Form **990**

SCANNED JUN 1 8 2013

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

benefit trust or private foundation)
 The organization may have to use a copy of this return to satisfy state reporting requirements.

2011
Open to Public Inspection

A	or the	e 2011 calendar year, or tax year beginning $$ JUL 29 , 2011 $$ and ending	<u>JUN 30, 20</u>	12
В	Check if ipplicabl	C Name of organization	D Employer ide	ntification number
	chang	Doing Business As		
	return			
	Amen		G Gross receipts \$	1,175,397.
	Application pendi	BROOKLYN, NY 11201	H(a) Is this a grou	
	perior	F Name and address of principal officer: PAUL APPELBAUM	for affiliates?	
		147 PRINCE STREET, SUITE 10, BROOKLYN, NY		s included? Yes No
		empt status X 501(c)(3) 501(c) ()		ch a list. (see instructions)
			H(c) Group exem	1 M State of legal domicile: NY
$\overline{}$	art i	Summary	ear of formation. 201	T M State of legal domiche, 14 1
		Briefly describe the organization's mission or most significant activities: FES PROV	IDES ADVOCA	CY, TRAINING
Activities & Governance	•	SERVICES, AND PARENT ORGANIZATION CONSULTING	TO VARIOUS	CHARTER
r.	2	Check this box If the organization discontinued its operations or disposed of n		
OVE	3	Number of voting members of the governing body (Part VI, line 1a)		<u>3</u> 5
ص ع	4	Number of independent voting members of the governing body (Part VI, line 1b)		4 5
ies		Total number of individuals employed in calendar year 2011 (Part V, line 2a)		5 12
ti.	l .	Total number of volunteers (estimate if necessary)		$\begin{array}{c c} 6 & 1 \\ \hline 7a & 0 \end{array}$
Ac	1	Total unrelated business revenue from Part VIII, column (C), line 12		·
	b	Net unrelated business taxable income from Form 990-T, line 34	Prior Year	7b U • Current Year
_	8	Contributions and grants (Part VIII, line 1h)	Frior Tear	640,042.
Revenue	l .	Program service revenue (Part VIII, line 2g)		500,046.
eve	l .	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		410.
Œ	L	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,140,498.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.
		Benefits paid to or for members (Part IX, column (A), line 4)		0.
ses		Salaries, other compensation employee benefits (Part X column (A), lines 5-10)		559,566.
Expenses	1	Professional fundraising fees (Part X column (A), Vine 1.6) Total fundraising expenses (Part X column (D), line 25) 10,730.		
쮰	D			410,831.
	17 18	Other expenses (Part IX, column A), lines 11911d 711124e) O		970,397.
	19	Revenue less expenses Subtract line 18 from line 12		170,101.
Ses	<u> </u>	DODEN, UI	Beginning of Current Y	
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	-	244,820.
t Ass	21	Total liabilities (Part X, line 26)		74,719.
캳	22	Net assets or fund balances Subtract line 21 from line 20		170,101.
	art II	Signature/Block	 	
		llies of perjury, i deplace that have examined this return, including accompanying schedules and sta		of my knowledge and belief, it is
true,	correc	t, and complete Detrayation of property other than officer) (pased on all information of which prep	arer has any knowledge.	114/12
Sig		Signature of officer ()	Date	
Her		PAUL APPELBAUM, BOARD CHAIRMAN		
	•	Type or print name and title	/	
		Print/Type preparer's name Preparer's signature	Date Check	
Paid	j	GUS SALIBA GUS SALIBA	05/14/13 self-e	
-	arer	Firm's name FRUCHTER ROSEN & COMPANY, F.C.	Firm's EIN	▶ 06-1671819
Use	Only	Firm's address 156 WEST 56TH STREET, SUITE 1804		/212\057 2600
		NEW YORK, NY 10019	Phone no.	(212)957-3600
-		RS discuss this return with the preparer shown above? (see instructions)	-	Yes No Form 990 (2011)
1320	01 01-2	3-12 LHA For Paperwork Reduction Act Notice, see the separate instructions.		FOIII 330 (2011)

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

914

V

	rt III Statement of Program Service Accomplishments	e 2
Pai	······································	
	Check if Schedule O contains a response to any question in this Part III	ᆜ.
1	Briefly describe the organization's mission:	
	FES PROVIDES ADVOCACY, TRAINING SERVICES, AND PARENT ORGANIZATION	
	CONSULTING TO VARIOUS CHARTER SCHOOLS.	
		
2	Did the organization undertake any significant program services during the year which were not listed on	
	the prior Form 990 or 990-EZ?	No
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.	
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts 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 \$ 833,257 · including grants of \$) (Revenue \$	- 1
70	CHARTER SCHOOL ADVOCACY AND TRAINING PROGRAMS.	<u>•</u> ,
	CHARLER BEHOOD ADVOCACT AND TRAINING FROGRAMS.	
	<u> </u>	
4b	(Code) (Expenses \$	<u> </u>
	(Code) (Copenses) (Constituting grants of) (Constituting grants of)	— <i>'</i>
4c	(Code) (Expenses \$ including grants of \$) (Revenue \$)
		- '
	<u> </u>	
4d	Other program services (Describe in Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses ► 833, 257.	
	Form 990 (20	1111

	990 (2011) FAMILIES FOR EXCELLENT SCHOOLS, INC. 45-2870	970	P	age 3
Pai	t IV Checklist of Required Schedules		Tv	NI-
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		Yes	No
•	If "Yes," complete Schedule A	1	x	
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		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	- -		
	during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_		
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, 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			ŀ
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	ļ	X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			~ -
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	X	<u> </u>
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	l 	1	- T
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	 	Х
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	١		v
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	-	X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			х
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d 11e	 	X
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	116	╁──	
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	х	i
120	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	- ' ' ' -		
120	Schedule D, Parts XI, XII, and XIII	12a	х	
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	1_0	 -	
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	1	X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
	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		İ	ĺ
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	<u> </u>	X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
10	Did the erganization report more than \$15,000 of gross income from gaming activities on Part VIII. Jine 9a2 If "Yes "	i	ľ	i

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complete Schedule G, Part III

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

	1990 (2011) FAMILIES FOR EXCELLENT SCHOOLS, INC. 45-2870	9/0	<u>Р</u>	age 4
Pai	rt IV Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the			
	United States 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 and other assistance to individuals in the United States on Part IX,	l		,,
	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	1		.,,
	Schedule J	23	ļ	X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete		1	3,7
	Schedule K If "No", go to line 25	24a	L	Х
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	<u> </u>	
¢	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	ļ		
	any tax-exempt bonds?	24c	<u> </u>	
	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	1		٠,,
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
þ	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	ł		l
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified		!	
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	ļ	Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	ľ		ĺ
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member	1	1	
	of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):	ļ	ļ .	
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	ļ	X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			l
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	<u> </u>	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			1
	contributions? If "Yes," complete Schedule M	30	<u> </u>	X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			l
	If "Yes," complete Schedule N, Part I	31	<u> </u>	X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	l	ļ	l
	Schedule N, Part II	32	<u> </u>	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			Į
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	<u> </u>	X
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	<u></u>	Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related organization?			
	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			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х

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38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?

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

	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			!
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 12			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	_		₩.
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
a	If "Yes," enter the name of the foreign country			
50	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
	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?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			لـــــــــــــــــــــــــــــــــــــ
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	_		7.7
	to file Form 8282?	7c		<u> </u>
d	If "Yes," indicate the number of Forms 8282 filed during the year	_ ~		Х
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e 7f		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		 -
g h	If the organization received a contribution of qualified intellection property, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting	-:		
•	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	•	ļ
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		_`_
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter		İ	İ
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			'
11	Section 501(c)(12) organizations. Enter			
a	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
120	amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	120		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
u	Note. See the instructions for additional information the organization must report on Schedule O			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			,
_	organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			<u></u> _
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	if "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	L	L
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132005 01-23-12

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 to any question 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	1a		5						
	If there are material differences in voting rights among members of the governing body, or if the governing									
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O									
b	Enter the number of voting members included in line 1a, above, who are independent	1b		5						
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationshi	p with	any other	ا ا		_				
	officer, director, trustee, or key employee?			2		X				
3	Did the organization delegate control over management duties customarily performed by or under the	e direc	t 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 9	990 wa	s filed?	4		X				
5	Did the organization become aware during the year of a significant diversion of the organization's ass	sets?		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 a	ppoint	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, s	tockh	olders, or			.,				
	persons other than the governing body?			7b_		X				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	ar by th	e tollowing.	8a	х					
	The governing body?									
	, , , , , , , , , , , , , , , , , , , ,									
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be real	iched :	at the			х				
<u> </u>	organization's mailing address? If "Yes," provide the names and addresses in Schedule O		0-4-1	9						
sec	tion B. Policies (This Section B requests information about policies not required by the Internal R	evenu	e Code)			N				
40.	Dubban and the bank hard bank as been been been been been been been bee			10a	Yes	No X				
	Did the organization have local chapters, branches, or affiliates?									
D	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,									
44.	and branches to ensure their operations are consistent with the organization's exempt purposes?									
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?									
	b Describe in Schedule O the process, if any, used by the organization to review this Form 990. a Did the organization have a written conflict of interest policy? If "No," go to line 13									
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	to con	flicts?	12a 12b	X					
_	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y									
Ŭ	in Schedule O how this was done	, -		12c	X					
13	Did the organization have a written whistleblower policy?			13	Х					
14	Did the organization have a written document retention and destruction policy?			14	Х					
15	Did the process for determining compensation of the following persons include a review and approve	al by ır	dependent							
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		•							
а	The organization's CEO, Executive Director, or top management official			15a	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).				-					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment v	vith a			l '				
	taxable entity during the year?			16a		X				
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	te its p	articipation			,				
	ın joint venture arrangements under applicable federal tax law, and take steps to safeguard the orga	nızatıo	n's			'				
	exempt status with respect to such arrangements?			16b		L				
Sec	tion C. Disclosure		· <u>··</u> ··							
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 990-7	Γ (Sect	ion 501(c)(3)s only)	availat	le					
	for public inspection Indicate how you made these available. Check all that apply.									
	Own website Another's website Upon request									
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, co	onflict	of interest policy, a	nd finai	ncial					
	statements available to the public during the tax year.									
20	State the name, physical address, and telephone number of the person who possesses the books a	nd rec	oras of the organiz	ation.						
	JEREMIAH KITTREDGE - 646-738-3061 147 PRINCE STREET, SUITE 10, BROOKLYN, NY 11201									
132000				F 4 11 11	000	(2011)				

Form 990 (2011)

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

Check if Schedule O contains a response to any question in this Part VII

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

(A)	(B)				2)			(D)	(E)	(F)	
Name and Title	Average	Position (do not check more that			re than one		Reportable	Reportable	Estimated		
	hours per week	box, unless person is both an officer and a director/trustee)				ıs bot	h an	compensation from	compensation from related	amount of other	
	(describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations	
(1) PAUL APPELBAUM			1	İ						_	
CHAIRMAN	3.00	X	<u> </u>	Х	<u>L</u>			0.	0.	0	
(2) BRYAN LAWRENCE		i		l							
VICE CHAIRMAN	3.00	X		X	<u> </u>	<u> </u>		0.	0.	0	
(3) JON LEWINSOHN	1 2 22		ĺ							,	
TREASURER	3.00	X	├-	Х	<u> </u>	├-	<u> </u>	0.	0.	0	
(4) JOSEPH KUSNAN	3.00	x		x				0.	0.	C	
SECRETARY	3.00	^	-	^	-	├	_	<u> </u>	<u> </u>		
(5) FRANCES MESSANO TRUSTEE	3.00	v						0.	0.	(
(6) JEREMIAH KITTREDGE	1 3.00	1	-	-	\vdash	+-	-			 	
EXECUTIVE DIRECTOR	40.00			x				36,708.	0.	2,713	

132007 01-23-12

Par	T VII Section A. Officers, Directors, Tr		mple	oyee			High	est	Compensated Employ	ees (continued)				
	(A)	(B)			•	C)	_		(D)	(E)			(F)	
	Name and title	Average		not c		more	than		Reportable Repor				timate	ed
		hours per week					ıs bot or/trus			compensation		ar	nount	of
		(describe	\vdash		1	Γ	Τ	Ė	from the	from related organization		000	other	****
		hours for	direct		Ì		L.		organization	(W-2/1099-MI			pensa om th	
		related	96 O.	stee	l	l	lsae es		(W-2/1099-MISC)	(** 2) 1000 1111	- , l		anızat	
		organizations	Individual trustee or director	Institutional trustee		8	Highest compensated employee		,			_	d relat	
		in Schedule	ndual	tutor	 	Key employee	loyee	ner				orga	anızatı	ons
		0)	ğ	ıtsı	Officer	ě.	를를	Former						
		ì		ĺ	ĺ	ĺ	1							
		<u> </u>	_	L		L	L							
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	Cub Askal			L	<u> </u>		┶		36,708.		0.		2 7	13.
	Sub-total	II Caatian A							30,700.		0.		<i>4, 1</i>	-0:
	Total from continuation sheets to Part V	II, Section A							36,708.		<u> </u>		2,7	
	Total (add lines 1b and 1c) Total number of individuals (including but r	ant limited to th		licto	od a	bov	ابداه	00 r		000 of reportab			-,,	
2	compensation from the organization	iot iiiriited to tr	1056	liste	su a	DOV	C) WI	10 1	eceived more than wroc	,000 or reportat	110			0
	compensation from the organization												Yes	No
3	Did the organization list any former officer	director or tr	iste	e ke	v er	nnlo	ovee	or	highest compensated e	mplovee on			-	
•	line 1a? If "Yes," complete Schedule J for s			o,	,, 0.		,, 00		mgmoot componicated c	p.ayee e.v		3		X.
4	For any individual listed on line 1a, is the si			amo	ensa	atior	n and	d ot	her compensation from	the organization				
•	and related organizations greater than \$15	•		-					·			4		X
5	Did any person listed on line 1a receive or									dual for services	,			
	rendered to the organization? If "Yes," con								ŭ			5		X
Sec	tion B. Independent Contractors					•								
1	Complete this table for your five highest co	ompensated in	depe	ende	ent c	onti	racto	ors t	that received more than	\$100,000 of cor	npens	ation	from	
	the organization Report compensation for	the calendar y	ear	endi	ng v	vith	or w	ıthır	n the organization's tax	ear				
	(A)								(B)				>)	
	Name and business	address	N	INC	3			ŀ	Description of s	ervices	С	ompe	nsatio	n
		-												
								\perp						
								- 1						
	· · · · · · · · · · · · · · · · · · ·							4						
							-	4						
								-						
								4						
														
2	Total number of independent contractors (-	ot III	mite	a to		se lis O	stec	a above) who received n	iore than				
	\$100,000 of compensation from the organi	zation											990 4	2011)

132008 01-23-12

Pa	rt VIII	Statement of Rever	nue					
}					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns	1a					
ira our	b	Membership dues	1b					
s, G	С	Fundraising events	1c					
Sift lar	d	Related organizations	1d					
ini's	е	Government grants (contribut	ions) 1e					
r Sign	f	All other contributions, gifts, gran	ts, and					
the		similar amounts not included abo	ve 1 f	640,042.				
d d	g	Noncash contributions included in lines	1a-1f \$	34,899.				
<u>3</u> <u>E</u>	h	Total. Add lines 1a-1f		•	640,042.			
				Business Code				
ဗ	2 a	ADVOCACY AND TR	RAINING	541610	500,046.	500,046.		
ēŠ	b							
Score	С							
e a	d							
Program Service Revenue	е							
ā	f	All other program service reve	enue		- F00 046			
	g	Total. Add lines 2a-2f			500,046.			
	3	Investment income (including	dividends, inte	rest, and				
		other similar amounts)						
	4	Income from investment of ta	x-exempt bond	proceeds				
	5	Royalties						
		_	(i) Real	(II) Personal				
		Gross rents		 				
	ŀ	Less rental expenses	<u> </u>					
		Rental income or (loss)						
		Net rental income or (loss)	(3.0	, 				
	7 a	Gross amount from sales of	(i) Securities 35,309	(ii) Other				
	.	assets other than inventory	33,303	•		,		,
	0	Less: cost or other basis	34,899	_]				
	_	and sales expenses	410					
	d	Gain or (loss) Net gain or (loss)		<u> </u>	410.	410.		•
_		Gross income from fundraisin	na events (not					
une	"	including \$	of					
ě		contributions reported on line						
Other Reven		Part IV, line 18		<u> </u>				
tþe	Ь	Less: direct expenses		0				
0		Net income or (loss) from fund	draising events					
	1	Gross income from gaming a	-					
		Part IV, line 19		a				
	ь	Less direct expenses	1	b	_	_		
	С	Net income or (loss) from gan	ning activities					
	10 a	Gross sales of inventory, less	returns					
		and allowances	i	a				
	Ь	Less cost of goods sold	1	b			=	:
	<u> </u>	Net income or (loss) from sale	es of inventory	<u> </u>				
		Miscellaneous Revenu	16	Business Code				
	11 a			<u> </u>		ļ		
	b							
	C					 		
	d			<u> </u>				
		Total. Add lines 11a-11d			1,140,498.	500,456.	0.	0.
1320 01-2	12 09	Total revenue. See instructions.			<u> </u>	1 200,420.	<u>~</u>	Form 990 (2011)
01-2	3-12							1 31111 230 (2011)

Form 990 (2011) FAMILIES FOR 2 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) but are not required to complete columns (B), (C), and (D)

	Check if Schedule O contains a respons	(A)	s Part IX (B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in	[
	the United States See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the	Î			
	United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	100 020	00 010	0 040	7 262
	trustees, and key employees	100,030.	82,818.	9,949.	7,263
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	267 270	220 (41	26 720	
7	Other salaries and wages	367,379.	330,641.	36,738.	
8	Pension plan accruals and contributions (include	10 071	10 071	1 200	
	section 401(k) and section 403(b) employer contributions)	12,071.	10,871.	1,200.	
9	Other employee benefits	45,054.	40,523.	4,531.	
10	Payroll taxes	35,032.	31,546.	3,486.	
11	Fees for services (non-employees)				
а	Management	07 000	24 105	2 700	
b	Legal	27,903.	24,195.	3,708.	
С	Accounting	10,000.		10,000.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	00 (72		0 007	1 260
g	Other	92,673.	83,406.	8,007.	1,260
12	Advertising and promotion	11,932.	10,739.	954.	239 259
13	Office expenses	12,946.	11,652.	1,035.	459
14	Information technology	11,216.	10,094.	1,122.	
15	Royalties		11 162	27 742	<u> </u>
16	Occupancy	48,906.	11,163.	37,743.	C10
17	Travel	30,497.	27,447.	2,440.	610
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	 			
21	Payments to affiliates	16.000	4 4 4 0 4	1 206	200
22	Depreciation, depletion, and amortization	16,089.	14,481.	1,286.	322
23	Insurance	9,172.	8,254.	735.	183
24	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.)				
а	PARENT STIPENDS	98,795.	98,795.		
b	FOOD	15,615.	14,054.	1,249.	312
c	EVENT COSTS	14,100.	12,690.	1,128.	282
d	MISCELLANEOUS	5,408.	4,867.	541.	
	All other expenses	5,579.	5,021.	558.	
25	Total functional expenses. Add lines 1 through 24e	970,397.	833,257.	126,410.	10,730
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined			ļ	
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)			į.	

132010 01-23-12

	990 (2011) FAMILIES FOR EXCELLENT Balance Sheet	SCHOOLS,	, INC.	45-	2870970	Page 11
Fai	t X	Balance Sheet		(A)		(B)	
•				Beginning of year		End of ye	ar
	1	Cash - non-interest-bearing			1	142	,764.
	2	Savings and temporary cash investments	Γ		2		
	3	Pledges and grants receivable, net			3		
	4	Accounts receivable, net			4		
	5	Receivables from current and former officers, directors, trustees, k	ey				
		employees, and highest compensated employees. Complete Part	ı Į				
		of Schedule L	Ĺ		5		
	6	Receivables from other disqualified persons (as defined under sec	tion				
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contrib	uting				
		employers and sponsoring organizations of section 501(c)(9) volun	tary				
6		employees' beneficiary organizations (see instructions)	L	· · · · · · · · · · · · · · · · · · ·	6		
Assets	7	Notes and loans receivable, net	L		7		
As	8	Inventones for sale or use	L		8_		
	9	Prepaid expenses and deferred charges			9	5	,771.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D 10a	12,374.	***			640
	b	Less accumulated depreciation 10b	2,756.	0,	10c	9	,618.
	11	Investments · publicly traded securities	Ļ		11		
	12	investments - other securities See Part IV, line 11	1	 -	12		
	13	Investments · program-related. See Part IV, line 11	-		13		
	14	Intangible assets	-		14	86	,667.
	15	Other assets. See Part IV, line 11	Ļ		15	244	020
	16	Total assets. Add lines 1 through 15 (must equal line 34)		0.	16	244	,820. ,719.
	17	Accounts payable and accrued expenses	_		17	/4	, /15.
	18	Grants payable	Ļ	· · · · · · · · · · · · · · · · · · ·	18		
	19	Deferred revenue			19		
	20	Tax-exempt bond liabilities	_		20		
Liabilities	21	Escrow or custodial account liability. Complete Part IV of Schedule			21		
bilii	22	Payables to current and former officers, directors, trustees, key en	1				
Lia		highest compensated employees, and disqualified persons. Comp	iele Fan II		22		
	00	of Schedule L Secured mortgages and notes payable to unrelated third parties	F		23		
	23 24	Unsecured notes and loans payable to unrelated third parties	}		24	·- <u>-</u>	
	25	Other liabilities (including federal income tax, payables to related the	pird		- -		
	23	parties, and other liabilities not included on lines 17-24) Complete					
		Schedule D			25	1	
	26	Total liabilities. Add lines 17 through 25	ŀ	0.		74	,719.
			complete				
S		lines 27 through 29, and lines 33 and 34.					
Fund Balances	27	Unrestricted net assets			27	135	,101.
ala	28	Temporanly restricted net assets	F		28		,000.
B P	29	Permanently restricted net assets	ľ		29		
Fun		Organizations that do not follow SFAS 117, check here	and				
or		complete lines 30 through 34.					~
S			i"		1 00	1	

170,101. 244,820. Form **990** (2011)

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0. 33

0. 34

31

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

Total net assets or fund balances

Paid-in or capital surplus, or land, building, or equipment fund

Retained earnings, endowment, accumulated income, or other funds

Fom	n 990 (2011)	_ FAMILIES	FOR	EXCELLENT	SCHOOLS,	INC.	45-28	370970	Pag	_{re} 12
Pa	rt XI Reco	nciliation of Net Assets	3							
	Check	f Schedule O contains a respo	onse to	any question in this	Part XI					
•										
1	Total revenue	(must equal Part VIII, column	(A), line	12)			1	1,140		
2	Total expens	es (must equal Part IX, column	(A), line	e 25)			2			<u>97.</u>
3	Revenue less	expenses. Subtract line 2 from	m line 1				3	170),1	01.
4	Net assets of	fund balances at beginning o	f year (n	nust equal Part X, lin	ne 33, column (A))		4			0.
5	Other change	s in net assets or fund balanc	es (exp	laın ın Schedule O)			5			0.
6		fund balances at end of year			must equal Part X	, line 33, column (B))	6	170),1	01.
Pa	rt XII Finar	cial Statements and R	eporti	ng						
	Check	f Schedule O contains a respo	onse to	any question in this	Part XII					LX.
					_				Yes	No
1	Accounting r	ethod used to prepare the Fo	rm 990:	: 🔲 Cash 🛣	Accrual L	Other		_		
	If the organiz	ation changed its method of a	ccounti	ng from a prior year	or checked "Othe	r," explain in Schedule	e O.			، ــــا
2a	Were the org	anization's financial statement	s comp	olled or reviewed by a	an independent a	ccountant?		2a		X
b	Were the org	anization's financial statement	s audite	ed by an independer	nt accountant?			2b	X	
С	If "Yes" to lin	e 2a or 2b, does the organizat	ion have	e a committee that a	ssumes responsi	bility for oversight of th	ne audit,			
	review, or co	npilation of its financial staten	nents ar	nd selection of an inc	dependent accou	ntant?		2c	X	
	If the organiz	ation changed either its oversi	ght pro	cess or selection pro	ocess during the t	ax year, explain in Sch	redule O.			
d	If "Yes" to lin	e 2a or 2b, check a box below	to indic	cate whether the fina	incial statements	for the year were issue	ed on a			
	separate bas	s, consolidated basis, or both							,	,
	X Separa	te basis Consolidated	l basıs	Both consoli	dated and separa	ite basis				_ ,
За	As a result of	a federal award, was the orga	inization	required to undergo	o an audit or audi	ts as set forth in the S	ingle Audit			
	Act and OME	Circular A-133?						3a		X
b	If "Yes," did	he organization undergo the r	equired	audit or audits? If th	ne organization di	d not undergo the requ	ured audit			
		lain why in Schedule O and d						3b		<u> </u>
								Form	990 (2011)

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. ➤ See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization **Employer identification number** FAMILIES FOR EXCELLENT SCHOOLS, 45-2870970 Part I 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. 5 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) 6 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). 11 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 **b** Type II c ____ Type III - Functionally integrated By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type II, Type III, or Type III f supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? g Yes (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) 11g(ii) (ii) A family member of a person described in (i) above? (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) h Provide the following information about the supported organization(s). (iii) Type of (vi) Is the organization in col. (iv) is the organization (v) Did you notify the (i) Name of supported (ii) EIN (vii) Amount of organization n col. (i) listed in your organization in col. organization (i) organized in the support (described on lines 1-9 governing document? (i) of your support? U.S.? above or IRC section (see instructions)) No Yes No Yes No Yes

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

Schedule A (Form 990 or 990-EZ) 2011

132021 01-24-12 Schedule A (Form 990 or 990 EZ) 2011 FAMILIES FOR EXCELLENT SCHOOLS, INC. 45-28709 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) 45-2870970 Page 2

(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.)

<u>se</u>	ction A. Public Support			,	,	···	
	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not	1	ł		ł	}	
	include any "unusual grants.")			L		640,042.	640,042.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf			<u> </u>	<u> </u>	<u> </u>	
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge				<u> </u>		
4	Total. Add lines 1 through 3		L _			640,042.	640,042.
5	The portion of total contributions						
	by each person (other than a				1		
	governmental unit or publicly						
	supported organization) included				[\	
	on line 1 that exceeds 2% of the						
	amount shown on line 11,		ļ				
	column (f)]		<u> </u>		
6	Public support. Subtract line 5 from line 4						640,042.
Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011 640,042.	(f) Total 640,042.
7	Amounts from line 4					640,042.	640,042.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties]			Į.	
	and income from similar sources					410.	410.
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				1		
	assets (Explain in Part IV)						
11	Total support. Add lines 7 through 10						640,452.
	Gross receipts from related activities,	etc. (see instruct	ions)			12	
	First five years. If the Form 990 is for	•	•	rd, fourth, or fifth	tax year as a secti	on 501(c)(3)	
	organization, check this box and stor	-	•				▶ X
Se	ction C. Computation of Publ		ercentage				
14	Public support percentage for 2011 (line 6, column (f) c	livided by line 11,	column (f))		14	%
15	Public support percentage from 2010) Schedule A, Pari	t II, line 14			15	%
	33 1/3% support test - 2011. If the			on line 13, and line	14 is 33 1/3% or	more, check this bo	ox and
	stop here. The organization qualifies						▶□
b	33 1/3% support test - 2010. If the d	organization did n	ot check a box on	line 13 or 16a, and	d line 15 is 33 1/39	% or more, check th	nis box
	and stop here. The organization qual	-					▶□
17a	10% -facts-and-circumstances tes	t - 2011. If the or	ganization did not	check a box on lir	ne 13, 16a, or 16b,	and line 14 is 10%	or more,
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"					_	ightharpoons
b	10% -facts-and-circumstances tes	•	•		=	17a, and line 15 is	10% or
_	more, and if the organization meets the						
	organization meets the "facts-and-circ						▶□
18	Private foundation. If the organization		•	-			s >
						edule A (Form 990	
					= =	• • • • • • •	•

132022 01-24-12

Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	ction A. Public Support				·		
_	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
	Gifts, grants, contributions, and					`	
	membership fees received. (Do not	1					
	include any "unusual grants.")	I	J	ļ			
2	Gross receipts from admissions,						
	merchandise sold or services per-		ļ				
	formed, or facilities furnished in any activity that is related to the		1				
	organization's tax-exempt purpose	L				L	
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ızatıon's benefit and either paid to		ĺ				
	or expended on its behalf					<u></u>	
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge					<u></u>	
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and				:		
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received	!	į	}			
	from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year				<u> </u>		
c	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6.)		<u> </u>		<u> </u>	<u> </u>	
<u>Sec</u>	ction B. Total Support						,
Cale	ndar year (or fiscal year beginning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
-	Amounts from line 6	ļ			<u> </u>	· · · · · · · · · · · · · · · · · · ·	
10a	Gross income from interest, dividends, payments received on	I					
	securities loans, rents, royalties	I					
	and income from similar sources	- <u> </u>			<u> </u>	ļ	
b	Unrelated business taxable income	1			1		
	(less section 511 taxes) from businesses			J			ļ
	acquired after June 30, 1975				<u> </u>		
	Add lines 10a and 10b	ļ					
13	Net income from unrelated business activities not included in line 10b.	I					
	whether or not the business is	I					
4.0	regularly carried on		·		 		
12	Other income Do not include gain or loss from the sale of capital				1		
	assets (Explain in Part IV.)				 		
	Total support (Add lines 9, 10c, 11, and 12)			<u> </u>	<u> </u>		
14	First five years. If the Form 990 is for	the organization's	s first, second, thii	d, fourth, or fifth t	tax year as a section	on 501(c)(3) organi	zation,
<u> </u>	check this box and stop here	e Support De	roontogo	'			
	ction C. Computation of Publ	· · · · · · · · · · · · · · · · · · ·		(0)		I.E.	
	Public support percentage for 2011 (I			column (t))		15	%
	Public support percentage from 2010 ction D. Computation of Investigation					16	%
						17	
	Investment income percentage for 20	•		ne 13, column (1))			<u>%</u>
	Investment income percentage from 2	· ·		on line 14 and lin	a 15 is mars than	18	
ıya	33 1/3% support tests - 2011. If the	-					17 13 1101
	more than 33 1/3%, check this box as	•	•		· •		and
O	33 1/3% support tests - 2010. If the	_					
20	line 18 is not more than 33 1/3%, che						
	Private foundation. If the organizatio	п ою посспеск а	DOX on line 14, 19	a, or 190, check t			0 or 990-EZ) 2011
13202	23 01-24-12				301	iedule A (Form 99	O UI 99U-EZ) 2011

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

➤ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ➤ Attach to Form 990. ➤ See separate instructions. 2011
Open to Public Inspection

Name of the organization

Employer identification number

	FAMILIES FOR EXCEL		45-2870970
Pai	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds of	or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin	e 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advised	d funds
	are the organization's property, subject to the organization's	_	L Yes No
6	Did the organization inform all grantees, donors, and donor a		
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose co	
Pai	impermissible private benefit?		Yes No
			rt IV, line /
1	Purpose(s) of conservation easements held by the organizat	· — — ·	was II
	Preservation of land for public use (e.g., recreation or e	Preservation of an histor	orically important land area
	Protection of natural habitat	Freservation of a certific	ed Historic structure
2	Preservation of open space Complete lines 2a through 2d if the organization held a quality	find consequation contribution in the form of	a conservation easement on the last
_	day of the tax year.	ned conservation contribution in the form of	a conservation easement on the last
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
C	Number of conservation easements on a certified historic str	ructure included ın (a)	2c
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic structure	e
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the c	organization during the tax
	year ▶		
4	Number of states where property subject to conservation ea	sement is located >	
5	Does the organization have a written policy regarding the pe	riodic monitoring, inspection, handling of	L
	violations, and enforcement of the conservation easements i	it holds?	└── Yes └── No
6	Staff and volunteer hours devoted to monitoring, inspecting,	and enforcing conservation easements dur	ring the year ▶
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170(h)	
	and section 170(h)(4)(B)(ii)?		☐ Yes ☐ No
9	In Part XIV, describe how the organization reports conservat		
	include, if applicable, the text of the footnote to the organiza	tion's financial statements that describes th	e organization's accounting for
Dai	t III Organizations Maintaining Collections o	f Art Historical Treasures or Oth	per Similar Assets
Fai	Complete if the organization answered "Yes" to Form	-	ici olillidi Assets.
12	If the organization elected, as permitted under SFAS 116 (AS		ant and halance sheet works of art
ıa	historical treasures, or other similar assets held for public ext	•	
	the text of the footnote to its financial statements that descri		se of public service, provide, in rate xiv,
h	If the organization elected, as permitted under SFAS 116 (AS		and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e		
	relating to these items:	distance, or research in farmoralists of pass.	is control, provide in a terreming annealist
	(i) Revenues included in Form 990, Part VIII, line 1		▶ \$
	(ii) Assets included in Form 990, Part X		▶ \$
2	If the organization received or held works of art, historical tre	asures, or other similar assets for financial g	gain, provide
	the following amounts required to be reported under SFAS 1		
а	Revenues included in Form 990, Part VIII, line 1	• •	> \$
b	Assets included in Form 990, Part X		> \$

Schedule D (Form 990) 2011

132051 01-23-12

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	dule D (Form 990) 2011 FAMILIE:										Page 2
Par	t III Organizations Maintaining C	ollection	s of Ar	t, Histo	rical Tr	easures,	or Oth	er Simil	ar Asse	e ts (contii	nued)
3	Using the organization's acquisition, accessi	on, and oth	er record	s, check a	ny of the	following th	nat are a s	significant	use of its	collection	ı ıtems
•	(check all that apply)										
а	Public exhibition		d			hange prog	rams				
b	Scholarly research		е	L Ot	her						
С	Preservation for future generations										
4	Provide a description of the organization's co	ollections ar	nd explair	n how they	further th	he organiza	tion's exe	empt purpo	ose in Pa	rt XIV.	
5	During the year, did the organization solicit o	r receive do	nations o	of art, histo	orical trea	sures, or ot	her sımıla	ar assets	_	_	
	to be sold to raise funds rather than to be ma									Yes	No_
Pai	t IV Escrow and Custodial Arran	_		ete if the o	rganızatıo	n answered	d "Yes" to	Form 990	, Part IV,	line 9, or	
	reported an amount on Form 990, Par										
1a	Is the organization an agent, trustee, custode	an or other	ıntermed	lary for co	ntribution	is or other a	assets no	t included	_	_	
	on Form 990, Part X?								L	⊔ Yes	LJ No
b	If "Yes," explain the arrangement in Part XIV	and comple	ete the fo	llowing tal	ole:				-		
										Amount	
С	Beginning balance							1c		·	
d	Additions during the year							1d			
e	Distributions during the year							1e			
f	Ending balance							1f		 	
2a	•	orm 990, Pa	art X, line	217					L	_ Yes	∟ No
	If "Yes," explain the arrangement in Part XIV										
Pai	t V Endowment Funds. Complete i					1		1		1.,55	
		(a) Currer	nt year	(b) Pric	r year	(c) Two ye	ars back	(d) Three y	ears back	(e) Four	years back
1a	Beginning of year balance										
b	Contributions									-	
С	Net investment earnings, gains, and losses					ļ				 -	
d	Grants or scholarships									ļ.—	
е	Other expenditures for facilities										
	and programs						 			 	
f	Administrative expenses									 	
9	End of year balance					<u>. </u>					
2	Provide the estimated percentage of the cur	rent year er	nd balanc		column (a	a)) held as.					
а	Board designated or quasi-endowment			_%							
þ	Permanent endowment	%									
C	Temporarily restricted endowment		%								
	The percentages in lines 2a, 2b, and 2c should										
3а	Are there endowment funds not in the posse	ssion of the	e organiza	ation that	are held a	ınd admınıs	tered for	tne organi	zation	Г	Yes No
	by:										Yes No
	(i) unrelated organizations									3a(i)	
	(ii) related organizations									3a(ıi)	
b	If "Yes" to 3a(II), are the related organizations									3b	i
4	Describe in Part XIV the intended uses of the										
Pai	t VI Land, Buildings, and Equipm						T			(d) Dool	
	Description of property	1	Cost or o			or other	1 '	Accumulate epreciation		(d) Bool	k value
		pasi	s (investr	Herry	Dasis	(other)	1	prociation			
	Land						+				
Ь	Buildings	 					+				
C	Leasehold improvements	<u> </u>				7,874	+	1,6	31		6,243.
	Equipment	-				4,500		$\frac{1,0}{1,1}$			$\frac{3,243}{3,375}$.
	Other	augl Farra	200 2004	V och m-	(D) line 1		<u>• </u>	<u> </u>			9,618.
											_ ,

Schedule D (Form 990) 2011

	dule D (Form 990) 2011 FAMILIES FOR EXCELLENT SCHO						<u> 2870970</u>	Page 4
Par	t XI Reconciliation of Change in Net Assets from Form 990 to	Audited	d Financ	cial S	tate	nent		
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1	1			1,140	
Ż	Total expenses (Form 990, Part IX, column (A), line 25)			2			970	<u>,397.</u>
3	Excess or (deficit) for the year. Subtract line 2 from line 1			3			170	,101.
4	Net unrealized gains (losses) on investments		ľ	4				
5	Donated services and use of facilities		ſ	5				
6	Investment expenses			6				
7	Prior period adjustments		Ī	7				
8	Other (Describe in Part XIV)		<u> </u>	8				
9	Total adjustments (net) Add lines 4 through 8		ſ	9				
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and	d 9	Ī	10			170	,101.
Par	t XII Reconciliation of Revenue per Audited Financial Stateme	nts With	n Reven	ue p	er Re	∍turn		
1	Total revenue, gains, and other support per audited financial statements					1	1,140	,498.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				Γ			
а	Net unrealized gains on investments	2a						
b	Donated services and use of facilities	2b	-		\Box			
С	Recoveries of prior year grants	2c						
d	Other (Describe in Part XIV.)	2d						
е	Add lines 2a through 2d					2e		0.
3	Subtract line 2e from line 1				Γ	3	1,140	,498.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				Ī			<u> </u>
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			l			
ь	Other (Describe in Part XIV)	4b		•		Į.		
	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	1,140	,498.
Pai	t XIII Reconciliation of Expenses per Audited Financial Stateme	ents Wit	th Expe	nses	per	Retu	rn	
1	Total expenses and losses per audited financial statements					1		,397.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.				ſ			
а	Donated services and use of facilities	2a						
b	Prior year adjustments	2b						
c	Other losses	2c				1		
d	Other (Describe in Part XIV)	2d						
	Add lines 2a through 2d					2e		0.
3	Subtract line 2e from line 1					3	970	,397.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1				Ī	7		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a						
b	Other (Describe in Part XIV)	4b				- 1		
	Add lines 4a and 4b					4c		0.
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)				ľ	5	970	,397.
	t XIV Supplemental Information							
	olete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III	l. lines 1a	and 4: Par	rt IV. in	nes 1b	and 2	b: Part V. line	4: Part
	e 2, Part XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b Also comp							·
	RT X, LINE 2: FES'S ACCOUNTING POLICY PROVI							
				-				
BEI	EFIT FROM AN UNCERTAIN TAX POSITION MAY B	E REC	OGNIZ	ED 1	WHE	N IT	r IS MO	RE
LIE	KELY THAN NOT THAT THE POSITION WILL BE SUS	STAIN	ED UP	ON I	EXA	1IN/	ATION,	
INC	CLUDING RESOLUTIONS OF ANY RELATED APPEALS	OR L.	L'I'IGA'	LTO	N PI	ROCE	ESSES,	
BAS	ED ON THE TECHNICAL MERITS. FES HAS NO UNC	CERTA	IN TA	X P	osi	101	N RESUL	TING
								
IN	AN ACCRUAL OF TAX EXPENSE OR BENEFIT.							
_								

SCHEDULE M (Form 990)

Department of the Treasury

Internal Revenue Service

Noncash Contributions

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization

FAMILIES FOR EXCELLENT SCHOOLS, INC.

Employer identification number 45-2870970

Pai	rt I Types of Property								
		(a)	(b)	(c)		(d)			
		Check if	Number of	Noncash contrib amounts reporte		Method of de			
		applicable	contributions or	Form 990, Part VIII,		noncash contribu	ition ar	nount	S
1	Art · Works of art								
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 - Publicly traded	X	1	34,8	99.	FAIR MARKET	VA	HIL	
10	•		-	31,0	 -	11111 111111111111111111111111111111111	<u> </u>		
	Securities - Closely held stock					 			
11	Securities - Partnership, LLC, or								
40	trust interests					·		_	
12	Securities - Miscellaneous								
13	Qualified conservation contribution -								
44	Historic structures	ļ							
14	Qualified conservation contribution Other								
15	Real estate - Residential	 						_	
16	Real estate - Commercial		·						
17	Real estate · Other								
18	Collectibles								
19	Food inventory			· -		 			
20	Drugs and medical supplies	<u> </u>							
21	Taxidermy								
22	Historical artifacts								
23	Scientific specimens								
24	Archeological artifacts						, .		
25	Other ()								
26	Other ()								
27	Other ()								
28	Other (l		<u> </u>					
29	Number of Forms 8283 received by the organi		-						
	for which the organization completed Form 82	83, Part IV,	Donee Acknowled	gement	29				
								Yes	No
30a	During the year, did the organization receive b							1	ì
	at least three years from the date of the initial	contribution	, and which is not	required to be used	for exem	pt purposes for			37
	the entire holding period?						30a		_ <u>X</u> _
þ	If "Yes," describe the arrangement in Part II								
31	Does the organization have a gift acceptance	policy that r	equires the review	of any non-standard	l contribu	itions?	31		_X_
32a	Does the organization hire or use third parties	or related o	rganizations to sol	cit, process, or sell r	noncash			ł	
	contributions?						32a		_X
b	If "Yes," describe in Part II.								1
33	If the organization did not report an amount in	column (c)	or a type of prope	rty for which column	(a) is che	ecked,		i	1
	describe in Part II.			<u> </u>					
LHA	For Paperwork Reduction Act Notice, see	the Instruc	tions for Form 99	0.		Schedule M	(Form	990) (2011)

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2011
Open to Public Inspection

Department of the Treasury ▶ Attach to Form 990 or 990-EZ. Internal Revenue Service Name of the organization **Employer identification number** FAMILIES FOR EXCELLENT SCHOOLS, INC. 45-2870970 FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: SCHOOLS. FORM 990, PART VI, SECTION B, LINE 11: FORM 990 IS REVIEWED BY MANAGEMENT AND THE FINANCE COMMITTEE OF THE BOARD OF DIRECTORS FOR APPROVAL. CHANGES ARE REQUIRED, FES WILL THEN FORWARD TO THE AUDITING FIRM AND A FINAL VERSION WILL BE DISTRIBUTED TO ALL BOARD MEMBERS PRIOR TO THE IRS SUBMISSION. FORM 990, PART VI, SECTION B, LINE 12C: FES SHARES ITS CONFLICT OF INTEREST POLICY WITH BOARD MEMBERS AND OFFICERS ON AN ANNUAL BASIS. OFFICERS, DIRECTORS, AND KEY EMPLOYEES ARE EXPECTED TO DECLARE IF AT ANY POINT A CONFLICT OF INTEREST ARISES. FORM 990, PART VI, SECTION B, LINE 15: COMPARABLE DATA IS USED BY THE BOARD WHEN DETERMINING THE COMPENSATION OF OFFICERS AND KEY EMPLOYEES. FORM 990, PART VI, SECTION C, LINE 19: UPON REQUEST, FES MAKES AVAILABLE TO THE PUBLIC ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS. FORM 990, PART XII, FINANCIAL STATEMENTS AND REPORTING, LINE 2C: FES HAS A FINANCE COMMITTEE THAT IS RESPONSIBLE FOR OVERSIGHT OF THE AUDIT AND SELECTION OF THE INDEPENDENT AUDITOR.

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

Schedule O (Form 990 or 990-EZ) (2011)

2011 DEPRECIATION AND AMORTIZATION REPORT FORM 990 PAGE 10

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(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

Depreciation and Amortization (Including Information on Listed Property)

► See separate instructions. ► Attach to your tax return. Business or activity to which this form relates

OMB No 1545-0172

990

Attachment Sequence No 179

FORM 990 DACE 10 FAMILIES FOR EXCELLENT SCHOOLS

45-2870970

	AIDIES FOR EXCEPTENT					90 F				43-2670370
Pa	rt Election To Expense Certain Proper	ty Under Section 1	79 Note: If yo	u have any lis	ted pro	perty, c	omplete Part	V befo	- 	
1	Maximum amount (see instructions)							L	1	500,000.
2	Total cost of section 179 property place	ed in service (see	instructions)					⊢	2	
3	Threshold cost of section 179 property	before reduction	ın limitation					L	3	2,000,000.
4	Reduction in limitation. Subtract line 3 f	from line 2. If zero	or less, ente	er -0-				L	4	
<u>5</u> [Pollar limitation for tax year Subtract line 4 from line		-0- If married file						5	
<u>6</u> _	(a) Description of pro	perty		(b) Cost (busin	ness use o	inly)	(c) Elected	cost		
										
									—	
	isted property Enter the amount from				L	7				
	Total elected cost of section 179 prope	•	s in column (c	c), lines 6 and	17			-	8	
	Tentative deduction. Enter the smaller	-						 -	9	
	Carryover of disallowed deduction from	_				_		-	10	· — · — · — · — · — · — · — · — · — · —
	Business income limitation. Enter the sr		•		•	ne 5		-	11	
	Section 179 expense deduction. Add lin				[40	 		12	
	Carryover of disallowed deduction to 20 : Do not use Part II or Part III below for				<u> </u>	13				,
_	rt II Special Depreciation Allowa	<u></u>			do listo	d prope	ety)			
	Special depreciation allowance for qual			`					\neg	
	he tax year	illed property (or	ner man iiste	a property, p	iaceu ir	Service	during		14	
	Property subject to section 168(f)(1) ele	ection						F	15	
	Other depreciation (including ACRS)	ection						Ė	16	2,756.
Pa	rt III MACRS Depreciation (Do no	t include listed o	roperty.) (See	instructions	.)				10 1	= 7.00.
	interior population (political)	THIS ISSUED		ction A	'					
17	MACRS deductions for assets placed in	n service in tax vi	ears beginnin	a before 201	1				17	
	you are electing to group any assets placed in serv	•	-	_		eck here	▶ [7 F	. • • •	<u></u>
	Section B - Assets						eral Deprecia	tion	Syste	em
	(a) Classification of property	(b) Month and year placed in service	(business/ir	depreciation vestment use instructions)	(d) F	lecovery eriod	(e) Convention	(f) Me	thod	(g) Depreciation deduction
19a	3-year property	 					1			
b	5-year property	7		· · · · · · · · · · · · · · · · · · ·						
	7-year property	1								
d	10-year property	1								
e	15-year property	7								
f	20-year property	7								
g	25-year property	1			25	yrs.		S/	′L]	
		/			27.	5 yrs.	MM	S/	Ľ	
_ h	Residential rental property	/			27.	5 yrs.	MM	S/	'L	
	No. and the state of	/			39	yrs.	MM	S/	L	
i _	Nonresidential real property	/		_			MM	S/	L]	
	Section C - Assets P	laced in Service	During 201	1 Tax Year U	sing th	e Altern	native Deprec	iatio	n Sys	tem
20a	Class life							S/	'L	
ь	12-year				12	yrs.		S/	<u>'L</u>	
С	40-year	/			40	yrs.	MM	_S/	<u>'L</u>	
Pa	rt IV Summary (See instructions.)									
21 I	isted property. Enter amount from line	28		<u>-</u>					21	
22 1	Total. Add amounts from line 12, lines 1	14 through 17, lin	es 19 and 20) ın column (g	j), and li	ne 21.				
	Enter here and on the appropriate lines						<u>:</u>		22	2,756.
23 F	or assets shown above and placed in	service during th	e current yea	r, enter the						·
	portion of the basis attributable to secti	on 263A costs			İ	23				
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