** PUBLIC DISCLOSURE COPY **

Form **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)

ions) **2013**

Open to Public

Form 990 (2013)

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Do not enter Social Security numbers on this form as it may be made public.

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

A For the 2013 calendar year, or tax year beginning JUL 1, 2013 and ending JUN 30, 2014 C Name of organization Check if D Employer identification number applicable: BUTLER COUNTY COMMUNITY COLLEGE Address EDUCATION FOUNDATION Name change 25-1555437 Doing Business As Room/suite Number and street (or P.O. box if mail is not delivered to street address) E Telephone number Termin-COLLEGE DRIVE - OAK HILLS 287-8711 (724)Amende City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ 2,165,038. Applica-tion BUTLER, PA 16001 H(a) Is this a group return pending F Name and address of principal officer: MARY RUTH PURCELL for subordinates? Yes X No SAME AS C ABOVE Yes No H(b) Are all subordinates included? I Tax-exempt status: X 501(c)(3) 4947(a)(1) or 501(c)() ◀ (insert no.) If "No," attach a list. (see instructions) J Website: ► WWW.BC3.EDU H(c) Group exemption number ▶ K Form of organization: X Corporation Trust Association Other > Year of formation: 1985 M State of legal domicile: PA Part I Summary 1 Briefly describe the organization's mission or most significant activities: THE FOUNDATION SEEKS AND MANAGES Activities & Governance PRIVATE GIFTS TO SUPPORT THE COLLEGE'S MISSION. Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) 3 19 Number of independent voting members of the governing body (Part VI, line 1b) 4 19 Total number of individuals employed in calendar year 2013 (Part V, line 2a) 5 0 Total number of volunteers (estimate if necessary) 0 7 a Total unrelated business revenue from Part VIII, column (C), line 12 0. b Net unrelated business taxable income from Form 990-T, line 34 0. **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) 561,309. 1,125,626. Revenue Program service revenue (Part VIII, line 2g) 0. 0. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 416,601. 666,299. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 118,756 11 120,286. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 1,096,666. 1,912,211. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 602,832. 608,076. Benefits paid to or for members (Part IX, column (A), line 4) 0. 0. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 0. 0. 16a Professional fundraising fees (Part IX, column (A), line 11e) 0. 0. b Total fundraising expenses (Part IX, column (D), line 25) Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 205,631. 245,433. 17 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 808,463. 853,509. Revenue less expenses. Subtract line 18 from line 12 288,203. 1,058,702. Beginning of Current Year End of Year 20 Total assets (Part X, line 16) 12,396,656. 13,575,860. 21 Total liabilities (Part X, line 26) 8,220,649 8,214,949. Net assets or fund balances. Subtract line 21 from line 20 4,176,007. 5,360,911. Part II Signature Block Under penalties of perjury reclare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is information of which preparer has any knowledge. true, correct, and complet Signature of officer Sign MARY RUTH PURCELL, EXECUTIVE DIRECTOR Here Type or print name and title Print/Type preparer's name Preparer's signature 1/14/15 Paid TIMOTHY J. MORGUS self-employed P00229535 Firm's name MAHER DUESSEL, CPA'S Firm's EIN 25-1622758 Preparer Firm's address 503 MARTINDALE STREET, SUITE 600 Use Only Phone no. 412 - 471 - 5500 PITTSBURGH, PA 15212 X Yes No May the IRS discuss this return with the preparer shown above? (see instructions)

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

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Form **990** (2013)

Form	990 (2013) EDUCATION FOUNDATION 25-1555437 Page 2
Pa	t 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:
•	BUTLER COUNTY COMMUNITY COLLEGE EDUCATION FOUNDATION ENHANCES THE
	EXPERIENCES OF BC3 STUDENTS BY PROVIDING EXTERNAL RESOURCES TO SUPPORT
	THE COLLEGE'S MISSION. THE FOUNDATION IS A DRIVING FORCE THAT LINKS
	THE COMMUNITY, STUDENTS, ALUMNI, BUSINESSES, ORGANIZATIONS, AND
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured 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.
4a	(Code:) (Expenses \$ 684,464. including grants of \$ 608,076.) (Revenue \$ 763,284.)
40	THE FOUNDATION PROMOTES EDUCATIONAL EFFORTS OF BUTLER COUNTY COMMUNITY
	COLLEGE (BC3) THROUGH STUDENT SCHOLARSHIPS, ACADEMIC ENHANCEMENT AND
	CAPITAL GRANTS.
4b	(Code:) (Expenses \$
4c	(Code:) (Expenses \$
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses 684,464.
	recommendation of the extrementary and the extremen

BUTLER COUNTY COMMUNITY COLLEGE EDUCATION FOUNDATION

Form 990 (2013) EDUCATION FO
Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
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		X
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		X
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		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	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		X
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	X	
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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	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	11b	X	
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	11c		X
þ	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	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	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	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
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		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		<u> X</u>
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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			77
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u>X</u>
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			v
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to		İ	77
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			77
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		<u>X</u>
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	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			v
00	complete Schedule G, Part III	19		<u>X</u>
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
מ	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Form 990 (2013) EDUCATION FOUNDATI Part 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			
	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	Х	
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	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) 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	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			ŀ
	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			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so,			
	complete Schedule L, Part II	26		X
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	27		X
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):			
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		X
С	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	28c	ļ.,	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	l		3.7
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?	l		х
	If "Yes," complete Schedule N, Part I	31		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			X
	Schedule N, Part II	32		
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	00		X
04	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	33		22
34		24		x
05-	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	34 35a		X
35a	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	35a		- 43
b	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?	000		
J U	If "Yes," complete Schedule R, Part V, line 2	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	33		<u></u>
Ψ.	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 19?	<u> </u>		
	Note. All Form 990 filers are required to complete Schedule O	38	х	

25-1555437

EDUCATION FOUNDATION

The second color of the	Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance		·	age .							
table Enter the number reported in Box 3 of From 1096. Enter -0° into applicable		Check if Schedule O contains a response or note to any line in this Part V										
b Enter the number of Forms W-20 included in line 1a. Enter 0-If not applicable				Yes	No							
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gamming (gambling) winnings to price winners? 2a Enter the number of employees reported on Form W3. Trensmittal of Wage and Tax Statements. filed for the calendar year ending with or within the year covered by this return. 2	1a			19,005								
agrambling) winnings to prize winners? 2a Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements. 1a Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements. 1b If at least one is reported on line 2a, did the organization life all required federal employment tax returns? 2b Note. If the sum of lines 1 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 Life If Yes, 1 and 1 file of Form 950 or Tro this year? If W ₀ , 1 to line 95, provide an explanation in Schedule O 4a 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? ₱V is the provided on the provided of the organization from 1 form 9586 17 to 1 for year. 5b If Yes, 1 for the organization have annual gross receipts that are normally greater than \$100,000, and did the organization sollot any contributions that were not tax deductible? 5c Life organization and the organization from 9586 17 to 1 form	b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable										
2a Elter the number of employees reported on Form W.S. Transmittal of Wape and Tax Statements. ### Idea of the capiedary sare and ending with or within the year covered by this return ### Idea of the capiedary sare and ending with or within the year covered by this return ### Idea of the capiedary sare and the capiedary of	С											
tiled for the calendar year ending with or within the year covered by this return		(gambling) winnings to prize winners?										
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 Did the organization have unrelated business gross income of \$1,000 or more utdrig the year? 3a 3b X b if "Yes," has it filed a Form 990-T for this year / If "No. 10 line 3b, provide an explanation in Schedule O 3b A At any time during the cellandar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account; b 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 aparty to a prohibited tax shelter transaction at any time during the tax year? 5a Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year? 5b Did any stable party notify the organization this it was or is a party to a prohibited tax shelter transaction? 5b Did any stable party notify the organization this it was or is a party to a prohibited tax shelter transaction? 5c Did be reginization as a more annual gross receipts that are normally greater than \$100,000, and did the organization solicid any contributions that wave not tax deductible as charitable contributions? 5c Diff "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible with every solicitation and express statement that such contributions or gifts were not tax deductible? 7c Organizations that may receive deductible contributions under section 170(c). 8d Diff the organization receive any syment in excess of \$57 made party as a contribution and and party for goods and services provided to the payor? 7a X 7b X 7c Did the organization services any syment in excess o	2a	· · · · · · · · · · · · · · · · · · ·										
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3		,										
3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3b Dif "Yes," has filled a Form 990-T for this year? I"No," to line 3b, provide an explanation in Schedule O 3b Dif "Yes," the sit flied a Form 990-T for this year? I"No," to line 3b, provide an explanation in Schedule O 3b Dif "Yes," the terre 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 apart to a prohibited tax shelter transaction at any time during the tax year? 5b Us darry taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5c Did any taxable party notify the organization flie Form 8886-T? 5b 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 Does 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 Did the organization notify the donor of the value of the goods or services provided? 8d If "Yes," did the organization notify the donor of the value of the goods or services provided? 8d If "Yes," inclinate the number of Forms 8282 flied during the year 9 Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 Did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization for paying the premiums, directly or indirectly, to pay premiums on a personal benefit contract? 7 Did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization flie Form 8890 as required? 9 Sponsoring organization make a distribution with the organization flie organization make a distribution to a	b		2b									
b If "Yes," has it fled 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 accountif? 4b 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? 5a Was the organization a party to a prohibited tax shelter transaction? 5b If "Yes," on line 5a or 5b, did the organization file Form 88867? 6a Does the organization avainual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that there not tax deductible as charitable contributions? 6a X 5b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$5 famés party as a contribution and party for goods and services provided to the payor? 5b If "Yes," inclicate the number of Forms 8282 filed during the year 6 Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required 7 to 10 the organization received a contribution of qualified intellectual property, did the organization file a Form 109e C? 7 the organization received a contribution of qualified intellectual property, did the organization file a Form 109e C? 7 the organization make any taxable distribution sunder section 509(a)(3) supporting organizations. Did the supporting organization make any taxable distributions under section 509(a)(3) supporting organizations. Did the supporting organization make any taxable distr												
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)? See instructions for filing requirements for Form TD F90.22.1, Report of Foreign Bank and Financial Accounts. Sa Was the organization reprive to a prohibited tax shelter transaction at any time during the tax year? 5a IX to did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b IX TYes, 'to line 5a or 5b, did the organization file Form 8896-17 6a Does the organization have annual gross recolpts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 6b If Yes, 'did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). 8 Did the organization receive a payment in excess of \$75 made party as contribution and party for goods and services provided to the payor? 7 b If Yes, 'did the organization notify the donor of the value of the goods or services provided? 7 b If Yes, 'did the organization received a contribution of value of the goods or services provided? 7 b If the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? 7 c X 7 b If the organization received a contribution of qualified intellectual property, did the organizations. 8 personal payment in excess of a contribution of cars, boats, anjanes, or other vehicles, did the organizations for Form 8998 as required? 9 Spensoring organizations maintaining donor advised funds and section 599(8)(3) supporting organizations. Did the organizations maintaining donor advised funds. 9 Did the organization make any taxable distributions under section 4966?					X							
financial account in a foreign country (such as a bank account, securities account, or other financial account)? 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 ID did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b IS X c If "Yes," to line 5a or 5b, did the organization file Form 8868-T? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 6a X b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made party as a contribution or promise provided to the payor? 7 If "Yes," did the organization notify the donor of the value of the goods or services provided? 7 To "Yes," indicate the number of Forms 8282 filed during the year 8 Did the organization receive an yinds, directly or indirectly, to pay premiums on a personal benefit contract? 7 To "ID the organization receive an yinds, directly or indirectly, to pay premiums on a personal benefit contract? 8 Spensoring organization received an contribution of orar, boats, signless, or other vehicles, did the organization? 9 If the organization received an orar boats and section 50f(a)(3) supporting organizations. Did the supporting organization make any taxable distributions under section 49687, 9 Did the organization make any taxable distributions under section 49687, 9 Did the organization make any taxable distributions under section 49687, 9 Did the organization make any taxable distributions under			3b		<u> </u>							
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Form 990 (2013)

BUTLER COUNTY COMMUNITY COLLEGE EDUCATION FOUNDATION

25-1555437

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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.

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	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 of the governing body, or if the governing	0.000.00		
	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 1b 19			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2	January (150-11)	X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
-	persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a	The governing body?	8a	Х	1000 (100) (1000 (1000 (100) (1000 (1000 (100) (1000 (100) (1000 (1000 (100) (1000 (100) (1000 (100) (1000 (100) (1000 (100) (1000 (100) (1000 (100) (1000 (100) (1000 (100) (1000 (100) (1000 (100) (100) (1000 (100) (100) (1000 (100) (1000 (100) (100) (1000 (100) (100) (100) (1000 (100) (100) (1000 (100) (
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	-		
J	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	100		
_	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		(A) (S)	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	1996111199
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
•	in Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent	5696	#85.50	
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		90.00	
а	The organization's CEO, Executive Director, or top management official	15a	essentante.	X
	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		88	
16a	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	West Control	X
'n	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	50836	W60/088	67/69/S
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's	2550.0		
	exempt status with respect to such arrangements?	16b	4563756V	2011/22/1003
Sec	tion C. Disclosure	100		
17	List the states with which a copy of this Form 990 is required to be filed NONE			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) is	availah	le	
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, an	d finen	icia!	
	statements available to the public during the tax year.	- 111 ICI	Jiai	
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organiza	tion [,]		
	MARY RUTH PURCELL - (724) 287-8711	siveli 🏴		
	107 COLLEGE DRIVE, BUTLER, PA 16002			

BUTLER COUNTY COMMUNITY COLLEGE EDUCATION FOUNDATION

25-1555437

Form 990 (2013) Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

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

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

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

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

Check this box if neither the organizati (A)	(B)	liga	211122))	npe	isai	(D)	(E)	(F)
Name and Title	Average	١		Pos	ition	1		Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	sck more than one person is both an a director/trustee)			compensation	compensation	amount of
	week	<u> </u>	cer an	dad	irecto	or/trus	tee)	from	from related	other
	(list any hours for	trustee or director						the organization	organizations	compensation
	related	9000	slee			Highest compensated employee		(W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	organizations	trast	institutional trustee		ak	эшрег		(** 2) 1000 111100)		and related
	below	Individual	igg.	<u>ي</u>	Key employee	lest co	Jei			organizations
***************************************	line)	횰	ilisti	Officer	Key	Ema	Form			
(1) MRS. AMY K. BEILER	0.70								_	_
SECRETARY	4	X		Х				0.	0.	0.
(2) DR. ANTHONY C. BILOTT	1.30								_	
TREASURER		X		X		L		0.	0.	0.
(3) MR. ARTHUR H. ARONSON	0.30									_
DIRECTOR	4 5 6	X						0.	0.	0.
(4) MR, JAMES A. BECK	1.50									_
VICE CHAIR	0.10	Х		X				0.	0.	0.
(5) MS. JOAN T. CHEW	0.10	,,						_		
DIRECTOR	0.00	X						0.	0.	0.
(6) MS. CAROL ACHEZINSKI	0.20	37								•
DIRECTOR	0.20	X				<u> </u>		0.	0.	0.
(7) MR. MAURICE GOODWIN	0.20	х						0.	_	^
OIRECTOR (8) MRS. JOCELYN H. SINOPOLI	0.80	^						U •	0.	0.
DIRECTOR	0.00	X						0.	0.	0.
(9) MR, DAVID C, HUSEMAN	0.30	^						V •	V •	<u></u>
DIRECTOR	0.50	х						0.	0.	0.
(10) MR. LEWIS P. MCEWEN	0.40	77						0.	0.	· ·
DIRECTOR	0.20	X						0.	0.	0.
(11) MR. MARTIN J. O'BRIEN	0.50					-			U • :	
DIRECTOR		x						0.	0.	0.
(12) MRS, JEAN B, PURVIS	0.80									
DIRECTOR		х						0.	0.	0.
(13) DR. NICHOLAS C. NEUPAUER	18.00									
DIRECTOR		X						0.	0.	0.
(14) MR. TONY SHAKELY	0.50									
DIRECTOR		X						0.	0.	0.
(15) MRS. LUCILLE SHAPIRO	0.70									
DIRECTOR		X	_					0.	0.	0.
(16) MR. RAY D. STEFFLER	0.50			\neg						
DIRECTOR		X						0.	0.	0.
(17) MRS, KELLY A. GILES	0.10									
DIRECTOR		X						0.	0.	0.

Part VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	/ees	, an	d Hi	ighe	st (Compensated Employe	es (continued)		
(A) Name and title	(A) (B)			Pos heck ss pe	C) ition more rson		one h an	(D) Reportable compensation	(E) Reportable compensation from related		(F) Estimated amount of other
	(list any hours for related organizations below line)	Indiwidual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	ormer	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC	3)	compensation from the organization and related organizations
(18) MRS. NANCY HUNTER MYCKA	1.10				_		Г				_
DIRECTOR	1 20	X	<u> </u>	ļ		<u> </u>	_	0.		0.	0.
(19) MR. JAMES A. TAYLOR CHAIR	1.30	X	l	x				0.		٥.	0.
(20) MS. MARY RUTH PURCELL	40.00	Ĥ	 	^	-	╁	 	0.		-	0.
EXECUTIVE DIRECTOR	10.00		ł	x				110,025.		٥.	23,782.
						†				\exists	
					L						
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			-	_	_	-	├			\dashv	
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							1				
		ļ	<u> </u>	<u> </u>		ļ	<u> </u>				
		-									
1b Sub-total		L		L	l	<u></u>	┕	110,025.		0.	23,782.
c Total from continuation sheets to Part VI								0.		0.	0.
d Total (add lines 1b and 1c)								110,025.		0.	23,782.
2 Total number of individuals (including but n								received more than \$100	0,000 of reportable		_
compensation from the organization									<u>.</u>		1
3 Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s				-	-			•			Yes No
4 For any individual listed on line 1a, is the su	ım of reportab	le co	omp	ensa	atior	n and	d ot		the organization		
and related organizations greater than \$150											4 X
5 Did any person listed on line 1a receive or a	-				-			- -			5 X
rendered to the organization? If "Yes," com Section B. Independent Contractors	piete Scriedui	201	OF SI	ucn	pers	SOII		1,144,14,11,141,141,141,141,141,141,141	*************************	<u>. بند</u>	5 X
Complete this table for your five highest co									·	ensa	ation from
the organization. Report compensation for (A)	the calendar y	ear	endi	ng v	vith	or w	'ithi	n the organization's tax (B)	year.		(C)
Name and business	address	N	INC	E				Description of s	ervices	C	ompensation
· · · · · · · · · · · · · · · · · · ·											
										ostalarens i	
2 Total number of independent contractors (i	=	ot li	mite	d to		se li: O	ste	d above) who received n	nore than		
\$100,000 of compensation from the organiz	zation 📂		·			<u> </u>					- 000 (oo4o)

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Form 990 (2013)

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (D) Revenue excluded from tax under sections 512 - 514 (B) (C) Related or Total revenue Unrelated business exempt function revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a b Membership dues 1b 38,690. c Fundraising events 1c d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 1f 1,086,936 41,019. g Noncash contributions included in lines 1a-1f; \$ 1,125,626 h Total. Add lines 1a-1f Business Code 2 a Program Service Revenue f All other program service revenue g Total. Add lines 2a-2f Investment income (including dividends, interest, and 666,299. 666,299. other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (ii) Personal 300,000. 6 a Gross rents 218,676. b Less: rental expenses 81,324. c Rental income or (loss) 81,324 81,324. d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (ii) Other assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ 38,690. of contributions reported on line 1c). See 43,731 Part IV, line 18 a 34,151. b Less: direct expenses _____ b 9,580. 9,580. c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 a b Less: direct expenses _____ b c Net income or (loss) from gaming activities . 10 a Gross sales of inventory, less returns and allowances _____a b Less: cost of goods sold _____ b c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a SALES COMM./SPONS. INC 900099 13,721. 13,721. 900099 15,661. 15,661. d All other revenue 29,382. e Total. Add lines 11a-11d 912,211. 763,284. 23,301. Total revenue. See instructions.

EDUCATION FOUNDATION

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (D) Fundraising (A) Total expenses Do not include amounts reported on lines 6b. Program service Management and 7b, 8b, 9b, and 10b of Part VIII. ĕxpenses general expenses expenses Grants and other assistance to governments and 436,776. 436,776. organizations in the United States. See Part IV, line 21 Grants and other assistance to individuals in 171,300. 171,300. the United States. See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages _____ Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 9 10 Payroll taxes Fees for services (non-employees): 11 a Management 10,710. 10,710. b Legal 58,705. 58,705. c Accounting d Lobbying e Professional fundraising services. See Part IV, line 17 20,757. 20,757. Investment management fees _____ Other, (If line 11g amount exceeds 10% of line 25, 28,912. 1,200. 341 27,371. column (A) amount, list line 11g expenses on Sch O.) 17,814. 17,814. Advertising and promotion 12 13 Office expenses Information technology 14 Royalties 15 16 Occupancy 17 Travel Payments of travel or entertainment expenses 18 for any federal, state, or local public officials Conferences, conventions, and meetings 19 20 21 Payments to affiliates _____ 22 Depreciation, depletion, and amortization 3,716. 3,716. 23 Insurance Other expenses, Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.) 44,876. 44,876. EDUCATIONAL PROGRAM EXP 14,427. 3,272. HOSPITALITY 11,155. 6,145. EVENTS AND COMMUNITY SU 6,145. d 39,371. 27,040. 4,894. 7,437. All other expenses 110,278. Total functional expenses. Add lines 1 through 24e 853,509. 684,464. 58,767. 25 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)

Form 990 (2013)
Part X Balance Sheet

гa	rt X	Balance Sneet					
		Check if Schedule O contains a response or not	e to an	y line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		1			
	2	Savings and temporary cash investments	1,162,451.	2	1,142,246.		
	3	Pledges and grants receivable, net		3	250,195.		
	4	Accounts receivable, net			24,437.	4	2,634.
	5	Loans and other receivables from current and for	rmer o	fficers, directors,			
		trustees, key employees, and highest compensa	ated en	nployees. Complete			
		Part II of Schedule L				5	
	6	Loans and other receivables from other disqualit	fied per	rsons (as defined under			
		section 4958(f)(1)), persons described in section	4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of sect				9.5	
sts		employees' beneficiary organizations (see instr).				6	
Assets	7	Notes and loans receivable, net				7	
•	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			335.	9	285.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	3,276,686.			4.2.4 5.2 6.5 6.6 6.6
	b	Less: accumulated depreciation	10b	417,865.	2,971,641.	10c	
	11	Investments - publicly traded securities			3,082,758.	11	3,944,849.
	12	Investments - other securities. See Part IV, line 1			5,155,034.	12	5,376,830.
	13	Investments - program-related. See Part IV, line				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11				15	
	16	Total assets. Add lines 1 through 15 (must equa			12,396,656.	16	13,575,860.
	17	Accounts payable and accrued expenses			228,008.	17	148,603.
	18	Grants payable				18	
	19	Deferred revenue			136,064.	19	96,800.
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete F				21	
es	22	Loans and other payables to current and former		18			
Ħ		key employees, highest compensated employee		· · · · · · · · · · · · · · · · · · ·			
Liabilities		Complete Part II of Schedule L			0 704 540	22	
_	23	Secured mortgages and notes payable to unrela			2,701,543.	23	2,592,716.
	24	Unsecured notes and loans payable to unrelated				24	
	25	Other liabilities (including federal income tax, pay					
		parties, and other liabilities not included on lines	17-24)	. Complete Part X of	E 1EE 004		F 250 020
		Schedule D	•••••		5,155,034.	25	5,376,830.
	26	Total liabilities. Add lines 17 through 25			8,220,649.	26	8,214,949.
		Organizations that follow SFAS 117 (ASC 958)		k here ▶ 🔼 and			
Ses		complete lines 27 through 29, and lines 33 and			1 100 000		1 200 000
<u>a</u>	27	Unrestricted net assets	1,106,628.	27	1,329,978.		
Ba	28	Temporarily restricted net assets	1,414,616.	28	2,196,860.		
pu.	29	Permanently restricted net assets			1,654,763.	29	1,834,073.
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (AS	SC 958), cneck here 🕨 📖			
30		and complete lines 30 through 34.					
set	30	Capital stock or trust principal, or current funds				30	
As	31	Paid in or capital surplus, or land, building, or eq				31	
let	32	Retained earnings, endowment, accumulated inc			A 176 007	32	
_	33	Total net assets or fund balances			4,176,007.	33	5,360,911.
	34	Total liabilities and net assets/fund balances			12,396,656.	34	13,575,860.

Form	990	(2013)	

Pa	rt XI Reconciliation of Net Assets		•					
	Check if Schedule O contains a response or note to any line in this Part XI	**************						
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,91	2,2:	11.			
2	Total expenses (must equal Part IX, column (A), line 25)	2	853	3,50	09.			
3	Revenue less expenses. Subtract line 2 from line 1							
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))							
5	Net unrealized gains (losses) on investments	5	120	5,20	02.			
6	Donated services and use of facilities	6						
7	Investment expenses	7						
8	Prior period adjustments	8						
9	Other changes in net assets or fund balances (explain in Schedule O)	9			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	5,360	0,9:	11.			
Pa	rt XIII Financial Statements and Reporting							
	Check if Schedule O contains a response or note to any line in this Part XII				X			
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	Yes	No X			
	Were the organization's financial statements compiled or reviewed by an independent accountant? 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? 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?							
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?							
Ŋ	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audits explain why in Schedule O and describe any steps taken to undergo such audits.	ireu auuil	36		ı			

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

➤ 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.

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

BUTLER COUNTY COMMUNITY COLLEGE EDUCATION FOUNDATION

Employer identification number 25-1555437

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

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

Schedule A (Form 990 or 990-EZ) 2013

Total

Schedule A (Form 990 or 990-EZ) 2013 EDUCATION FOUNDATION

Part III 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.) Section A. Public Support Calendar 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.") 561,819. 501,140. 660,936. 561,309. 1,125,626 3,410,830. 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 501,140. 561,819. 660,936. 561,309. 4 Total. Add lines 1 through 3 1,125,626 3,410,830. 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) 197,626. 3,213,204. 6 Public support. Subtract line 5 from line 4. Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2009 (b) 2010 (c) 2011 (d) 2012 (e) 2013 (f) Total 561,819 501,140. 660,936. 561,309. 7 Amounts from line 4 1,125,626. 3,410,830. 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties 524,197. 657,113. 779,867. 741,277. 753,505. 3,455,959. and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) 6,866,789. 11 Total support. Add lines 7 through 10 74,877. 12 Gross receipts from related activities, etc. (see instructions)

13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

and stop here. The organization qualifies as a publicly supported organization

17a 10% -facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

• •

b 10% -facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

. 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2013 EDUCATION FOUNDATION

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	ľ					
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						
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						
,	Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6.)						
	ction B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	Amounts from line 6	(4) 2000	(2) 2010	(0) 2011	(4) 2012	(0) 2010	(i) Total
	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and income from similar sources						
h	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 20, 1075						
	* *************************************						
	Add lines 10a and 10b Net income from unrelated business						
, ,	activities not included in line 10b,						
	whether or not the business is						
12	regularly carried on Other income. Do not include gain						
12.	or loss from the sale of capital						
	assets (Explain in Part IV.)						
	Total support. (Add lines 9, 10c, 11, and 12.)					<u></u> _	
14	First five years. If the Form 990 is for	<u> </u>	-	•	•	1 /1 /	· —
0	check this box and stop here						<u></u>
	tion C. Computation of Publ	···				1 1	
	Public support percentage for 2013 (15	
	Public support percentage from 2012			***************************************		16	<u>%</u>
	tion D. Computation of Inve					Г <u>.</u>	
	Investment income percentage for 20					17	
	Investment income percentage from					18	<u>%</u>
19a	33 1/3% support tests - 2013. If the	_					
	more than 33 1/3%, check this box a			· ·	- · ·		
b	33 1/3% support tests - 2012. If the	-					
	line 18 is not more than 33 1/3%, che		_			-	
20	Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check th	is box and see ins	structions	<u></u> ▶Ц

Schedule A	(Form 990 or 990-EZ) 2013 EDUCATION FOUNDATION	25-1555437 Page 4
Part IV	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a	or 17b; and Part III, line 12.
	Also complete this part for any additional information. (See instructions).	
,		
		<u> </u>
		· · · · · · · · · · · · · · · · · · ·
		
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Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

BUTLER COUNTY COMMUNITY COLLEGE

OMB No. 1545-0047

2013

Employer identification number

El	DUCATION FOUNDATION	25-1555437					
Organization type (check o	Organization type (check one):						
Filers of:	Section:						
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization						
	4947(a)(1) nonexempt charitable trust not treated as a private foundation						
	527 political organization						
Form 990-PF	501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a private foundation						
	501(c)(3) taxable private foundation						
	s covered by the General Rule or a Special Rule. (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rul	le. See instructions.					
General Rule							
For an organization contributor. Complete	n filing Form 990, 990·EZ, or 990·PF that received, during the year, \$5,000 or more (in molete Parts I and II.	oney or property) from any one					
Special Rules							
509(a)(1) and 170(I	c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the region b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the gi) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.						
total contributions	For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.						
For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year							
Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to ertify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).							

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

Name of organization
BUTLER COUNTY COMMUNITY COLLEGE
EDUCATION FOUNDATION

Employer identification number

25-1555437

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	I space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$35,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$ 24,400.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$100,000 .	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$50,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroli Noncash (Complete Part II for noncash contributions.)

Name of organization BUTLER COUNTY COMMUNITY COLLEGE EDUCATION FOUNDATION

Employer identification number

25-1555437

Part II	Noncash Property (see instructions). Use duplicate copies of Part	II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		s	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
23453 10-24-	-13	Schedule B (Form 9	90, 990-EZ, or 990-PF) (2013)

EDUCATION FOUNDATION

25-1555437

Employer identification number

Part III	Exclusively religious, charitable, etc., individ year. Complete columns (a) through (e) and the	ual contributions to section 501(c following line entry. For organization	c)(/), (8), or (10) organizations that total more than \$1,000 for the ions completing Part III, enter or the year. (Enter this information once.)
	the total of exclusively religious, charitable, etc., Use duplicate copies of Part III if additional	contributions of \$1,000 or less for space is needed.	or the year. (Enter this Information once.) \$
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
:			
-		(e) Transfer of git	ft
	Transferee's name, address, and		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
- Faiti			
•		(e) Transfer of git	
	'Transferee's name, address, and		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
-			
	<u>L</u>	(e) Transfer of gif	ft
	Transferee's name, address, and	ZIP + 4	Relationship of transferor to transferee
-			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gif	ft
_	Transferee's name, address, and	ZiP + 4	Relationship of transferor to transferee
-			
1			

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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.

Employer identification number

OMB No. 1545-0047

Open to Public

EDUCATION FOUNDATION 25-1555437 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I

BUTLER COUNTY COMMUNITY COLLEGE

organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year _____ 1 Aggregate contributions to (during year) Aggregate grants from (during year) 3 Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of 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 of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements 2a b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax Number of states where property subject to conservation easement is located > Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? J No Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year > \$ 7 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)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, 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 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenues included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

Schedule D (Form 990) 2013 EDUCATION FOUNDATION

25-1555437 Page 2

Par	t III Organizations Maintaining C	ollections of Ar	t, Historical Tr	easures, d	or Othe	r Similar	Asse	ts(continued)
3	Using the organization's acquisition, accession	on, and other record	s, check any of the	following tha	t are a si	gnificant us	e of its	collection items
	(check all that apply):							
а	Public exhibition	d	Loan or excl	hange progra	ams			
b	Scholarly research	e		5 , 5				
c	Preservation for future generations							
4	Provide a description of the organization's co	llections and explain	how they further th	ne organizati	naya a'an	ant nurnes	e in Par	t XIII
5	During the year, did the organization solicit or		· · · · · · · · · · · · · · · · · · ·				0 II 1 UI	C7GH.
•	to be sold to raise funds rather than to be ma							Yes No
Pai	t IV Escrow and Custodial Arrang							
1	reported an amount on Form 990, Par		ne ii the organizatio	ii answered	103 10	1 0(11) 550, 1	C(1114, 1	1110 0, 01
1a	Is the organization an agent, trustee, custodia	an or other intermed	iary for contribution	s or other as	sets not	included		
	on Form 990, Part X?		-					Yes No
b	If "Yes," explain the arrangement in Part XIII a							
-			g talling					Amount
С	Beginning balance					1c		
	Additions during the year							
e	Distributions during the year					··		
f	Ending balance	000 D-4 V II				. 1f		Tv
2a	Did the organization include an amount on Fo							」Yes No
	If "Yes," explain the arrangement in Part XIII.							
Fai	t V Endowment Funds. Complete if							
	_	(a) Current year	(b) Prior year	(c) Two year		· · · · · · · · · · · · · · · · · · ·		(e) Four years back
1a	Beginning of year balance	1,784,338.	1,644,737.		0,785.		2,096.	
d	Contributions	182,107.	127,929.		5,378.		L,137.	<u> </u>
С	Net investment earnings, gains, and losses		20,031. 12,2272,265. 23,517.					
d	Grants or scholarships	992.	555.	10	0,161.	9 5	3,965.	78,076.
е	Other expenditures for facilities							
	and programs							
f	Administrative expenses							
g	End of year balance	1,985,484.	1,784,338.	1,64	1,737.	1,580	3,785.	1,582,096.
2	Provide the estimated percentage of the curr	ent vear end balanc	e (line 1a. column (a	i)) held as:				
	Board designated or quasi-endowment	7.60	%	.,				
b	Permanent endowment ▶ 92.40	%	- '-					
	Temporarily restricted endowment	% %						
•	The percentages in lines 2a, 2b, and 2c shou	-						
3-1	Are there endowment funds not in the posses		ation that are held a	nd administa	rad for th	ae organizat	tion	
Ja	·	ssion of the organiza	ation that are neitra	nu aummiste	iled for ti	ic organizat	1011	Yes No
	by:							
	(i) unrelated organizations							·
_	(ii) related organizations						•••••	. ++(1.1)
b	If "Yes" to 3a(ii), are the related organizations							. 3b
100	Describe in Part XIII the intended uses of the		wment funds.					
rai	t VI Land, Buildings, and Equipm		D 1011 44 0	F 000	D 1371	v 40		
	Complete if the organization answered						1	
	Description of property	(a) Cost or of	' '	or other		cumulated		(d) Book value
		basis (investm	,		aep	preciation	25058	4EE 001
	Land			5,991.		14 B - 2 C		455,991.
b	Buildings		2,82	0,695.	4	117,86	5 •	2,402,830.
C	Leasehold improvements							
d	Equipment							
	Other							
Total	. Add lines 1a through 1e. (Column (d) must ed	qual Form 990, Part	X, column (B), line 1	O(c).)			•	2,858,821.

E	SUTLER COUN'	TY COMMUNITY	COLLEGE			
00000.00	DUCATION FO	MOITAGMUC		25-155543		
Part VII Investments - Other	er Securities.					
Complete if the organization answered "Yes" to Form 990, Part IV, line 11b. See Form 990, Part X, line 12.						
(a) Description of security or category (in	cluding name of security)	(b) Book value	(c) Method of valua	ation: Cost or end-of-year marke		

Complete if the organization answered "Yes"	' to Form 990, Part IV, li		
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation:	Cost or end-of-year market value
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A) INVESTMENT AGREEMENT	5,376,83	0. END-OF-YEAR	MARKET VALUE
(B)	1,		
(C)			
(D)			
(E)			
(F)			
(G)			
(H)	5 276 92	0	
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	5,376,83	U • [
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes'		ne 11c. See Form 990, Part X, Iir	ne 13.
(a) Description of investment	(b) Book value	(c) Method of valuation:	Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes"	to Form 990 Part IV li	ne 11d. See Form 990. Part X. lir	ne 15
• • • • • • • • • • • • • • • • • • • •	Description	10.00010111000,1 4117, 11	(b) Book value
(1)			(D) DOOK TOILD
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) lin	e 15.)		
Part X Other Liabilities.			
Complete if the organization answered "Yes"	to Form 990, Part IV, lin		rt X, line 25.
(a) Description of liability		(b) Book value	
(1) Federal income taxes			
(2) SUPPORT AGREEMENT		5,376,830.	
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
্বে) Fotal. (Column (b) must equal Form 990, Part X, col. (B) lin	e 25.)	5,376,830.	
otan (Johann (b) must equal i thin 330, Falt A, tol. (B) IIII	~ <i>~~</i> //	-,-,-,-,-,-,-,-,-,-,-,-,-,-,-,-,-,-,-,	

2. Liability for uncertain tax positions. 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 Schedule D (Form 990) 2013

EDUCATION FOUNDATION

Revenue per Audited Financial State

Pai	Complete if the exampletion appropriate Form 900. But IV line 12a	ents with	nevenue per r	teturn.	•
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a. Total revenue, gains, and other support per audited financial statements			4	2,291,240.
1		***************	**********************		2,271,240.
2 a	Amounts included on line 1 but not on Form 990, Part VIII, line 12: Net unrealized gains on investments	2a	126,202.		
b	Donated services and use of facilities			1	
C	Recoveries of prior year grants			1	
d	Other (Describe in Part XIII.)		252,827.		
e	Add lines 2a through 2d			2e	379.029.
3	Subtract line 2e from line 1			3	379,029. 1,912,211.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		***************************************	NEWS TRANS	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	1		1	
С	Add lines 4a and 4b			4c	0.
5	Total revenue. Add lines 3 and 4c, (This must equal Form 990, Part I, line 12.)			5	1,912,211.
Pai	rt XII Reconciliation of Expenses per Audited Financial Statem			Retur	๊ก.
*************	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.				
1	Total expenses and losses per audited financial statements			1	1,106,336.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII.)	2d	252,827.		
е	Add lines 2a through 2d			2e	252,827.
3	Subtract line 2e from line 1			3	853,509.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
	Investment expenses not included on Form 990, Part VIII, line 7b				
	Other (Describe in Part XIII.)	***************************************		13501652	^
	Add lines 4a and 4b			4c	0.
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		***************************************	5	853,509.
	rt XIII Supplemental Information.	N		4. 25	/ P A - M - 1 > //
	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part			4; Part)	K, line 2; Part XI,
mies	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any addi	itional inion	nation.		
PAF	RT V, LINE 4:				
					,
EXI	PLANATION: THE ENDOWMENT INCLUDES THE BOAR	D ENDO	WMENT WHIC	H IS	SPENT AT
THE	E DISCRETION OF THE BOARD FOR THE PURPOSES	STATE	D IN THE G	OVER	RNING
DOC	CUMENTS OF THE FOUNDATION. IT ALSO INCLUDE	ES THE	GENERAL S	CHOL	ARSHIP
ENI	DOWMENT WHICH IS USED TO PROVIDE SCHOLARSH:	IPS TO	STUDENTS	ATTE	NDING
T) 7 T T					
RO.1	TLER COUNTY COMMUNITY COLLEGE.				
			····		
ממק	RT XI, LINE 2D - OTHER ADJUSTMENTS:				
T 1.11	ti Ai, bine 2D offick ADOODIMBNID.				
SPE	CIAL EVENTS REVENUE				34,151.
					~ 4/4/4
REN	NTAL EXPENSES				218,676.
rot	TAL TO SCHEDULE D, PART XI, LINE 2D				252,827.

25-1555437 Page 5 Schedule D (Form 990) 2013 EDUCATION FOUNDATION Part XIII | Supplemental Information (continued) PART XII, LINE 2D - OTHER ADJUSTMENTS: SPECIAL EVENTS EXPENSE 34,151. RENTAL EXPENSES 218,676. TOTAL TO SCHEDULE D, PART XII, LINE 2D 252,827.

SCHEDULE G

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

Attach to Form 990 or Form 990-EZ.

2013

Open To Public Inspection

Name of the organization

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

BUTLER COUNTY COMMUNITY COLLEGE Emplo

m 990 Employer identification number

EDUCATION FOUNDATION 25-1555437 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not Part I required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations e L Solicitation of non-government grants а Internet and email solicitations h Solicitation of government grants Phone solicitations Special fundraising events C d In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or __ Yes No key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (iii) Did fundraiser have custody or control of contributions? (v) Amount paid (vi) Amount paid (i) Name and address of individual (iv) Gross receipts to (or retained by) (ii) Activity to (or retained by) or entity (fundraiser) from activity fundraiser organization listed in col. (i) Yes 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Schedule G (Form 990 or 990-EZ) 2013 EDUCATION FOUNDATION 25-1555437 Pace Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000

25-1555437 Page 2

		of fundraising event contributions and g	ross income on Form 990	EZ, lines 1 and 6b. List	events with gross receip	ots greater than \$5,000.
			(a) Event #1 18TH FOUNDATION G	(b) Event #2	(c) Other events NONE	(d) Total events (add col. (a) through
			(event type)	(event type)	(total number)	col. (c))
nue			(orom typo)	(availe type)	(total namber)	
Revenue	1	Gross receipts	82,421.			82,421.
	2	Less: Contributions	38,690.		-	38,690.
	3	Gross income (line 1 minus line 2)	43,731.			43,731.
	4	Cash prizes				
ψ	5	Noncash prizes				
pense	6	Rent/facility costs				:
Direct Expenses	7	Food and beverages				
	8	Entertainment				
	9	Other direct expenses	26,579.			26,579.
	10	Direct expense summary. Add lines 4 throug	h 9 in column (d)	***************************************	>	26,579.
Pa	11 urb	Net income summary. Subtract line 10 from Gaming. Complete if the organization	line 3, column (d)	000 Part IV line 10 or	······	17,152.
1.25	92.3	\$15,000 on Form 990-EZ, line 6a.	answered tes to roini	990, Part IV, line 19, or i	eported more than	
		ψ10,000 011 0111 000 EE, 1110 001		(b) Pull tabs/instant		(d) Total gaming (add
Revenue			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))
eve						
	1	Gross revenue				
Ses	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
	5	Other direct expenses				
			Yes%	Yes%	Yes%	
	6	Volunteer labor	No No	No No	□ No	
	7	Direct expense summary. Add lines 2 through	h 5 in column (d)		>	
	0	Not gaming income summary Subtract line 7	from line 1 column (d)		_	
	8	Net gaming income summary. Subtract line 7	from line 1, column (a)		······	
9 a		ter the state(s) in which the organization opera the organization licensed to operate gaming ac		states?		Yes No
b	If "	No," explain:				
		ere any of the organization's gaming licenses re			/ear?	Yes No

Sch	edule G (Form 990 or 990-EZ) 2013 EDUCATION FOUNDATION 25-	-15554	137	Page 3
	Does the organization operate gaming activities with nonmembers?	🗆 🛚 🗡	'es	☐ No
	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?	,	⁄es	□ No
13	Indicate the percentage of gaming activity operated in:	·		
	The organization's facility	13a		%
	An outside facility			%
	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
	Name			
	Address >			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	D Y	es (☐ No
b	If "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount			
	of gaming revenue retained by the third party > \$			
C	If "Yes," enter name and address of the third party:			
	Name >			
	Address ►			
16	Gaming manager information:			
	Name			
	Gaming manager compensation ▶ \$			
	Description of services provided			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
	Is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license?	🗀 Y	⁄es	☐ No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the			
	organization's own exempt activities during the tax year ▶ \$			····
Pa	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).	, lines 9, 9	9b, 10	b, 15b,
•	Too, tot and trop de application and compose the part to provide any additional mental and compose mental and to			
				······································

SCHEDULE I (Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

OMB No. 1545-0047 2013 Open to Public

Department of the Treasury Internal Revenue Service

Attach to Form 990.

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990
BUTLER COUNTY COMMUNITY COLLEGE inspection Name of the organization Employer identification number EDUCATION FOUNDATION 25-1555437 Part | General Information on Grants and Assistance 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? X No Yes Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part II 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. (f) Method of 1 (a) Name and address of organization (c) IRC section (d) Amount of (e) Amount of (g) Description of non-cash assistance (b) EIN (h) Purpose of grant or assistance valuation (book, FMV, appraisal, other) if applicable cash grant assistance BUTLER COUNTY COMMUNITY COLLEGE REIMBURSEMENT FOR COLLEGE 107 COLLEGE DRIVE PROGRAMS FROM AVAILABLE 25-1154027 BUTLERCO COM COLLEGE 436,776 BUTLER, PA 16002 GRANTS

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

3 Enter total number of other organizations listed in the line 1 table

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

Schedule I (Form 990) (2013)

332101 10-29-13

Schedule I (Form 990) (2013) EDUCATION FOUND		CODDECE			25-1555437 Page 2
Part III Grants and Other Assistance to Individuals in the Uni Part III can be duplicated if additional space is needed.	ited States. Com	plete if the organiza	ation answered "Yes	* to Form 990, Part IV, line 22.	
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
ANNUAL & DONOR ENDOWED SCHOLARSHIPS	149	159,601.	0.		
BROCKWAY & EITC-CWHS-STUDENTS	405	9,239.	0.		
GED APPLICATION FEE GRANTS	33	2,460.	0.		
Part IV Supplemental Information. Provide the information req	uired in Part I, lin	e 2, Part III, column	(b), and any other a	dditional information.	
PART I, LINE 2:					
EXPLANATION: THE GRANT FUNDS ARE P	ROVIDED	TO THE BUT	LER COUNTY	COMMUNITY	
COLLEGE WHO IS AUDITED ANNUALLY BY	AN INDE	PENDENT AU	DITOR. TH	E FOUNDATION	
MONITORS SOME OF THE GRANT EXPENSE	S BY REV	IEWING INV	OICES PROV	IDED BY THE	
COLLEGE.					
332102 10-29-13					Schedule I (Form 990) (2013)

SCHEDULE J (Form 990)

Compensation Information

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

25-1555437

Department of the Treasury
Internal Revenue Service
Name of the organization

BUTLER COUNTY COMMUNITY COLLEGE EDUCATION FOUNDATION

m990 | Employer identification number

OMB No. 1545-0047

Part 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 reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain _____ 1b 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 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's 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. Compensation committee Written employment contract Independent compensation consultant Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee 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: a Receive a severance payment or change-of-control payment? Х 4a X b Participate in, or receive payment from, a supplemental nonqualified retirement plan? c Participate in, or receive payment from, an equity-based compensation arrangement? X 4c 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. 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: a The organization? X X b Any related organization? If "Yes" to line 5a or 5b, describe in Part III. 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: Х a The organization? 6a X b Any related organization? If "Yes" to line 6a or 6b, describe in Part III. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments X not described in lines 5 and 6? If "Yes," describe in Part III 7 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the X initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

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

Schedule J (Form 990) 2013

BUTLER COUNTY COMMUNITY COLLEGE EDUCATION FOUNDATION

Schedule J (Form 990) 2013 EDUCATION FOUNDATION 25-1555437

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

25-1555437

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.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation				(D) Nontaxable benefits	(E) Total of columns	
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	Белепть	(B)(i)-(D)	reported as deferred in prior Form 990
(1) MS, MARY RUTH PURCELL	(i)	108,629.	1,000.	396.	10,093.	13,689.	133,807.	0.
EXECUTIVE DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							1
	(ii)							
	(i)							
	(ii)							
	(i)							
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	(ii)							
	1797	I	L	L	L		J. Schad	ule J (Form 990) 2013

Schedule J (Form 990) 2013

Page 2

332112 09-13-13

Schedule J (Form 990) 2013 EDUCATION FOUNDATION	25-1555437	Page 3
Part III Supplemental Information		
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part	 Also complete this part for any additional information. 	
SCHEDULE J, PART II, LINE 1		
EXPLANATION: AMOUNTS REPORTED IN FORM 990, SCHEDULE J, PART II WERE		
PAID BY BUTLER COUNTY COMMUNITY COLLEGE, AN UNRELATED ORGANIZATION.		
	,	

Schedule J (Form 990) 2013

332113 09-13-13

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization

BUTLER COUNTY COMMUNITY COLLEGE EDUCATION FOUNDATION

Employer identification number 25-1555437

Clack if applicable Contribution or amounts reported on amounts reported reported on amounts reported reported on amounts reported reported on amounts reported	Par	t l Types of Property					
2 Art - Historical treasures 3 Art - Fractional interests 4 Books and publications 5 Clothing and household goods 6 Cars and other vehicles 7 Boats and planes 8 Intellectual property 9 Securities - Publicity varded 8 X 4 33,119 SELLING PRICE LESS F 8 Securities - Publicity varded 8 X 4 33,119 SELLING PRICE LESS F 10 Securities - Partnership, LLC, or 10 trust interests 10 Securities - Partnership, LLC, or 11 trust interests 11 Caudified conservation contribution - Historic structures 12 Qualified conservation contribution - Other - Historic structures 13 Caudified conservation contribution - Other - Historic structures 14 Caudified conservation contribution - Other - Historic structures 15 Real estate - Residential - Real estate - Commercial - Real estate - Other Partnership - Real estate - Other - Real estate - Other - Real estate - Other - Real estate - Other - Real estate - Other - Real estate - Other - Real estate - Other - Real estate - Other - Real estate - Other - Real estate - Other - Real estate - Other - Real - Oth	<u></u>		Check if	Number of contributions or	Noncash contribution amounts reported on	Method of de	etermining
2 Art - Historical treasures 3 Art - Fractional interests 4 Books and publications 5 Clothing and household goods 6 Cars and other vehicles 7 Boats and planes 8 Intellectual property 9 Securities - Publicity varded 8 X 4 33,119 SELLING PRICE LESS F 8 Securities - Publicity varded 8 X 4 33,119 SELLING PRICE LESS F 10 Securities - Partnership, LLC, or 10 trust interests 10 Securities - Partnership, LLC, or 11 trust interests 11 Caudified conservation contribution - Historic structures 12 Qualified conservation contribution - Other - Historic structures 13 Caudified conservation contribution - Other - Historic structures 14 Caudified conservation contribution - Other - Historic structures 15 Real estate - Residential - Real estate - Commercial - Real estate - Other Partnership - Real estate - Other - Real estate - Other - Real estate - Other - Real estate - Other - Real estate - Other - Real estate - Other - Real estate - Other - Real estate - Other - Real estate - Other - Real estate - Other - Real estate - Other - Real - Oth	1	Art - Works of art					
3 Art - Fractional Interests 4 Books and publications 5 Clothing and household goods 6 Cars and other vehicles 7 Boats and planes 8 Intellectual property 9 Securities - Closely held stock 11 Securities - Closely held stock 12 Securities - Partnership, LLC, or 13 trust interests 14 Qualified conservation contribution - Historic Structures 15 Real estate - Residential Real estate - Residential Real estate - Commercial Real estate - Residential estate - Commercial Real estate - Residential Real estate - Commercial Real estate - Commercial Real estate - Commercial Real estate - Residential Real estate - Commercial Real estate - Residential Real estate - Reside	2						
4 Books and publications	3						
6 Cars and other vehicles	4						
7 Boats and planes 3 Intellectual property 9 Securities - Publicly traded X 4 33,119. SELLING PRICE LESS F 10 Securities - Closely held stook 11 Securities - Partnership, LLC, or trust interests 12 Securities - Miscellaneous 13 Qualified conservation contribution Historic structures 14 Qualified conservation contribution - Other, 15 Real estate - Commercial 16 Real estate - Commercial 17 Real estate - Commercial 18 Collectibles 19 Food inventory 20 Drugs and medical supplies 21 Taxidermy 22 Historical artifacts 23 Scientific specimens 24 Archeological artifacts 25 Other ▶ (PRIZES AND GI) X 6 7,900. COST, DONOR VALUED 26 Other ▶ (PRIZES AND GI) X 6 7,900. COST, DONOR VALUED 27 Other ▶ (PRIZES AND GI) X 6 7,900. COST, DONOR VALUED 28 Other ▶ (PRIZES AND GI) X 6 7,900. COST, DONOR VALUED 30 During the year, did the organization completed Form 8283, Part IV, Donee Acknowledgement 30 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 the entire holding period? 30 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 the entire holding period? 30 Des the organization three or related organizations to solicit, process, or sell noncash contributions? 31 X Sall Fittes, describe the arrangement 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,	5						
8 Intellectual property 9 Securities - Publicity traded 10 Securities - Closely held stock 11 Securities - Partnership, LLC, or 12 trust interests 12 Securities - Miscellaneous 13 Qualified conservation contribution - 14 Historic structures 14 Qualified conservation contribution - 15 Real estate - Residential 16 Real estate - Commercial 17 Real estate - Commercial 18 Real estate - Commercial 19 Food Inventory 20 Drugs and medical supplies 21 Taxidermy 20 Drugs and medical supplies 21 Taxidermy 22 Historical artifacts 23 Scientific specimens 24 Archeological artifacts 25 Scientific specimens 26 Other ▶ (PRIZES AND GT) 27 Other ▶ (PRIZES AND GT) 28 Other ▶ () 30 Other ▶ () 30 Other ▶ () 30 Other ▶ () 30 Other ▶ () 30 Other ▶ () 30 Other ▶ () 30 Other ▶ () 30 Other ▶ () 30 Other ▶ () 30 Other ▶ () 30 Other ▶ () 30 Other ▶ () 30 Other ▶ () 30 Other ▶ () 31 Dees the organization completed Form 8283, Part IV, Donee Acknowledgement call the other structures of the entire holding period? 31 Dees the organization receive by contribution, and which is not required to be used for exempt purposes for the entire holding period? 31 X 32 Does the organization hive or use third parties or related organizations to solicit, process, or sell noncash contributions? 31 X 32 Does the organization hive or use third parties or related organizations to solicit, process, or sell noncash contributions? 31 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,	6	Cars and other vehicles					
9 Securities - Publicity traded	7	Boats and planes					
10 Securities - Closely held stock 11 Securities - Partnership, LLC, or trust interests 12 Securities - Miscellaneous 13 Qualified conservation contribution - Historic structures 14 Qualified conservation contribution - Other. 15 Real estate - Residential 16 Real estate - Chornercial 17 Real estate - Other 18 Collectibles 19 Food inventory 20 Drugs and medical supplies 21 Taxidermy 22 Historical artifacts 23 Scientific specimens 24 Archeological artifacts 25 Other	8	Intellectual property					
11 Securities - Partnership, LLC, or trust interests 2 Securities - Miscellaneous 3 Qualified conservation contribution - Historic structures 4 Qualified conservation contribution - Other	9	Securities - Publicly traded	X	4	33,119.	SELLING PRI	CE LESS F
trust interests 2 Securities - Miscellaneous 3 Qualified conservation contribution - Historic structures 4 Qualified conservation contribution - Other. 5 Real estate - Residential 6 Real estate - Commercial 7 Real estate - Commercial 9 Food inventory 10 Drugs and medical supplies 21 Taxidermy 22 Drugs and medical supplies 23 Scientific specimens 24 Archeological artifacts 25 Other	10						
12 Securities · Miscellaneous Qualified conservation contribution ·	11	Securities - Partnership, LLC, or					
13 Qualified conservation contribution - Historic structures							
Historic structures Qualified conservation contribution - Other	12	Securities - Miscellaneous					
14 Qualified conservation contribution · Other	13	**					
15 Real estate - Residential Real estate - Commercial Real estate - Other Collectibles Drugs and medical supplies Taxidermy Ta							
16 Real estate · Commercial Real estate · Cother Re	14	***		 			
17 Real estate - Other Collectibles Collectibles Collectibles Collectibles Collectibles Collectibles Collectibles Collectibles Collectibles Collectibles Collectibles Collectibles Collectibles Collectibles Collectibles Collectibles Collectible Col	15						
18 Collectibles	16						
19 Food inventory	17	Real estate - Other					
Drugs and medical supplies	18						
21 Taxidermy 22 Historical artifacts 23 Scientific specimens 24 Archeological artifacts 25 Other	19						
22 Historical artifacts 23 Scientific specimens 24 Archeological artifacts 25 Other	20	Drugs and medical supplies					
Scientific specimens 24 Archeological artifacts 25 Other (PRIZES AND GI) X 6 7,900. COST, DONOR VALUED 26 Other (PRIZES AND GI) X 6 7,900. COST, DONOR VALUED 27 Other () 28 Other () 29 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 Suring 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 the entire holding period? 30a	21						
24 Archeological artifacts 25 Other	22			· · · · · · · · · · · · · · · · · · ·			
25 Other	23						
26 Other () 27 Other () 28 Other () 29 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 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 the entire holding period? 30a	24	Archeological artifacts			7 000	GOGE BOXOT	
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 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 the entire holding period? If "Yes," describe the arrangement in Part II. Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 31 X B If "Yes," describe in Part II. If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,	25		X	b	7,900.	COST, DONOR	K VALUED
28 Other ▶ () 29 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 Yes No 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 the entire holding period? 30a X b If "Yes," describe the arrangement in Part II. 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? 4 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,	26						
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 Yes No 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 the entire holding period? 10 11 12 13 13 14 15 16 17 18 18 18 18 19 19 19 19 19 19	27	Other ()					
For which the organization completed Form 8283, Part IV, Donee Acknowledgement 29 Part IV P				<u> </u>			
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 the entire holding period? 10 b If "Yes," describe the arrangement in Part II. 11 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 12 Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? 13 Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash to the contributions? 13 Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash to the contributions? 13 Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash to the contributions? 13 Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash to the contributions? 13 Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash to the contributions? 13 Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash to the contributions? 13 Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash to the contributions? 14 Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash to the contributions? 15 Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash to the contributions? 16 Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash to the contributions? 16 Does the organization hire or use third parties or related organizations to solicit, process, or sell	29			-			
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		describe in Part II.					

	DUILLER COUNTI COMMUNITI	COLLEGE	05 1555405
Schedule iv	M (Form 990) (2013) EDUCATION FOUNDATION Supplemental Information. Provide the information requ		25-1555437 Page 2
Рапси	Supplemental Information. Provide the information requis reporting in Part I, column (b), the number of contributions, the this part for any additional information.	ired by Part I, lines 30b, 32b, and 33, e number of items received, or a comb	and whether the organization ination of both. Also complete
			
A			

SCHEDULE 0

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2013
Open to Public Inspection

OMB No. 1545-0047

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

BUTLER COUNTY COMMUNITY COLLEGE Emplo

EDUCATION FOUNDATION

Employer identification number 25-1555437

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

FOUNDATIONS TO AN ENVIRONMENT OF INNOVATION, ENERGY, CREATIVITY, AND

ACCOMPLISHMENT.

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

EXPLANATION: THE DRAFT 990 IS PROVIDED TO ALL FOUNDATION BOARD OF DIRECTORS FOR REVIEW. THE FINANCE COMMITTEE REVIEWS THE 990 WITH THE AUDITORS AND AFTER ANY REVISIONS RECOMMENDS ITS APPROVAL TO THE EXECUTIVE COMMITTEE TO TAKE ACTION.

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

EXPLANATION: EACH BOARD MEMBER AND OFFICER OF BC3 EDUCATION FOUNDATION SHALL BE REQUESTED ANNUALLY BY BC3 EDUCATION FOUNDATION TO SUBMIT A DISCLOSURE STATEMENT LISTING ALL ORGANIZATIONS WITH WHICH HE OR SHE IS AFFILIATED AND DESCRIBING THE NATURE OF THE AFFILIATION. ALL DISCLOSURES REQUIRED UNDER THIS POLICY AND AMENDMENTS THERETO SHALL BE DIRECTED IN WRITING TO THE CHAIR OF THE BOARD. THE CHAIR OF THE BOARD AND THE DIRECTOR SHALL BE RESPONSIBLE FOR THE ADMINISTRATION OF THIS POLICY. ISSUES UNDER THIS POLICY SHALL BE REPORTED TO THE CHAIR OF THE BOARD FOR APPROPRIATE INFORMATION DISCLOSED UNDER THIS POLICY SHALL BE HELD IN ACTION. CONFIDENCE BY THE PERSONS AUTHORIZED TO RECEIVE AND ACT UPON IT EXCEPT WHERE, IN THE JUDGMENT OF ANY OF SUCH PERSONS, THE BEST INTEREST OF THE FOUNDATION REQUIRES FURTHER DISCLOSURE. THIS REVIEW PROCESS SHALL BE REPORTED ANNUALLY TO THE BOARD BY THE CHAIR.

Schedule O (Form 990 or 990-EZ) (2013)	Page 2
Name of the organization BUTLER COUNTY COMMUNITY COLLEGE EDUCATION FOUNDATION	Employer identification number 25–1555437
EXPLANATION: INQUIRING PERSONS CAN CONTACT THE FOUNDATION	OR COLLEGE AND
SPEAK TO LYNN ISMAIL, AT WHICH TIME THE DOCUMENTS WILL BE	MADE AVAILABLE.
FORM 990, PART XII, LINE 2C	
EXPLANATION: THE PROCESS HAS NOT CHANGED FROM THE PRIOR Y	EAR.