

Form 990

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

2007



Department of the Treasury Internal Revenue Service(77)

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

Form 990 header section including: A For the 2007 calendar year, or tax year beginning 2007, and ending; B Check if applicable: Address change, Name change, Initial return, Termination, Amended return, Application pending; C Name of organization American Education Foundation; D Employer Identification Number; E Telephone number; F Accounting method; G Web site: www.amedf.org; J Organization type; K Check here; L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 131,018.

Part III Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions.)

Table with 21 rows and 3 columns: Description, Amount, Total. Rows include: 1 Contributions, gifts, grants, and similar amounts received; 2 Program service revenue including government fees and contracts; 3 Membership dues and assessments; 4 Interest on savings and temporary cash investments; 5 Dividends and interest from securities; 6a Gross rents; 6b Less: rental expenses; 6c Net rental income or (loss); 7 Other investment income; 8a Gross amount from sales of assets other than inventory; 8b Less: cost or other basis and sales expenses; 8c Gain or (loss); 8d Net gain or (loss); 9 Special events and activities; 9a Gross revenue; 9b Less: direct expenses; 9c Net income or (loss); 10a Gross sales of inventory; 10b Less: cost of goods sold; 10c Gross profit or (loss); 11 Other revenue; 12 Total revenue; 13 Program services; 14 Management and general; 15 Fundraising; 16 Payments to affiliates; 17 Total expenses; 18 Excess or (deficit) for the year; 19 Net assets or fund balances at beginning of year; 20 Other changes in net assets or fund balances; 21 Net assets or fund balances at end of year.

**Statement of Functional Expenses** All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See instructions)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
<b>22a</b> Grants paid from donor advised funds (attach sch) (cash \$ _____ non-cash \$ _____ If this amount includes foreign grants, check here <input type="checkbox"/> .....	22a			
<b>22b</b> Other grants and allocations (att sch) (cash \$ _____ non-cash \$ _____ If this amount includes foreign grants, check here <input type="checkbox"/> .....	22b			
<b>23</b> Specific assistance to individuals (attach schedule) .....	23			
<b>24</b> Benefits paid to or for members (attach schedule) .....	24			
<b>25a</b> Compensation of current officers, directors, key employees, etc. listed in Part V-A ..... See L-25a Stmt	25a	35,383.	0.	35,383.
<b>b</b> Compensation of former officers, directors, key employees, etc. listed in Part V-B .....	25b			
<b>c</b> Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) .....	25c			
<b>26</b> Salaries and wages of employees not included on lines 25a, b, and c .....	26			
<b>27</b> Pension plan contributions not included on lines 25a, b, and c .....	27			
<b>28</b> Employee benefits not included on lines 25a - 27 .....	28			
<b>29</b> Payroll taxes .....	29	2,437.	0.	2,437.
<b>30</b> Professional fundraising fees .....	30			
<b>31</b> Accounting fees .....	31	3,395.	0.	3,395.
<b>32</b> Legal fees .....	32			
<b>33</b> Supplies .....	33	1,996.	0.	1,996.
<b>34</b> Telephone .....	34			
<b>35</b> Postage and shipping .....	35	19,516.	19,034.	482.
<b>36</b> Occupancy .....	36	11,548.	0.	11,548.
<b>37</b> Equipment rental and maintenance .....	37			
<b>38</b> Printing and publications .....	38	20,273.	19,760.	513.
<b>39</b> Travel .....	39	1,125.	0.	1,125.
<b>40</b> Conferences, conventions, and meetings .....	40	1,003.	613.	390.
<b>41</b> Interest .....	41			
<b>42</b> Depreciation, depletion, etc (attach schedule) .....	42	776.	0.	776.
<b>43</b> Other expenses not covered above (itemize):				
<b>a</b> Advertising .....	43a	150.	0.	150.
<b>b</b> Staff Development .....	43b	1,045.	0.	1,045.
<b>c</b> Insurance .....	43c	1,624.	0.	1,624.
<b>d</b> Mailing Lists .....	43d	8,578.	8,578.	0.
<b>e</b> Miscellaneous .....	43e	5,456.	0.	5,456.
<b>f</b> Speaker Fee .....	43f	4,855.	4,855.	0.
<b>g</b> See Other Expenses Stmt .....	43g	61,215.	37,694.	23,521.
<b>44</b> Total functional expenses. Add lines 22a through 43g. (Organizations completing columns (B) - (D), carry these totals to lines 13 - 15) .....	44	180,375.	90,534.	89,841.

Joint Costs. Check  if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services?  Yes  No  
 If 'Yes,' enter (i) the aggregate amount of these joint costs \$ \_\_\_\_\_; (ii) the amount allocated to Program services \$ \_\_\_\_\_; (iii) the amount allocated to Management and general \$ \_\_\_\_\_; and (iv) the amount allocated to Fundraising \$ \_\_\_\_\_

**Part III** Statement of Program Service Accomplishments (See the instructions.)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt purpose? **Dedicated to the advancement of Higher Education**  
All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)

**Program Service Expenses**  
(Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts; but optional for others.)

**a** Publicly supported organization dedicated to the advancement of higher education as well as distributing newsletters, booklets and web articles to the general public.

(Grants and allocations \$ 0. ) If this amount includes foreign grants, check here

90,534.

**b**

(Grants and allocations \$ ) If this amount includes foreign grants, check here

**c**

(Grants and allocations \$ ) If this amount includes foreign grants, check here

**d**

(Grants and allocations \$ ) If this amount includes foreign grants, check here

**e** Other program services

(Grants and allocations \$ ) If this amount includes foreign grants, check here

**f** Total of Program Service Expenses (should equal line 44, column (B), Program services) 90,534.

**Part IV Balance Sheets** (See the instructions.)

**Note:** Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year		(B) End of year
ASSETS	45 Cash – non-interest-bearing .....	12,103.	45	13,309.
	46 Savings and temporary cash investments .....	61,500.	46	34,279.
	47a Accounts receivable .....	0.		
	b Less: allowance for doubtful accounts .....		47c	0.
	47b	3,719.		
	48a Pledges receivable .....			
	b Less: allowance for doubtful accounts .....		48c	
	48b			
	49 Grants receivable .....		49	
	50a Receivables from current and former officers, directors, trustees, and key employees (attach schedule) .....		50a	
b Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule) .....		50b		
51a Other notes and loans receivable (attach schedule) .....				
b Less: allowance for doubtful accounts .....		51c		
51b				
52 Inventories for sale or use .....		52		
53 Prepaid expenses and deferred charges .....		53		
54a Investments – publicly-traded securities .....	<input type="checkbox"/> Cost <input type="checkbox"/> FMV		54a	
b Investments – other securities (attach sch) .....	<input type="checkbox"/> Cost <input type="checkbox"/> FMV		54b	
55a Investments – land, buildings, & equipment: basis .....	55a			
b Less: accumulated depreciation (attach schedule) .....	55b		55c	
56 Investments – other (attach schedule) .....			56	
57a Land, buildings, and equipment: basis .....	57a	3,146.		
b Less: accumulated depreciation (attach schedule) .....	57b	1,951.	57c	
58 Other assets, including program-related investments (describe ▶ <u>Security deposit</u> ) .....		1,140.	58	
59 <b>Total assets</b> (must equal line 74). Add lines 45 through 58 .....		80,658.	59	48,783.
LIABILITIES	60 Accounts payable and accrued expenses .....		60	26,885.
	61 Grants payable .....		61	
	62 Deferred revenue .....		62	
	63 Loans from officers, directors, trustees, and key employees (attach schedule) .....		63	
	64a Tax-exempt bond liabilities (attach schedule) .....		64a	
	b Mortgages and other notes payable (attach schedule) .....		64b	
	65 Other liabilities (describe ▶ .....		65	
	66 <b>Total liabilities.</b> Add lines 60 through 65 .....		9,403.	66
NET ASSETS OR FUND BALANCES	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.			
	67 Unrestricted .....	61,255.	67	21,898.
	68 Temporarily restricted .....	10,000.	68	0.
	69 Permanently restricted .....		69	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.			
	70 Capital stock, trust principal, or current funds .....		70	
	71 Paid-in or capital surplus, or land, building, and equipment fund .....		71	
	72 Retained earnings, endowment, accumulated income, or other funds .....		72	
	73 <b>Total net assets or fund balances.</b> Add lines 67 through 69 or lines 70 through 72. (Column (A) must equal line 19 and column (B) must equal line 21) .....	71,255.	73	21,898.
	74 <b>Total liabilities and net assets/fund balances.</b> Add lines 66 and 73 .....	80,658.	74	48,783.

**Part IV A** Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See the instructions.)

a	Total revenue, gains, and other support per audited financial statements	a	131,018.
b	Amounts included on line a but not on Part I, line 12:		
	1 Net unrealized gains on investments	b1	
	2 Donated services and use of facilities	b2	
	3 Recoveries of prior year grants	b3	
	4 Other (specify):	b4	
	Add lines b1 through b4	b	
c	Subtract line b from line a	c	131,018.
d	Amounts included on Part I, line 12, but not on line a:		
	1 Investment expenses not included on Part I, line 6b	d1	
	2 Other (specify):	d2	
	Add lines d1 and d2	d	
e	Total revenue (Part I, line 12). Add lines c and d	e	131,018.

**Part IV B** Reconciliation of Expenses per Audited Financial Statements with Expenses per Return

a	Total expenses and losses per audited financial statements	a	180,375.
b	Amounts included on line a but not on Part I, line 17:		
	1 Donated services and use of facilities	b1	
	2 Prior year adjustments reported on Part I, line 20	b2	
	3 Losses reported on Part I, line 20	b3	
	4 Other (specify):	b4	
	Add lines b1 through b4	b	
c	Subtract line b from line a	c	180,375.
d	Amounts included on Part I, line 17, but not on line a:		
	1 Investment expenses not included on Part I, line 6b	d1	
	2 Other (specify):	d2	
	Add lines d1 and d2	d	
e	Total expenses (Part I, line 17). Add lines c and d	e	180,375.

**Part IV C** Current Officers, Directors, Trustees, and Key Employees (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) (See the instructions.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans and deferred compensation plans	(E) Expense account and other allowances
Gail Travers 300 International Drive Williamsville, NY 14221	Executive Director 40.00	35,383.	0.	0.
Michele Zieziula 300 International Drive Williamsville, NY 14221	Trustee 2.00	0.	0.	0.
Douglas McCallum 300 International Drive Williamsville, NY 14221	Secretary 2.00	0.	0.	0.



**Part VII Other Information (continued)**

		Yes	No
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value? .....		X
b	If 'Yes,' you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.) .....		
82 b			
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications? .....	X	
b	Did the organization comply with the disclosure requirements relating to <i>quid pro quo</i> contributions? .....	X	
83 b			
84 a	Did the organization solicit any contributions or gifts that were not tax deductible? .....	X	
b	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? .....	X	
84 b			
85 a	501(c)(4), (5), or (6). Were substantially all dues nondeductible by members? .....	N/A	
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? .....	N/A	
	If 'Yes' was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.		
c	Dues, assessments, and similar amounts from members .....	N/A	
85 c			
d	Section 162(e) lobbying and political expenditures .....	N/A	
85 d			
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices .....	N/A	
85 e			
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) .....	N/A	
85 f			
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? .....	N/A	
85 g			
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year? .....	N/A	
85 h			
86	501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 12 .....		
86 a		N/A	
b	Gross receipts, included on line 12, for public use of club facilities .....	N/A	
86 b		N/A	
87	501(c)(12) organizations. Enter: a Gross income from members or shareholders .....		
87 a		N/A	
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) .....	N/A	
87 b		N/A	
88 a	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Part IX .....		X
b	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Part XI .....		X
88 b			
89 a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶ N/A ; section 4912 ▶ N/A ; section 4955 ▶ N/A		
b	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If 'Yes,' attach a statement explaining each transaction .....		X
89 b			
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 .....	0.	
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization .....		
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? .....		X
89 e			
f	All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract? .....		X
89 f			
g	For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? .....		X
89 g			
90 a	List the states with which a copy of this return is filed ▶ See States Filed In .....		
b	Number of employees employed in the pay period that includes March 12, 2007 (See instructions.) .....		1
90 b			
91 a	The books are in care of ▶ Gail Travers Telephone number ▶ (716) 626-3446 Located at ▶ 300 International Drive, Williamsville, NY ZIP + 4 ▶ 14221		
b	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)? .....		X
91 b			
	If 'Yes,' enter the name of the foreign country ▶ .....		
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		

**Part VII Other Information (continued)**

c At any time during the calendar year, did the organization maintain an office outside of the United States? 91 c  Yes  No

If 'Yes,' enter the name of the foreign country

92 Section 4947(a)(1) nonexempt trusts filing Form 990 in lieu of Form 1041 - Check here

and enter the amount of tax-exempt interest received or accrued during the tax year 92

**Part VIII Analysis of Income-Producing Activities (See the instructions.)**

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue:					
a <u>Scholars Program</u>					13,225.
b <u>Advisors Certification</u>					3,150.
c _____					
d _____					
e _____					
f Medicare/Medicaid payments					
g Fees & contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings & temporary cash invmnts			14	1,943.	
96 Dividends & interest from securities					
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from pers prop					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue: a _____					
b <u>Miscellaneous</u>					
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))				1,943.	16,375.
105 Total (add line 104, columns (B), (D), and (E))					18,318.

Note: Line 105 plus line 1e, Part I, should equal the amount on line 12, Part I.

**Part IX Relationship of Activities to the Accomplishment of Exempt Purposes (See the instructions.)**

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
93a	The Scholars Program is an individual customized curriculum of workshops, individual guidance and professionally prepared financial analysis. Individuals are provided a detailed report of aid eligibility and

See Relationship of Activities to the Accomplishment of Exempt Purposes Statement

**Part X Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions.)** N/A

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
	%			
	%			
	%			
	%			

**Part XI Information Regarding Transfers Associated with Personal Benefit Contracts (See the instructions.)**

a Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Yes  No

b Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  Yes  No

Note: If 'Yes' to (b), file Form 8870 and Form 4720 (see instructions).