orm **990**

Return of Organization Exempt From Income Tax

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

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

and ending MAR 31,

2013

Open to Public Inspection

Form 990 (2013)

Department of the Treasury Internal Revenue Service

A For the 2013 calendar year, or tax year beginning APR 1, 2013

332001 10-29-13 LHA For Paperwork Reduction Act Notice, see the separate instructions.

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

Check if applicable C Name of organization D Employer identification number Address change FOUNDATION FOR ECONOMIC EDUCATION. Name change **_**** Doing Business As Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Termin-ated 1718 PEACHTREE STREET NW 1048 914-816-8967 Amended return City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ 7,856,932. Applica-ATLANTA, GA 30309 H(a) Is this a group return pending F Name and address of principal officer: CARL OBERG Yes X No for subordinates? SAME AS C ABOVE H(b) Are all subordinates included? Yes Tax-exempt status: X 501(c)(3) __ 501(c) (4947(a)(1) or (insert no.) 527 If "No," attach a list. (see instructions) J Website: WWW.FEE.ORG H(c) Group exemption number ▶ K Form of organization: X Corporation Trust Association Other > L Year of formation: 1946 M State of legal domicile: GA Part I Summary Briefly describe the organization's mission or most significant activities: TO PROMOTE AND EDUCATE IN THE Governance PRINCIPLES OF SOUND ECONOMICS Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) 4 Number of independent voting members of the governing body (Part VI, line 1b) 14 4 Activities & Total number of individuals employed in calendar year 2013 (Part V, line 2a) 16 5 6 Total number of volunteers (estimate if necessary) 6 7 a Total unrelated business revenue from Part VIII, column (C), line 12 270,250. b Net unrelated business taxable income from Form 990-T, line 34 220,492. **Prior Year Current Year** 4,170,925. Contributions and grants (Part VIII, line 1h) 2,352,336. Program service revenue (Part VIII, line 2g) 0. 0. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 140,641. 252,435. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 751,810. 351,348. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 3,244,787. 4,774,708. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 5,800. 20,083. 14 Benefits paid to or for members (Part IX, column (A), line 4) 0. 0. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 971,680. 1,305,761. Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) 0. b Total fundraising expenses (Part IX, column (D), line 25) 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 2,065,497. 2,498,111. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 3,042,977. 3,823,955. 19 Revenue less expenses. Subtract line 18 from line 12 201,810. 950,753. or **Beginning of Current Year End of Year** 20 Total assets (Part X, line 16) 6,262,251. 7,591,183. 21 Total liabilities (Part X, line 26) 542,563. 606,598. Net 22 Net assets or fund balances. Subtract line 21 from line 20 . 5,719,688. 6,984,585. Part II | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Signature of officer Sign CARL OBERG, CHIEF OPERATING OFFICER Here Type or print name and title Print/Type preparer's name PTIN Preparer's signature Paid DAVID SCHUCHMANN P01240918 self-employed Firm's name CBIZ MHM, Preparer Firm's EIN Firm's address 3625 CUMBERLAND BLVD SE. Use Only ATLANTA, GA 30339 Phone no. 770 - 858 - 4473May the IRS discuss this return with the preparer shown above? (see instructions) X Yes

	m 990 (2013) FOUNDATION FOR ECONOMIC EDUCATION, INC. **-***** Proceedings of the control of the	age 2
Pa	art III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	
1	Briefly describe the organization's mission:	
	ORGANIZATION'S MISSION IS TO OFFER THE MOST CONSISTENT CASE FOR THE	
	"FIRST PRINCIPLES" OF FREEDOMS: THE SANCTITY OF PRIVATE PROPERTY,	
	INDIVIDUAL LIBERTY, THE RULE OF LAW, THE FREE MARKET AND THE MORAL	
	SUPERIORITY OF INDIVIDUAL CHOICE AND RESPONSIBILITY OVER COERCION.	
_		
2	Did the organization undertake any significant program services during the year which were not listed on	7
	the prior Form 990 or 990-EZ?	J No
	If "Yes," describe these new services on Schedule O.	_
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and	
	revenue, if any, for each program service reported.	
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	SEMINARS AND LECTURES - PROMOTING THE PHILOSOPHY OF FREE MARKET	
	ECONOMICS AND THE IMPORTING OF GENERAL EDUCATION RELATING TO ECONOMIC	
	FREEDOM.	
	L 1144 H 2 V L 1 8	
4b	(Code:) (Expenses \$ 816,503. including grants of \$ 10,000.) (Revenue \$ 9,698)	1
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FOUNDATION FOR ECONOMIC EDUCATION, INC. Part IV | Checklist of Required Schedules

Did the organization maintain an office, employees, or agents outside of the United States? b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV 16 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? If "Yes," complete Schedule F, Parts III and IV 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 18 X				Yes	No
2 Is the organization required to complete Schedule 8, Schedule of Contributors 3 Just the organization engage in direct or indicate 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 are completed in the organization regage in lobbying activities, or have a section 501(ii) election in effect during the tax year? If "Yes," complete Schedule C, Part II 5 Is the organization as ection 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 848-19 If "Yes," complete Schedule C, Part II 6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advise on the distribution or investment funds are considered to prevent or provide advise on the distribution or investment and accounts fund funds are considered to prevent a security funds. 5 If 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, ine 167 if "yes," complete Schedule D, Part VII 10 If the organization report an amount for the following questions is "yes," then complete Schedule D, Part VII, VII, VII, VII, VII, VII, VII, VII	1				
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Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(n) election in effect during the tax year? If "Yes," complete Schedule C, Part III 5 Is the organization as section 501(c)(4), 501(c)(6), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Prevenue Procedure 98-19? If "Yes," complete Schedule C, Part III 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 for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment or provide advice on the distribution or investment or funds and the anxiety of the complete Schedule D, Part III 10 Did the organization distribution or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 10 Did the organization report an amount for lend, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V 11 If the organization report an amount for investments or yes, then complete Schedule D, Part VI 12 Did the organization report an amount for investments organization in Part X, line 10? If "Yes," complete Schedule D, Part VI 13 Did the organization report an amount for other assets in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VI 14 Did the organization report an amount for other assets in Part X, line 12 that is 5% or more of its to	3		3		Х
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19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a X	18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
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20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		X
	20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
			20b		

Pa	art IV Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			T
	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b		200		
	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		x
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or	202		
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so,			
	complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	20		
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	TANKS	325	
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	202		
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	1		
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?	100		
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	1		
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations		\neg	
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity		\neg	
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization		\neg	
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 192			

Form **990** (2013)

Note. All Form 990 filers are required to complete Schedule O ...

STREET, SQUARE,	-	AND DESCRIPTION OF THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN COLUM								_
Part V		Statements	Regarding	Other	IRS	Filings	and	Tax	Complianc	e

tale Enter the number reported in Box 3 of Form 1096, Enter 0-I find applicable 1 to 1 to 1 to 1 to 1 to 1 to 2 to 1 to 1 to 2 t		Check if Schedule O contains a response or note to any line in this Part V					
b Enter the number of Forms W2G included in line 1a. Enter 0 if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming gaming winnings to prize winners? Qamining winnings winni			•			Yes	No
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable garming (gambling) winnings to prize winners? 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, [2a 16] b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 3b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 3c Did the organization have unreaded business gross income of \$1 L000 or more during the year? 3c Did the organization have unreaded business gross income of \$1 L000 or more during the year? 3c A Early time during the calendary year, did the organization flow 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)? 3c If "Yes," has it field a form \$900 Tor this year? If "No." to line 3b, provide an explanation in Schedule O 3d A Early time the hanse of the foreign country. 3d A Early time the hanse of the foreign country. 3d A Early time the hanse of the foreign country (such as a bank account, securities account, or other financial accounts)? 3d Was the organization apply to a prohibited tax whelter transaction and any time during the tax yea? 3d Was the organization and the organization file Form 8886-1? 5d Does the organization have enmud gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that may receive deductible as charitable contributions? 4d If "Yes," to line 5a or 5b, did the organization file Form 8886-1? 5d Does the organization solicit with every exploration and partly for goods and services provided to the payor? 5d If "Yes," indicate the number of Forms 8222 filed during the year payment in excess of \$55 made partly as a contribution and partly for goods and services provided to the Forms \$400 to the organization receive any tunds, direct	1a			(]		
a Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, field for the calendar year ending with or within the year covered by this return 16	b				2		
2a Eiter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, filed for the calendary year ending with or within the year ocered by this return b If a least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a X b If "Yes," has it filed a Form 990-T for this year? If "No," to line 30, provide an explanation in Schedule O 3b X 4a At any time during the calendary year, did the organization have uniterest 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 accounts. 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a Des 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 charitatele contributions? 6a Des the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7c Organization statemary receive deductible contributions? 7d Did the organization include applied in excess of \$15 made party sa contribution and party for goods and services provided? 7b If "Yes," did the organization motify the donor of the value of the goods or services provided? 7d Did the organization and party for goods and services provided? 7d Did the organization secure applied in excess of \$15 made party sa contributions or quanty and party for goods and services provided	С			0 0			
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b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a IX 3b IV **Yes,** has it filed a Form 990.T for this year? If **No,** to line 3b, provide an explanation in Schedule 0 3b IX 3d At any time during the calendary 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 At any time the name of the foreign country. Such as a bank account, securities account, or other financial account)? 5b If **Yes,** inter the name of the foreign country. Such as a bank account, securities account, or other financial account)? 5c If **Yes,** to line 3a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 5c If **Yes,** to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 5c If **Yes,** to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 5c If **Yes,** to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 5c If **Yes,** to line 5a or 5b, did the organization interest that are normally greater than \$100,000, and did the organization solicit any contributions that may receive deductible as charitable contributions? 5c If **Yes,** did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 5c If the organization receive a payment in excess of \$75 made party as a contribution? 5d If **Yes,** did the organization neity the donor of the value of the goods or services provided? 5d If **Yes,** did the organization neity the donor of the value of the goods or services provided? 5d If **Yes,** did the organization neceive any funds, directl	2a						
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3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 4b If Yes, 1 his if lide a Form B990 For this year? If №, 1 to line Ap, provide an explanation in Schedule O 4b X 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 V X 4b If Yes, 1 enter the name of the foreign country: Securities account, or other financial accounts. 5b Was the organization approved to a prohibited tax shelter transaction at any time during the tax year? 5c Was 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? 6c W Yes, 1 in the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7c Organizations that may receive deductible contributions under section 170(c). 8d If Yes, 1 indicate the rumber of Forms 8982 filed during the year 9 bid the organization soli, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8892? 9 bid the organization soli, exchange, or otherwise dispose of tangible personal property for which it was required? 10 bid the organization received a contribution of casts, boats, airplane, or other velocities, did the organization file Form 8892? 10 bid the organization received a contribution of casts, boats, airplane, or other velocies, did the organization file Form 899 as required? 17 bid the organization make any taxable distributions under section 998(2) of the organization file Form 899 as required? 18 bid the organization make any taxable distributions under section 998(2) of the organization file Form 899 as required? 19 bid the organization make any taxable distributions under section 998(2) of the organization fil	b				2b	X	
b If "Yes," has it flied a Form 990-T for this year/ If "No." to line 3b, provide an explanation in Schedule O 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 X 5b If "Yes," enter the name of the foreign country. ▶ 5ee instructions for filing requirements for Form TD F 90.22.1, Report of Foreign Bank and Financial Accounts. 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a V See instructions for filing requirements for Form TD F 90.22.1, Report of Foreign Bank and Financial Accounts. 5b If "Yes," to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 5c If "Yes," to line 5a or 5b, did the organization file Form 88661? 6b Dose the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax eductibles as charitable contributions? 6c V Pres," did the organization include with every solicitation an express statement that such contributions or gifts were not tax acductibles a scharitable contributions? 7c Organizations that may receive a payment in excess of \$15 made party is a contribution and party for goods and services provided to the payor? 7a V Pres," indicate the number of Forms 8282 filed during the year 7b If "Yes," indicate the number of Forms 8282 filed during the year 7c Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7r Did the organization received a contribution of qualified intellectual property, did the organization file a Form 1098 Cr 9 to the organization received a contribution of crass, boats, singilarization file form 899 sequined? 9 Sponsoring organizations maintaining denor advised funds and section 509(a)3 supporting organizations			s)	*********			
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financial account in a foreign country (such as a bank account, securities account, or other financial account)? b If "Yes," enter the name of the foreign country: See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5b LO3 any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b LX c If "Yes," to line 5a or 5b, did the organization file Form 8886-T? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that twe not tax deductible as charitable contributions? 6a X b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible as charitable contributions under section 170(c). a Did the organization stat may receive deductible contributions under section 170(c). b If "Yes," did the organization notify the donor of the value of the goods or services provided? C Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year b Did the organization received any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7c X If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7n If the organization received a contribution of qualified intellectual property, did the organization file Form 108-C? 7n Spensoring organizations maintaining doen advised funds and services business holdings at any time during the year? 9n Spensoring organization maintaining doen advised funds and services business holdings at any time during the year? 9n Spensoring organization maintaining doen advised funds.					3b	X	
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Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

1a Enter the number of voting members of the governing body at the end of the tax year tax 14		Check if Schedule O contains a response or note to any line in this Part VI			X
there are material differences in uniting notes of the governing body at the end of the tax year tiff there are material differences in uniting night among members of the governing body, or the governing body deligated throat authority to an excutive committee or similar committee, englain in Schedule 0. b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee? 2	Sec	tion A. Governing Body and Management			
the there are material differences in voting rights among members of the governing body of letting through the provided broad submitty for an excusive committee, explain in Studied in the 1st above, who are independent to the provided broad submitty of the control of the con				Yes	No
body delegated broad authority to an executive committee or similar committee, explain in Schedule 0. b Effort the number of voting members included in line 1a, above, who are independent Did any officer, director, inustee, or key employee have a family relationship or a business relationship with any other officer, director, inustee, or key employees to a management duries customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 3	1a	Enter the number of voting members of the governing body at the end of the tax year	l.		
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9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) 10a Did the organization have local chapters, branches, or affiliates? 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 12a Did the organization have a written conflict of interest policy? If "No." go to line 13 12a X 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b X 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c X 13 Did the organization have a written document retention and destruction policy? 14 Did the organization have a written document retention and destruction policy? 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15a X 15b Other officers or key employees of the organization 15c Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?					
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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.

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

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

(A) Name and Title	(B) Average hours per week	box	, unle	Posi check i ess per nd a di	more rson	than	th an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) PETER BOETTKE TRUSTEE	1.00	x						0.	0	0
(2) ROGER REAM	10.00	<u> </u>		\square		H	-	0.	0.	0.
CHAIRMAN TRUSTEE	10.00	X						0.	0.	0.
(3) STEPHEN HENNESSY	1.00	Α	-	\vdash		-	-	0.	0.	0.
TRUSTEE	1.00	X						0.	0.	0.
(4) CHRIS TALLEY	1.00				\neg	\vdash				
TRUSTEE		X						0.	0.	0.
(5) INGRID GREGG	1.00				\neg					
SECRETARY, TRUSTEE		Х		X				0.	0.	0.
(6) DON SMITH	1.00									
TRUSTEE		Х						0.	0.	0.
(7) MICHAEL YASHKO	2.00									
TREASURER, TRUSTEE		Х		X				0.	0.	0.
(8) HAROLD BOWEN III	1.00									
TRUSTEE		Х						0.	0.	0.
(9) JEFF GIESEA	1.00								_	_
TRUSTEE	4 00	Х		4	_			0.	0.	0.
(10) HARRY LANGENBERG	1.00									
TRUSTEE	1 00	X	\dashv	\dashv	_			0.	0.	0.
(11) KRIS ALAN MAUREN TRUSTEE	1.00	3,			1				_	0
(12) SARAH ATKINS	1.00	X	\dashv	+	\dashv	\dashv		0.	0.	0.
TRUSTEE	1.00	x						0.	0.	0.
(13) JOHN WESTERFIELD	1.00	^	\dashv	+	\dashv	\dashv		0.	0.	0.
TRUSTEE	1.00	x						0.	0.	0.
(14) WAYNE OLSON	40.00		\dashv	+	\dashv	\dashv	-	- 0.	- 0.	
EXECUTIVE DIRECTOR		x				- 1		52,500.	0.	0.
(15) CARL OBERG	40.00		\dashv	\top	十	\dashv		52,000		
CHIEF OPERATING OFFICER					x			100,250.	0.	0.
(16) LARRY REED	40.00	\neg		\top		\neg				
PRESIDENT						Х		160,811.	0.	0.
				T	T	T				

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Form 990 (2013)

Pa	rt VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	yees	, an	d Hi	ighe	st C	ompensated Employe	es (continued)				
	(A) Name and title	(B) Average hours per week	Position (do not check more than or box, unless person is both officer and a director/truste			than	one h an	(D) Reportable compensation from	(E) Reportable compensation from related	on d	aı	(F) stimat mount other	t of r	
		(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organization (W-2/1099-MIS	2017 J. 1888 F. 1888 J. L. 1888 J. 1888		ganiza nd rela	ne ition ited
·		illey	luc	lns	Ю	Key	High	Fo						
S											_			
											\dashv			
					-			-						-
-								1					- 2	
										* ***	\top			
									313,561.		0.			0
С	Sub-total Total from continuation sheets to Part VII Total (add lines 1b and 1c)	, Section A)	•	313,561.		0.			0.
2	Total number of individuals (including but no compensation from the organization							o re		000 of reportable	е			2
3	Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for su									7. · · · · · · · · · · · · · · · · · · ·	9		Yes	No X
4	For any individual listed on line 1a, is the sur and related organizations greater than \$150	m of reportable	е со	mpe	nsat	tion	and	othe		ne organization		3	х	A
5	Did any person listed on line 1a receive or a rendered to the organization? If "Yes," comp	ccrue compen	sati	on fr	om a	any	unre					5		Х
Sec 1	tion B. Independent Contractors Complete this table for your five highest cor	nnensated ind	ene	nder	nt co	ntra	ector	s th	at received more than \$	100 000 of com	nensai	tion f	rom	
	the organization. Report compensation for the													
	(A) Name and business a	address	NO	NE				_	(B) Description of se	rvices	Cor	(C mper	s) nsation	n
								+						
								+						
-								+						
								1						
2	Total number of independent contractors (in \$100,000 of compensation from the organization from the organization)		t lim	nited	to th	hose 0	e list	ed a	above) who received mo	re than				

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Form 990 (2013)

Pa	art V	III Statement of Reve	nue			•		
		Check if Schedule O cor	ntains a response	e or note to any lin	e in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue exclude from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 :	a Federated campaigns	1a					
Gra		b Membership dues						
Am	(c Fundraising events	1c					
ar Figure	(d Related organizations						
S, E	(e Government grants (contribu	tions) 1e					
it is	1	f All other contributions, gifts, gran	nts, and					
草		similar amounts not included abo	ove 1f	4,170,925.				
dat	9	g Noncash contributions included in line	s 1a-1f: \$	1,343,278.				
<u>8</u> 0		h Total. Add lines 1a-1f	*********	▶	4,170,925.			
				Business Code				
ce	2 8	a						
er.	l t	0						
n S	۰ ا							
Rev	(d b						
Program Service Revenue	€	•						
а.		All other program service reve						
	9	Total. Add lines 2a-2f						
	3	Investment income (including						
		other similar amounts)			191,468.			191,468
	4	Income from investment of ta						
	5	Royalties		>				
			(i) Real	(ii) Personal				
	9000000	Gross rents						
		Less: rental expenses						
		Rental income or (loss)						
		Net rental income or (loss)	A CONTRACTOR OF THE PARTY OF TH		authorities de de la company de la	NVCC10-20-210-20-20-20-20-20-20-20-20-20-20-20-20-20		
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
- 1		assets other than inventory	3,143,191.					
	D	Less: cost or other basis	3 002 224					
		and sales expenses	3,082,224.					
1		Gain or (loss)			60,967.			60 067
İ		Net gain or (loss)		D	80,987.			60,967.
nue	O a	Gross income from fundraising including \$	of					
še		contributions reported on line						
œ.		Part IV, line 18						
Other Revenu	b	Less: direct expenses						
0		Net income or (loss) from fund						
-		Gross income from gaming ac					4455955554	
		Part IV, line 19						
	b	Less: direct expenses	b					
		Net income or (loss) from gam		>		SM-010 EXECUTATION 22 DU		
1		Gross sales of inventory, less	5579					
		and allowances						
	b	Less: cost of goods sold						
		Net income or (loss) from sales					SATURDA MESANCIAN (ASCIDE SEQUENCE	
Γ		Miscellaneous Revenue		Business Code				
	11 a	S-CORP K-1		310000	270,250.	THE RESERVE OF THE PERSON OF T	270,250.	
	b	ROYALTY RECEIPTS		900099	31,808.	31,808.		
	С	SPECIAL EVENT INCOME	34_0 0000555	900099	20,000.	20,000.		
	d	All other revenue		900099	29,290.	29,290.		
	е	T-1-1 A LIP - 44 44 1	•	>	351,348.			
	12	Total revenue. See instructions.		▶ □	4,774,708.	81,098.	270,250.	252,435.
332009 10-29-1	13							Form 990 (2013)

Form 990 (2013) FOUNDATION FOR Part IX Statement of Functional Expenses

Sec	tion 501(c)(3) and 501(c)(4) organizations must com	plete all columns. All ot	her organizations must co	omplete column (A).	
_	Check if Schedule O contains a respon				X
	not include amounts reported on lines 6b, , 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	3				
	organizations in the United States. See Part IV, line 21	20,083.	20,083.		
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	212 560	022 070	22 206	46 006
****	trustees, and key employees	313,560.	233,278.	33,296.	46,986
6	Compensation not included above, to disqualified		a		
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	604 404	440 722	CA 100	00 500
7	Other salaries and wages	604,494.	449,722.	64,190.	90,582
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	100 200	140 550	2 710	45 001
9	Other employee benefits	189,289.	140,550.	3,718.	45,021. 11,706.
10	Payroll taxes	198,418.	57,590.	129,122.	11,/06
11	Fees for services (non-employees):				
а					
b	_				
C	Accounting				
d					
е	Company of the contract of the				
f	J				
g		F07 040	402 040	10 240	70 065
100.00	column (A) amount, list line 11g expenses on Sch O.)	507,049.	423,842.	10,342.	72,865. 19,459.
12	Advertising and promotion	66,312.	46,508.	345.	19,459.
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy	00 005	00 160		F03
17	Travel	89,295.	88,169.	543.	583.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates	66,991.	49,742.	7 111	10 125
22	Depreciation, depletion, and amortization	38,980.	28,942.	7,114.	10,135.
23	Other expenses. Itemize expenses not covered	30,300.	20,942.	4,140.	3,030.
24	above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A)				
	amount, list line 24e expenses on Schedule 0.)	104 054	206 222		7 - 7 - 7
а	SUPPLIES	404,864.	396,999.	1,353.	6,512.
b	OUTSIDE SERVICES	377,049.	273,924.	4,878.	98,247.
С	SEMINAR STUDENTS	297,184.	297,184.	10 010	00 000
d	RENTAL & LEASE EXPENSE	158,127.	124,407.	12,840.	20,880.
	All other expenses SEE SCH O	492,260.	311,710.	93,808.	86,742.
25	Total functional expenses. Add lines 1 through 24e	3,823,955.	2,942,650.	365,689.	515,616.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

Part)	Balance Sheet			
	Check if Schedule O contains a response or note to any line in this Part X			L
		(A) Beginning of year		(B) End of year
-	Cash - non-interest-bearing	272,843.		356,709
2		107,566.	2	580,191
3		34,513.	3	566,042
4			4	
5			No.	
	trustees, key employees, and highest compensated employees. Complete			
	Part II of Schedule L		5	
6				
	section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
	employers and sponsoring organizations of section 501(c)(9) voluntary			
2	employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
Since 7			7	
8		15,316.	8	64,188
9		103,166.	9	322,825
	a Land, buildings, and equipment: cost or other			
"	basis. Complete Part VI of Schedule D 10a 2,209,710.			
	b Less: accumulated depreciation 10b 1,949,335.	232,360.	10c	260,375.
11	West opening the state of the s	3,644,593.	11	3,072,993
12		1,526,000.	12	1,774,000
13			13	277727000
14			14	
15		325,894.	15	593,860.
16		6,262,251.	16	7,591,183
17		123,536.	17	278,131.
18		120,000	18	2707252
19		100,188.	19	100,188.
20		100/1000	20	100/100
21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
			21	
-	key employees, highest compensated employees, and disqualified persons.			
22	Complete Part II of Schedule L		22	
23	Secured mortgages and notes payable to unrelated third parties		23	
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities (including federal income tax, payables to related third		24	
23	A STATE OF THE PARTY OF THE PAR			
	parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	318,839.	25	228,279.
26	Total liabilities. Add lines 17 through 25	542,563.	26	606,598.
20	Organizations that follow SFAS 117 (ASC 958), check here	342,303.	20	000,330.
	complete lines 27 through 29, and lines 33 and 34.			
27		4,022,853.	27	4,178,586.
28	Unrestricted net assets	201,531.	28	1,296,643.
29	Temporarily restricted net assets Permanently restricted net assets	1,495,304.	29	1,509,356.
23	Organizations that do not follow SFAS 117 (ASC 958), check here	1,400,004.	29	1,303,330.
	and complete lines 30 through 34.			
20	5 2 2 2 2 2 3 3 3 4 4 5 5 5 5 5 5 5 5		20	
30	Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund		30	
27 28 29 30 31 32	Retained earnings, endowment, accumulated income, or other funds		31	
33		5,719,688.	32	6,984,585.
	Total net assets or fund balances	6,262,251.		7,591,183.
34	Total liabilities and net assets/fund balances	0,202,231.	34	1,331,103.

	m 990 (2013) FOUNDATION FOR ECONOMIC EDUCATION, INC.	**_**	***	Pa	age 12
Pa	art XI Reconciliation of Net Assets			8911	
	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	4,77		
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,82		
3	Revenue less expenses. Subtract line 2 from line 1	3			753.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	5,71	9,6	88.
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	31	4,1	45.
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,		_		
-	column (B))	10	6,98	4,5	86.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule				
2a	garante de la constant de la constan		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	l on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the				
	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 Sche			126	
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	gle Audit			77
120	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 requi				
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
			Form	990 ((2013)

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

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

4947(a)(1) nonexempt charitable trust.

➤ Attach to Form 990 or Form 990-EZ.

▶ 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

Name of the organization FOUNDATION FOR ECONOMIC EDUCATION

Employer identification number

			FOUNDA	TION FOR ECO	NOMIC	EDUCA	MOITA	, INC	.		**_*****	
Pa	rt l	Reason	for Public Cha	arity Status (All organi	izations m	ust comple	ete this pa	rt.) See ins	structions	¥		
The	orgar	10. 10.90		n because it is: (For lines								
1				es, or association of chu			and the second second		i).			
2				170(b)(1)(A)(ii). (Attach S					•			
3				pital service organization			170(b)(1)(A)(iii).				
4				operated in conjunction					0(b)(1)(A)(iii). Ente	r the hospital's name	e.
		city, and sta							- (-)(-)(-)(,.		-,
5				e benefit of a college or u	university o	owned or o	perated b	v a govern	mental ur	nit descri	bed in	
150			0(b)(1)(A)(iv). (Comp				p	, - 3		000011		
6				ment or governmental un	it describe	nd in sacti	on 170/h)/	(1)(A)(v)				
	X		5 50	ceives a substantial part			170 50		or from th	o gonoro	I public described in	
•			(b)(1)(A)(vi). (Compl		or its sup	port nom a	governin	entar unit	or morn un	e genera	i public described ii	
8				section 170(b)(1)(A)(vi).	(Complete	Dort II \						
9				ceives: (1) more than 33			from cont	ributiono r	namharah	in face	and arose receipts f	rom
-				unctions - subject to cert								
				taxable income (less sec							-	
			509(a)(2). (Complet			ممر الحالات ال	1311103362	acquired I	by the org	ariization	i aitei Julie 30, 1973	J.
10				operated exclusively to te	et for nub	lic safety	See section	on 500(a)/	4)			
11				perated exclusively for the properated exclusively for the properated exclusively for the properated exclusively for the properated exclusively to the prope						n out the	a nurnosas of one o	
				zations described in sect								1
				g organization and comp				2). Oee 30	ction 509	(a)(o). O	leck tile box tilat	
		a Type				inctionally		,	d 🔲 Tvr	ae III - No	n-functionally integr	rated
e				at the organization is not								
				than one or more publicl								•
f		If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III										
		supporting organization, check this box										
g				organization accepted ar								
				directly controls, either a							Yes Yes	No
				supported organization?					The second secon			
								11g(ii)				
		(iii) A 35%	controlled entity of a	a person described in (i)	or (ii) abov	e?					11g(iii)	
h				about the supported or								
(i) N	Vame	of supported	(ii) EIN	(iii) Type of organization	(iv) Is the o	organization	(v) Did yo	u notify the	(vi) ls		(vii) Amount of mone	tarv
100		nization	1	(described on lines 1-9		sted in your		ion in col.	organizati (i) organiz	ed in the	support	,
				above or IRC section (see instructions))	governing	document?	(i) of you	r support?	U.S	.?	2000	
				(see matraotions))	Yes	No	Yes	No	Yes	No		
				1								
				1								115
											m a von dannen samme	
otal								1				

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

Schedule A (Form 990 or 990-EZ) 2013

332021 09-25-13

Schedule A (Form 990 or 990-EZ) 2013 FOUNDATION FOR ECONOMIC EDUCATION, INC. **-***** Page 2

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

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

Se	ction A. Public Support	1.00					
Cal	endar 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.")	2,430,003.	3,706,000.	2,321,879.	2,352,336.	4,175,576.	14,985,794.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to		1				
	or expended on its behalf						
3	The value of services or facilities				1000		W 3331 11
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	2,430,003.	3,706,000.	2,321,879.	2,352,336.	4,175,576.	14,985,794.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included				A MALSE CHE		
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
	Public support. Subtract line 5 from line 4.						14,985,794.
Se	ction B. Total Support						
Cale	endar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4	2,430,003.	3,706,000.	2,321,879.	2,352,336.	4,175,576.	14,985,794.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	130,968.	102,168.	111,198.	165,225.	164,031.	673,590.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on	<47,227.	> 24,654.	150,107.	680,726.	452,274.	1,260,534.
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV.)						
	Total support. Add lines 7 through 10						16,919,918.
	Gross receipts from related activities,					12	
13	First five years. If the Form 990 is for		first, second, third	d, fourth, or fifth ta	x year as a sectior	1 501(c)(3)	
Sec	organization, check this box and stop ction C. Computation of Publi	here C Support Per	centage				<u> </u>
_	Public support percentage for 2013 (li			olumn (fl)		14	88.57 %
	Public support percentage from 2012					15	88.42 %
	33 1/3% support test - 2013. If the o						
	stop here. The organization qualifies						
b	33 1/3% support test - 2012. If the o						
	and stop here. The organization quali						
17a	10% -facts-and-circumstances test						
	and if the organization meets the "fact						
	meets the "facts-and-circumstances"						
	10% -facts-and-circumstances test						
	more, and if the organization meets th						anword Alli
	organization meets the "facts-and-circ						
	Private foundation. If the organization						
						dule A (Form 990 c	

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.)

Se	ction A. Public Support						
Cal	endar 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.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus- iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons				1		
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						
c	Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6.)				Malacha Lincolna		
Sec	tion B. Total Support						
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						
	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses			1		1	
	acquired after June 30, 1975						
11	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
	Other income. Do not include gain						
	or loss from the sale of capital			1	1		
13	assets (Explain in Part IV.)						
	First five years. If the Form 990 is for	the organization's	first second third	fourth or fifth tax	v vear as a section	501(c)(3) organiza	tion
	check this box and stop here				c year as a section	01 001 0 0 0 0	miori,
	tion C. Computation of Publi						
	Public support percentage for 2013 (lin			nlumn (fl)		15	%
	Public support percentage from 2012		0.00			16	%
	tion D. Computation of Inves			***************************************		10	70
	Investment income percentage for 201			13 column (fl)		17	%
	Investment income percentage from 2			70, 001017117 (1))		18	%
	33 1/3% support tests - 2013. If the o		The contract of the second				
	more than 33 1/3%, check this box an						
	33 1/3% support tests - 2012. If the o						
	line 18 is not more than 33 1/3%, chec						- Incommond
	Private foundation. If the organization						
	2 00 25 12	a.a riot dilock a bi	on on mio 17, 13a,	or rob, origon tris	DON GITU SEE ITISU		

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

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

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.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

FOUNDATION FOR ECONOMIC EDUCATION TNC Employer identification number **_***

Pa	rt I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds	or Accounts.Complete if the
	organization answered "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 donor advisors in w	vriting that the assets held in donor advised	d funds
	are the organization's property, subject to the organization's e		
6	Did the organization inform all grantees, donors, and donor ad		
	for charitable purposes and not for the benefit of the donor or		•
Pa	rt II Conservation Easements. Complete if the orga	anization answered "Yes" to Form 990, Par	t IV, line 7.
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).	
	Preservation of land for public use (e.g., recreation or ed	ducation) Preservation of an histo	rically important land area
	Protection of natural habitat	Preservation of a certific	ed historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifie	ed conservation contribution in the form of	a conservation easement on the last
	day of the tax year.		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic structure		
d	Number of conservation easements included in (c) acquired af		
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rele		rganization during the tax
	year ▶		ORT 00 P. M.
4	Number of states where property subject to conservation ease	ement is located >	
5	Does the organization have a written policy regarding the period	odic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it h	nolds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, a	nd enforcing conservation easements duri	ng the year >
7	Amount of expenses incurred in monitoring, inspecting, and er	nforcing conservation easements during the	e year ▶ \$
8	Does each conservation easement reported on line 2(d) above	satisfy the requirements of section 170(h)	(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation	n easements in its revenue and expense st	atement, and balance sheet, and
	include, if applicable, the text of the footnote to the organization	on's financial statements that describes the	organization's accounting for
_	conservation easements.		
Pai	t III Organizations Maintaining Collections of		er Similar Assets.
W1 - 624	Complete if the organization answered "Yes" to Form 99	The state of the s	
1a	If the organization elected, as permitted under SFAS 116 (ASC		
	historical treasures, or other similar assets held for public exhib		e of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that describe		
b	If the organization elected, as permitted under SFAS 116 (ASC		
	treasures, or other similar assets held for public exhibition, edu	cation, or research in furtherance of public	service, provide the following amounts
	relating to these items:		
	(i) Revenues included in Form 990, Part VIII, line 1		
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, historical treas	and the figure from the contract of the contra	in, provide
	the following amounts required to be reported under SFAS 116		
а	Revenues included in Form 990, Part VIII, line 1		• \$
b	Assets included in Form 990, Part X		▶ \$

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

Schedule D (Form 990) 2013

		TION FOR EC	and the second	CONTRACTOR DESCRIPTION OF THE PERSON OF THE			****	Page 2
Pa	rt III Organizations Maintaining							
3	Using the organization's acquisition, access	sion, and other record	ds, check any of t	ne following tha	t are a significant	use of its	collection	items
	(check all that apply):							
а	Public exhibition	d		xchange progra				
b		е	Other					
С	Preservation for future generations							
4	Provide a description of the organization's of	collections and explain	n how they furthe	r the organization	on's exempt purp	ose in Par	t XIII.	
5	During the year, did the organization solicit					_	-	
	to be sold to raise funds rather than to be n						Yes	No
Pa	rt IV Escrow and Custodial Arrar		ete if the organiza	tion answered "	Yes" to Form 990), Part IV, I	ine 9, or	
	reported an amount on Form 990, Pa							
1a	Is the organization an agent, trustee, custoo						7	77
	on Form 990, Part X?						Yes	X No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing table:					
							Amount	205
С	Beginning balance						1,495	
	Additions during the year						14	,051.
	Distributions during the year						1 500	256
f	Ending balance				1f		1,509	
	Did the organization include an amount on F						Yes	X No
	If "Yes," explain the arrangement in Part XIII T V Endowment Funds. Complete							
1 di	Endowment Lunds. Complete	(a) Current year		(c) Two years		oare back	(e) Four ye	are back
1a	Reginning of year balance		(b) Prior year	(c) Two years	back (a) Tillee y	ears back	(e) rour ye	ars Dack
h	Beginning of year balance Contributions			+				
0	Net investment earnings, gains, and losses							
	Grants or scholarships			+				
	Other expenditures for facilities		·	 				
·	and programs			1				
f	Administrative expenses			 				
	End of year balance			 				
2	Provide the estimated percentage of the cur		e (line 1a. column	(a)) held as:				
а	Board designated or quasi-endowment		%	(4))				
	Permanent endowment ▶	%	-					
С	Temporarily restricted endowment ▶	%						
	The percentages in lines 2a, 2b, and 2c shou	ıld equal 100%.						
3a	Are there endowment funds not in the posse	ssion of the organiza	tion that are held	and administer	ed for the organiz	ation		
	by:						Ye	s No
	(i) unrelated organizations						3a(i)	
	(ii) related organizations						3a(ii)	
b	If "Yes" to 3a(ii), are the related organizations	s listed as required or	Schedule R?				3b	
	Describe in Part XIII the intended uses of the		vment funds.					
Par	t VI Land, Buildings, and Equipm							
	Complete if the organization answered							
	Description of property	(a) Cost or oth	1 ' '	t or other	(c) Accumulated	d ((d) Book va	alue
		basis (investme	ent) basis	(other)	depreciation			100
	Land			9,122.				122.
b	Buildings			27,229.	042.55	70	527,	
	Leasehold improvements			27,340.	843,57			239.>
	Equipment			33,331.	672,87			455.
	Other			52,688.	432,88		129,	
Total.	Add lines 1a through 1e. (Column (d) must ed	qual Form 990, Part X	, column (B), line	10(c).)			260,	3/5.

Schedule D (Form 990) 2013

Schedule D (Form 990) 2013

Sch	edule D (Form 990) 2013 FOUNDATION FOR ECONOMIC	EDUCATION, INC.	**_	***** Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Stat	5. 7 0	er Returr	٦.
	Complete if the organization answered "Yes" to Form 990, Part IV, line			
1	Total revenue, gains, and other support per audited financial statements		1	4,774,708.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 1		
а	Net unrealized gains on investments			
b	Donated services and use of facilities			
С	Recoveries of prior year grants			
d	, , , , , , , , , , , , , , , , , , , ,	2d		0
е	9			4 774 700
3	Subtract line 2e from line 1		3	4,774,708.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	f I		
a	Investment expenses not included on Form 990, Part VIII, line 7b			
b	Other (Describe in Part XIII.)	4b	3658	0
_ C	Add lines 4a and 4b			4,774,708.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			
Fai	rt XIII Reconciliation of Expenses per Audited Financial Sta		per Retu	m.
	Complete if the organization answered "Yes" to Form 990, Part IV, line			3,823,956.
1	Total expenses and losses per audited financial statements		1	3,043,930.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1.0.1		
a	Donated services and use of facilities			
b	Prior year adjustments		-	
C C	Other losses Other (Describe in Part XIII.)		2000 to 1	
e			- 0	Λ.
3	Add lines 2a through 2d			3,823,956.
4	Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1:	***************************************		3,023,330.
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)			
	Add lines 4a and 4b		4c	0.
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			3,823,956.
	t XIII Supplemental Information.			-,,
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4;	Part IV. lines 1b and 2b: Part V.	line 4: Part	X. line 2: Part XI.
	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any			
PAF	T IV, LINE 1B:			
THE	FOUNDATION FOR ECONOMIC EDUCATION HOLD	S SEVERAL LONG T	ERM	
INV	ESTMENTS RECEIVED FROM CONTRIBUTIONS AN	D GRANTS SPECIFI	ED BY	THE DONORS
го	BE USED FOR ENDOWMENTS.			

SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Governments, and Individuals in the United States

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

▶ Attach to Form 990.

Open to Public

Inspection

OMB No. 1545-0047

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

Part Secretar Information occurs and construction of counts and control and counts and counts and observations because the grants or assistance, the grants or assistance, the grants or assistance, the grants or assistance, and the selection of the grants or assistance and the grants or assistance or assis		FOUNDATION FOR ECO	ECONOMIC EDUCA	EDUCATION, INC.				Employer identification number **-**
Does the organization records to say assistance? Describe in Part IV the organization's gravements and organization to the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of reant tunis in the United States. Ill Grant the United States. In Grant the United States. Ill Grant the Unite		ints and Assistance						
Describe in Part Wite organization's procedures for monitoring the use of grant funds in the United States. If	Does the organization maintain recontrieria used to award the grants or	ords to substantiate the	e amount of the grants	s or assistance, the	grantees' eligibilit	y for the grants or ass	sistance, and the selec	[; §
Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part repleient that received more than \$5,000. Part It can be duplicated if additional space is needed. (a) Name and address of organization or government of organization (b) EN (c) EN (SCI	's procedures for moni	toring the use of grant	funds in the United	d States.			se
(a) Name and address of organization (b) EIN (f) IRO section of cash grant and address of organization (box, organizations) (f) IRO section of cash grant assistance		ce to Governments and	d Organizations in the	e United States. C	omplete if the orga	anization answered ")	res" to Form 990, Part	IV, line 21, for any
TRANCTSCO, CA 54103 TRANCTSCO, CA 54103 TRANCTSCO, CA 54103 THE TOTAL Number of section 501(c)(3) and government organizations listed in the line 1 table The Total number of other coganizations listed in the line 1 table	1 (a) Name and address of organizat or government	ion (b) EIN		(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, EMV, appraisal, other)	(g) Description of non-cash assistance	
Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.	REET			10 000	0			
Enter total number of section 501(c)(3) and government organizations listed in the line 1 table								AVAILABLE UPON KEQUEST
Enter total number of section 501(c)(3) and government organizations listed in the line 1 table								
Enter total number of section 501(c)(3) and government organizations listed in the line 1 table								
Enter total number of section 501(c)(3) and government organizations listed in the line 1 table								
Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table								
Enter total number of other organizations listed in the line 1 table		s)(3) and government or	ganizations listed in th	100				A
		ations listed in the line						A

Schedule I (Form 990) (2013)

FOUNDATION FOR ECONOMIC EDUCATION, INC. Schedule I (Form 990) (2013)

Page 2

Part III

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.

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

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

Schedule I (Form 990) (2013)

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

See separate instructions.

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

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

Department of the Treasury

Internal Revenue Service

FOUNDATION FOR ECONOMIC EDUCATION, INC.

Employer identification number **_*****

P	art I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or		1977	
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?	. 2		eta eta e
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
Ŭ	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	Form 990 of other organizations Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a	Na Bellinia	X
	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	-	\neg	X
	Participate in, or receive payment from, an equity-based compensation arrangement?			X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:	Is.		
а	The organization?	5a		X
b	Any related organization?	5b		X
	If "Yes" to line 5a or 5b, describe in Part III.			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
a	The organization?	6a		<u>X</u>
b	Any related organization?	6b		X
	If "Yes" to line 6a or 6b, describe in Part III.			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			
	not described in lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2013

FOUNDATION FOR ECONOMIC EDUCATION, INC. **-****

Schedule J (Form 990) 2013

Page 2

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of W-2 and/or 1099-MISC compensation	-2 and/or 1099-MIS	3C compensation	(C) Retirement and	(D) Nontavable	(E) Total of only	(E) Company
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation		(D)(l)(B)	reported as deferred in prior Form 990
(1) LARRY REED	3	160,81	0	0.	0	0.	160,811.	0
PRESIDENT	=	0	0	0.	0	0	0	0
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Schedule J (Form 990) 2013

Schedule J (Form 990) 2013

SCHEDULE M (Form 990)

Department of the Treasury

Name of the organization

Internal Revenue Service

Noncash Contributions

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

► Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990 Employer identification number

OMB No. 1545-0047

Open to Public Inspection

FOUNDATION FOR ECONOMIC EDUCATION, **_*** INC. Part I Types of Property (a) (b) (d) (c) Check if Number of Noncash contribution Method of determining applicable contributions or amounts reported on noncash contribution amounts tems contributed Form 990, Part VIII, line 1g Art - Works of art

Art - Historical treasures 2 Art - Fractional interests 3 Books and publications Clothing and household goods Cars and other vehicles 6 Boats and planes Intellectual property 8 Securities - Publicly traded X 53,807. FAIR MARKET VALUE Securities - Closely held stock 10 Securities - Partnership, LLC, or trust interests Securities - Miscellaneous 12 13 Qualified conservation contribution -Historic structures Qualified conservation contribution - Other 15 Real estate - Residential Real estate - Commercial 16 Real estate - Other 17 Collectibles 18 19 Food inventory 20 Drugs and medical supplies Taxidermy 21 Historical artifacts 22 Scientific specimens 23 24 Archeological artifacts (BITCOINS 991,920. FAIR MARKET VALUE X 25 Other -X 297,551. FAIR MARKET 26 Other 27 Other 28 Other

Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement 29

30a	During the year, did the organization receive by contribution any property reported in Part I, lines 1 - 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for			SALES SERVICES
	the entire holding period?	30a	X	
b	If "Yes," describe the arrangement in Part II.			Č
31	Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	31	X	
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	32a	х	
b	If "Yes," describe in Part II.			
33	If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.			P. OPPLESSED

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

Schedule M (Form 990) (2013)

Yes No

Schedule M	(Form 990) (2013)	FOUNDATION	FOR	ECONOMIC	EDUCATION	, INC.	**_****	Page 2
Part II	Supplemental is reporting in Part this part for any ac	Information. Production. In column (b), the number distributional information.	vide the nber of c	information requir contributions, the	red by Part I, lines 30 number of items rece	b, 32b, and 3 eived, or a co	33, and whether the organiz mbination of both. Also con	ation nplete

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Schedule M (Form 990) (2013)

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ complete to provide information for responses to specific questions on

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.

2013

OMB No. 1545-0047

Open to Public

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

Name of the organization Employer identification number **_**** FOUNDATION FOR ECONOMIC EDUCATION, INC FORM 990, PART VI, SECTION B, LINE 11: COPY IS PROVIDED TO ORGANIZATION AND GOVERNING BOARD. FORM 990, PART VI, SECTION B, LINE 15: REVIEWED, DELIBERATED AND DECIDED BY THE BOARD OF TRUSTEES. FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST. FORM 990, PART IX, LINE 11G, OTHER FEES: STATUTORY FEES: PROGRAM SERVICE EXPENSES 272. MANAGEMENT AND GENERAL EXPENSES 39. FUNDRAISING EXPENSES 55. TOTAL EXPENSES 366. PROFESSIONAL FEES: PROGRAM SERVICE EXPENSES 423,570. MANAGEMENT AND GENERAL EXPENSES 10,303. FUNDRAISING EXPENSES 72,810. TOTAL EXPENSES 506,683. TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A 507,049.

FORM 990, PART IX, LINE 24E, ALL OTHER FUNCTIONAL EXPENSES:

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 332211 09-04-13

Schedule O (Form 990 or 990-EZ) (2013)

Schedule O (Form 990 or 990-EZ) (2013) Name of the organization FOUNDATION FOR ECONOMIC EDUCATION, II	Employer identification number **-*********************************
POSTAGE AND DELIVERY:	
PROGRAM SERVICE EXPENSES	83,739
MANAGEMENT AND GENERAL EXPENSES	2,832.
FUNDRAISING EXPENSES	53,730
TOTAL EXPENSES	140,301.
INCOME TAXES:	
PROGRAM SERVICE EXPENSES	0.
MANAGEMENT AND GENERAL EXPENSES	69,949.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	69,949.
INTERNSHIPS:	
PROGRAM SERVICE EXPENSES	67,414.
MANAGEMENT AND GENERAL EXPENSES	469.
FUNDRAISING EXPENSES	1,093.
TOTAL EXPENSES	68,976.
MAINTENANCE AND REPAIRS:	
PROGRAM SERVICE EXPENSES	48,216.
MANAGEMENT AND GENERAL EXPENSES	6,896.
FUNDRAISING EXPENSES	9,825.
TOTAL EXPENSES	64,937.
UTILITIES:	
PROGRAM SERVICE EXPENSES	43,246.
MANAGEMENT AND GENERAL EXPENSES	6,185.
	8,812.
FUNDRAISING EXPENSES 332212 09-04-13 34	Schedule O (Form 990 or 9

Schedule O (Form 990 or 990-EZ) (2013) Name of the organization	Page 2 Employer identification number
FOUNDATION FOR ECONOMIC EDUCATION	
TOTAL EXPENSES	58,243.
TELEPHONE:	
PROGRAM SERVICE EXPENSES	22,348.
MANAGEMENT AND GENERAL EXPENSES	2,589.
FUNDRAISING EXPENSES	4,781.
TOTAL EXPENSES	29,718.
CREDIT CARD AND OTHER FEES:	
PROGRAM SERVICE EXPENSES	10,147.
MANAGEMENT AND GENERAL EXPENSES	1,408.
FUNDRAISING EXPENSES	2,139.
TOTAL EXPENSES	13,694.
BANK SERVICE CHARGES:	
PROGRAM SERVICE EXPENSES	9,034.
MANAGEMENT AND GENERAL EXPENSES	1,291.
FUNDRAISING EXPENSES	1,839.
TOTAL EXPENSES	12,164.
REAL ESTATE TAXES:	
PROGRAM SERVICE EXPENSES	7,468.
MANAGEMENT AND GENERAL EXPENSES	1,068.
FUNDRAISING EXPENSES	1,522.
TOTAL EXPENSES	10,058.
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EMPLOYEE TRAINING:	
PROGRAM SERVICE EXPENSES	7,025.
332212 09-04-13 35	Schedule O (Form 990 or 990-EZ) (2013)

Schedule O (Form 990 or 990-EZ) (2013) Name of the organization	Page : Employer identification number
FOUNDATION FOR ECONOMIC EDUCATION, INC.	**_****
MANAGEMENT AND GENERAL EXPENSES	555.
FUNDRAISING EXPENSES	1,360.
TOTAL EXPENSES	8,940.
SMALL GIFTS & AWARDS:	
PROGRAM SERVICE EXPENSES	8,580.
MANAGEMENT AND GENERAL EXPENSES	33.
FUNDRAISING EXPENSES	308.
TOTAL EXPENSES	8,921.
DUES & SUBSCRIPTIONS:	
PROGRAM SERVICE EXPENSES	4,493.
MANAGEMENT AND GENERAL EXPENSES	533.
FUNDRAISING EXPENSES	1,333.
TOTAL EXPENSES	6,359.
TOTAL OTHER EXPENSES ON FORM 990, PART IX, LINE 24E, COL	A 492,260.
FORM 990, PART XII, LINE 2C:	
THE AUDIT PROCESS AND AUDIT COMMITTEE INVOLVEMENT HAS NOT	
CHANGED FROM THE PREVIOUS YEAR.	
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Form	9	9	u	-	W	į

Estimated Tax on Unrelated Business Taxable Income for Tax-Exempt Organizations

•	orksheet) artment of the Treasury hal Revenue Service			stment Income for Priv . Do not send to the In	vate Foundations) ternal Revenue Service	FORM 990- .)	T	2014
1	Unrelated business	taxable income expected in the tax	year				1	
2	Tax on the amount	on line 1. See instructions for tax of	computation	n			2	
3	Alternative minimum tax (see instructions)							
4	Total. Add lines 2 ar	nd 3					4	
5	Estimated tax credit	s (see instructions)					5	
6	Subtract line 5 from	line 4					6	
7		tructions)					7	
8	8 Total. Add lines 6 and 7						8	
9	9 Credit for federal tax paid on fuels (see instructions)							
	Oa Subtract line 9 from line 8. Note. If less than \$500, the organization is not required to make estimated tax payments. Private foundations, see instructions							
U	b Enter the tax shown on the 2013 return (see instructions). Caution. If zero or the tax year was for less than 12 months, skip this line and enter the amount from line 10a on line 10c 10b 69,242.							
С		c. Enter the smaller of line 10a or lin	e 10b. If th	e organization is require	ed to skip line 10b, enter		10c	69,280.
				(a)	(b)	(c)		(d)
11	Installment due dat	es (see instructions)	11					
12	columns (a) through uses the annualized the adjusted seasons	nts. Enter 25% of line 10c in (d) unless the organization income installment method, al installment method, or is a see instructions)	12					
13	2013 Overpayment	(see instructions)	13				_	
14	Payment due (Subtr	act line 13 from line 12)	14					

HA	For Paperwork Reduction Act Notice,	see instructions.
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Form 990-W (2014)

ESTIMATED TAX	69,280
AMOUNT PAID	88,020
OVERPAYMENT APPLIED	8,731
AMOUNT DUE	0