2000
	_
	Torn
	≒
B	Y
	_
6	-
	for Schedule
×	Ĭ
_	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	2
	$\simeq$
=	$\overline{c}$
ſ	ň
•	•
	一
ı	⋍
v	ب
	ð
	ഇ
-	<u>_</u>
(	Sheet
	Continuation
	0
•	
	$\boldsymbol{\sigma}$
	3
_	_
•	▔
	Ξ
	Ó
(	ر

	Continuati	Continuation Sheet for Schedule I (Form 990)	Schedule I (F	orm 990)	Page 1 of 1
Name of the organization					tification number
THE ABILENE EDUCATION FOUNDATION					31-1741496
Part III Continuation of Grants and Other Assistance to Individuals in the United States	Assistance to In	idividuals in the Un	nited States		
(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
Kindergarten Readiness Books		1,500	İ		
E-Power AHS Activity Grant	-	1,000			
Million-Word Readers Program	-	200			
AHS Percussion Grant		200	The state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the s		
12			100		
13					
41					
15					
16					
17					,
18					
19					
20					
21					
22					
23					
24					
25					
26					

#### SCHEDULE O (Form 990 or 990-EZ)

### Supplemental Information to Form 990 or 990-EZ

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

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

THE ABILENE EDUCATION FOUNDATION

Employer identification number

31-1741496 Form 990, Part III, Line 4d: Program Service Expenses: 2,035, Grants and allocations: 0, Revenue: 0 Alumni Scholarship Endowment Program - The program began in February 2008. The monies raised for the program are used to fund an endowment where earnings are awarded to seniors in AISD in the from of scholarships. The amount of the scholarships varies depending on the donations and earnings from investments. These scholarship funds are generated by the alumni of the two high schools in the district. Funds are held by the Community Foundation of Abilene for investment and remain there as a permanent (asset) endowment for future scholarships. Alumni Scholarship Funds - Funds in the AEF Scholarship Endowment Program are designated and split between the two high school; they consist of permanently restricted donations and as well as board restricted funds. AEF collects all donations, writes all acknowledgements, and administers all scholarships following the guidelines established for past AER scholarships. Donated funds added to the program will be shared equally by both unless restricted by the donor. Two \$1,000 scholarships were awarded in 2013. Form 990, Part III, Line 4d: Program Service Expenses: 18,400, Grants and allocations: 0, Revenue: 0 AEF Donor Directed Scholarships are given by donors for specific scholarships for students at both Abilene High School and Cooper High School. These scholarships vary in criteria and amount as per the request of the donor. Fourteen scholarships were awarded during 2013 for a total of \$18,400. ; Form 990, Part III, Line 4d: Program Service Expenses: 15,250, Grants and allocations: 0, Revenue: 0 Abilene Education Foundation also raised funds for AEF Scholarships for both Abilene High School and Cooper High School on an annual basis. In 2013 AEF awarded ten scholarships AISD high schools seniors for a total of \$15,250. Form 990, Part III, Line 4d: Program Service Expenses: 21,832, Grants and allocations: 0, Revenue: 0 AEF received donations from Edwin and Agnes Jennings to provide a Teaching