Form 990

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

(except black lung benefit trust or private foundation)

► The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No. 1545-0047

Open to Public Inspection

A	For the	2012 calen	dar year, or tax	year begir	ning 7/	01	, 2012	, and endin	a 6/	'30	3,500,000	, 2013	100000000000000000000000000000000000000
В	Check if ap	oplicable:	С			,	5 0/		er Iden	tification Number			
	Addre	ss change	Questa Fo	undatio	n for E	incation	. Tnc					5795	
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	\vdash		F Name and addr		.1 .46				III. A la Abia	G Gross r		,	
	Abbiid	cation pending			ai oincer.							1 1163	X No
	Tov over	mat atatua	Same As C		_ (:	1	1017(.)(1)	1 1503	If 'No,	ll affiliates incl ' attach a list.	(see in:	structions) Yes	No
÷		mpt status	X 501(c)(3)	501(c) (nsert no.)	4947(a)(1) or						
J	Websi		w.questafo	···	T		····	I	<u> </u>	exemption nu			
K		organization:	X Corporation	Trust	Association	Other ►	L	Year of Format	ion: 194	6 M s	State of	legal domicile: IN	
Pa	rt I	Summar	У						·				
	1 Br	lefly descri	oe the organiza	tion's miss	ion or most	significant a	ictivities: Q	<u>uesta Fo</u>	<u>oundat</u>	ion_as	<u>sis</u> t	ts_young	
çe	g p	<u>eobre m</u>	<u>ith financ</u>	<u>ial ne</u>	<u>ed to at</u>	<u>tain a</u>	<u>college</u>	educati	on, q	raduate	<u>wi</u>	th less deb	<u>t</u> _
Activities & Governance	_ <u>a</u> :	<u>nd beco</u>	<u>me contrib</u>	outing i	<u>members</u>	<u>of nort</u>	<u>heast In</u>	<u>idiana's</u>	work.	<u>force.</u>			
Je II	2 5						-,,-						
ģ	2 Ch 3 Nu	mber of vo	x ► ☐ if the o	organizatio	n aiscontinu rnina body (i	ed Its opera	itions or disp	oosed of mo	re than 2	25% of its		ssets.	
જ	4 Nu	imber of inc	dependent votin	n the gove ia member	s of the gove	ernina body	(Part VI line	e 1h)			3		14
ies	5 To	tal number	of individuals e	moloved in	n calendar v	ear 2012 (P.	art V. line 2a	a)			5		14
Ĭ	6 To	tal number	of volunteers (estimate if	necessary).						6		33
Act	7a To	tal unrelate	d business reve	enue from	Part VIII, col	lumn (C), lir	ne 12				7 a		0.
			business taxab								7 b		0.
								····	F	Prior Year		Current Year	
d)			and grants (Pa							494,7	79.	672,1	
Revenue	9 Pr	ogram serv	ice revenue (Pa	art VIII, line	e 2g)					22,6		30,0	
eVe	10 Inv	vestment in	come (Part VIII	, column (A), lines 3, 4 	, and 7d)				266,4		408,7	
Œ	11 Ot	her revenue	e (Part VIII, colu	ımn (A), lii	nes 5, 6d, 8d	c, 9c, 10c, a	nd 11e)						
	12 To	tal revenue	- add lines 8	through 11	(must equa	Part VIII, c	olumn (A), I	ine 12)		783,8	84.	1,111,0	159.
			milar amounts p							95,5	00.	125,5	500.
			to or for memb										
S		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) a Professional fundraising fees (Part IX, column (A), line 11e)										284,0	29.
Expenses	16a Pr											;	
bei	b To	tal fundrais	ing expenses (F	Part IX, co	lumn (D), lin	e 25) ►		7,046.					
ũ			es (Part IX, colu						2002000000000	263,8	၁၁	E11 7	770
			s. Add lines 13							592,2		511,7	~
			expenses. Sub									921,3	
8		101100 1000	oxporteder dub	traot into 1	0 110111 11110					191,6		189,7 End of Yea r	
let Assets of and Balances	20 To	tal assets (Part X, line 16).							ng of Curren 1,369,7		11,965,3	
d B			s (Part X, line 2							11,5		11,965,3	
Ne.			fund balances.						———				
		Signatur	***************************************	Oubtract II	<u> </u>	1116 20			1 1.	1,358,2	29.	11,950,1	.40.
					-//								
comp	r penaities olete. Declai	or perjury, i de ration of prepai	reg (other than officer	mined this reti r) is based on	irn, including acc all information	companying sch f which prepare	edules and state r has any knowle	ements, and to to edge.	he best of n	ny knowledge	and bel	lief, it is true, correct, a	nd
			Mu	1/	1/1/					2/1	114	f	
Sig	ın	Signatur	e of officer				***************************************	***************************************	Da	ate			
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	. •	Type or	print name and title.	· CE	"/-/-	PRE	CINE	- 17-6	CIUR				
		Print/Type p	eparer's name		Preparer's sign	nature		Date		Chool];e	PTIN	
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IVICIV		4134433 III	STOLUHII WILLI BI	o preparer	SHUYYH dull	C: LOCK INS	o achoust					IXI YAC	NO

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	X	
2		2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I.	3		Х
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III.	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV.	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable.			
i	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	Х	
	b Did the organization report an amount for investments – other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII.	11 b		Х
•	c Did the organization report an amount for investments – program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		Х
	d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX.	11 d		Х
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		X
	f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f		Х
	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII.	12a	Х	
	b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
ı	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	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Parts III and IV	16		Х
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 (see instructions).	17		Х
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		Х
	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		Х
	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		X
i	of If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		

Part IV | Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II..... Χ 21 22 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* Χ 23 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, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,'go to line 25..... Χ 24a 24b b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?..... c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease 240 any tax-exempt bonds? 24d 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 with a Х 25a disqualified person during the year? If 'Yes,' complete Schedule L, Part I..... 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 X 25b Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II..... X 26 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III. Χ 27 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): Χ 28a a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV..... b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Χ Schedule L, Part IV...... c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV..... X 28c X 29 Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M..... Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation Χ 30 contributions? If 'Yes,' complete Schedule M..... X Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I...... 31 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Χ 32 Schedule N, Part II...... X 33 Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, X 34 and V, line 1..... X 35a 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?..... b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2..... 35h 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..... Χ 36 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI..... X 37 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** (2012)

Form 990 (2012) Questa Foundation for Education, Inc. Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V......

	Check if Schedule O Contains a response to any question in this Part V			· L
_		r	Yes	No
	a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
	Enter the number of Forms W-2G 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 (gambling) winnings to prize winners?	1 c	X	q.
	a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 6			
ł	of at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)			
	a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		X
Ł	olf 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	3 b		
	a 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)?	4 a		Х
Ŀ	olf '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.			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		X
C	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
6 a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Х
b	olf 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
7	Organizations that may receive deductible contributions under section 170(c).			
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7 a		х
Ł	of Yes, did the organization notify the donor of the value of the goods or services provided?	7 b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c		Х
c	If 'Yes,' indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e	-117107-12-0100	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		X
ç	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g	:	
ŀ	nlf the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	7 h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting 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		
9	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9 a	-1101550	
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9 b		
	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
t	o Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
	Section 4947(a)(1) non - exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	olf 'Yes,' enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
a	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
	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			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
Ŀ	olf 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14b		

Page 6 35-6025795 Form 990 (2012) Questa Foundation for Education, Inc. 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. X Check if Schedule O contains a response to any question in this Part VI..... Section A. Governing Body and Management Yes No 1 a Enter the number of voting members of the governing body at the end of the tax year. If there are material differences in voting rights among members 14 of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. **b** Enter the number of voting members included in line 1a, above, who are independent ... 14 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 X officer, director, trustee or key employee?..... Did the organization delegate control over management duties customarily performed by or under the direct supervision X of officers, directors or trustees, or key employees to a management company or other person?..... 3 4 Did the organization make any significant changes to its governing documents Χ 4 since the prior Form 990 was filed?..... X Did the organization become aware during the year of a significant diversion of the organization's assets?..... 5 X 6 6 Did the organization have members or stockholders?..... 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more Χ 7 a members of the governing body?..... **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body?..... Х 7 b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X 8 a a The governing body?..... Χ **b** Each committee with authority to act on behalf of the governing body?..... 8 b Is there any officer, director or 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..... Χ 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code. No Yes X 10a Did the organization have local chapters, branches, or affiliates?..... 10 a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10 h 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?...... Х 11 a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O X 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13..... 12a b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise Х 12b Х 12 c X 13 13 Did the organization have a written whistleblower policy?..... 14 Did the organization have a written document retention and destruction policy?..... 14 Χ 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? Χ a The organization's CEO, Executive Director, or top management official.. See . Schedule.. 0..... Χ **b** Other officers of key employees of the organization...See .Schedule.0..... 15b If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions.) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Х 16 a taxable entity during the year?..... **b** If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the 16 b organization's exempt status with respect to such arrangements?.... Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed ▶ Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. Other (explain in Schedule O) X Upon request X Own website Another's website Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to 19

Form 990 (2012)

See Schedule 0

State the name, physical address, and telephone number of the person who possesses the books and records of the organization:

20

the public during the tax year.

Form 990 (2012) Questa Foundation for Education, Inc.	35-6025795	Page 7								
Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
Check if Schedule O contains a response to any question in this Part VII										
Section A. Officers Directors Trustees Key Employees and Highest Company	neated Employees									

es, Key Employees, and Highest Compensated Employees

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

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

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

<u></u>				9					a any carrotte comocity at	rootor, or tradico.	
					(0	;)					
(A) Name and Title	(A) Name and Title		Position (do not check more than one box, unless person is both an officer and a director/trustee)					h an e)	(D) Reportable compensation from the organization	(E) Reportable compensation from	(F) Estimated amount of other
		hours per week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key emplayee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	relaled organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) John Snider		2									
Chairman		0	X		Χ				0.	0.	0.
(2) Kathy Friend		11									
Past Chairwoman		0	X		Χ				0.	0.	0.
_(3)_Wilburn_Smith		1									
Vice Chairman		0	X		Χ				0.	0.	0.
_(4) Judy Roy		1									
Treasurer	*****	0	X		Χ				0.	0.	0.
_(5) Scott Maddox		1									
Secretary		0	X		X				0.	0.	0.
(6) Peter Henry		_0.5_									
Director		0	X		_			<u> </u>	0.	0.	0.
_(7)_Tamyra_Kelly		0.5									
Director		0	X						0.	0.	0.
(8) <u>James Koday</u>		0.5									
Director		0	Х						0.	0.	0.
_(9)_Maclyn_Parker		_0.5_									
Director		0	X						0.	0.	0.
(10) Richard Poinsatte		_0.5_	'		ĺ						
Director		0	X						0.	0.	0.
(11) Kathleen Randolph		_0.5_			1				_		
Director (12) Paris de Carista		0	X		_				0.	0.	0.
(12) David Smith		_0.5_			- 1				_		
Director		0	X		_				0.	0.	0.
(13) Jonathan Steiner		_0.5_	. ,,						_		
Director (14) Vathleen Tunnin T	D	0	X						0.	0.	0.
(14) Kathleen Turpin, J	<u></u>	0.5	v							_	_
Director		0	Χ						0.	0.	0.

Page 8

Part VII Section A. Officers, Directors, Trus		\ey				es, a	anc	nighest Con	ipensaleu Empi	Oyees (cont)
(A) Name and title	Average hours per week (list any hours for related organiza - tions below dotted line)	or direct	unle er ar	ss pe	sition more erson direct	than Highest compensated	n an tee)	(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
			,,			8				
(15) Marc Levy Executive Dir.	_ <u>50</u> 0			Х				72,317.	0.	16,776.
(16)										
(17)										
(18)		-								
(19)								; 3		
(20)										
(21)										
(22)										
(23)										
(24)								100000		
(25)										
1 b Sub-total							>	72,317.		16,776.
c Total from continuation sheets to Part VII, Sectio							₽	72,317.	0.	16,776.
d Total (add lines 1b and 1c)	to those	listed	abo	ve)	who	rece	ived	12,317. I more than \$100,0	00 of reportable com	
 3 Did the organization list any former officer, direct on line 1a? If 'Yes,' complete Schedule J for such 4 For any individual listed on line 1a, is the sum of the organization and related organizations greater such individual	reportal than \$	<i>ual</i> ble co 150.0	omp 000?	ens	atio <i>'Yes</i>	n and	d otl	her compensation	from	Yes No 3 X 4 X
5 Did any person listed on line 1a receive or accrue for services rendered to the organization? If 'Yes,										
Section B. Independent Contractors 1 Complete this table for your five highest compens										
complete this table for your five highest compens compensation from the organization. Report compens	sation fo	r the	cale	ndar	yea	ar end	ding	with or within the o	organization's tax yea	
(A) Name and business addr	ess							Description	3) of services	(C) Compensation
None ,										
2 Total number of independent contractors (including b \$100,000 in compensation from the organization		mited	to th	nose	list	ed ab	ove) who received mo	re than	
BAA	<u> </u>	TEE	A0108	3L 0	1/24/	13				Form 990 (2012

	Check if Schedule O contains a response to any que	estion in this Part VIII			
		Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ANT	1 a Federated campaigns 1 a				
85	b Membership dues				agram the sea
TS,	c Fundraising events			STATE OF THE STATE	
5	d Related organizations 1 d	CONTRACTOR STREET			100000000000000000000000000000000000000
S S	e Government grants (contributions) 1 e				
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	f All other contributions, gifts, grants, and similar amounts not included above 1f 672,18	6.			
O N	g Noncash contributions included in Ins 1a-1f: \$				
		672,186.		See a see a see	
PROGRAM SERVICE REVENUE	Business Code				
Ē	2a Student loan interest 522291	30,077.	30,077.		
핑	b				
Š	С				
꾨	d		:		
Æ	e		W-1-10-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1		
8	f All other program service revenue				
7	g Total. Add lines 2a-2f	▶ 30,077.			
	3 Investment income (including dividends, interest and			Physics of any operator students defined by the second students of t	
	other similar amounts)				235,188.
	4 Income from investment of tax-exempt bond proceeds				
	5 Royalties	>			
	(i) Real (ii) Personal				
	6a Gross rents				
	b Less: rental expenses				
	c Rental income or (loss)				
	d Net rental income or (loss)	>			
	7 a Gross amount from sales of (i) Securities (ii) Other				
	assets other than inventory. 2,005,858.			3,51790	
	b Less: cost or other basis and sales expenses		lar as		
	c Gain or (loss) 173,608.				
	d Net gain or (loss)	172 600			172 600
		173,608.			173,608.
EVENUE	8a Gross income from fundraising events (not including. \$	2 16 16 16 16 16 16 16 16 16 16 16 16 16		2000	
Ē	of contributions reported on line 1c).				
	See Part IV, line 18 a				
OTHER	b Less: direct expenses b			1000	
Q	c Net income or (loss) from fundraising events	-	- 100		
	9a Gross income from gaming activities. See Part IV, line 19a				
	b Less: direct expenses b	_			2007 1007 100
	c Net income or (loss) from gaming activities				Section 1
	· · · · · · · · · · · · · · · · · · ·			1	
	10a Gross sales of inventory, less returns and allowances				
	b Less: cost of goods sold b	+			
	c Net income or (loss) from sales of inventory				
	Miscellaneous Revenue Business Code				
	11a				
	b				
	d All other revenue				
	e Total. Add lines 11a-11d				
	12 Total revenue. See instructions		30,077.	0.	408,796.
BAA	N T	EEA0109L 12/17/12			Form 990 (2012)

Sect	ion 501(c)(3) and 501(c)(4) organizations must com Check if Schedule O contains a re	plete all columns. All oth	ner organizations must co	omplete column (A).	
	not include amounts reported on lines 6b, Bb, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
10, 6	Grants and other assistance to governments		expenses	general expenses	expenses
,	and organizations in the United States. See				
2	Part IV, line 21 Grants and other assistance to individuals in		4,	10 mg	
	Grants and other assistance to individuals in the United States. See Part IV, line 22	125,500.	125,500.		
3	Grants and other assistance to governments, organizations, and individuals outside the			90.00	
	United States. See Part IV, lines 15 and 16.				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	72,317.	69,425.	1,446.	1,446.
6	Compensation not included above, to	12,311.	037 120.		
•	disqualified persons (as defined under section 4958(f)(1)) and persons described				
	section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	150,927.	144,889.	3,019.	3,019.
8	Pension plan accruals and contributions (include section 401(k) and section 403(b)				
	employer contributions)	5,481.	5,152.	219.	110.
9	Other employee benefits	36,252.	34,077.	1,468.	707.
10	Payroll taxes	19,052.	18,290.	381.	381.
	Fees for services (non-employees):				
	Management				
	Legal			17 654	
	: Accounting	17,654.		17,654.	
	Lobbying				
	Professional fundraising services. See Part IV, line 17	43,456.	THE CONTRACTOR CONTRAC	43,456.	
	Investment management fees	43,436.			
	umn (A) amt, list line 11g expenses on Sch 0)	7,492.	6,796.	696.	
12	Advertising and promotion	12,533.	12,391.	43.	99.
13	Office expenses	7,553.	7,228.	227.	98.
14	Information technology	6,256.	5,963.	220.	73.
15	Royalties	10 400	12 020	372.	
16	Occupancy	12,400.	12,028. 4,084.	255.	766.
17:		5,105.	4,004.	255.	700.
18	expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	,				
22	Depreciation, depletion, and amortization	3,569.	2,855.	714.	
23 24	Insurance Other expenses. Itemize expenses not	3,326.		3,326.	
24	covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)			100 mm (100 mm)	
	,	362,880.	362,880	and the second s	Approximation of the second of
	<pre>a Loan forgiveness b Prov for uncollectible loans</pre>	25,457.	25,457		
	C Unclassified	4,098.	1,872		347.
	d				
	e All other expenses				
25	Total functional expenses. Add lines 1 through 24e	921,308.	838,887.	75,375.	7,046.
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)				
PΛ					Form 990 (2012)

Lomonus	****	Check if Schedule O contains a response to any question in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	179,086.	1	490,368.
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net	637,412.	3	484,403.
	4	Accounts receivable, net	2,113,622.	4	2,289,472.
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
S	7	Notes and loans receivable, net		7	
ASSETS	8	Inventories for sale or use		8	
T S	9	Prepaid expenses and deferred charges	5,516.	9	6,066.
	10 a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D			
	b	Less: accumulated depreciation	6,946.	10 c	11,378.
	11	Investments – publicly traded securities.	8,091,858.	11	8,332,266.
	12	Investments – other securities. See Part IV, line 11	0,001,000.	12	0,332,200.
	13	Investments – program-related. See Part IV, line 11	VATERALIN	13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	335,341.	15	351,438.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	11,369,781.	16	11,965,391.
	17	Accounts payable and accrued expenses	11,552.	17	15,251.
	18	Grants payable	11,002.	18	13,231.
	19	Deferred revenue		19	
Ļ	20	Tax-exempt bond liabilities		20	
Ā	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
L-AB-L-T-ES	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		22	
į	23	Secured mortgages and notes payable to unrelated third parties		23	STARWINAL
ร	24	Unsecured notes and loans payable to unrelated third parties		24	
	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.		25	FAATTA MINNESS CO.
	26	Total liabilities. Add lines 17 through 25.	11,552.	26	15,251.
ZET		Organizations that follow SFAS 117 (ASC 958), check here ► X and complete lines 27 through 29, and lines 33 and 34.			
Ą	27	Unrestricted net assets	9,905,200.	27	10,159,934.
SETS	28	Temporarily restricted net assets	1,195,370.	28	1,532,547.
ŚΙ	29	Permanently restricted net assets	257,659.	29	257,659.
R F		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ and complete lines 30 through 34.			
Ď	30	Capital stock or trust principal, or current funds	and the second s	30	
Ŗ	31	Paid-in or capital surplus, or land, building, or equipment fund	75 AVAILUE 2	31	
۲	32	Retained earnings, endowment, accumulated income, or other funds		32	
FUZD BALAZOWS	33	Total net assets or fund balances	11,358,229.	33	11,950,140.
5	34	Total liabilities and net assets/fund balances	11,369,781.	34	11,965,391.
BA	4			·	Form 990 (2012)

Forn	1990 (2012) Questa Foundation for Education, Inc. 35-6025791	5 Page 12
Pai	t XI Reconciliation of Net Assets	
	Check if Schedule O contains a response to any question in this Part XI	
1	Total revenue (must equal Part VIII, column (A), line 12)	1,111,059.
2	Total expenses (must equal Part IX, column (A), line 25)	921,308.
3	Revenue less expenses. Subtract line 2 from line 1	<u> 189,751.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	11,358,229.
5	Net unrealized gains (losses) on investments	
6	Donated services and use of facilities	
7	Investment expenses	
8	Prior period adjustments	
9	Other changes in net assets or fund balances (explain in Schedule O). See Schedule 0	402,160.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (R))	11 050 140
-	Coldinit (D)/	11,950,140.
Pa	rt XII Financial Statements and Reporting	
	Check if Schedule O contains a response to any question in this Part XII	
		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 O.	
2	a Were the organization's financial statements compiled or reviewed by an independent accountant?	. 2a X
	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:	
	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 separate basis, consolidated basis, or both:	
	X Separate basis Consolidated basis Both consolidated and separate basis	
	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c X
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	
3	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	
BA	4	Form 990 (2012)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

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. ► See separate instructions.

OMB No. 1545-0047 2012

Open to Public Inspection

Employer identification number

Schedule A (Form 990 or 990-EZ) 2012

			for Education			0440			35-6	02579	5			
Part	2300.000			ıs (All organizations) See i	nstruct	ions.			
				use it is: (For lines 1 thro										
1				sociation of churches des		n sectio	n 170(b)	(1)(A)(i)).					
2				(A)(ii). (Attach Schedule										
3				vice organization describ										
4	A n	nedical research	organization operate	ed in conjunction with a	hospital	describe	ed in se	ction 17	'0(b)(1)(A)(iii). E	nter the ho	spital's		
		ne, city, and sta												
5	二 170	(b)(1)(A)(iv). (C	omplete Part II.)	a college or university own			-		l unit de	scribed in	section			
6				governmental unit descr										
7	吕 in s	section 170(b)(1)	(A)(vi). (Complete F	mally receives a substantial part of its support from a governmental unit or from the general public described (vi). (Complete Part II.) cribed in section 170(b)(1)(A)(vi). (Complete Part II.)										
8														
9	unre (Co	ted to its exempt lated business taxa mplete Part III.)	normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities t functions — subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and cable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2).											
10	∐ An	organization org	anized and operated	exclusively to test for p	ublic saf	ety. See	section	1 509(a)	(4).					
11	An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3) . Check the box that describes the type of supporting organization and complete lines 11e through 11h.													
	a		b Type II	c Type III – Function	-	-						integrated		
е	e 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).													
f	If th	e organization re	ceived a written deterr	mination from the IRS that	is a Type	I, Type	II or Typ	e III sup	porting	organizat	ion,	🗆		
g	Sin	ce August 17, 20	006, has the organiza	ation accepted any gift	or contril	oution fr	om any	of the f	ollowing	persons	s?			
									_	•		Yes No		
	(i)	A person who below, the government	directly or indirectly verning body of the s	controls, either alone or supported organization?.	togethe	r with p	ersons d	lescribe	d in (ii)	and (iii)	11 g (i)			
	(ii)			ribed in (i) above?										
	٠,										3 ()			
h				n described in (i) or (ii) a					• • • • • • •		11 g (iii)			
				the supported organizati			т		-					
	(I) IN	lame of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	column (Is the zation in i) listed in overning ment?	(v) Did yo the organ column (supp	ou notify ization in i) of your port?	(vi) organiz colu organiz U.	Is the zation in mn (i) ed in the S.?		at of monetary oport		
					Yes	No	Yes	No	Yes	No				
											- ' '			
(A)														
(B)														
(C)	(C)								1					
<u>(D)</u>												W		
(E)					1									
<u></u>		***************************************												
Total				he Instructions for Form								M13775.111.		

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.)

Sect	ion A. Public Support						
begir	ndar year (or fiscal year ıning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')	136,877.	227,230.	796,053.	494,779.	672,186.	2,327,125.
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4	Total. Add lines 1 through 3	136,877.	227,230.	796,053.	494,779.	672,186.	2,327,125.
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						952,132.
6	Public support. Subtract line 5 from line 4						1,374,993.
Sec	tion B. Total Support		and the state of t				
Cale	ndar year (or fiscal year	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4	136,877.	227,230.	796,053.	494,779.	672,186.	2,327,125.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	324,390.	268,922.	264,354.	284,285.	408,796.	1,550,747.
9	Net income from unrelated business activities, whether or not the business is regularly carried on						: 0.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						0.
11	Total support. Add lines 7 through 10						3,877,872.
12	Gross receipts from related activ	vities, etc (see ins	structions)			12	0.
13	First five years. If the Form 990 is organization, check this box and	for the organizatio	n's first, second, th	nird, fourth, or fifth	tax year as a secti	on 501(c)(3)	▶ []
Sec	tion C. Computation of Pu	blic Support F	Percentage				
	Public support percentage for 2						35.46%
	Public support percentage from						34.91 %
	a 33-1/3% support test – 2012. It and stop here. The organization	i qualifies as a pu	iblicly supported c	organization			Δ
ı	33-1/3% support test – 2011. If and stop here. The organization	the organization on qualifies as a po	did not check a boublicly supported o	ox on line 13 or 1 or ganization	6a, and line 15 is	33-1/3% or more	, check this box
17 a	a 10%-facts-and-circumstances to or more, and if the organization the organization meets the 'fact	est – 2012. If the meets the 'facts- s-and-circumstan	organization did r and-circumstance ces' test. The orga	not check a box c es' test, check this anization qualifies	on line 13, 16a, or s box and stop he s as a publicly su	16b, and line 14 ere. Explain in Par pported organizati	is 10% rt IV how on▶ ☐
	o 10%-facts-and-circumstances to or more, and if the organization organization meets the 'facts-and organization meets the 'facts-and organization meets the 'facts-and organization's meets the 'facts-and organization's meets the 'facts-and organization's meets and organization's meets and organization's meets and organization organization's meets and organization organization organization's meets and organization orga	meets the 'facts- nd-circumstances'	and-circumstance test. The organiz	es' test, check this ation qualifies as	s box and stop ne a publicly suppor	rted organization.	
18	Private foundation. If the organ	ization did not ch	eck a box on line	13, 16a, 16b, 1/a			agn or 990 E7) 2013

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			,			
	dar year (or fiscal yr beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions and membership fees received. (Do not include any unusual grants.)						
2	Gross receipts from admis-						
	sions, merchandise sold or services performed, 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 business under section 513.						
4	Tax revenues levied for the organization'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		1 79 000				
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons						
t	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	1.4.74.4	· · · · · · · · · · · · · · · · · · ·				
8	Public support (Subtract line 7c from line 6.)				- 14		
	tion B. Total Support						
	dar year (or fiscal yr beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	Amounts from line 6						
10 a	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 acquired after June 30, 1975					r a valle valda.	; ; ;
C	Add lines 10a and 10b	***************************************		***************************************			
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support. (Add Ins 9, 10c, 11, and 12.)						
	First five years. If the Form 990 organization, check this box and	is for the organiza	ation's first, secon	nd, third, fourth, o	r fifth tax year as	a section 501(c)	(3) ▶ □
Sec	tion C. Computation of Pul	blic Support P	ercentage				
	Public support percentage for 20						%
	Public support percentage from 2						%
Sec	tion D. Computation of Inv	estment Incor	ne Percentage	9			
	Investment income percentage f				mn (f))	17	8
	Investment income percentage f						8
	33-1/3% support tests - 2012. If	the organization	did not check the	box on line 14 a	nd line 15 is more	than 33-1/3%	and line 17
	is not more than 33-1/3%, check 33-1/3% support tests — 2011. If line 18 is not more than 33-1/3%	this box and sto	here. The orgar	nization qualifies a	s a publicly suppo	orted organizatio	n ▶
20	line 18 is not more than 33-1/3%	, check this box a	and stop here. Th	e organization qua	alifies as a public	ly supported org	anization ►
20	Private foundation. If the organize	zation did not che	ck a box on line	14, 19a, or 19b, cl	neck this box and	see instructions	

Schedule A	(Form 990 or 990-EZ) 2012	Questa	Found	ation	for	Educa	tion,	Inc.	35-60257	95	Page 4
Part IV	Supplemental Informati Part II, line 17a or 17b; (See instructions).	i on. Con and Part	nplete th	nis part 12. Als	to pr so co	ovide th mplete t	e expla his par	anations i t for any	required by Pa additional inf	art II, line ormation.	10;
						. – – – -					

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

PUBLIC DISCLOSURE COPY

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF

OMB No. 1545-0047

2012

Name of the organization		Employer identification number
Questa Foundation for Educat	tion, Inc.	35-6025795
Organization type (check one):		
Filers of:	Section:	
Form 990 or 990-EZ	X 501(c)(3) (enter number) organiza	ition
	4947(a)(1) nonexempt charitable trust n	ot treated as a private foundation
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust to	reated as a private foundation
	501(c)(3) taxable private foundation	
Check if your organization is covered by the	General Rule or a Special Rule	
Note. Only a section 501(c)(7), (8), or (10) o	rganization can check boxes for both the Gener	al Rule and a Special Rule. See instructions.
General Rule For an organization filing Form 990, 990-EZ contributor. (Complete Parts I and II.)	, or 990-PF that received, during the year, \$5,000 c	or more (in money or property) from any one
Special Rules		
X For a section 501(c)(3) organization filing 509(a)(1) and 170(b)(1)(A)(vi) and receiv (2) 2% of the amount on (i) Form 990, Pa	g Form 990 or 990-EZ that met the 33-1/3% sup red from any one contributor, during the year, a art VIII, line 1h or (ii) Form 990-EZ, line 1. Com	oport test of the regulations under sections contribution of the greater of (1) \$5,000 or oplete Parts I and II.
total contributions of more than \$1,000 for the prevention of cruelty to children or ar		ntific, literary, or educational purposes, or
For a section 501(c)(7), (8), or (10) organization contributions for use <i>exclusively</i> for religious If this box is checked, enter here the total contributions. Do not complete any of the parts used to the part	ation filing Form 990 or 990-EZ that received from a s, charitable, etc, purposes, but these contributions ontributions that were received during the year for a nless the General Rule applies to this organization	any one contributor, during the year, did not total to more than \$1,000. an <i>exclusively</i> religious, charitable, etc, because it received nonexclusively
	\$5,000 or more during the year	
Caution: An organization that is not covered by the Gener answer 'No' on Part IV, line 2, of its Form 990; or chemeet the filing requirements of Schedule B (I	al Rule and/or the Special Rules does not file Schedule B (Fock the box on line H of its Form 990-EZ or on Part I, line Form 990, 990-EZ, or 990-PF).	orm 990, 990-EZ, or 990-PF) but it must 2, of itsForm 990-PF, to certify that it does not
BAA For Paperwork Reduction Act Notice, or 990-PF.	see the Instructions for Form 990, 990EZ,	Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

	B (Form 990, 990-EZ, or 990-PF) (2012)	Page L Employer	1 of 2 of Part 1
Name of orga Questa	Foundation for Education, Inc.	' '	25795
	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed	l.	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$96,075.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$14,716.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$ 20,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$ <u>20,224.</u>	Person Payroll Noncash X (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$15,000.	Person X Payroll Noncash Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		_ _\$24,375. _	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
BAA	TEEA0702L 11/30/12	Schedule B (Form 9	1 90, 990-EZ, or 990-PF) (2012)

Schedule Name of org	B (Form 990, 990-EZ, or 990-PF) (2012)	Page	2 of 2 of Part 1
•	Foundation for Education, Inc.	1 ' '	r identification number 025795
Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed	d	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>7</u>		\$60,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8		\$ <u>50,000.</u>	Person X Payroll
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9		\$ <u>100,000</u> .	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>10</u>		\$ <u>14,940.</u>	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
11		\$225,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II if there is
BAA	TEEA0702L 11/30/12	Schedule B (Form 99	à noncash contribution.) 0, 990-EZ, or 990-PF) (2012)

Name of organization

Questa Foundation for Education, Inc.

Employer identification number 35-6025795

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. (d) Date received (b)
Description of noncash property given (c) FMV (or estimate) (see instructions) (a) No. from Part I Marketable securities 4 20,224. 10/31/12 (d) Date received (c) FMV (or estimate) (see instructions) (a) No. from (b)
Description of noncash property given Part I (d) Date received (b)
Description of noncash property given (c) FMV (or estimate) (see instructions) (a) No. from Part I (b)
Description of noncash property given (c) FMV (or estimate) (see instructions) (d) Date received (a) No. from Part I (d) Date received (a) No. from (b)
Description of noncash property given (c) FMV (or estimate) (see instructions) Part I (c) FMV (or estimate) (see instructions) (d) Date received (b)
Description of noncash property given (a) No. from Part I

1 of Part III

N/A

riania oi oigai	neadon			
Onesta	Foundation	for	Education	Inc

Employer Identification number 35–6025795

		33 0023133
Part III	Exclusively religious, charitable, etc, individual contributions to section 501(c)(7	7), (8) or (10)
	organizations that total more than \$1,000 for the year. Complete columns (a) through (e) all	nd the following line entry.
	For organizations completing Part III, enter total of exclusively religious, charitable, etc,	-
	contributions of \$1,000 or less for the year. (Enter this information once. See instructions.)	▶ Ś
	Use duplicate copies of Part III if additional space is needed.	•

	To approace copies of fact in it additional	space is necaca.			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held	
	N/A				
		(e) Transfer of gift			
	Transferee's name, addres	i ransier of gift ss, and ZIP + 4	Rela	ationship of transferor to transferee	
		- Armitelian -			
	:			Filtrania V.	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held	
		VI 7/////			
	The second secon				
		(e)			
	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Relationship of transferor to transferee		

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held	
	à				

			·····		
	We amount of the second	(e)	······································		
	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Rela	ationship of transferor to transferee	
		= v= (1000)			
		W10/24			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held	
		. (1)			
İ	(4)			L	
	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	t Relationship of transferor to transferee		
		40000000			

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

Open to Public Inspection
Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

Complete if the organization answered 'Yes,' to Form 990,
 Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
 Attach to Form 990.
 See separate instructions.

0110	sta Foundation for Education, Inc.	35-6025795						
Par								
rai	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	1						
5	Did the organization inform all donors and donor advisors in writing that the assets held in do are the organization's property, subject to the organization's exclusive legal control?	nor advised funds						
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant fund for charitable purposes and not for the benefit of the donor or donor advisor, or for any other impermissible private benefit?	s can be used only purpose conferring Yes No						
Par	Conservation Easements. Complete if the organization answered 'Yes'	to Form 990, Part IV, line 7.						
1	Purpose(s) of conservation easements held by the organization (check all that apply).	1						
	——————————————————————————————————————	f an historically important land area						
		f a certified historic structure						
	Preservation of open space							
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form	n of a conservation easement on the						
	last day of the tax year.	Held at the End of the Tax Year						
_	Total number of conservation easements	**************************************						
	Total acreage restricted by conservation easements							
	Number of conservation easements on a certified historic structure included in (a)							
C	Number of conservation easements included in (c) acquired after 8/17/06, and not on a histor structure listed in the National Register	, . 20						
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the tax year ►	ne organization during the						
4	Number of states where property subject to conservation easement is located ▶							
5	Does the organization have a written policy regarding the periodic monitoring, inspection, har and enforcement of the conservation easements it holds?	ndling of violations, Yes No						
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements (during the year						
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements durin ►\$	g the year						
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of se and section 170(h)(4)(B)(ii)?	ction 170(h)(4)(B)(i) Yes No						
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expeninclude, if applicable, the text of the footnote to the organization's financial statements that conservation easements.							
Pai	Till Organizations Maintaining Collections of Art, Historical Treasures, or Complete if the organization answered 'Yes' to Form 990, Part IV, line	Other Similar Assets. 8.						
	a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its reve art, historical treasures, or other similar assets held for public exhibition, education, or research in for in Part XIII, the text of the footnote to its financial statements that describes these items.	armerance of public service, provide,						
	b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue historical treasures, or other similar assets held for public exhibition, education, or research in further 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 treasures, or other similar assets for finar amounts required to be reported under SFAS 116 (ASC 958) relating to these items:	ncial gain, provide the following						
	a Revenues included in Form 990, Part VIII, line 1	▶\$						
	b Assets included in Form 990, Part X	▶\$						

Schedule D (1 offit 990) 2012 QUEST	a rounda	tion	ior Educa	tton	i, Inc.		35-602	5795		Page 2
Part III Organizations Mainta	ining Colle	ctions	of Art, Hist	orica	Treasures, o	r Other	Similar Ass	ets (c	ontinu	ıed)
3 Using the organization's acquisition items (check all that apply):	, accession, ar	nd other i	records, check	any of	the following that a	are a sign	ificant use of its	collectio	n	
a Public exhibition	a ☐ Public exhibition d ☐ Loan or exchange programs									
b Scholarly research			e 🗌 Othe	r						
c Preservation for future gener										
4 Provide a description of the organiz Part XIII.	ation's collection	ons and e	explain how the	ey furthe	er the organization	n's exemp	t purpose in			
5 During the year, did the organiza to be sold to raise funds rather the	tion solicit or nan to be mai	receive ontained a	donations of a as part of the	ırt, hist organi:	orical treasures, zation's collectior	or other:	similar assets	Yes	Г	No
Part IV Escrow and Custodial Arra reported an amount or	angements. C	Complete	if the organi	zation	answered 'Yes' t	to Form 9	990, Part IV, lin	e 9, or		
1 a Is the organization an agent, trus	stee, custodiar	n, or oth	er intermediar	y for c	ontributions or ot	her asse	ts not included	—	-	٦
on Form 990, Part X?b If 'Yes,' explain the arrangement							• • • • • • • • • • • • • • • • • • • •	Yes	L	No
bit res, explain the analigement	III Falt Alli ai	на соттр	nete the lonow	nng tat	oie:		T	A		
c Beginning balance								Amoun	[
d Additions during the year										
e Distributions during the year										
f Ending balance										
2a Did the organization include an a								Yes		TNo
b If 'Yes,' explain the arrangement									F	No
b es, explain the arrangement	iiri aicraii c	JIIOON 110	ic ii tile exple	11110171	ias been provide	u III i ait	Хии		· · · · · L	_
Part V Endowment Funds. C	omplete if t	he ora	anization a	nswer	ed 'Yes' to Fo	orm 990	Part IV Jin	a 10		
	(a) Current	t I	(b) Prior ye		(c) Two years		Three years		our year	rs
1 a Beginning of year balance	355,	390.	351,		315,38		288,062.	` '	, , , , , , , , , , , , , , , , , , , ,	0.
b Contributions	,						200,002.	1	40	449.
c Net investment earnings, gains,										
and losses	27,	765.	13,	577.	46,42	26.	37,325.		9.	900.
d Grants or scholarships	10,	000.	10,0		10,00		10,000.	1		
e Other expenditures for facilities and programs			***************************************				0.			
f Administrative expenses							V-110001-1		288.	062.
g End of year balance	373,	155.	355,3	390.	351,81	3.	315,387.			062.
Provide the estimated percentage	of the currer	nt year e	nd balance (li	ne 1g,	column (a)) held	as:				
a Board designated or quasi-endowment	ent 🟲		%			1				
b Permanent endowment ►	69.00%									
c Temporarily restricted endowmen		31.00	-							
The percentages in lines 2a, 2b,	and 2c should	l equal 1	00%.							
3 a Are there endowment funds not in the	ne possession	of the org	ganization that	are hel	d and administere	d for the		_	-	
organization by:									Yes	No
(i) unrelated organizations								3a(i)		X
(ii) related organizations								3a(ii)		X
b If 'Yes' to 3a(ii), are the related o	rganizations i	isted as	required on S	cnedu	e R?		_	3b		L
4 Describe in Part XIII the intended Part VI Land, Buildings, and I	uses of the c	Saa	orres OOO D	ent fur	ids. See Par	t XII.	L			
Part VI Land, Buildings, and I Description of property			or other basis		***************************************			/-I\ F		
			vestment)		Cost or other pasis (other)		ccumulated preciation	(a) E	Book va	lue
1 a Land	L									
b Buildings										
c Leasehold improvements	<u>L</u>		***************************************							-71101
d Equipment	_				53,832.		42,454.		<u>11,</u>	378.
e Other				<u> </u>	(D) # 35	<u> </u>				
Total. Add lines 1a through 1e. (Column	n (a) must eq	ual Form	1 990, Part X,	columi	n (B), line 10(c).)					378.
BAA							Schedu	ile D (Fo	rm 990°	2012

2. FIN 48 (ASC 740) Footnote. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII.

(10) (11)

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

Schedule D (Form 990) 2012 Questa Foundation for Education, In			-602579	5 Page 4
Part XI Reconciliation of Revenue per Audited Financial Statemen			eturn	
1 Total revenue, gains, and other support per audited financial statements			1	1,514,309.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a Net unrealized gains on investments	2a	402,160.		
b Donated services and use of facilities		1,090.		
c Recoveries of prior year grants				
d Other (Describe in Part XIII.)				
e Add lines 2a through 2d			2 e	403,250.
3 Subtract line 2e from line 1			3	1,111,059.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
a Investment expenses not included on Form 990, Part VIII, line 7b		····		
b Other (Describe in Part XIII.)				
c Add lines 4a and 4b			4 c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.).			5	1,111,059.
Part XII Reconciliation of Expenses per Audited Financial Statemen	nts With E	xpenses per	Return	
1 Total expenses and losses per audited financial statements			1	922,398.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a Donated services and use of facilities	2a	1,090.		
b Prior year adjustments	2 b			
c Other losses	2 c			
d Other (Describe in Part XIII.)	2 d			
e Add lines 2a through 2d			2 e	1,090.
3 Subtract line 2e from line 1			3	921,308.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:				
a Investment expenses not included on Form 990, Part VIII, line 7b		······································		
b Other (Describe in Part XIII.)	L			
c Add lines 4a and 4b			4 c	001 200
Part XIII Supplemental Information		,	5	921,308.
	····	~~····································		***************************************
Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Paline 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also com Part V, Line 4 - Intended Uses Of Endowment Fund	art III, lines nplete this p	1a and 4; Part IV, art to provide any	lines 1b ar additional	nd 2b; Part V, information.
Tart v, Line 4- intended Oses Of Endownient Fund				
The intended use of the endowment funds is to gener	rate_ear	nings and o	gains fr	om_which
scholarships may be awarded as described in the suc	cceeding	paragraphs	3	···
·				
Gregory Hosler Wilson Grant provides scholarship as	ssistanc	e to gradua	ites of	Allen
County high schools who are Questa Scholars and dem				

need. Recipients must have completed two semesters of college and evidence an

Schedule **D** (Form 990) 2012

exceptional work ethic and a high measure of perseverance. One student received a

BAA

Schedule D (Form 990) 2012 Questa Foundation for Education, Part XIII Supplemental Information (continued)	Inc.	35-6025795	Page 5
Part V, Line 4 - Intended Uses Of Endowment Fund (continued)		
\$5,000.00 Wilson scholarship during the fiscal ye	<u>ar.</u>		
Walter and Lucile Beckman Grant provides scholars	hip assistance to	Questa Scholar	s
who are pursuing education and/or social science	degrees. Recipie	ents must have	
completed two semesters of college and have a GPA			
received a \$5,000.00 Beckman scholarship during t			
	·		

TEEA3305L 06/08/12

BAA

Schedule **D** (Form 990) 2012

SCHEDULE I (Form 990)		<u> </u>	rants and Otl rernments, a	Grants and Other Assistance to Organizations, Governments, and Individuals in the United States	to Organizatior n the United St	is, ates		OMB No. 1545-0047
Department of the Treasury Internal Revenue Service		Comple	ete if the organizati	Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 or 22. ► Attach to Form 990.	orm 990, Part IV, line 2 0.	1 or 22.		Open to Public Inspection
Name of the organization Ouesta Foundation	ion for Education	ion Tnc					Employer identification number 3ちーらいクスプロス	cation number のら
Part General In	ation	nts and Assista	ance					
1 Does the organization the selection crite	ion maintain records to sair a used to award the	substantiate the am grants or assistand	ount of the grants or	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?	eligibility for the grants			Vec No
2 Describe in Part IV	Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	edures for monitorin	g the use of grant fu	nds in the United States.	See Part IV	:		
Part II Grants and Other Assistance to Government Form 990, Part IV, line 21 for any recipient that	d Other Assistance Part IV, line 21 fo	e to Governme r any recipient	ents and Organi that received m	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.	ed States. Comple art II can be duplic	te if the organizal	tion answered '\ space is needed	fes' to
1 (a) Name and address of organization or government	ess of organization rnment	(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
(b)								
(2)								
(3)								
(4)								
(5)								
<u> </u>								
(8)								
2 Enter total number 3 Enter total number	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	and government or s listed in the line	ganizations listed i	n the line 1 table				0
BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.	eduction Act Notice, se	ee the Instructions	s for Form 990.		TEEA3901L 11/30/12	11/30/12	Schedul	Schedule I (Form 990) (2012)

Page 2 35-6025795

Questa Foundation for Education,

Schedule I (Form 990) (2012)

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 Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other (e) Method of valuation (book, FMV, appraisal, other) Funds from the Venette and Mabel Sites Foundation are applied internally to Questa Grants for loan repayment assistance pursuant to the Brain Gain program are made The Gregory Hosler Wilson and the Walter and Lucile Beckman grants are also made The Virgil J. and Mildred C. Roy and the Edward C. Dodez scholarships are made directly payable to the U.S. Department of Education accredited colleges and (d) Amount of non-cash assistance directly payable to the students' educational institutions. 500. 123,000 Part I, Line 2 - Procedures for Monitoring Use of Grants Funds in U.S. Scholars' loan balances thereby reducing the debt owed. (c) Amount of cash grant 7 92 universities at which the students attend. (b) Number of recipients payable directly to the lender. additional information (a) Type of grant or assistance 2 Brain Gain Grants Scholarships Part IV 2 4 9 ന

BAA

Schedule I (Form 990) (2012)

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.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990 or 990-EZ.

QUIZOpen to Public

Employer identification number

Questa Foundation for Education, Inc. 35-6025795 Part III, line 4a (continued) Questa Foundation for Education assists graduates of Allen, DeKalb, Huntington, Kosciusko and Whitely county, Indiana high schools and home school programs in the pursuit of associates and bachelors degrees. The Foundation awards loans and scholarships to students currently enrolled in U.S. Department of Education accredited colleges and universities in the state of Indiana who are pursuing their first associates or bachelors degree. The Foundation also is involved in seeking to retain college graduates in northeast Indiana with debt forgiveness and college loan repayment assistance programs that incentivize college graduates to reside and work in northeast Indiana after graduation from college. All loan and scholarship recipients are selected by the board of directors through a competitive application, review and evaluation process that considers financial need and academic merit. Part III, line 4b (continued) Other Scholarships and Grants: The Virgil J. and Mildred C. Roy Nursing Scholarship assists students who are enrolled in Allen County, Indiana schools of nursing (University of Saint Francis, IPFW, and Ivy Tech Community College), pursing an R.N. degree. Eight (8) students received \$11,000.00 in Roy scholarship awards during the fiscal year. The Edward C. Dodez Scholarship provides financial support to Indiana students who attend Dartmouth College. Six (6) students received \$22,000.00 in Dodez scholarship awards during the fiscal year. Gregory Hosler Wilson Grant provides scholarship assistance to graduates of Allen County high schools who are Questa Scholars and demonstrate significant financial need. Recipients must have completed two semesters of college and evidence an

Name of the organization Questa Foundation for Education, Inc.	35-6025795
exceptional work ethic and a high measure of perseverance. One	student_received_a
\$5,000.00 Wilson scholarship during the fiscal year.	
Walter and Lucile Beckman Grant provides scholarship assistance	e to Questa Scholars
who are pursuing education and/or social science degrees. Reci	pients must have
completed two semesters of college and have a GPA of at least 3	3.0. One student
received a \$5,000.00 Beckman scholarship during the fiscal year	:
:	
Brain Gain Grants:	
During fiscal year 2013, Questa Foundation provided \$2,500.00	in Brain Gain grants
to one (1) recipient. Brain Gain Grant recipients must be empl	Loyed in Allen County
in the fields of advanced manufacturing, computer information	echnology or
biomedical/ biotechnology. Grants are awarded through a compet	itive_selection
process. Recipients receive \$2,500.00 per year for four years	in college loan
repayment assistance.	
Form 990, Part VI, Line 11b - Form 990 Review Process	
The completed Form 990 is prepared by a contracted CPA, in con-	sultation_with
management, and forwarded to the Treasurer and to the finance	and audit committee
for review. Once reviewed, Form 990 is provided to the Board	of Directors prior to
filing.	
Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Co	nflicts
Board members are required to complete a Conflict of Interest	form and abstain from
voting on measures that come before the board that reflect a c	onflict of interest.
This occurs on an ongoing basis in both committee and full boa	rd meetings.
Form 990, Part VI, Line 15a - Compensation Review & Approval Process - CEO, To	p <u>Management</u>
The Human Resource Committee (an ad-hoc committee of the Board	of Directors)
performs benchmarking against other non-profit organizations,	as well as other

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Name of the organization Questa Foundation for Education, Inc.	Employer identification number 35–6025795
Form 990, Part VI, Line 15a - Compensation Review & Approval Process - CEC	D, Top Management (continued)
foundations, via information found on GuideStar. From this	information, a salary
range is set for the Executive Director position that is wi	thin a reasonable range.
The employee benefit package is a component of compensation	and is benchmarked
against other companies, including non-profit organizations	via GuideStar and Board
member_knowledge of other organizations' executive benefit	packages.
Form 990, Part VI, Line 15b - Compensation Review & Approval Process - Offi	cers & Key Employees
N/A; no other officers or key employees are compensated.	
Form 990, Part VI, Line 19 - Other Organization Documents Publicly Availal	ble
Questa Foundation for Education makes its Articles of Incor	poration, Bylaws,
Conflict of Interest policy and annual audited financial st	atements available to the
public upon request. These items may be viewed by the publ	ic at Questa's office at
3468 Stellhorn Road, Fort Wayne, Indiana during normal busi	ness hours (8:00 a.m
4:30 p.m.) Monday through Friday.	
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2012	Schedule O - Supplemental Information	Page 2
Client QUESTA	Questa Foundation for Education, Inc.	35-6025795
2/02/14		01:18PM
Form 990, Part XI, L Other Changes In N	ine 9 let Assets Or Fund Balances	
Change in benefi Unrealized gain	icial interest investment \$ on investments Total $\underline{\underline{\$}}$	16,188. 385,972. 402,160.
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