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GOVERNMENT COPY

JANUARY 29, 2015

THE FORUM ON EDUCATION ABROAD, INC. DICKINSON COLLEGE, PO BOX 1773 CARLISLE, PA 17013

THE FORUM ON EDUCATION ABROAD, INC.:

ENCLOSED ARE THE 2013 EXEMPT ORGANIZATION RETURNS, AS FOLLOWS...

2013 FORM 990

2013 PENNSYLVANIA FORM BCO-10

EACH ORIGINAL SHOULD BE DATED, SIGNED AND FILED IN ACCORDANCE WITH THE FILING INSTRUCTIONS. THE COPY SHOULD BE RETAINED FOR YOUR FILES.

VERY TRULY YOURS,

CHARLES R. NEBEL, JR.

TAX RETURN FILING INSTRUCTIONS

FORM 990

FOR THE YEAR ENDING

JUNE 30, 2014

PREPARED FOR:

THE FORUM ON EDUCATION ABROAD, INC. DICKINSON COLLEGE, PO BOX 1773 CARLISLE, PA 17013

PREPARED BY:

BOYER & RITTER 9 IRVINE ROW CARLISLE, PA 17013

AMOUNT DUE OR REFUND:

NOT APPLICABLE

MAKE CHECK PAYABLE TO:

NOT APPLICABLE

MAIL TAX RETURN AND CHECK (IF APPLICABLE) TO:

NOT APPLICABLE

RETURN MUST BE MAILED ON OR BEFORE:

NOT APPLICABLE

SPECIAL INSTRUCTIONS:

THIS RETURN HAS BEEN PREPARED FOR ELECTRONIC FILING. IF YOU WISH TO HAVE IT TRANSMITTED ELECTRONICALLY TO THE IRS, PLEASE SIGN, DATE, AND RETURN FORM 8879-EO TO OUR OFFICE. WE WILL THEN SUBMIT THE ELECTRONIC RETURN TO THE IRS. DO NOT MAIL A PAPER COPY OF THE RETURN TO THE IRS.

Form	88	79-	EO

IRS e-file Signature Authorization for an Exempt Organization

OMB No. 1545-1878

Department of the Treasury

For calendar year 2013, or fiscal year beginning <u>JUL 1</u>, 2013, and ending <u>JUN 30</u>, 20 <u>14</u> **Do not send to the IRS. Keep for your records.**

Information about Form 8879-EO and its instructions is at www.irs.gov/form8879eo

Internal Revenue Service Name of exempt organization

Employer identification number

THE FORUM ON EDUCATION ABROAD, INC.

Name and title of officer

23-3100062

BRIAN WHALEN PRESIDENT, CEO Part | Type of Ret

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line **1a**, **2a**, **3a**, **4a**, or **5a**, below, and the amount on that line for the return being filed with this form was blank, then leave line **1b**, **2b**, **3b**, **4b**, or **5b**, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than 1 line in Part I.

1a	Form 990 check here X b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b	1,429,766.
2a	Form 990-EZ check here b Total revenue, if any (Form 990-EZ, line 9)	2b	
3a	Form 1120-POL check here b Total tax (Form 1120-POL, line 22)	3b	
4a	Form 990-PF check here b Tax based on investment income (Form 990-PF, Part VI, line 5)	4b	
5a	Form 8868 check here b Balance Due (Form 8868, Part I, line 3c or Part II, line 8c)	5b	

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2013 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

X I authorize BOYER & RITTER	to enter my PIN	17013
ERO firm name		Enter five numbers, but do not enter all zeros
as my signature on the organization's tax year 2013 electronically filed return. If I have indicated within th is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also aut enter my PIN on the return's disclosure consent screen.		
As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2013 indicated within this return that a copy of the return is being filed with a state agency(ies) regulating char program, I will enter my PIN on the return's disclosure consent screen.		
Officer's signature Date Date		
Part III Certification and Authentication		
ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN. do not enter all zeros		
I certify that the above numeric entry is my PIN, which is my signature on the 2013 electronically filed return for the confirm that I am submitting this return in accordance with the requirements of Pub. 4163 , Modernized e-File (Mef <i>e-file</i> Providers for Business Returns.		
ERO's signature Date		
ERO Must Retain This Form - See Instructions Do Not Submit This Form To the IRS Unless Requested To Do	So	

		•	Return of Organization Exempt Fr	om In	come T	ах	OMB No. 1545-0047
For	m 99	0	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Co				2013
Depa	artment of the	e Treasury	Do not enter Social Security numbers on this form as it		•		Open to Public
	nal Revenue		Information about Form 990 and its instructions is at 0.011 and 0.011 and 0.0111 and 0.011 and 0.011 and 0.011 an				Inspection
<u>A</u>	For the 20	013 calenda	ar year, or tax year beginning $ { m JUL}1,2013$ and en	nding JI	JN 30, 2	014	
	Check if applicable:	C Name of	organization		D Employer i	dentificati	ion number
	Address change	THE	FORUM ON EDUCATION ABROAD, INC.				
	Name change		usiness As		2	23-310	0062
	Initial return	Number	and street (or P.O. box if mail is not delivered to street address)	oom/suite	E Telephone	number	
	Termin- ated	DICK	INSON COLLEGE, PO BOX 1773		7	717-24	5-1031
	Amended return	City or to	own, state or province, country, and ZIP or foreign postal code		G Gross receipts	\$	1,429,766.
	Applica-		ISLE, PA 17013		H(a) Is this a g	group retur	'n
	pending	F Name ar	nd address of principal officer: BRIAN WHALEN		for subor	dinates?	Yes X No
		SAME 2	AS C ABOVE		H(b) Are all subor	dinates includ	led? Yes No
			X 501(c)(3) 501(c) ()◀ (insert no.) 4947(a)(1) or	527	lf "No," a	ttach a list	. (see instructions)
			FORUMEA.ORG		H(c) Group ex		
			X Corporation Trust Association Other ►	L Year o	f formation: 20)01 м Si	tate of legal domicile: PA
Pa		ummary					
Ð	1 Bri		e the organization's mission or most significant activities: MEMBER				THAT IS
anc	$ \underline{T}$		NDARDS DEVELOPMENT ORGANIZATION FOR				
ernä	2 Ch		x I if the organization discontinued its operations or disposed	d of more t	han 25% of its	1 1	
Š	3 Nu		ing members of the governing body (Part VI, line 1a)				15
ن ھ	4 Nu		ependent voting members of the governing body (Part VI, line 1b)				15
ies	5 Tot		of individuals employed in calendar year 2013 (Part V, line 2a)				0 275
Activities & Governance	6 Tot		of volunteers (estimate if necessary)			_	
Act	7 a loi		d business revenue from Part VIII, column (C), line 12				0.
	D Ne	t unrelated	business taxable income from Form 990-T, line 34			. 7b	
		ntributiona	and grants (Dart)/III, line 1b)		Prior Year 159,8	47	Current Year 1,073.
Ine	8 Co 9 Pro		and grants (Part VIII, line 1h) ce revenue (Part VIII, line 2g)		1,643,3		1,404,517.
Revenue	10 Inv	-	ce revenue (Part VIII, line 2g) come (Part VIII, column (A), lines 3, 4, and 7d)		13,9		24,176.
Be	11 Ot		(Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			0.	0.
	1		- add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,817,1		1,429,766.
			nilar amounts paid (Part IX, column (A), lines 1-3)		10,0		10,000.
	1		o or for members (Part IX, column (A), line 4)			0.	0.
s	15 00	•	compensation, employee benefits (Part IX, column (A), lines 5-10)			0.	0.
			undraising fees (Part IX, column (A), line 11e)			0.	0.
Expense	b Tot		ng expenses (Part IX, column (D), line 25) 14,770	D .			
ш	17 Oth	her expense	es (Part IX, column (A), lines 11a-11d, 11f-24e)		1,481,1		1,426,190.
	1		s. Add lines 13-17 (must equal Part IX, column (A), line 25)		1,491,1	.58.	1,436,190.
	19 Re	venue less e	expenses. Subtract line 18 from line 12		325,9	89.	-6,424.
OL				Beg	inning of Curren		End of Year
sets	20 Tot	tal assets (F	Part X, line 16)		1,770,4		1,963,114.
Net Assets or	21 Tot		(Part X, line 26)		309,1		393,773.
	22 Ne		fund balances. Subtract line 21 from line 20		1,461,2	156.	1,569,341.
		Signature					
	-		declare that I have examined this return, including accompanying schedules ar			-	owledge and belief, it is
true	, correct, a	nd complete.	Declaration of preparer (other than officer) is based on all information of which	h preparer h	ias any knowledg	je.	

				2.		
Sign	Signature of officer			Date		
Here	BRIAN WHALEN, PRESIDEN	Г, СЕО				
	Type or print name and title					
	Print/Type preparer's name	Preparer's signature	Date	Check PTIN		
Paid	CHARLES R. NEBEL, JR.			self-employed P00143823		
Preparer	Firm's name 🕒 BOYER & RITTER			Firm's EIN 23-1311005		
Use Only Firm's address 9 IRVINE ROW						
CARLISLE, PA 17013				Phone no. 717 - 249 - 3414		
May the IF	RS discuss this return with the preparer shown abo	ve? (see instructions)		X Yes No		
332001 10-2	32001 10-29-13LHAFor Paperwork Reduction Act Notice, see the separate instructions.Form 990 (2013)					

Form	990 (2013) THE FORUM ON EDUCATION ABROAD, INC. 23-3100062 Page 2
Pa	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission: THE FORUM ON EDUCATION ABROAD IS THE HIGHER EDUCATION ASSOCIATION FOR
	EDUCATION ABROAD. THE FORUM IS RECOGNIZED BY THE U.S. DEPARTMENT OF
	JUSTICE AND THE FEDERAL TRADE COMMISSION AS THE STANDARDS DEVELOPMENT
	ORGANIZATION (SDO) FOR THE FIELD OF EDUCATION ABROAD. THE FORUM'S
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
4	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 583,887. including grants of \$) (Revenue \$ 704,557.)
	THROUGH CONVENING EVENTS AND CONFERENCES, THE FORUM OFFERS
	OPPORTUNITIES FOR DISCUSSION, LEARNING AND NETWORKING. THE FORUM
	ANNUAL CONFERENCE IS THE LARGEST EDUCATION ABROAD GATHERING AND THE
	SIGNATURE EVENT OF THE FORUM. IN LATE MARCH IN SAN DIEGO OVER 1,100
	PEOPLE ATTENDED THIS EVENT FROM 30 COUNTRIES, AND 47 U.S. STATES. IN
	ADDITION, DURING THE YEAR OVER 200 ATTENDED TWO STANDARDS OF GOOD
	PRACTICE INSTITUTES, 30 ATTENDED A FIRESIDE DIALOGUE, AND 493
	INSTITUTIONS PARTICIPATED IN WEBINARS.
4b	(Code:) (Expenses \$ 369,796. including grants of \$ 10,000.) (Revenue \$ 572,437.)
	THE FORUM'S PROGRAMS AND RESOURCES OFFER IMPORTANT DATA AND ANALYSIS,
	QUALITY ASSURANCE TOOLS, AND PUBLICATIONS AND ONLINE RESOURCES TO HELP
	INSTITUTIONS TO ADVANCE THEIR EDUCATION ABROAD PROGRAMS. IN 2014
	VISITS TO THE FORUM WEB SITE INCREASED BY 17%, THE ONLINE CURRICULUM
	COOPERATIVE GREW SUBSTANTIALLY, AND THE OUTCOMES ASSESSMENT TOOLBOX AND
	CRITICAL INCIDENT DATABASE WERE LAUNCHED.
4c	(Code:) (Expenses \$ 270,120. including grants of \$) (Revenue \$127,523.)
	THROUGH ITS MANY WORKSHOPS AND ITS PROFESSIONAL CERTIFICATION PROGRAM,
	THE FORUM TRAINS AND EDUCATES HUNDREDS OF COLLEAGUES EACH YEAR IN BEST
	PRACTICES, AND BY DOING SO HELPS TO IMPROVE THE EDUCATION ABROAD FIELD
	FOR THE BENEFIT OF STUDENTS. IN 2014, 26 WORKSHOPS WERE OFFERED,
	ATTENDED BY 476 PEOPLE. THE PROFESSIONAL CERTIFICATION PROGRAM, THE
	FIRST IN THE FIELD OF EDUCATION ABROAD, WAS ALSO LAUNCHED.
۵d	Other program services (Describe in Schedule O.)
τu	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses ► 1,223,803.
	Form 990 (2013)
33200	

Form	990	(2013)	

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a		Х
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	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			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
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	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u>X</u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		_X_
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		_X_
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		<u> </u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		<u>X</u>
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Form 990 (2013)

Form 990 (EDUCATION	ABROAD,	INC
Part IV	Checklist of R	equire	d Schedu	les ₍	continued)		

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		Х
24a				
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	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	0.5		v
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
a	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	056		х
26	Schedule L, Part I Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or	25b		-23
26	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so,			
		26		Х
27	complete Schedule L, Part II	20		
21	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
20	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			77
•	and that is treated as a partnership for federal income tax purposes? <i>If</i> "Yes," <i>complete Schedule R, Part VI</i>	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		v	
	Note. All Form 990 filers are required to complete Schedule O	38	X	

Form **990** (2013)

Part U Statements Regarding Other IRS Filings and Tax Compliance Check # Schedule O contains a response or note to any line in the Part V Check # Schedule O contains a response or note to any line in the Part V Terr the number of forms W-3G included in line 1a. Enter -0 find applicable 10 Det the cognization comply with backbuy withholding rules for reportable payments to vendors and reportable gaming (gambing) winnings to prax winnes? Terr the number of molyces reported on Form W-3, Transmittal of Wage and Tax Statements. 2a 0 B tast one is reported on line 2a, did the organization file all required federal employment tax relumn? 2b Webs. If the sum of lines 1a and 2a is greater than 250, you may be required to a_AB (gee instructions) 3a X B the sum one lines ta and 2a is greater than 250, you may be required to a schedule on the action form 900. Than Swart Pin Ves 1 (in Bac Action Pin Swart Pin Ves 1) A any time during the calendar year, dd the organization have an intervel in or al signature or ther authority over. a financial Account is activation for financial accounts. Sa D to ves its abs for the organization tax is an abs cale regularation and schedule accounts. Sa X but the organization have annealized basiles transaction at any time during the tax year? Sa X but the organization have an interves in a any time during the tax year? Sa X but any time and the organization have an intereline of a conhibitable activate therasaction? <	Form	990 (2013) THE FORUM ON EDUCATION ABROAD, INC. 23-3100	062	Р	age 5
1a Enter the number reported in Box 3 of Form 1096. Enter 0. If not applicable 1a 10 10 10 1a Enter the number of Form W-2G included in line 1a. Enter 0. If not applicable 10 0 0 10 10 0 2 Enter the number of Form W-2G included in line 1a. Enter 0. If not applicable 10	Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
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THE FORUM ON EDUCATION ABROAD, INC.

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 15			
	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 15			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3	Х	
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6	Х	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b	х	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes." provide the names and addresses in Schedule O	9		x
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe			
	in Schedule O how this was done	12c	х	
13	Did the organization have a written whistleblower policy?	13	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 approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
	Other officers or key employees of the organization	15b		х
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed $\blacktriangleright PA$			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) as	ailable	9	
	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website X Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and	financ	cial	
	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 and records of the organization	on: 🕨		
	BRIAN WHALEN - 717-245-1031			
	DICKINSON COLLEGE CARLISLE PA 17013			

THE FORUM ON EDUCATION ABROAD, INC.

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A)	(B)	(C)		(D)	(E)	(F)				
Name and Title	Average	(do	Position (do not check more than one		Reportable	Reportable	Estimated			
	hours per	box	, unle	ss pei	rson i	s both	n an	compensation	compensation	amount of
	week		cer ar I	nd a d I	irecto	r/trus I	tee)	from	from related	other
	(list any	rector						the	organizations	compensation
	hours for	or di	96			ated		organization	(W-2/1099-MISC)	from the
	related	ustee	trust		e	bens		(W-2/1099-MISC)		organization and related
	organizations below	ual tr	tional		voldu	t con	_			organizations
	line)	ndividual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) BARBARA ROWE	2.00				<u>×</u>	1 0	ш			
CHAIR		Х		X				0.	0.	0.
(2) PAUL DAVIES	1.00									
TREASURER		Х		X				0.	0.	0.
(3) GREGG KVISTAD	1.00									
VICE CHAIR		Х		X				0.	0.	0.
(4) SUSAN POPKO	1.00									
SECRETARY		Х		Х				0.	0.	0.
(5) JOY GLEASON CAREW	1.00									
BOARD MEMBER		Х						0.	0.	0.
(6) ENDA CARROLL	1.00									
BOARD MEMBER		Х						0.	0.	0.
(7) ROBIN CRAGGS	1.00									
BOARD MEMBER		Х						0.	0.	0.
(8) ROSA MARINA DE BRITO MEYER	1.00									
BOARD MEMBER		Х						0.	0.	0.
(9) MARY ANNE GRANT	1.00									
BOARD MEMBER		Х						0.	0.	0.
(10) JOHN LUCAS	1.00									
BOARD MEMBER		Х						0.	0.	0.
(11) PAUL MCVEIGH	1.00									
BOARD MEMBER		Х						0.	0.	0.
(12) MICHAEL MORRISON	1.00									
BOARD MEMBER		Х						0.	0.	0.
(13) MARGARET PLYMPTON	1.00									
BOARD MEMBER		Х						0.	0.	0.
(14) PATRICIA SCROGGS	1.00									
BOARD MEMBER		Х						0.	0.	0.
(15) HANNAH STEWART GAMBINO	1.00									
BOARD MEMBER		Х						0.	0.	0.
(16) BRIAN WHALEN	40.00							_	_	•
PRESIDENT				X				0.	0.	0.
		I					I			

Form 990 (2013) THE FORU									23-31	000	62	Pa	ige 8
Part VII Section A. Officers, Directors, Trus		oloy	ees,			ghes	t C		· /				
(A) Name and title	(B) Average hours per week	Average Position hours per do not check more than one box, unless person is both an			n an	(D) Reportable compensation from	(E) Reportable compensation from related		Esti amo	(F) mate ount c ther			
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key em ployee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MIS	s	comp fro orga	ensat m the nization relate	e on ed
		-											
		-											
		-											
		-											
		-								\square			
		-											
		-											
										\square			
		-						0					0
1b Sub-total c Total from continuation sheets to Part VI								0.		0.			0.
d Total (add lines 1b and 1c)								0.		0.			0.
2 Total number of individuals (including but n							o re	eceived more than \$100,	000 of reportable				
compensation from the organization													0
3 Did the organization list any former officer,	director or tri	istor	a ko	w on	nnlo		or	highest compensated er	mplovee on	П		Yes	No
line 1a? If "Yes," complete Schedule J for s	-			-	•			•		- 1	3		Х
4 For any individual listed on line 1a, is the su										····			
and related organizations greater than \$150	,		'							🛓	4	_	Х
5 Did any person listed on line 1a receive or a rendered to the organization? <i>If</i> "Yes." con					-			-			5		х
Section B. Independent Contractors													
1 Complete this table for your five highest co the organization. Report compensation for	•	•						n the organization's tax y	•	ensati			
(A) Name and business	address							(B) Description of s	services	Cc	(C) ompens		ı
DICKINSON COLLEGE 28 N COLLEGE STREET, CARI	ISLE, P	A	17	01	3			STAFFING SER	VICES		696	,70	00.
2 Total number of independent contractors (i	ncluding but p	ot lin	niter		thor	e lie	ted	above) who received m	ore than				
\$100.000 of compensation from the organi	•	. m			1								

Form	n 990 ((2013) THE F	ORUM ON	EDUCATION	ABROAD, I	INC.	23-3100	062 Page 9
Pa	rt VII	I Statement of Reven	nue					
		Check if Schedule O cont	ains a response	or note to any line	e in this Part VIII			
			·		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
		<u> </u>				revenue	revenue	512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns						
Gra	b							
An An	С	Fundraising events						
Gifi Iar	d	Related organizations						
imi	е	5						
rior S	f	All other contributions, gifts, gran						
ibu		similar amounts not included abo	ve 1f	1,073.				
d C	g	Noncash contributions included in lines	1a-1f: \$					
Co an	h	Total. Add lines 1a-1f		🕨	1,073.			
				Business Code				
é	2 a	FORUM CONFERENC	E	611430	704,557.	704,557.		
e vic	b	MEMBERSHIP		611430	572,437.	572,437.		
Se	с	EDUCATIONAL PRO	GRAMS	611430	126,981.	126,981.		
Program Service Revenue	d							
Ba	е							
Pre	f	All other program service reve	nue	611430	542.	542.		
	g				1,404,517.			
	3	Investment income (including						
		other similar amounts)			24,176.			24,176.
	4	Income from investment of tax						-
	5	Royalties		· · · ·				
	•		(i) Real	(ii) Personal				
	6 9	Gross rents						
	b	Less: rental expenses						
	c c	Rental income or (loss)						
	d							
		Gross amount from sales of	(i) Securities					
	<i>i</i> a			(ii) Other				
	h	assets other than inventory						
	D	Less: cost or other basis						
	_	and sales expenses						
		Gain or (loss)						
		Net gain or (loss)						
ne	8 a	Gross income from fundraising						
/eni		including \$						
Rev		contributions reported on line	,					
ler		Part IV, line 18						
Other Revenue		Less: direct expenses		Ļ				
-		Net income or (loss) from func		▶				
	9 a	Gross income from gaming ac						
		Part IV, line 19						
		Less: direct expenses						
		Net income or (loss) from gam	-	····· ►				
	10 a	Gross sales of inventory, less						
		and allowances						
	b	Less: cost of goods sold	b					
	С	Net income or (loss) from sale	s of inventory	>				
		Miscellaneous Revenu	e	Business Code				
	11 a							
	b							
	с							
	d	All other revenue						
	е	Total. Add lines 11a-11d		►				
	12	Total revenue. See instructions.		🕨	1,429,766.	1,404,517.	0.	24,176.

<u>Secti</u>	on 501(c)(3) and 501(c)(4) organizations must comp				
	Check if Schedule O contains a respons	(A)	(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	10,000.	10,000.		
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):				
а	Management	746,204.	630,871.	100,563.	14,770.
b	Legal	75.		75.	
с	Accounting	8,565.		8,565.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
•	column (A) amount, list line 11g expenses on Sch O.)	19,315.	1,000.	18,315.	
12	Advertising and promotion	724.	724.		
13	Office expenses	63,136.	15,167.	47,969.	
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel	41,171.	41,171.		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	453,577.	440,531.	13,046.	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
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	CERTIFICATION PROGRAM	36,537.	36,537.		
b	WORKSHOP/WEBINAR EXPENS	30,461.	30,461.		
c	PRINTING AND REPRODUCTI	13,303.	13,303.		
d	PROFESSIONAL DEVELOPMEN	9,054.		9,054.	
	All other expenses	4,068.	4,038.	30.	
25	Total functional expenses. Add lines 1 through 24e	1,436,190.	1,223,803.	197,617.	14,770.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

THE FORUM ON EDUCATION ABROAD, INC. Part IX Statement of Functional Expenses

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- Form	990 (2013) THE FORUM ON EDUCATION ABROAD,	INC.	23-	3100062 Page 11
	rt X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	296,529.	1	287,617.
	2	Savings and temporary cash investments	201,848.	2	202,367.
	3	Pledges and grants receivable, net	98,347.	3	59,170.
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees. Complete			
		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under			
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
S		employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		7	
Š	8	Inventories for sale or use	1,202.	8	<u>1,417.</u> 6,289.
	9	Prepaid expenses and deferred charges	16,387.	9	6,289.
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a			
	b	Less: accumulated depreciation 10b		10c	
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11	1,156,088.	12	1,406,254.
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	1 660 401	15	1 0 6 2 1 1 4
	16	Total assets. Add lines 1 through 15 (must equal line 34)	1,770,401.	16	1,963,114.
	17	Accounts payable and accrued expenses	24,885.	17	31,932.
	18	Grants payable	201 200	18	261 041
	19	Deferred revenue	284,260.	19	361,841.
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
ies	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons.			
Liabiliti				22	
Lia	23			23	
	24	Secured mortgages and notes payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third		27	
		parties, and other liabilities not included on lines 17-24). Complete Part X of			
		Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	309,145.	26	393,773.
		Organizations that follow SFAS 117 (ASC 958), check here X and			
ŝ		complete lines 27 through 29, and lines 33 and 34.			
nce	27	Unrestricted net assets	1,304,274.	27	1,459,350.
Net Assets or Fund Balances	28	Temporarily restricted net assets	156,982.	28	109,991.
Ы	29	Permanently restricted net assets		29	
Fun		Organizations that do not follow SFAS 117 (ASC 958), check here			
o		and complete lines 30 through 34.			
ets	30	Capital stock or trust principal, or current funds		30	
Ass	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
let,	32	Retained earnings, endowment, accumulated income, or other funds	1 461 056	32	1,569,341.
2	33	Total net assets or fund balances	1,461,256.	33	1 1.309.341.

Total net assets or fund balances

Total liabilities and net assets/fund balances

Form **990** (2013)

1,569,341. 1,963,114.

33

34

1,461,256. 1,770,401.

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F

	1990 (2013) THE FORUM ON EDUCATION ABROAD, INC.	23-31	100062	Pa	_{ge} 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>		
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,429	9,7	66.
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,430	5,1	90.
3	Revenue less expenses. Subtract line 2 from line 1	3	- (5,4	24.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,461		
5	Net unrealized gains (losses) on investments	5	114	4,5	09.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	1,569	9,3	41.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII		<u></u>		
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	О.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	edule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audit			
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits				
					/ · - ·

Form **990** (2013)

SCHED (Form 99	OULE A 0 or 990-EZ)	Complete if the organization is a section 501(c)(3) organization or a section								OMB No. 1545-0047				
Department o Internal Rever	ue Service			onexempt charitable Form 990 or Form 99 or 990-EZ) and its instru	90-EZ.			Open to Inspe	ction					
Name of t	he organizati				TNO	Empl		entificatio		nber				
Part I	Reason	THE FOR	UM ON EDUCAT: ty Status (All organiz	TON ABROAD,	LNC.	uctions	23-	31000	162					
			because it is: (For lines 1											
1		-	, or association of churc	-	•									
2			0(b)(1)(A)(ii). (Attach Sci											
3			al service organization d	,	170(b)(1)(A)(iii).									
4	•	• •	operated in conjunction v)(1)(A)(iii). ⊟	Inter the	hospital'	s name	e,				
	city, and stat	e:												
5	An organizati	on operated for the b	penefit of a college or un	iversity owned or ope	erated by a governme	ental unit des	cribed ir	า						
	section 170	(b)(1)(A)(iv). (Comple	ete Part II.)											
6	A federal, sta	te, or local governme	ent or governmental unit	described in section	n 170(b)(1)(A)(v).									
7	An organizati	on that normally rece	eives a substantial part o	of its support from a g	overnmental unit or f	rom the gen	eral pub ^l	lic descrit	oed in					
	section 170(b)(1)(A)(vi). (Comple	te Part II.)											
8	A community	r trust described in s	ection 170(b)(1)(A)(vi).	Complete Part II.)										
9 X	An organizati	on that normally rece	eives: (1) more than 33 1	/3% of its support fro	m contributions, mer	nbership fee	s, and g	ross recei	ipts fro)m				
	activities rela	ted to its exempt fun	ctions - subject to certai	n exceptions, and (2)	no more than 33 1/3	% of its supp	port from	n gross in	vestme	ent				
	income and ι	unrelated business ta	xable income (less secti	on 511 tax) from busi	nesses acquired by t	he organizat	ion after	June 30,	1975.					
	See section	509(a)(2). (Complete	Part III.)											
10	An organizati	on organized and op	erated exclusively to tes	t for public safety. Se	e section 509(a)(4)									
11 🛄	An organizati	on organized and op	erated exclusively for th	e benefit of, to perfor	m the functions of, or	r to carry out	the pur	poses of	one or					
	more publicly	v supported organiza	tions described in section	n 509(a)(1) or section	509(a)(2). See sect	ion 509(a)(3)). Check	the box	that					
			organization and comple	te lines 11e through	11h.									
	a 🔄 Type I			/pe III - Functionally ir	•			inctionally	•	rated				
e 🔛		· •	t the organization is not	-		-	-							
		-	nan one or more publicly) or sect	ion 509(a)(2).					
f	Ŭ		en determination from t	ne IRS that it is a Typ	e I, Type II, or Type II	I								
		rganization, check th												
g	•		rganization accepted an			•		ſ						
	., .		rectly controls, either alo	v .		., .,		44.0	Yes	No				
	•	e ,	pported organization?					11g(i)						
			described in (i) above?					11g(ii)						
h			person described in (i) or about the supported or <u>c</u>					11g(iii)						
		onowing information	about the supported ofg	anzalion(5).										
	of our ported		(III) Type of examination	(iv) is the organization	(v) Did you notify the	(vi) Is the	(Amount	ofmon					

(i) Name of supported organization	(ii) EIN	(described on lines 1-9 above or IRC section	(iv) Is the organization (in col. (i) listed in your governing document? (in col. (i) listed in your		in col . (i) listed in your		in col. (i) listed in your		in col. (i) listed in your		in col. (i) listed in your		organizat	u notify the ion in col. support?	(vi) Is organizatic (i) organizi U.S	the on in col. ed in the .?	(vii) Amount of monetary support
		(see instructions))	Yes	Yes No		Yes No		No											
Total																			

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

Schedule A (Form 990 or 990-EZ) 2013

Schedule A (Form 990 or 990-EZ) 2013 THE FORUM ON EDUCATION ABROAD, INC. 23-3100 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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(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.)

Sec	tion A. Public Support		_		_	_	_
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4.						
Sec	tion B. Total Support					_	_
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	
13	First five years. If the Form 990 is for	the organization'	s first, second, thi	d, fourth, or fifth t	ax year as a sectio	n 501(c)(3)	
_	organization, check this box and stor						
	ction C. Computation of Publi						
14	Public support percentage for 2013 (I					14	%
15	Public support percentage from 2012					15	%
16a	33 1/3% support test - 2013. If the c						
	stop here. The organization qualifies						
b	33 1/3% support test - 2012. If the c						
	and stop here. The organization qual						
17a	10% -facts-and-circumstances test	-	-				
	and if the organization meets the "fac				-	0	. —
	meets the "facts-and-circumstances"	-	-	• • • •			
b	10% -facts-and-circumstances test	-	-				
	more, and if the organization meets th						ie
	organization meets the "facts-and-circ						>
18	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 16b, 17a, or 17	b, check this box a	and see instruction	s ►

Schedule A (Form 990 or 990-EZ) 2013

Schedule A (Form 990 or 990-EZ) 2013 THE FORUM ON EDUCATION ABROAD, INC. 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						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	21,200.	30,020.	61,450.	159,847.	1,073.	273,590.
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	891,113.	1177069.	1341129.	1643366.	1404517.	6457194.
3	Gross receipts from activities that						
-	are not an unrelated trade or bus- iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to or expended on its behalf						
E							
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	912,313.	1207089.	1402579.	1803213.	1405590.	6730784.
7a	Amounts included on lines 1, 2, and 3 received from disgualified persons						0.
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						0.
_	amount on line 13 for the year						0.
	Add lines 7a and 7b						6730784.
	Public support (Subtract line 7c from line 6.)						0750704.
	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	Amounts from line 6	912,313.	1207089.	1402579.	1803213.	1405590.	6730784.
	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	4,838.	4,775.	8,563.	13,934.	24,176.	56,286.
b	Unrelated business taxable income		-	-	-		
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
c	Add lines 10a and 10b	4,838.	4,775.	8,563.	13,934.	24,176.	56,286.
	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on		·				·
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)	917,151.	1211864.	1411142.	1817147.	1429766.	6787070.
14	First five years. If the Form 990 is for	the organization's	first, second, third	d, fourth, or fifth ta	x year as a sectior	n 501(c)(3) organiza	ition,
	check this box and stop here						
Sec	ction C. Computation of Publi	c Support Per	centage				
15	Public support percentage for 2013 (li	ne 8, column (f) div	vided by line 13, co	olumn (f))		15	<u>99.17 %</u>
16	Public support percentage from 2012	Schedule A, Part	III, line 15			16	<u>99.38 %</u>
Sec	ction D. Computation of Inves	tment Income	Percentage				
17	Investment income percentage for 20	13 (line 10c, colun	nn (f) divided by lin	e 13, column (f))		17	.83 %
	Investment income percentage from 2					18	.62 %
19 a	33 1/3% support tests - 2013. If the	organization did n	ot check the box o	on line 14, and line	15 is more than 3	3 1/3%, and line 17	
h	more than 33 1/3%, check this box ar 33 1/3% support tests - 2012. If the						►X
~	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organizatio						

Schedule A (Form 990 or 990-EZ) 2013

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

						OMB No.	1545-0047
	-	-	al Financial Statements			20	112
(Fori			anization answered "Yes," to Form 990, , 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.				
	tment of the Treasury al Revenue Service	Attach to Form 990. m 990) and its instructions is at <u>www.irs.</u>	a a ulfa		Inspe	to Public ction	
	ne of the organization	Schedule D (For		<u> </u>		oyer identificat	
	THE FORUM		FION ABROAD, INC.			23-3100	062
Pa	rt I Organizations Maintaining D	Donor Advise	d Funds or Other Similar Funds o	r Aco	count	s. Complete if	the
	organization answered "Yes" to Form	n 990, Part IV, line					
			(a) Donor advised funds	(b) Fund	s and other acc	ounts
1	Total number at end of year						
2	Aggregate contributions to (during year)						
3							
4							
5	Did the organization inform all donors and do		-				
6	are the organization's property, subject to th Did the organization inform all grantees, don					Yes	└── No
6	for charitable purposes and not for the benef	,	8 0		,		
					-	Yes	No
Pa			ganization answered "Yes" to Form 990, Pa				
1	Purpose(s) of conservation easements held b			,			
	Preservation of land for public use (e.g			orically	/ import	tant land area	
	Protection of natural habitat		Preservation of a certifi				
	Preservation of open space						
2	Complete lines 2a through 2d if the organiza	ation held a qualif	ied conservation contribution in the form of	a con	servatio	on easement on	the last
	day of the tax year.			_			
					ŀ	Held at the End of	the Tax Year
а	Total number of conservation easements				2a		
b	Total acreage restricted by conservation eas	ements			2b		
С					2c		
d							
	listed in the National Register				2d		
3	Number of conservation easements modified	d, transferred, rel	eased, extinguished, or terminated by the o	rganiz	ation d	uring the tax	
	year						
4	Number of states where property subject to						
5	Does the organization have a written policy r violations, and enforcement of the conservat	• • •				Yes	No
6	Staff and volunteer hours devoted to monitor						
7	Amount of expenses incurred in monitoring,		-	-	•		
8	Does each conservation easement reported			•			
-	and section 170(h)(4)(B)(ii)?					Yes	No
9	In Part XIII, describe how the organization re						and
	include, if applicable, the text of the footnote	e to the organizat	ion's financial statements that describes the	e orga	nizatior	n's accounting f	or
	conservation easements.						
Pa			Art, Historical Treasures, or Othe	er Si	milar	Assets.	
	Complete if the organization answere						
1 a	If the organization elected, as permitted under						
	historical treasures, or other similar assets he	·		e of p	ublic se	ervice, provide, i	n Part XIII,
	the text of the footnote to its financial statem						
b	0 7 1						
	treasures, or other similar assets held for put	blic exhibition, ec	ducation, or research in furtherance of public	c servi	ice, pro	wide the followii	ng amounts
	relating to these items:	II. line of			•		
0			asuras, or other similar assots for financial a				
2	If the organization received or held works of the following amounts required to be reporte			jairi, pi	ovide		
	and to be reported to be reported		10 (100 000) 10 alling to these items.				

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 332051 09-25-13

a Revenues included in Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

▶ \$

▶ \$

Sche		M ON EDUCA				23-31			age 2
Par	t III Organizations Maintaining Co	ollections of Art	t, Historical Tre	easures, or Oth	er Simila	r Assets	contir	nued)	
3	Using the organization's acquisition, accession							,	;
	(check all that apply):	,	,	5	5				
а	Public exhibition	d		hange programs					
b	Scholarly research	e		indinge programe					
c	Preservation for future generations								
4	Provide a description of the organization's col	lections and explain	how they further th	ne organization's ex	empt purpo	sa in Part	XIII		
5	During the year, did the organization solicit or					oo inn are	/		
Ŭ	to be sold to raise funds rather than to be mai						Yes		No
Par						Part IV li	_		
	reported an amount on Form 990, Part		sto in the organizatio			, r arciv, n	110 0, 01		
12	Is the organization an agent, trustee, custodia		iany for contribution	s or other assets no	nt included				
Ia							Yes		No
h	on Form 990, Part X? If "Yes," explain the arrangement in Part XIII a					······ ∟			
U			iowing table.				Amount	+	
~	Paginning balance				10		Amoun		
	Beginning balance								
	Additions during the year								
e د	Distributions during the year								
20	Ending balance						Yes		No
	If "Yes," explain the arrangement in Part XIII. C					L	_ 165		
Par		the organization an	swered "Ves" to Fo	rm 990 Part IV line	<u>ו</u> 10 נ				
		(a) Current year	(b) Prior year	(c) Two years back		ware hack	(e) Four	Veare	hack
1a	Beginning of year balance	1,156,088.	520,125.			63,522.		-	229.
b	Contributions	112,000.	550,000.			70,000.			000.
0	Net investment earnings, gains, and losses	138,166.	85,963.	· · · · ·		42,468.		,	293.
ט ה		200,200.			•	,			
	Grants or scholarships								
е	Other expenditures for facilities								
	and programs								
	Administrative expenses	1,406,254.	1,156,088.	520,125	1	75,990.		163,	522
g	End of year balance		, ,	,	•	15,550.		105,	522.
2	· •	·)) heid as.					
	Board designated or quasi-endowment ▶ _ Permanent endowment ▶	%	_%						
С	Temporarily restricted endowment 3 The second seco								
0-	The percentages in lines 2a, 2b, and 2c should		tion that and hald a	a al la aluación i a trava al da u					
Ja	Are there endowment funds not in the posses	sion of the organiza	ition that are held a	na administered for	the organiza	ation	ſ	Vee	Na
	by:						0-(1)	Yes X	No
	(i) unrelated organizations						3a(i)	~	х
ь	(ii) related organizations						3a(ii)		л
-	If "Yes" to 3a(ii), are the related organizations	-					3b		
4 Par	Describe in Part XIII the intended uses of the or t VI Land, Buildings, and Equipme		wment tunds.						
I UI	Complete if the organization answered		Part IV line 11a S	ee Form 990 Part	(line 10				
	Description of property	(a) Cost or o			Accumulate	ad I	(d) Bool		•
	Description of property	basis (investr	• •		depreciation		(u) 600	valu	e
10	Land								
	Land								
	Buildings								
	Leasehold improvements								
	Equipment								
	Other								0
Total	. Add lines 1a through 1e. <i>(Column (d) must eq</i>	ual Form 990, Part J	<u>X, column (B), line 1</u>	<u>0(c).)</u>			D /=		0.
						Schedule	D (Form	ı 990)	2013

332052 09-25-13

Schedule	D (Form 990) 2013 THE FORUM O	N EDUCATION	ABROAD	, INC.	2	3-3100062	Page 3
Part V							
	Complete if the organization answered "Yes"	to Form 990, Part IV,	line 11b. See	Form 990, F	art X, line 12.		
(a) Desc	cription of security or category (including name of security)	(b) Book value	(c) N	Method of va	aluation: Cost or e	nd-of-year market v	alue
(1) Finar	ncial derivatives						
(2) Close	ely-held equity interests						
(3) Othe							
(A) I	ENDOWMENT FUND	1,406,25	54. ENI	D-OF-Y	EAR MARKE	T VALUE	
(B)							
(C)							
(D)							
(E)							
(F)							
(G)							
(H)							
Total. (Co	I. (b) must equal Form 990, Part X, col. (B) line 12.)	1,406,25	54.				
Part V	III Investments - Program Related.						
	Complete if the organization answered "Yes"	to Form 990, Part IV,	line 11c. See l	Form 990, F	art X, line 13.		
	(a) Description of investment	(b) Book value				nd-of-year market v	alue
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
	I. (b) must equal Form 990, Part X, col. (B) line 13.) 🕨						
Part I	C Other Assets.						
	Complete if the organization answered "Yes"	to Form 990, Part IV,	line 11d. See	Form 990, F	Part X, line 15.	-	
	(a)	Description				(b) Book va	alue
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
Total. (C	olumn (b) must equal Form 990, Part X, col. (B) line	e 15.)					
Part X							
	Complete if the organization answered "Yes"	to Form 990, Part IV,	line 11e or 11	f. See Form	990, Part X, line 2	5.	
1.	(a) Description of liability		(b) Book	value			
(1) F	ederal income taxes						
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
Total. (C	olumn (b) must equal Form 990, Part X, col. (B) line	e 25.) 🕨					
	lity for uncertain tax positions. In Part XIII, provide	,	ote to the orga	nization's fir	nancial statements	that reports the	

organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII 🔀

	dule D (Form 990) 2013 THE FORUM ON EDUCATION ABF				3100062 Page 4
Pa	t XI Reconciliation of Revenue per Audited Financial Stateme	ents With I	Revenue per Re	turn.	
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a	l.			
1	Total revenue, gains, and other support per audited financial statements			1	1,623,775.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains on investments	. 2a	114,509.		
b	Donated services and use of facilities	2b	79,500.		
с	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	<u>194,009.</u> 1,429,766.
3	Subtract line 2e from line 1			3	1,429,766.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
~				4c	0.
U.	Add lines 4a and 4b				
<u>5</u>	Total revenue. Add lines 3 and 4c. (<i>This must equal Form 990. Part I. line 12.</i>)			5	1,429,766.
				5	
	Total revenue. Add lines 3 and 4c. (<i>This must equal Form 990. Part I. line 12.</i>)	nents With		5	n.
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) rt XII Reconciliation of Expenses per Audited Financial Statem	ients With	Expenses per F	5	
Pa	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) rt XII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" to Form 990, Part IV, line 12a	ients With	Expenses per F	5 Retur	n.
Pa 1	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) t XII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" to Form 990, Part IV, line 12a Total expenses and losses per audited financial statements	nents With	Expenses per F	5 Retur	n.
Pa 1 2	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) t XII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" to Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:	nents With	Expenses per F	5 Retur	n.
Pa 1 2 a	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I, line 12.) Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I, line 12.) Complete if the organization answered "Yes" to Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities	22 25 25	Expenses per F	5 Retur	n.
Pa 1 2 a	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I, line 12.) Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I, line 12.) Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" to Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments	2a 2b 2c	Expenses per F	5 Retur	n. 1,515,690.
Pa 1 2 a	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) rt XII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" to Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	2a 2b 2c 2d	Expenses per F	5 Retur	n. <u>1,515,690.</u> 79,500.
Par 1 2 a b c d	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) rt XII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" to Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d	2a 2b 2c 2d	Expenses per F 79,500.	5 Return	n. 1,515,690.
Par 1 2 a b c d e	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) rt XII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" to Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	2a 2b 2c 2d	Expenses per F 79,500.	5 Return	n. <u>1,515,690.</u> 79,500.
Part 1 2 a b c d e 3	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I, line 12.) t XII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" to Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1	2a 2b 2c 2d	Expenses per F 79,500.	5 Return	n. <u>1,515,690.</u> 79,500.
Part 1 2 a b c d e 3 4	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I, line 12.) Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I, line 12.) Complete if the organization answered "Yes" to Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1:	2a 2b 2c 2d	Expenses per F 79,500.	5 Return	n. <u>1,515,690.</u> 79,500.
Pa 1 2 a b c d e 3 4 a	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" to Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b	2a 2b 2c 2d 2d	Expenses per F	5 Return	n. <u>1,515,690.</u> <u>79,500.</u> <u>1,436,190.</u> 0.
Pa 1 2 a b c d e 3 4 a b c 5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) rt XII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" to Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)	2a 2b 2c 2d 2d	Expenses per F	5 Return 1 2e 3	n. <u>1,515,690.</u> <u>79,500.</u> 1,436,190.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART V, LINE 4:

EXPLANATION: THE FORUM ON EDUCATION ABROAD HAS INVESTED IN THE DICKINSON

COLLEGE ENDOWMENT FOR THE PURPOSES OF ENHANCING THE GROWTH OF ITS

OPERATING ACCOUNT, WITH THE INTENT THAT THE INCOME OF THE FUND WILL

PROVIDE SUPPORT FOR FORUM ON EDUCATION ABROAD PROGRAMMING.

PART X, LINE 2:

EXPLANATION: MANAGEMENT HAS ASSESSED THE FORUM'S EXPOSURE TO INCOME TAXES

AT THE ENTITY LEVEL AS A RESULT OF UNCERTAIN TAX POSITIONS TAKEN IN

CURRENT AND PREVIOUSLY FILED TAX RETURNS. EXAMPLES OF TAX POSITIONS TAKEN

AT THE ENTITY LEVEL INCLUDE THE CONTINUING VALIDITY OF ITS EXEMPT

ORGANIZATION STATUS, POTENTIAL FILING REQUIREMENT FOR UNRELATED BUSINESS 322054 09-25-13 Schedule D (Form 990) 2013

 Schedule D (Form 990) 2013
 THE FORUM ON EDUCATION ABROAD, INC.
 23-3100062 Page 5

 Part XIII
 Supplemental Information (continued)
 INCOME AND OTHER TAX POSITIONS THAT COULD RESULT IN INCOME TAX LIABILITIES

 TO THE FORUM UPON EXAMINATION BY TAXING AUTHORITIES PRESENTLY, MANAGEMENT
 BELIEVES THAT IT IS MORE LIKELY THAN NOT ITS TAX POSITION WILL BE

 SUSTAINED UPON EXAMINATION, INCLUDING ANY APPEALS AND LITIGATION, SUCH
 THAT THE FORUM HAS NO EXPOSURE TO INCOME TAX LIABILITIES FROM UNCERTAIN

 TAX POSITIONS.
 THE FORUM IS SUBJECT TO ROUTINE AUDITS BY TAXING

 JURISDICTIONS, HOWEVER THERE ARE CURRENTLY NO AUDITS FOR ANY TAX PERIODS

 IN PROGRESS.
 MANAGEMENT BELIEVES THE FORUM IS NO LONGER SUBJECT TO AUDIT

 FOR YEARS PRIOR TO JUNE 30, 2011.

SCHEDULE I		G	arants and Oth	ner Assistan	ce to Organ	izations.		OMB No. 1545-0047	,
(Form 990) Governments, and Individuals in the United States Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Department of the Treasury Internal Revenue Service ► Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.									
									C
Name of the organizat			TION ABROAD					Employer identification num 23-310006	
Part I General I	nformation on Grants a			•					
1 Does the organiz	zation maintain records t	to substantiate the	amount of the grants	or assistance, the	grantees' eligibility	for the grants or assis	stance, and the selecti		
criteria used to a	award the grants or assis	stance?						X Yes	No
	IV the organization's pro								
	nd Other Assistance to					anization answered "Y	′es" to Form 990, Part	IV, line 21, for any	
1 (a) Name and ad	hat received more than s ddress of organization vernment	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	ed. (e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
DICKINSON COLLEGE P.O. BOX 1773 CARLISLE, PA 1701		23-1365954	501(C)(3)	10,000.	0.			SCHOLARSHIP FUND FOR STUDENTS WHO WILL BE STUDYING ABROAD.	
2 Enter total numb	per of section 501(c)(3) a	nd government or	anizations listed in the	e line 1 table		· · · · · · · · · · · · · · · · · · ·	I	└─── ▶ _	1.
	per of other organization			·····					0.
LHA For Paperwork	k Reduction Act Notice	, see the Instructi	ons for Form 990.					Schedule I (Form 990) (2	.013)

Schedule I (Form 990) (2013)

23-3100062

Page 2

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

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

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

PART I, LINE 2:

EXPLANATION: THE GRANT IS MADE TO DICKINSON COLLEGE AND THEN THE

DISTRIBUTION OF THE FUNDS IS LEFT AT THE DISCRETION OF THE COLLEGE.

DICKINSON GIVES THE FORUM A YEARLY UPDATE ON THE STUDENTS AND PROJECTS THAT

THE FUNDS HAVE BEEN USED TO SUPPORT.

OMB No. 1545-0047 SCHEDULE O Supplemental Information to Form 990 or 990-EZ 13 Complete to provide information for responses to specific questions on (Form 990 or 990-EZ) Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or 990-EZ. **Open to Public** Department of the Treasury Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990 Inspection Internal Revenue Service Name of the organization Employer identification number 23-3100062 THE FORUM ON EDUCATION ABROAD, INC. FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: STANDARDS OF GOOD PRACTICE ARE RECOGNIZED AS THE DEFINITIVE MEANS BY WHICH THE QUALITY OF EDUCATION ABROAD PROGRAMS MAY BE JUDGED. THE FORUM'S NEARLY 700 INSTITUTIONAL MEMBERS INCLUDE U.S. COLLEGES AND UNIVERSITIES, OVERSEAS INSTITUTIONS, CONSORTIA, AGENCIES, PROVIDER ORGANIZATIONS AND FOUNDATIONS. THE FORUM FOCUSES ON DEVELOPING AND IMPLEMENTING STANDARDS OF GOOD PRACTICE, ENCOURAGING AND SUPPORTING RESEARCH INITIATIVES, AND OFFERING EDUCATIONAL PROGRAMS AND RESOURCES TO ITS MEMBERS. ITS MISSION IS TO HELP TO IMPROVE EDUCATION ABROAD PROGRAMS TO BENEFIT THE STUDENTS THAT PARTICIPATE IN THEM.

FORM 990, PART III, LINE 2, NEW PROGRAM SERVICES:

EXPLANATION: A PROFESSIONAL CERTIFICATION IN EDUCATION ABROAD PROGRAM

WAS LAUNCHED IN 2014, OFFERING A WAY FOR INDIVIDUALS TO CERTIFY THEIR

KNOWLEDGE AND EXPERTISE IN THE STANDARDS OF GOOD PRACTICE FOR EDUCATION

ABROAD.

FORM 990, PART VI, SECTION A, LINE 3:

EXPLANATION: THE FORUM HAS A MANAGEMENT CONTRACT WITH DICKINSON COLLEGE.

UNDER TERMS OF THE MANAGEMENT CONTRACT, THE MANAGEMENT COMPANY PROVIDES

OFFICE SPACE AND SUPPORT, PAYROLL AND BENEFITS, AND HUMAN RESOURCE

SERVICES.

THE PRESIDENT/CEO OF THE FORUM IS PAID FOR SERVICES TO THE FORUM THROUGH

THE MANAGEMENT CONTRACT. THE COMPENSATION AND BENEFITS ALLOCATED TO THE

FORUM ARE AS FOLLOWS:

Schedule O (Form 990 or 990-EZ) (2013)	Page 2
Name of the organization	Employer identification number
THE FORUM ON EDUCATION ABROAD, INC.	23-3100062

BRIAN WHALEN, PRESIDENT/CEO

COMPENSATION: \$183,025

BENEFITS: \$37,334

FORM 990, PART VI, SECTION A, LINE 6:

EXPLANATION: THERE ARE THE FOLLOWING TYPES OF MEMBERSHIPS: CHARITABLE

ORGANIZATION, INDIVIDUAL, ASSOCIATE MEMBER, INTERNATIONAL INSTITUTION,

PROVIDER, UNDERREPRESENTED, UNIVERSITY SYSTEM, AND US INSTITUTION.

FORM 990, PART VI, SECTION A, LINE 7B:

EXPLANATION: MEMBERS APPROVE CHANGES TO THE BY-LAWS.

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

EXPLANATION: COPY OF TAX RETURN IS PROVIDED FOR BOARD REVIEW PRIOR TO FILING.

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

EXPLANATION: SUBJECT TO ANNUAL REVIEW AND, IF NECESSARY, UPDATES.

FORM 990, PART VI, SECTION B, LINE 15A:

EXPLANATION: IT IS THE RESPONSIBILITY OF THE BOARD EXECUTIVE COMMITTEE TO

ANNUALLY REVIEW THE PERFORMANCE OF THE FORUM ON EDUCATION ABROAD'S (THE

FORUM) CEO AND TO RECOMMEND COMPENSATION FOR THE CEO FOR THE SUBSEQUENT

YEAR. COMPENSATION OF THE CEO, FORUM STAFF, AND ADDITIONAL SUPPORT IS

NEGOTIATED ANNUALLY WITH DICKINSON COLLEGE IN CONJUNCTION WITH THE

MANAGEMENT CONTRACT.

Schedule O (Form 990 or 990-EZ)	(2013)					Page 2
Name of the organization						Employer identification number
THE	FORUM	ON	EDUCATION	ABROAD,	INC.	23-3100062

FORM 990, PART VI, SECTION C, LINE 19:

EXPLANATION: GOVERNING DOCUMENTS ARE HELD AT THE FORUM'S OFFICE, AND ARE

AVAILABLE UPON REQUEST.

FORM 990, PART XII, LINE 2C:

EXPLANATION: MANAGEMENT ULTIMATELY BEARS RESPONSIBILITY FOR THE

INFORMATION PRESENTED IN THE FINANCIAL STATEMENTS AND TAX RETURNS.

(Rev. January 2014)

Application for Extension of Time To File an Exempt Organization Return

► X

Department of the Treasury
Internal Revenue Service

File a separate application for each return.

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868 .

If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box

• If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Electronic filing (*e-file*) . You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form,

visit www.irs.gov/efile and click on e-file for Charities & Nonprofits.

Part I	Automatic 3-Month Extension of Time.	Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete

Part I only
All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time
to file income tax returns.
Enter filer's identifying number

		Enter mer sidentnying number
Type or	Name of exempt organization or other filer, see instructions.	Employer identification number (EIN) or
print		
	THE FORUM ON EDUCATION ABROAD, INC.	23-3100062
File by the due date for	Number, street, and room or suite no. If a P.O. box, see instructions.	Social security number (SSN)
filing your return. See	DICKINSON COLLEGE, PO BOX 1773	
instructions.	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	

		,	,	
CARLT	SLE.	PΑ	17013	

Enter the Return code for the return that this application is for (file a separate application for each return)

Application	Return	Application	Return
Is For		Is For	Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12
BRIAN WHA	ALEN	-	

The books are in the care of \blacktriangleright	DICKINSON	COLLEGE	_	CARLISLE,	PA	17013

Telephone No. 🕨	717-245-1031	

If the organization does not have an office or place of business in the United States, check this box	• •	•]
---	-----	---	---

If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) ______. If this is for the whole group, check this box
 If it is for part of the group, check this box
 and attach a list with the names and EINs of all members the extension is for.

DOX			part of the group,	CHECK THIS DOX		and attach a lis	si with the	e names and	EINS OF a	i members i	ne extension is
1	١r	oquest an autom	natic 3 month (6 m	onthe for a corpo	vration r	oquired to file E	orm 000 T		of time up	+il	

1	I request an automation	c 3-mor	nth (6 months	for a corporatio	n required to file	Form 990-T) (extension of ti	me until
		1 -	001 F					

FEBRUARY 15, 2015	_ , to file the exempt organization return for the organization named above. The extension
is for the organization's return for:	

calendar year	or	
X tax year beginning	JUL 1, 2013	

. and ending	JUN

30, 2014

Fax No.

2	If the tax year entered in line 1 is for less than 12 months, check reason:	ıl retur	n	
3a	If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any			
	nonrefundable credits. See instructions.	3a	\$	0.
b	If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and			
	estimated tax payments made. Include any prior year overpayment allowed as a credit.	Зb	\$	0.
с	Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required,			
	by using EETPS (Electronic Eederal Tax Payment System). See instructions	30	\$	0.

Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

Caution: Forms printed from within Adobe Acrobat products may not meet IRS or state taxing agency specifications. When using Acrobat 5.x products, uncheck the "Shrink oversized pages to page size" and uncheck the "Expand small pages to paper size" options, in the Adobe "Print" dialog. When using Acrobat 6.x and later products versions, select "None" in the "PageScalling" selection box in the Adobe "Print" dialog.

STATE COPY

Commonwealth of Pennsylvania Department of State	(800) 732-0999 Fax: (717	717) 783-1720 (within PA only)) 783-6014 .state.pa.us/charities	AF: LF: Fee Received:	
Charitable Organiza	ation Regist	ration Statemen	t - Form BCO-10	
(See note under "important informatio	-	Certificate Nur	nber: <u>35270</u> (Renewals Only)	
	Fiscal Year End	ed: 06/30/2014		
Empl	oyer Identification Nu	mber (EIN): <u>23-3100062</u>		
. Legal name of organization: THE FORUM ON EDUCATION ABROAD, INC.				
Check if name change	Check if name change Previous name:			
2. All other names used to solicit c	ontributions:			
3. Contact person: <u>BRIAN WHA</u> Contact's E-mail: <u>WHALENB@</u> Physical address of organization	DICKINSON.EDU	Mailing address: _{(If di}	ifferent than physical)	
233 W. LOUTHER ST.		DICKINSON COLL	EGE, PO BOX 1773	
City: CARLISLE		City: <u>CARLISLE</u>		
State: PA ZIP code: 170	13	State: PA ZIP	code: <u>17013</u>	
County: CUMBERLAND		800 number:		
Phone number: <u>717-245-10</u>	31	Fax number: <u>717-2</u>	245-1677	
	E-mail (If different than Contact's E-mail) : INFO@FORUMEA.ORG Website: WWW.FORUMEA.ORG			

Bureau of Charitable Organizations 207 North Office Building

Harrisburg, Pennsylvania 17120

4. Names, addresses, and telephone numbers of all offices, chapters, branches, auxiliaries, affiliates, or other subordinate units located in Pennsylvania: (Attach separate sheet if necessary)

For Official Use Only

RF:

Approved:

5	THE FORUM ON EDUCATION ABROAD, INC. 23-3100062 For Organizations described in Section 162.7(a) of the Act, check section that describes organization:				
0.	(See footnote #2 of instructions. Volunteer registrants do not respond.)				
	162.7(a)(1) 162.7(a)(2) 162.7(a)(3) 162.7(a)(4) Not Applicable X				
6.	List type of organization (e.g. corporation, association, etc.) : NON-PROFIT CORPORATION Where established: DELAWARE Date established:** 06/01/2001				
	**(Initial registrants must submit copies of organizational documents such as charter, articles of incorporation, constitution, or other organizational instrument, and by-laws.)				
7.	Is any person compensated, or do you intend to compensate any person, for soliciting contributions in Pennsylvania, including employees of the organization and professional solicitors? Yes \Box No \underline{X}				
	(Do not check "Yes" if you only use or intend to only use a professional fundraising counsel.)				
	If "Yes", give date person or entity started or will start soliciting contributions from Pennsylvania residents.				
	Items 8 and 9 are required to be completed by initial registrants only				
8.	Date organization first solicited contributions from Pennsylvania residents:				
9.	If organization solicited Pennsylvania residents and received gross * contributions totaling more than \$25,000 during the fiscal year covered by this registration statement, or during its current fiscal year, give date contributions first totaled more than \$25,000. *Includes contributions received both within and outside Pennsylvania				
10.	Has organization been granted IRS tax-exempt status? Yes X No (If "Yes", please submit copy of IRS exemption letter if not previously submitted.)				
	A. If "Yes", under which IRS code section: 501(C)(3)				
	B. Has organization's tax-exempt status ever been denied, revoked, or modified? Yes No X (If "Yes", attach copy of denial, revocation, or modification.)				
11.	Was the organization required to file an IRS 990 return and applicable schedules for its most recently completed fiscal year? Yes X No				
11.					
11.	completed fiscal year? Yes X No				
	completed fiscal year? Yes X No (If "No", attach explanation of why organization is exempt from filing an IRS 990 return. An organization that is not required to file an IRS 990 return must file a Pennsylvania public disclosure form BCO-23. This includes an				
12.	 completed fiscal year? Yes X No (If "No", attach explanation of why organization is exempt from filing an IRS 990 return. An organization that is not required to file an IRS 990 return must file a Pennsylvania public disclosure form BCO-23. This includes an organization that files a 990N, 990EZ, or 990PF.) A clear description of the specific programs for which contributions will be used, and a statement whether such programs are planned or in existence: 				
12.	completed fiscal year? Yes X No (If "No", attach explanation of why organization is exempt from filing an IRS 990 return. An organization that is not required to file an IRS 990 return must file a Pennsylvania public disclosure form BCO-23. This includes an organization that files a 990N, 990EZ, or 990PF.) A clear description of the specific programs for which contributions will be used, and a statement whether such programs are planned or in existence: PROMOTE HIGH QUALITY AND EFFECTIVE EDUCATION ABROAD PROGRAMS ON BEHALF OF STUDENTS AT US COLLEGES AND				
12. TO E UNIX	 completed fiscal year? Yes X No (If "No", attach explanation of why organization is exempt from filing an IRS 990 return. An organization that is not required to file an IRS 990 return must file a Pennsylvania public disclosure form BCO-23. This includes an organization that files a 990N, 990EZ, or 990PF.) A clear description of the specific programs for which contributions will be used, and a statement whether such programs are planned or in existence: 				
12. TO E	completed fiscal year? Yes X No (If "No", attach explanation of why organization is exempt from filing an IRS 990 return. An organization that is not required to file an IRS 990 return must file a Pennsylvania public disclosure form BCO-23. This includes an organization that files a 990N, 990EZ, or 990PF.) A clear description of the specific programs for which contributions will be used, and a statement whether such programs are planned or in existence: PROMOTE HIGH QUALITY AND EFFECTIVE EDUCATION ABROAD PROGRAMS ON BEHALF OF STUDENTS AT US COLLEGES AND VERSITIES THROUGH PROVIDING EDUCATIONAL PROGRAMS, RESOURCES AND TRAINING FOR THE EDUCATIONAL INSTITUTIONS,				

RA	NT APPLICATIONS
4.	Is organization registered to solicit contributions in any other state or municipality? Yes No X (If "Yes", list all states and municipalities. Attach separate sheet if necessary.)
5.	Names, addresses, and telephone numbers of all professional solicitors you use or intend to use to solicit contributions from Pennsylvania residents. For each entry, include the beginning and ending dates of all contracts, and dates Pennsylvania residents were first solicited, or will be solicited: (Attach separate sheet if
	necessary)
-	necessary) Names, addresses, and telephone numbers of all professional fundraising counsels you use or intend to us
	necessary)

18.	THE FORUM ON EDUCATION ABROAD, INC. If you are a parent organization located in Pennsylvania, do you all of your Pennsylvania affiliates? Yes No Not Applicable X (See note under "impor		
	Yes No Not Applicable X (See note under "impor	rtant information")	
	If "Yes", give all names and certificate numbers of your affiliate organizations: (For each affiliate v parent organization files a Form IRS 990 group return, it must file a form BCO-23, in addition to filing a copy of the organization's Form IRS 990 return.)		
19.	Are you a Pennsylvania affiliate of a parent organization, which	-	
	your behalf? Yes No X (See note under "important inform	pation")	
	If "Yes", provide the name and, if available, certificate # of whose parent organization files a Form IRS 990 group return, it must f copy of the organization's Form IRS 990 return.)	·	
	(Legal name of parent organization)	(Certificate #)	
20.	Does your organization share contributions or other revenue with unincorporated association? Yes No X (If "Yes", atta organization, and relationship to your organization.)	ith any other nonprofit corporation or ch an explanation listing name, address, type of	
21.	Does your organization share formal governance with any other nonprofit corporation or unincorporated association? Yes No X (If "Yes", attach an explanation listing name, address, type of organization, and relationship to your organization.)		
22.	Does any other domestic or foreign organization own a 10% or greater interest in your organization? Yes \square No \boxed{X} (If "Yes", attach the following information for each other domestic or foreign organization: name and type of organization, whether organization is for-profit or nonprofit, and relationship of organization to your organization.)		
23.	Poes your organization own a 10% or greater interest in any other domestic or foreign organization ? ies No X (If "Yes", attach the following information for each other domestic or foreign organization: name and type of organization, whether organization is for-profit or nonprofit, and relationship of organization to your rganization.)		
24.	Provide the names and addresses of all officers, directors, trust officers: (Attach separate sheet if necessary)	tees, and principal salaried executive staff	

A. Individual(s) in charge of solicitation activities:

BRIAN WHALEN, PRESIDENT

PO BOX 1773 CARLISLE, PA 17013

B. Individual(s) with final responsibility for the custody of contributions:

BRIAN WHALEN, PRESIDENT

PO BOX 1773 CARLISLE, PA 17013

C. Individual(s) with final responsibility for final distribution of contributions:

BRIAN WHALEN, PRESIDENT

PO BOX 1773 CARLISLE, PA 17013

D. Individual(s) responsible for custody of financial records:

BRIAN WHALEN, PRESIDENT

PO BOX 1773 CARLISLE, PA 17013

- 26. If you answer "Yes" to any of the following, attach a list of related individuals with names, business, and residence addresses of related parties. Are any officers, directors, trustees, or employees related by blood, marriage, or adoption to:
 - A. Any other officer, director, trustee, or employee? Yes X No SEE STATEMENT 2
 - B. Any officer, agent, or employee of any professional fundraising counsel or solicitor under contract with organization? Yes No X
 - C. Any supplier or vendor providing goods or services? Yes No X
- 27. If you answer "Yes" to any of the following, attach full written explanations, including reasons for actions, and copies of all relevant documents. Has organization or any of its present officers, directors, executive personnel, trustees, employees, or fundraisers:
 - A. Been found to have engaged in unlawful practices in the solicitation of contributions or administration of charitable assets or been enjoined from soliciting contributions or are such proceedings pending in this or any other jurisdiction? Yes No X
 - B. Had its registration or license to solicit contributions denied, suspended, or revoked by any governmental agency? Yes No X
 - C. Entered into any legally enforceable agreement such as a consent agreement, an assurance of voluntary compliance or discontinuance with any district attorney, Office of Attorney General, or other local or state governmental agency? Yes No X

THE FORUM ON EDUCATION ABROAD, INC.

23-3100062 I certify that the information provided in this registration, including all statements and documentation, is true and correct. I understand that the falsification of any statement or documentation is subject to criminal penalties for unsworn falsifications pursuant to 18 PA. C.S. § 4904.

Signature of Chief Fiscal Officer	Date
BRIAN WHALEN, PRESIDENT, CEO Type or Print Name and Title of Chief Fiscal Officer Signature of Another Authorized Officer PAUL DAVIES, TREASURER	Date
Type or Print Name and Title of Another Authorized Officer	Checklist X Original Registration Statement Properly Signed and Dated X A Copy of Form IRS 990 Return and Required Schedules Signed and Dated by an Authorized Officer Image: Form BCO-23, if Required X Applicable Financial Statements X Registration Fee and any Late Filing Fees Image: Additional Filings, if an Initial Registrant

THE FORUM ON EDUCATION ABROAD, INC.

23-3100062

FORM BCO-10	OFFICERS, DIRECTORS,	TRUSTEES AND	EXECUTIVES	STATEMENT	1
NAME AND ADDRESS		TITL	Æ		
BARBARA ROWE DICKINSON COLLEGE, CARLISLE, PA 1701		CHAI	R		
NAME AND ADDRESS		TITL	ε		
PAUL DAVIES DICKINSON COLLEGE, CARLISLE, PA 1701	РО ВОХ 1773 3	TREA	 SURER		
NAME AND ADDRESS		TITL	ε		
GREGG KVISTAD DICKINSON COLLEGE, CARLISLE, PA 1701		VICE	 CHAIR		
NAME AND ADDRESS		TITL	ε		
SUSAN POPKO DICKINSON COLLEGE, CARLISLE, PA 1701		SECR	— ETARY		
NAME AND ADDRESS		TITL	ε		
JOY GLEASON CAREW DICKINSON COLLEGE, CARLISLE, PA 1701		BOAR	D MEMBER		
NAME AND ADDRESS		TITL	ε		
ENDA CARROLL DICKINSON COLLEGE, CARLISLE, PA 1701		BOAR	D MEMBER		
NAME AND ADDRESS		TITL	ε		
ROBIN CRAGGS DICKINSON COLLEGE, CARLISLE, PA 1701		BOAR	D MEMBER		
NAME AND ADDRESS		TITL	ε		
ROSA MARINA DE BRI DICKINSON COLLEGE, CARLISLE, PA 1701	PO BOX 1773	BOAR	D MEMBER		
NAME AND ADDRESS		TITL	ε		
MARY ANNE GRANT DICKINSON COLLEGE, CARLISLE, PA 1701		BOAR	D MEMBER		

THE FORUM ON EDUCATION ABROAD, INC.	
NAME AND ADDRESS	TITLE
JOHN LUCAS DICKINSON COLLEGE, PO BOX 1773 CARLISLE, PA 17013	BOARD MEMBER
NAME AND ADDRESS	TITLE
PAUL MCVEIGH DICKINSON COLLEGE, PO BOX 1773 CARLISLE, PA 17013	BOARD MEMBER
NAME AND ADDRESS	TITLE
MICHAEL MORRISON DICKINSON COLLEGE, PO BOX 1773 CARLISLE, PA 17013	BOARD MEMBER
NAME AND ADDRESS	TITLE
MARGARET PLYMPTON DICKINSON COLLEGE, PO BOX 1773 CARLISLE, PA 17013	BOARD MEMBER
NAME AND ADDRESS	TITLE
PATRICIA SCROGGS DICKINSON COLLEGE, PO BOX 1773 CARLISLE, PA 17013	BOARD MEMBER
NAME AND ADDRESS	TITLE
HANNAH STEWART GAMBINO DICKINSON COLLEGE, PO BOX 1773 CARLISLE, PA 17013	BOARD MEMBER
NAME AND ADDRESS	TITLE
BRIAN WHALEN DICKINSON COLLEGE, PO BOX 1773 CARLISLE, PA 17013	PRESIDENT

FORM BCO-10 RELATED OFFICER, DIRECTOR, TRUSTEE, EMPLOYEE STATEMENT 2

NAME AND ADDRESS

BRIAN WHALEN PO BOX 1773 CARLISLE, PA 17013

BUSINESS

PRESIDENT

NAME AND ADDRESS

ANNE MARIE WHALEN PO BOX 1773 CARLISLE, PA 17013

BUSINESS

VICE PRESIDENT FOR PROGRAMS & RESOURCES

		•	Return of Organization Exempt Fr	om In	come T	ах	OMB No. 1545-0047
For	m 99	0	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Co				2013
Depa	artment of the	e Treasury	Do not enter Social Security numbers on this form as it		•		Open to Public
	nal Revenue		Information about Form 990 and its instructions is at 0.011 and 0.011 and 0.0111 and 0.011 and 0.011 and 0.011 an				Inspection
<u>A</u>	For the 20	013 calenda	ar year, or tax year beginning $ { m JUL}1,2013$ and en	nding JI	JN 30, 2	014	
	Check if applicable:	C Name of	organization		D Employer i	dentificati	ion number
	Address change	THE	FORUM ON EDUCATION ABROAD, INC.				
	Name change		usiness As		2	23-310	0062
	Initial return	Number	and street (or P.O. box if mail is not delivered to street address)	oom/suite	E Telephone	number	
	Termin- ated	DICK	INSON COLLEGE, PO BOX 1773		7	717-24	5-1031
	Amended return	City or to	own, state or province, country, and ZIP or foreign postal code		G Gross receipts	\$	1,429,766.
	Applica-		ISLE, PA 17013		H(a) Is this a g	group retur	'n
	pending	F Name ar	nd address of principal officer: BRIAN WHALEN		for subor	dinates?	Yes X No
		SAME 2	AS C ABOVE		H(b) Are all subor	dinates includ	led? Yes No
			X 501(c)(3) 501(c) ()◀ (insert no.) 4947(a)(1) or	527	lf "No," a	ttach a list	. (see instructions)
			FORUMEA.ORG		H(c) Group ex		
			X Corporation Trust Association Other ►	L Year o	f formation: 20	001 м Si	tate of legal domicile: PA
Pa		ummary					
Ð	1 Bri		e the organization's mission or most significant activities: MEMBER				THAT IS
anc	$ \underline{T}$		NDARDS DEVELOPMENT ORGANIZATION FOR				
ernä	2 Ch		x I if the organization discontinued its operations or disposed	d of more t	han 25% of its	1 1	
Š	3 Nu		ing members of the governing body (Part VI, line 1a)				15
ن ھ	4 Nu		ependent voting members of the governing body (Part VI, line 1b)				15
ies	5 Tot		of individuals employed in calendar year 2013 (Part V, line 2a)				0 275
Activities & Governance	6 Tot		of volunteers (estimate if necessary)			_	
Act	7 a loi		d business revenue from Part VIII, column (C), line 12				0.
	D Ne	t unrelated	business taxable income from Form 990-T, line 34			. 7b	
		ntributiona	and grants (Dart)/III, line 1b)		Prior Year 159,8	47	Current Year 1,073.
Ine	8 Co 9 Pro		and grants (Part VIII, line 1h) ce revenue (Part VIII, line 2g)		1,643,3		1,404,517.
Revenue	10 Inv	-	ce revenue (Part VIII, line 2g) come (Part VIII, column (A), lines 3, 4, and 7d)		13,9		24,176.
Be	11 Ot		(Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			0.	0.
	1		- add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,817,1		1,429,766.
			nilar amounts paid (Part IX, column (A), lines 1-3)		10,0		10,000.
	1		o or for members (Part IX, column (A), line 4)			0.	0.
s	15 00	•	compensation, employee benefits (Part IX, column (A), lines 5-10)			0.	0.
			undraising fees (Part IX, column (A), line 11e)			0.	0.
Expense	b Tot		ng expenses (Part IX, column (D), line 25) 14,770	D .			
ш	17 Oth	her expense	es (Part IX, column (A), lines 11a-11d, 11f-24e)		1,481,1		1,426,190.
	1		s. Add lines 13-17 (must equal Part IX, column (A), line 25)		1,491,1	.58.	1,436,190.
	19 Re	venue less e	expenses. Subtract line 18 from line 12		325,9	89.	-6,424.
OL				Beg	inning of Curren		End of Year
sets	20 Tot	tal assets (F	Part X, line 16)		1,770,4		1,963,114.
Net Assets or	21 Tot		(Part X, line 26)		309,1		393,773.
	22 Ne		fund balances. Subtract line 21 from line 20		1,461,2	156.	1,569,341.
		Signature					
	-		declare that I have examined this return, including accompanying schedules ar			-	owledge and belief, it is
true	, correct, a	nd complete.	Declaration of preparer (other than officer) is based on all information of which	h preparer h	ias any knowledg	je.	

				2.	
Sign	Signature of officer			Date	
Here	BRIAN WHALEN, PRESIDEN	Г, СЕО			
	Type or print name and title				
	Print/Type preparer's name	Preparer's signature	Date	Check PTIN	
Paid	CHARLES R. NEBEL, JR.			self-employed P00143823	
Preparer	Firm's name 🕒 BOYER & RITTER			Firm's EIN 23-1311005	
Use Only	Firm's address 9 IRVINE ROW				
	CARLISLE, PA 170		Phone no. 717 - 249 - 3414		
May the IF	RS discuss this return with the preparer shown abo	ve? (see instructions)		X Yes No	
332001 10-2	32001 10-29-13LHAFor Paperwork Reduction Act Notice, see the separate instructions.Form 990 (2013)				

Form	990 (2013) THE FORUM ON EDUCATION ABROAD, INC. 23-3100062 Page 2
Pa	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission: THE FORUM ON EDUCATION ABROAD IS THE HIGHER EDUCATION ASSOCIATION FOR
	EDUCATION ABROAD. THE FORUM IS RECOGNIZED BY THE U.S. DEPARTMENT OF
	JUSTICE AND THE FEDERAL TRADE COMMISSION AS THE STANDARDS DEVELOPMENT
	ORGANIZATION (SDO) FOR THE FIELD OF EDUCATION ABROAD. THE FORUM'S
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
4	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 583,887. including grants of \$) (Revenue \$ 704,557.)
	THROUGH CONVENING EVENTS AND CONFERENCES, THE FORUM OFFERS
	OPPORTUNITIES FOR DISCUSSION, LEARNING AND NETWORKING. THE FORUM
	ANNUAL CONFERENCE IS THE LARGEST EDUCATION ABROAD GATHERING AND THE
	SIGNATURE EVENT OF THE FORUM. IN LATE MARCH IN SAN DIEGO OVER 1,100
	PEOPLE ATTENDED THIS EVENT FROM 30 COUNTRIES, AND 47 U.S. STATES. IN
	ADDITION, DURING THE YEAR OVER 200 ATTENDED TWO STANDARDS OF GOOD
	PRACTICE INSTITUTES, 30 ATTENDED A FIRESIDE DIALOGUE, AND 493
	INSTITUTIONS PARTICIPATED IN WEBINARS.
4b	(Code:) (Expenses \$ 369,796. including grants of \$ 10,000.) (Revenue \$ 572,437.)
	THE FORUM'S PROGRAMS AND RESOURCES OFFER IMPORTANT DATA AND ANALYSIS,
	QUALITY ASSURANCE TOOLS, AND PUBLICATIONS AND ONLINE RESOURCES TO HELP
	INSTITUTIONS TO ADVANCE THEIR EDUCATION ABROAD PROGRAMS. IN 2014
	VISITS TO THE FORUM WEB SITE INCREASED BY 17%, THE ONLINE CURRICULUM
	COOPERATIVE GREW SUBSTANTIALLY, AND THE OUTCOMES ASSESSMENT TOOLBOX AND
	CRITICAL INCIDENT DATABASE WERE LAUNCHED.
4c	(Code:) (Expenses \$ 270,120. including grants of \$) (Revenue \$127,523.)
	THROUGH ITS MANY WORKSHOPS AND ITS PROFESSIONAL CERTIFICATION PROGRAM,
	THE FORUM TRAINS AND EDUCATES HUNDREDS OF COLLEAGUES EACH YEAR IN BEST
	PRACTICES, AND BY DOING SO HELPS TO IMPROVE THE EDUCATION ABROAD FIELD
	FOR THE BENEFIT OF STUDENTS. IN 2014, 26 WORKSHOPS WERE OFFERED,
	ATTENDED BY 476 PEOPLE. THE PROFESSIONAL CERTIFICATION PROGRAM, THE
	FIRST IN THE FIELD OF EDUCATION ABROAD, WAS ALSO LAUNCHED.
۵d	Other program services (Describe in Schedule O.)
τu	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses ► 1,223,803.
	Form 990 (2013)
33200	

Form	990	(2013)	

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a		Х
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	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			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
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	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u>X</u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		_X_
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		_X_
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		<u> </u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		<u>X</u>
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Form 990 (2013)

Form 990 (EDUCATION	ABROAD,	INC
Part IV	Checklist of R	equire	d Schedu	les ₍	continued)		

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		Х
24a				
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	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	0.5		v
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
a	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	056		х
26	Schedule L, Part I Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or	25b		-23
26	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so,			
		26		Х
27	complete Schedule L, Part II	20		
21	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
20	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			77
•	and that is treated as a partnership for federal income tax purposes? <i>If</i> "Yes," <i>complete Schedule R, Part VI</i>	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		v	
	Note. All Form 990 filers are required to complete Schedule O	38	X	

Form **990** (2013)

Part U Statements Regarding Other IRS Filings and Tax Compliance Check # Schedule O contains a response or note to any line in the Part V Check # Schedule O contains a response or note to any line in the Part V Terr the number of forms W-3G included in line 1a. Enter -0 find applicable 10 Det the cognization comply with backbuy withholding rules for reportable payments to vendors and reportable gaming (gambing) winnings to prax winnes? Terr the number of molyces reported on Form W-3, Transmittal of Wage and Tax Statements. 2a 0 B tast one is reported on line 2a, did the organization file all required federal employment tax relumn? 2b Webs. If the sum of lines 1a and 2a is greater than 250, you may be required to a_AB (gee instructions) 3a X B the sum one lines ta and 2a is greater than 250, you may be required to a schedule on the action form 900. Than Swart Pin Ves 1 (in Bac Action Pin Swart Pin Ves 1) A any time during the calendar year, dd the organization have an intervel in or al signature or ther authority over. a financial Account is activation for financial accounts. Sa D to ves its abs for the organization tax is an abs cale regularation and schedule accounts. Sa X but the organization have annealized basiles transaction at any time during the tax year? Sa X but the organization have an interves in a any time during the tax year? Sa X but any time and the organization have an intereline of a conhibitable activate therasaction? <	Form	990 (2013) THE FORUM ON EDUCATION ABROAD, INC. 23-3100	062	Р	age 5
1a Enter the number reported in Box 3 of Form 1096. Enter 0. If not applicable 1a 10 10 10 1a Enter the number of Form W-2G included in line 1a. Enter 0. If not applicable 10 0 0 10 10 0 2 Enter the number of Form W-2G included in line 1a. Enter 0. If not applicable 10	Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
1a Inter the number prometian Box3 of Form 1066. Enter 0-1 in capplicable 1a 10 b Enter the number of form W30 included in line 1a. Enter 0-1 in capplicable 1b 0 c Difference 2a 0 c Difference 2a 0 c X 2a 1c 0 d If all estication compty with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 2a 0 d If all estication compty with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize with an 2d, of the organization the all employment tax returne? 2b Note. If the sum of ines 1a and 2a is greater than 250, you may be required to a-file (see instructions) 3a X d At any time the name of the organization have in interest in, or a signature or other authority over, a transacial account in a transacial account. 3b 4a d If "Yes, 'that is the organization have in a bread for the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any considication an special back shall be accounts. 5a X b If "Yes, 'that 'the organization be active as the file the special back shall be considicatin an specinsobiotit the seganization. 5		Check if Schedule O contains a response or note to any line in this Part V			
b Enter the number of Forms W20 included in line 1a. Enter 0-if not applicable Image: Comparison on the problem in the set of the problem in the period of the period is particular and reportable gaming (gambling) winnings to price winners? Image: Comparison on the period of t				Yes	No
b b the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambing) winnings to prize winners? 1c X 2 Enter the number of employees reported on form W-3, Transmittal of Wage and Tax Statements, field for the calendar year oding with the year covered by this return 2a 0 1 If at least one is reported on line 2, did the organization fiel al required federal employment tax returns? 2b Note. If the sum of lines 1 and 2 is greater than 250, you may be required to <i>e-fiel</i> (see instructions) 3a X 3 D dt the organization have unreaded basiness gost incerne of 13 (noo or more during the vear? 3a X 4 A any time and or the foreign country (souch as a bank account, securities account, or other financial account)? 4a X 5 Was the organization have annual gross recepts that are normally greater than \$100,000, and did the organization have annual gross recepts that are normally greater than \$100,000, and did the organization have annual gross recepts that are normally greater than \$100,000, and did the organization solid any contribution an express statement that such contributions or gifts 6b 6 If ''ses,' did the organization have explosed dispose of angle personal property for which it was required to the payof or the value of the organization neither explosed dispose of angle personal property for which it was required to the payof or the value of the organization neceive angle on thous dispose of angle persos	1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 10			
gambing winnings to prize winner? ic X 2a Enter the number of enophyses reported on from W-3. Transmittal of Wage and Tax Statements, list for the calendar year ending with or within the year covered by this return 2a 0 b If at least one is reported on line 2a, id the organization file all required fedaral employment tax returns? 2a 0 3a Dd the organization have unrelated business gross income of \$1.000 or more during the year? 3a X 3b If "ves," has tilled a Form BOPT for this year? 3a X b If "ves," has tilled a Form BOPT for this year? 3a X b If "ves," heat file all areal group on the year is the transmittant of Wage and Tax statements. 3a X b If "ves," heat the name of the foreign country. Image and x and the country on the provide an explonation is Schedule O. 4a X c If "Yes," to line Sa or 50, dd the organization file Form 888817? 5a X 5b 5a X B Dd any statebal party notify the organization till twas or is a porthy to a prohibuited tax schedure bar anothy the ves or tax declurches a contrabution an express statement that such contributions or gits ware not tax declurches a contrabution an express statement that such contributions or gits 5a X X <t< th=""><th>b</th><th>Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0</th><th></th><th></th><th></th></t<>	b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
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till de for the calendar year ending with or within the year covered by this "future many term tax returns? 2b b if at least one is reported on line 2a, did the organization file all required federal emplyment tax returns? 2b 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a 3b If 'Yes', if the a Is mobel To this year? 3a 4f At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account is a foreign country. 3a b If 'Yes', if the SI' To any other observation tax of the authority over, a financial account is a foreign country. 5a b Se instructions for filing requirements for Form TD F 90:22.1, Report of Foreign Bank and Financial Accounts. 5a b Was the organization a party to a prohibited tax shelter transaction? 5a b D d any taxable party notry the organization that it was or is a party to a prohibited tax shelter transaction? 5a c If 'Yes,' id the organization include with every solicitation an express statement that auch contributions or gifts were not tax deductible? 5a 7 Organization shell, with were you indicated accounts. 5a 5a 6a X 7a X 7 Organization an shell with every solicitation an express statement that auch contributions or gifts were not tax deductible? 5a 7 Organization shell, with every solicitation an express provided to the parganization shell with every solicitation an express provided to t		(gambling) winnings to prize winners?	1c	Х	
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3a Did the organization have unrelisted business gross income of \$1,000 or more during the year? 3a X b If 'Yes,' that field a Form 900-T for this year? If 'No,' to line 3b, provide an explanation in Schedule O 3b X d 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 county (such as a bark account, securities account, or other financial account)? 4a X 5 Was the organization action at the foreign county: > — — — 5 Was the organization action at the schelt transaction at any time during that axy ear? 5a X 5 Do dary taxable party notify the organization tild the minister action at any time during that axy ear? 5a X 6 Do de the organization neckle with every solicitation an express statement that such contributions or gits 5a X 9 Did the organization neckle apprent in eaces of 57 madp parity as contributions and parity for goods and services provided to the payo? 7a X 7 Organization neckle apprent in eaces of 57 madp parity as contributions and parity for goods and services provided to the payo? 7a X 7 Yes, 'i di the organization neckle apprent in eaces of 57 madp parity as contributions and parity for goods and services provided to the payo? <t< th=""><th>b</th><td>If at least one is reported on line 2a, did the organization file all required federal employment tax returns?</td><td>2b</td><td></td><td></td></t<>	b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
b If "Yes," has it field a Form 990-T for this year? If "No," to line 3b, 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 is other financial account? 4a X b If "Yes," enter the name of the foreign country: ▶		Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
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14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X	-				
			140		x
					<u> </u>

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THE FORUM ON EDUCATION ABROAD, INC.

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 15			
	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 15			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3	Х	
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6	Х	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b	х	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes." provide the names and addresses in Schedule O	9		x
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe			
	in Schedule O how this was done	12c	х	
13	Did the organization have a written whistleblower policy?	13	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 approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
	Other officers or key employees of the organization	15b		х
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed $\blacktriangleright PA$			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) as	ailable	9	
	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website X Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and	financ	cial	
	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 and records of the organization	on: 🕨		
	BRIAN WHALEN - 717-245-1031			
	DICKINSON COLLEGE CARLISLE PA 17013			

THE FORUM ON EDUCATION ABROAD, INC.

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A)	(B)	(C)		(D)	(E)	(F)				
Name and Title	Average	(do	Position (do not check more than one		Reportable	Reportable	Estimated			
	hours per	box	, unle	ss pei	rson i	s both	n an	compensation	compensation	amount of
	week		cer ar I	nd a d I	irecto	r/trus I	tee)	from	from related	other
	(list any	rector						the	organizations	compensation
	hours for	or di	96			ated		organization	(W-2/1099-MISC)	from the
	related	ustee	trust		e	bens		(W-2/1099-MISC)		organization and related
	organizations below	ual tr	tional		voldu	t con	_			organizations
	line)	ndividual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) BARBARA ROWE	2.00				<u>×</u>	1 0	ш			
CHAIR		Х		X				0.	0.	0.
(2) PAUL DAVIES	1.00									
TREASURER		Х		X				0.	0.	0.
(3) GREGG KVISTAD	1.00									
VICE CHAIR		Х		X				0.	0.	0.
(4) SUSAN POPKO	1.00									
SECRETARY		Х		Х				0.	0.	0.
(5) JOY GLEASON CAREW	1.00									
BOARD MEMBER		Х						0.	0.	0.
(6) ENDA CARROLL	1.00									
BOARD MEMBER		Х						0.	0.	0.
(7) ROBIN CRAGGS	1.00									
BOARD MEMBER		Х						0.	0.	0.
(8) ROSA MARINA DE BRITO MEYER	1.00									
BOARD MEMBER		Х						0.	0.	0.
(9) MARY ANNE GRANT	1.00									
BOARD MEMBER		Х						0.	0.	0.
(10) JOHN LUCAS	1.00									
BOARD MEMBER		Х						0.	0.	0.
(11) PAUL MCVEIGH	1.00									
BOARD MEMBER		Х						0.	0.	0.
(12) MICHAEL MORRISON	1.00									
BOARD MEMBER		Х						0.	0.	0.
(13) MARGARET PLYMPTON	1.00									
BOARD MEMBER		Х						0.	0.	0.
(14) PATRICIA SCROGGS	1.00									
BOARD MEMBER		Х						0.	0.	0.
(15) HANNAH STEWART GAMBINO	1.00									
BOARD MEMBER		Х						0.	0.	0.
(16) BRIAN WHALEN	40.00	-						_	_	•
PRESIDENT				X				0.	0.	0.
		I					I			

Form 990 (2013) THE FORU									23-31	000	62	Pa	ige 8
Part VII Section A. Officers, Directors, Trus		oloy	ees,			ghes	t C		· · /				
(A) Name and title	(B) Average hours per week	Average Position (do not check more than one box, unless person is both an			n an	(D) Reportable compensation from	(E) Reportable compensation from related		Esti amo	(F) mate ount c ther			
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key em ployee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MIS	s	comp fro orga	ensat m the nization relate	e on ed
		-											
		-											
		-											
		-											
		-								\square			
		-											
		-											
										\square			
		-						0					0
1b Sub-total c Total from continuation sheets to Part VI								0.		0.			0.
d Total (add lines 1b and 1c)								0.		0.			0.
2 Total number of individuals (including but n							o re	eceived more than \$100,	000 of reportable				
compensation from the organization													0
3 Did the organization list any former officer,	director or tri	istor	a ko	w on	nnlo		or	highest compensated er	mplovee on	П		Yes	No
line 1a? If "Yes," complete Schedule J for s	-			-	•			•		- 1	3		Х
4 For any individual listed on line 1a, is the su										····			
and related organizations greater than \$150	,		'							🛓	4	_	Х
5 Did any person listed on line 1a receive or a rendered to the organization? <i>If</i> "Yes." con					-			-			5		х
Section B. Independent Contractors													
1 Complete this table for your five highest co the organization. Report compensation for	•	•						n the organization's tax y	•	ensati			
(A) Name and business	address							(B) Description of s	services	Cc	(C) ompens		ı
DICKINSON COLLEGE 28 N COLLEGE STREET, CARI	ISLE, P	A	17	01	3			STAFFING SER	VICES		696	,70	00.
2 Total number of independent contractors (i	ncluding but p	ot lin	niter		thor	e lie	ted	above) who received m	ore than				
\$100.000 of compensation from the organi	•	. m			1								

Form	n 990 ((2013) THE F	ORUM ON	EDUCATION	ABROAD, I	INC.	23-3100	062 Page 9
Pa	rt VII	I Statement of Reven	nue					
		Check if Schedule O cont	ains a response	or note to any line	e in this Part VIII			
			·		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
						revenue	revenue	512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns						
Gra	b							
An An	С	Fundraising events						
Gifi Iar	d	Related organizations						
imi	е	5						
rior S	f	All other contributions, gifts, gran						
ibu		similar amounts not included abo	ve 1f	1,073.				
d C	g	Noncash contributions included in lines	1a-1f: \$					
Co an	h	Total. Add lines 1a-1f		🕨	1,073.			
				Business Code				
é	2 a	FORUM CONFERENC	E	611430	704,557.	704,557.		
e vic	b	MEMBERSHIP		611430	572,437.	572,437.		
Se	с	EDUCATIONAL PRO	GRAMS	611430	126,981.	126,981.		
Program Service Revenue	d							
Ba	е							
Pro	f	All other program service reve	nue	611430	542.	542.		
	g				1,404,517.			
	3	Investment income (including						
		other similar amounts)			24,176.			24,176.
	4	Income from investment of tax						-
	5	Royalties		· · · ·				
	•		(i) Real	(ii) Personal				
	6 9	Gross rents						
	b	Less: rental expenses						
	c c	Rental income or (loss)						
	d							
		Gross amount from sales of	(i) Securities					
	<i>i</i> a			(ii) Other				
	h	assets other than inventory						
	D	Less: cost or other basis						
	_	and sales expenses						
		Gain or (loss)						
		Net gain or (loss)						
ne	8 a	Gross income from fundraising						
/eni		including \$						
Rev		contributions reported on line	,					
ler		Part IV, line 18						
Other Revenue		Less: direct expenses		Ļ				
-		Net income or (loss) from func		▶				
	9 a	Gross income from gaming ac						
		Part IV, line 19						
		Less: direct expenses						
		Net income or (loss) from gam	-	····· ►				
	10 a	Gross sales of inventory, less						
		and allowances						
	b	Less: cost of goods sold	b					
	С	Net income or (loss) from sale	s of inventory	>				
		Miscellaneous Revenu	e	Business Code				
	11 a							
	b							
	с							
	d	All other revenue						
	е	Total. Add lines 11a-11d		►				
	12	Total revenue. See instructions.		🕨	1,429,766.	1,404,517.	0.	24,176.

<u>Secti</u>	on 501(c)(3) and 501(c)(4) organizations must comp				
	Check if Schedule O contains a respons	(A)	(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	10,000.	10,000.		
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):				
а	Management	746,204.	630,871.	100,563.	14,770.
b	Legal	75.		75.	
с	Accounting	8,565.		8,565.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
•	column (A) amount, list line 11g expenses on Sch O.)	19,315.	1,000.	18,315.	
12	Advertising and promotion	724.	724.		
13	Office expenses	63,136.	15,167.	47,969.	
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel	41,171.	41,171.		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	453,577.	440,531.	13,046.	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
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	CERTIFICATION PROGRAM	36,537.	36,537.		
b	WORKSHOP/WEBINAR EXPENS	30,461.	30,461.		
c	PRINTING AND REPRODUCTI	13,303.	13,303.		
d	PROFESSIONAL DEVELOPMEN	9,054.		9,054.	
	All other expenses	4,068.	4,038.	30.	
25	Total functional expenses. Add lines 1 through 24e	1,436,190.	1,223,803.	197,617.	14,770.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

THE FORUM ON EDUCATION ABROAD, INC. Part IX Statement of Functional Expenses

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- Form	990 (2013) THE FORUM ON EDUCATION ABROAD,	INC.	23-	3100062 Page 11
	rt X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	296,529.	1	287,617.
	2	Savings and temporary cash investments	201,848.	2	202,367.
	3	Pledges and grants receivable, net	98,347.	3	59,170.
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees. Complete			
		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under			
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
S		employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		7	
Š	8	Inventories for sale or use	1,202.	8	<u>1,417.</u> 6,289.
	9	Prepaid expenses and deferred charges	16,387.	9	6,289.
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a			
	b	Less: accumulated depreciation 10b		10c	
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11	1,156,088.	12	1,406,254.
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	1 660 401	15	1 0 6 2 1 1 4
	16	Total assets. Add lines 1 through 15 (must equal line 34)	1,770,401.	16	1,963,114.
	17	Accounts payable and accrued expenses	24,885.	17	31,932.
	18	Grants payable	201 200	18	261 041
	19	Deferred revenue	284,260.	19	361,841.
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
ies	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons.			
Liabiliti				22	
Lia	23			23	
	24	Secured mortgages and notes payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third		27	
		parties, and other liabilities not included on lines 17-24). Complete Part X of			
		Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	309,145.	26	393,773.
		Organizations that follow SFAS 117 (ASC 958), check here 🕨 🗴 and			
ŝ		complete lines 27 through 29, and lines 33 and 34.			
nce	27	Unrestricted net assets	1,304,274.	27	1,459,350.
Net Assets or Fund Balances	28	Temporarily restricted net assets	156,982.	28	109,991.
Ы	29	Permanently restricted net assets		29	
Fun		Organizations that do not follow SFAS 117 (ASC 958), check here			
o		and complete lines 30 through 34.			
ets	30	Capital stock or trust principal, or current funds		30	
Ass	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
let,	32	Retained earnings, endowment, accumulated income, or other funds	1 461 056	32	1,569,341.
2	33	Total net assets or fund balances	1,461,256.	33	1 1.309.341.

Total net assets or fund balances

Total liabilities and net assets/fund balances

Form **990** (2013)

1,569,341. 1,963,114.

33

34

1,461,256. 1,770,401.

Page **11**

F

	1990 (2013) THE FORUM ON EDUCATION ABROAD, INC.	23-31	100062	Pa	_{ge} 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>		
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,429	9,7	66.
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,430	5,1	90.
3	Revenue less expenses. Subtract line 2 from line 1	3	- (5,4	24.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,461		
5	Net unrealized gains (losses) on investments	5	114	4,5	09.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	1,569	9,3	41.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII		<u></u>		
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	edule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audit			
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits				
					/ · - ·

Form **990** (2013)

SCHED (Form 99	OULE A 0 or 990-EZ)	Complete if the organization is a section 501(c)(3) organization or a section								OMB No. 1545-0047				
Department o Internal Rever	ue Service			onexempt charitable Form 990 or Form 99 or 990-EZ) and its instru	90-EZ.			Open to Inspe	ction					
Name of t	he organizati				TNO	Empl		entificatio		nber				
Part I	Reason	THE FOR	UM ON EDUCAT: ty Status (All organiz	TON ABROAD,	LNC .	uctions	23-	31000	162					
			because it is: (For lines 1											
1		-	, or association of churc	-	•									
2			0(b)(1)(A)(ii). (Attach Sci											
3			al service organization d	,	170(b)(1)(A)(iii).									
4	•	• •	operated in conjunction v)(1)(A)(iii). ⊟	Inter the	hospital'	s name	e,				
	city, and stat	e:												
5	An organizati	on operated for the b	penefit of a college or un	iversity owned or ope	erated by a governme	ental unit des	cribed ir	า						
	section 170	(b)(1)(A)(iv). (Comple	ete Part II.)											
6	A federal, sta	te, or local governme	ent or governmental unit	described in section	n 170(b)(1)(A)(v).									
7	An organizati	on that normally rece	eives a substantial part o	of its support from a g	overnmental unit or f	rom the gen	eral pub ^l	lic descrit	oed in					
	section 170(b)(1)(A)(vi). (Comple	te Part II.)											
8	A community	r trust described in s	ection 170(b)(1)(A)(vi).	Complete Part II.)										
9 X	An organizati	on that normally rece	eives: (1) more than 33 1	/3% of its support fro	m contributions, mer	nbership fee	s, and g	ross recei	ipts fro)m				
	activities rela	ted to its exempt fun	ctions - subject to certai	n exceptions, and (2)	no more than 33 1/3	% of its supp	port from	n gross in	vestme	ent				
	income and ι	unrelated business ta	xable income (less secti	on 511 tax) from busi	nesses acquired by t	he organizat	ion after	June 30,	1975.					
	See section	509(a)(2). (Complete	Part III.)											
10	An organizati	on organized and op	erated exclusively to tes	t for public safety. Se	e section 509(a)(4)									
11 🛄	An organizati	on organized and op	erated exclusively for th	e benefit of, to perfor	m the functions of, or	r to carry out	the pur	poses of	one or					
	more publicly	v supported organiza	tions described in section	n 509(a)(1) or section	509(a)(2). See sect	ion 509(a)(3)). Check	the box	that					
			organization and comple	te lines 11e through	11h.									
	a 🔄 Type I			/pe III - Functionally ir	•			inctionally	•	rated				
e 🔛		· •	t the organization is not	-		-	-							
		-	nan one or more publicly) or sect	ion 509(a)(2).					
f	Ŭ		en determination from t	ne IRS that it is a Typ	e I, Type II, or Type II	I								
		rganization, check th												
g	•		rganization accepted an			•		ſ						
	., .		rectly controls, either alo	v .		., .,		44.0	Yes	No				
	•	e ,	pported organization?					11g(i)						
			described in (i) above?					11g(ii)						
h			person described in (i) or about the supported or <u>c</u>					11g(iii)						
		onowing information	about the supported ofg	anzalion(5).										
	of our ported		(III) Type of examination	(iv) is the organization	(v) Did you notify the	(vi) Is the	(Amount	ofmon					

(i) Name of supported organization	(ii) EIN	(described on lines 1-9 above or IRC section	(iv) Is the organization (in col. (i) listed in your governing document? (in col. (i) listed in your		in col . (i) listed in your		in col. (i) listed in your		in col. (i) listed in your		in col. (i) listed in your		organizat	u notify the ion in col. support?	(vi) Is organizatic (i) organizi U.S	the on in col. ed in the .?	(vii) Amount of monetary support
		(see instructions))	Yes	Yes No		Yes No		No											
Total																			

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

Schedule A (Form 990 or 990-EZ) 2013

Schedule A (Form 990 or 990-EZ) 2013 THE FORUM ON EDUCATION ABROAD, INC. 23-3100 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

23-3100062 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.)

Sec	tion A. Public Support		_		_	_	_
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4.						
Sec	tion B. Total Support					_	_
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	
13	First five years. If the Form 990 is for	the organization'	s first, second, thi	d, fourth, or fifth t	ax year as a sectio	n 501(c)(3)	
_	organization, check this box and stor						
	ction C. Computation of Publi						
14	Public support percentage for 2013 (I					14	%
15	Public support percentage from 2012					15	%
16a	33 1/3% support test - 2013. If the c						
	stop here. The organization qualifies						
b	33 1/3% support test - 2012. If the c						
	and stop here. The organization qual						
17a	10% -facts-and-circumstances test	-	-				
	and if the organization meets the "fac				-	0	. —
	meets the "facts-and-circumstances"	-	-	• • • •			
b	10% -facts-and-circumstances test	-	-				
	more, and if the organization meets th						ie
	organization meets the "facts-and-circ						>
18	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 16b, 17a, or 17	b, check this box a	and see instruction	s ►

Schedule A (Form 990 or 990-EZ) 2013

Schedule A (Form 990 or 990-EZ) 2013 THE FORUM ON EDUCATION ABROAD, INC. 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	-					
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	21,200.	30,020.	61,450.	159,847.	1,073.	273,590.
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	891,113.	1177069.	1341129.	1643366.	1404517.	6457194.
3	Gross receipts from activities that						
-	are not an unrelated trade or bus- iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to or expended on its behalf						
E							
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	912,313.	1207089.	1402579.	1803213.	1405590.	6730784.
7a	Amounts included on lines 1, 2, and 3 received from disgualified persons						0.
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						0.
_	amount on line 13 for the year						0.
	Add lines 7a and 7b						6730784.
	Public support (Subtract line 7c from line 6.)						0750704.
	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	Amounts from line 6	912,313.	1207089.	1402579.	1803213.	1405590.	6730784.
	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	4,838.	4,775.	8,563.	13,934.	24,176.	56,286.
b	Unrelated business taxable income		-	-	-		
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
c	Add lines 10a and 10b	4,838.	4,775.	8,563.	13,934.	24,176.	56,286.
	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						·
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)	917,151.	1211864.	1411142.	1817147.	1429766.	6787070.
14	First five years. If the Form 990 is for	the organization's	first, second, third	d, fourth, or fifth ta	x year as a sectior	n 501(c)(3) organiza	ition,
							>
Sec	ction C. Computation of Publi	c Support Per	centage				
15	Public support percentage for 2013 (li	ine 8, column (f) di	vided by line 13, c	olumn (f))		15	<u>99.17 %</u>
	Public support percentage from 2012					16	99.38 <u>%</u>
Sec	ction D. Computation of Inves	tment Income	Percentage				
17	Investment income percentage for 20)13 (line 10c, colun	nn (f) divided by lin	e 13, column (f))		17	.83 %
18	Investment income percentage from 2	2012 Schedule A,	Part III, line 17			18	.62 %
19 a	33 1/3% support tests - 2013. If the	organization did n	ot check the box o	on line 14, and line	15 is more than 3	3 1/3%, and line 17	
b	more than 33 1/3%, check this box ar 33 1/3% support tests - 2012. If the						►X
~	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organizatio						

Schedule A (Form 990 or 990-EZ) 2013

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

			al Financial Otatomonto			OMB No.	1545-0047
			al Financial Statements			20	10
(For			organization answered "Yes," to Form 990, , 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.			20	IJ
	tment of the Treasury al Revenue Service		Attach to Form 990. rm 990) and its instructions is at <u>www.irs.c</u>	no. /for		Inspec	o Public tion
	ne of the organization					yer identification	
	THE FORUM ON		TION ABROAD, INC.			23-3100	062
Pa	rt I Organizations Maintaining Dor	nor Advise	d Funds or Other Similar Funds o	r Acco	ounts	Complete if	the
	organization answered "Yes" to Form 99	90, Part IV, lin					
			(a) Donor advised funds	(b)	Funds	and other acco	unts
1	Total number at end of year						
2	Aggregate contributions to (during year)						
3							
4	Aggregate value at end of year						
5	Did the organization inform all donors and dono		-				
6	are the organization's property, subject to the organization inform all grantees, donors					Yes	└── No
6	for charitable purposes and not for the benefit of	,	0 0				
				-		Yes	No
Pa			ganization answered "Yes" to Form 990, Par				
1	Purpose(s) of conservation easements held by t			,			
	Preservation of land for public use (e.g., r	•		rically i	mporta	int land area	
	Protection of natural habitat		Preservation of a certifie		•		
	Preservation of open space						
2	Complete lines 2a through 2d if the organization	n held a quali	fied conservation contribution in the form of	a conse	ervatior	n easement on t	he last
	day of the tax year.			_			
					He	eld at the End of t	he Tax Year
а	Total number of conservation easements			上	2a		
b	Total acreage restricted by conservation easem	nents		[1	2b		
С					2c		
d							
	listed in the National Register				2d		
3	Number of conservation easements modified, tr	ransferred, re	leased, extinguished, or terminated by the or	ganizat	tion dur	ring the tax	
	year						
4	Number of states where property subject to cor						
5	Does the organization have a written policy regard violations, and enforcement of the conservation	•				Yes	No
6	Staff and volunteer hours devoted to monitoring						
7	Amount of expenses incurred in monitoring, ins		-				
8	Does each conservation easement reported on			•	* -		
	and section 170(h)(4)(B)(ii)?					Yes	No
9	In Part XIII, describe how the organization repo					balance sheet, a	and
	include, if applicable, the text of the footnote to	o the organiza	tion's financial statements that describes the	organi	ization's	s accounting fo	r
	conservation easements.			-			
Pa			f Art, Historical Treasures, or Othe	er Sim	nilar A	ssets.	
	Complete if the organization answered "						
1 a	If the organization elected, as permitted under S						
	historical treasures, or other similar assets held	•		e of pul	blic serv	vice, provide, in	Part XIII,
	the text of the footnote to its financial statemen						
b	5						
	treasures, or other similar assets held for public	c exhibition, e	ducation, or research in furtherance of public	c servic	e, provi	ide the following	g amounts
	relating to these items:			1			
0			asures, or other similar assets for financial a				
2	If the organization received or held works of art the following amounts required to be reported u			an, pro	mue		
	and the reported to be reported to		10 y 100 000 10 alling to these items.				

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a Revenues included in Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

▶ \$

▶ \$

Sche		M ON EDUCA				23-31			age 2
Par	t III Organizations Maintaining Co	ollections of Art	t, Historical Tre	easures, or Oth	er Simila	r Assets	contir	nued)	
3	Using the organization's acquisition, accession							,	;
	(check all that apply):	,	, , , , , , , , , , , , , , , , , , ,	5	5				
а	Public exhibition	d		hange programs					
b	Scholarly research	e		indinge programe					
c	Preservation for future generations								
4	Provide a description of the organization's col	lections and explain	how they further th	ne organization's ex	empt purpo	sa in Part	XIII		
5	During the year, did the organization solicit or						/		
Ŭ	to be sold to raise funds rather than to be mai						Yes		No
Par						Part IV li	_		
	reported an amount on Form 990, Part					, r arciv, n	110 0, 01		
12	Is the organization an agent, trustee, custodia		iany for contribution	s or other assets no	nt included				
ia							Yes		No
h	on Form 990, Part X? If "Yes," explain the arrangement in Part XIII a					······ ∟			
U			iowing table.				Amount	+	
~	Paginning balance				10		Amoun		
	Beginning balance								
	Additions during the year								
e د	Distributions during the year								
20	Ending balance						Yes		No
	If "Yes," explain the arrangement in Part XIII. C					L	_ 165	-	
Par		the organization an	swered "Ves" to Fo	rm 990 Part IV line	<u>ו</u> 10 נ				
		(a) Current year	(b) Prior year	(c) Two years back		ware hack	(e) Four	Veare	hack
1a	Beginning of year balance	1,156,088.	520,125.			63,522.		-	229.
b	Contributions	112,000.	550,000.			70,000.			
0	Net investment earnings, gains, and losses	138,166.	85,963.	· · · · ·		42,468.		6,293.	
ט ה		200,200.			•	,			
	Grants or scholarships								
е	Other expenditures for facilities								
	and programs								
	Administrative expenses	1,406,254.	1,156,088.	520,125	1	75,990.		163,	522
g	End of year balance		, ,	,	•	15,550.		105,	522.
2	· •	·)) heid as.					
	Board designated or quasi-endowment ▶ _ Permanent endowment ▶	%	_%						
С	Temporarily restricted endowment 3 The second seco								
0-	The percentages in lines 2a, 2b, and 2c should			a al la aluación i a trava al da u					
Ja	Are there endowment funds not in the posses	sion of the organiza	ition that are held a	na administered for	the organiza	ation	ſ	Vee	Na
	by:						0-(1)	Yes X	No
	(i) unrelated organizations						3a(i)	~	х
	(ii) related organizations						3a(ii)		
-	If "Yes" to 3a(ii), are the related organizations	-					3b		
4 Par	Describe in Part XIII the intended uses of the or t VI Land, Buildings, and Equipme		wment tunds.						
I UI	Complete if the organization answered		Part IV line 11a S	ee Form 990 Part	(line 10				
	Description of property	(a) Cost or o			Accumulate	ad I	(d) Bool		•
	Description of property	basis (investr	• •		depreciation		(u) 600	valu	e
10	Land								
	Land								
	Buildings								
	Leasehold improvements								
	Equipment								
	Other								0
Total	. Add lines 1a through 1e. <i>(Column (d) must eq</i>	ual Form 990, Part J	<u>X, column (B), line 1</u>	<u>0(c).)</u>			D /=		0.
						Schedule	D (Form	ı 990)	2013

332052 09-25-13

Complete if the organization answered "Yes" to Form 990, Part IV, line 11b. See Form 990, Part X, line 12. (a) Description of security or category (including name of security) (b) Book value (c) Method of valuation: Cost or end-of-year market value (1) Financial derivatives	Schedule D (Form 990) 2013 THE FORUM (ON EDUCATION A	ABROAD, INC.	23-3100062 Page
(a) Description of security or distingtory incursion security. (b) Book value (c) Method of valuation: Cost or end of year market value (a) Description of security or distingtory incursions (b) Book value (c) Method of valuation: Cost or end of year market value (b) Other Incursions Incursions Incursions Incursions (c) Description of security or distingtory incursions Incursions Incursions Incursions (c) Description of investment Incursions Incursions Incursions Incursions (c) Description of investment (b) Book value (c) Method of valuation: Cost or end of year market value (c) Description of investment (b) Book value (c) Method of valuation: Cost or end of year market value (c) Description of investment (b) Book value (c) Method of valuation: Cost or end of year market value (c) Description of investment (b) Book value (c) Method of valuation: Cost or end of year market value (c) Description of investment (b) Book value (c) Method of valuation: Cost or end of year market value (c) Description (b) Book value (c) Method of valuation: Cost or end of year market value (c) Description (b) Book value (c) Method of valuation: Cost or end of year market value (
1) Prinarcial derivatives 0 2) Colour 0 2) Observing 1,406,254. B) 1,406,254. Complete If the organization answerd Yes' to Form 990, Part X, line 13. (a) Description of investment (b) Bock value (b) 1.406,254. Complete If the organization answerd Yes' to Form 990, Part X, line 13. (a) Description of investment (b) Bock value (c) 1.406,254. Complete If the organization answerd Yes' to Form 990, Part X, line 13. Complete If the organization answerd Yes' to Form 990, Part X, line 15. (c) Description (b) Bock value (c) 1.100000000000000000000000000000000000	Complete if the organization answered "Yes	' to Form 990, Part IV, line	e 11b. See Form 990, Pa	art X, line 12.
(2) Closely-held equity interests (3) Other (3) Other (3) Other (3) Other (3) Other (3) Other (4) ENDOWMENT FUND (5) Image: Complete if the organization answered "Ves" to Form 990, Part X, line 13. (4) (5) (5) Image: Complete if the organization answered "Ves" to Form 990, Part X, line 13. (6) (6) (7) (7) (8) (9) (9) Description of investment (9) Description (9) Description <t< td=""><td>(a) Description of security or category (including name of security)</td><td>(b) Book value</td><td>(c) Method of va</td><td>luation: Cost or end-of-year market value</td></t<>	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of va	luation: Cost or end-of-year market value
(2) Conserved equity interests	(1) Financial derivatives			
ND OWMENT FUND 1,406,254. END-OF-YEAR MARKET VALUE (B) (C)	(2) Closely-held equity interests			
B Image: Constrained form 930, Part X, col. (Bl line 12) 1, 406, 254. Fart Will Investments - Program Related. Complete if the organization answered Yes' to Form 930, Part IV, line 11c. See Form 930, Part X, line 13. (a) Description of investment (b) Investments - Program Related. (b) Method of valuation: Cost or end-of-year market value (c) (b) Door value (c) Method of valuation: Cost or end-of-year market value (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) ((3) Other			
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(F)	(C)			
(F) Image: Complete if the organization answered 'Yes' to Form 990, Part X, line 11. See Form 990, Part X, line 13. (a) (b) (b) (c) (c) (c) (a) (c) (b) (c) (c) (c) <td>(D)</td> <td></td> <td></td> <td></td>	(D)			
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Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)				
		a 25) ►		
			to the organization's fin	ancial statements that reports the

organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII 🔀

	dule D (Form 990) 2013 THE FORUM ON EDUCATION ABF				3100062 Page 4
Pa	t XI Reconciliation of Revenue per Audited Financial Stateme	ents With	Revenue per Re	turn.	
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a	l.			
1	Total revenue, gains, and other support per audited financial statements			1	1,623,775.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains on investments	. 2 a	114,509.		
b	Donated services and use of facilities	2b	79,500.		
с	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	<u>194,009.</u> 1,429,766.
3	Subtract line 2e from line 1			3	1,429,766.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	. 4b			
~	Add lines 4a and 4b			4c	0.
U U	Add lines 4a and 4b				
<u>5</u>	Total revenue. Add lines 3 and 4c. (<i>This must equal Form 990. Part I. line 12.</i>)			5	1,429,766.
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) rt XII Reconciliation of Expenses per Audited Financial Statem				
	Total revenue. Add lines 3 and 4c. (<i>This must equal Form 990. Part I. line 12.</i>)	nents With			n.
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) rt XII Reconciliation of Expenses per Audited Financial Statem	ients With	Expenses per F		
Pa	Total revenue. Add lines 3 and 4c. (<i>This must equal Form 990, Part I, line 12.</i>) rt XII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" to Form 990, Part IV, line 12a	ients With	Expenses per F	Retur	n.
Pa 1	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) t XII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" to Form 990, Part IV, line 12a Total expenses and losses per audited financial statements	nents With	Expenses per F	Retur	n.
Pa 1 2	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I, line 12.) t XII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" to Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:	2a	Expenses per F	Retur	n.
Pa 1 2 a	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I, line 12.) Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I, line 12.) Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" to Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments	2a 2b	Expenses per F	Retur	n.
Pa 1 2 a	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.) Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.) Complete if the organization answered "Yes" to Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities	2a 2b 2c	Expenses per F	Retur	n.
Pa 1 2 a	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) rt XII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" to Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	2a 2b 2c 2d	Expenses per F	Retur	n. <u>1,515,690.</u> 79,500.
Par 1 2 a b c d	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) rt XII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" to Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d	2a 2b 2c 2d	Expenses per F	1	n. <u>1,515,690.</u>
Par 1 2 a b c d e	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) rt XII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" to Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	2a 2b 2c 2d	Expenses per F	1 2e	n. <u>1,515,690.</u> 79,500.
Part 1 2 a b c d e 3	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I, line 12.) t XII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" to Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1	2a 2b 2c 2d	Expenses per F	1 2e	n. <u>1,515,690.</u> 79,500.
Part 1 2 a b c d e 3 4	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Complete if the organization answered "Yes" to Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1:	2a 2b 2c 2d	Expenses per F	1 2e	n. <u>1,515,690.</u> 79,500.
Pa 1 2 a b c d e 3 4 a	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" to Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b	2a 2b 2c 2d	Expenses per F	1 2e	n. <u>1,515,690.</u> <u>79,500.</u> <u>1,436,190.</u> 0.
Pa 1 2 a b c d e 3 4 a	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) rt XII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" to Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)	2a 2b 2c 2d	Expenses per F	1 2e 3	n. <u>1,515,690.</u> <u>79,500.</u> <u>1,436,190.</u>

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART V, LINE 4:

EXPLANATION: THE FORUM ON EDUCATION ABROAD HAS INVESTED IN THE DICKINSON

COLLEGE ENDOWMENT FOR THE PURPOSES OF ENHANCING THE GROWTH OF ITS

OPERATING ACCOUNT, WITH THE INTENT THAT THE INCOME OF THE FUND WILL

PROVIDE SUPPORT FOR FORUM ON EDUCATION ABROAD PROGRAMMING.

PART X, LINE 2:

EXPLANATION: MANAGEMENT HAS ASSESSED THE FORUM'S EXPOSURE TO INCOME TAXES

AT THE ENTITY LEVEL AS A RESULT OF UNCERTAIN TAX POSITIONS TAKEN IN

CURRENT AND PREVIOUSLY FILED TAX RETURNS. EXAMPLES OF TAX POSITIONS TAKEN

AT THE ENTITY LEVEL INCLUDE THE CONTINUING VALIDITY OF ITS EXEMPT

ORGANIZATION STATUS, POTENTIAL FILING REQUIREMENT FOR UNRELATED BUSINESS 322054 09-25-13 Schedule D (Form 990) 2013

 Schedule D (Form 990) 2013
 THE FORUM ON EDUCATION ABROAD, INC.
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 Part XIII
 Supplemental Information (continued)
 INCOME AND OTHER TAX POSITIONS THAT COULD RESULT IN INCOME TAX LIABILITIES

 TO THE FORUM UPON EXAMINATION BY TAXING AUTHORITIES PRESENTLY, MANAGEMENT
 BELIEVES THAT IT IS MORE LIKELY THAN NOT ITS TAX POSITION WILL BE

 SUSTAINED UPON EXAMINATION, INCLUDING ANY APPEALS AND LITIGATION, SUCH
 THAT THE FORUM HAS NO EXPOSURE TO INCOME TAX LIABILITIES FROM UNCERTAIN

 TAX POSITIONS.
 THE FORUM IS SUBJECT TO ROUTINE AUDITS BY TAXING

 JURISDICTIONS, HOWEVER THERE ARE CURRENTLY NO AUDITS FOR ANY TAX PERIODS

 IN PROGRESS.
 MANAGEMENT BELIEVES THE FORUM IS NO LONGER SUBJECT TO AUDIT

 FOR YEARS PRIOR TO JUNE 30, 2011.

SCHEDULE I		G	arants and Oth	ner Assistan	ce to Organ	izations.		OMB No. 1545-0047
(Form 990)		Go	vernments, ar lete if the organizatio	nd Individual	s in the Ŭni	ted States		2013
Department of the Treasury Internal Revenue Service			on about Schedule I	Attach to For	m 990.		0.	Open to Public Inspection
Name of the organizat			TION ABROAD					Employer identification number 23-3100062
Part I General I	nformation on Grants a			•				
1 Does the organiz	zation maintain records t	to substantiate the	amount of the grants	or assistance, the	grantees' eligibility	for the grants or assis	stance, and the selecti	
criteria used to a	award the grants or assis	stance?						X Yes No
	IV the organization's pro							
	nd Other Assistance to					anization answered "Y	′es" to Form 990, Part	IV, line 21, for any
1 (a) Name and ad	hat received more than S ddress of organization vernment	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	ed. (e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DICKINSON COLLEGE P.O. BOX 1773 CARLISLE, PA 1701		23-1365954	501(C)(3)	10,000.	0.			SCHOLARSHIP FUND FOR STUDENTS WHO WILL BE STUDYING ABROAD.
2 Enter total numb	per of section 501(c)(3) a	nd government or	anizations listed in th	e line 1 table			L	► 1.
	per of other organization				<u></u>	······	·····	0
LHA For Paperwork	Reduction Act Notice	, see the Instructi	ons for Form 990.					Schedule I (Form 990) (2013

Schedule I (Form 990) (2013)

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Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

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

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

PART I, LINE 2:

EXPLANATION: THE GRANT IS MADE TO DICKINSON COLLEGE AND THEN THE

DISTRIBUTION OF THE FUNDS IS LEFT AT THE DISCRETION OF THE COLLEGE.

DICKINSON GIVES THE FORUM A YEARLY UPDATE ON THE STUDENTS AND PROJECTS THAT

THE FUNDS HAVE BEEN USED TO SUPPORT.

OMB No. 1545-0047 SCHEDULE O Supplemental Information to Form 990 or 990-EZ 13 Complete to provide information for responses to specific questions on (Form 990 or 990-EZ) Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or 990-EZ. **Open to Public** Department of the Treasury Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990 Inspection Internal Revenue Service Name of the organization Employer identification number 23-3100062 THE FORUM ON EDUCATION ABROAD, INC. FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: STANDARDS OF GOOD PRACTICE ARE RECOGNIZED AS THE DEFINITIVE MEANS BY WHICH THE QUALITY OF EDUCATION ABROAD PROGRAMS MAY BE JUDGED. THE FORUM'S NEARLY 700 INSTITUTIONAL MEMBERS INCLUDE U.S. COLLEGES AND UNIVERSITIES, OVERSEAS INSTITUTIONS, CONSORTIA, AGENCIES, PROVIDER ORGANIZATIONS AND FOUNDATIONS. THE FORUM FOCUSES ON DEVELOPING AND IMPLEMENTING STANDARDS OF GOOD PRACTICE, ENCOURAGING AND SUPPORTING RESEARCH INITIATIVES, AND OFFERING EDUCATIONAL PROGRAMS AND RESOURCES TO ITS MEMBERS. ITS MISSION IS TO HELP TO IMPROVE EDUCATION ABROAD PROGRAMS TO BENEFIT THE STUDENTS THAT PARTICIPATE IN THEM.

FORM 990, PART III, LINE 2, NEW PROGRAM SERVICES: EXPLANATION: A PROFESSIONAL CERTIFICATION IN EDUCATION ABROAD PROGRAM WAS LAUNCHED IN 2014, OFFERING A WAY FOR INDIVIDUALS TO CERTIFY THEIR KNOWLEDGE AND EXPERTISE IN THE STANDARDS OF GOOD PRACTICE FOR EDUCATION

ABROAD.

FORM 990, PART VI, SECTION A, LINE 3:

EXPLANATION: THE FORUM HAS A MANAGEMENT CONTRACT WITH DICKINSON COLLEGE.

UNDER TERMS OF THE MANAGEMENT CONTRACT, THE MANAGEMENT COMPANY PROVIDES

OFFICE SPACE AND SUPPORT, PAYROLL AND BENEFITS, AND HUMAN RESOURCE

SERVICES.

THE PRESIDENT/CEO OF THE FORUM IS PAID FOR SERVICES TO THE FORUM THROUGH

THE MANAGEMENT CONTRACT. THE COMPENSATION AND BENEFITS ALLOCATED TO THE

FORUM ARE AS FOLLOWS:

Schedule O (Form 990 or 990-EZ) (2013)	Page 2
Name of the organization	Employer identification number
THE FORUM ON EDUCATION ABROAD, INC.	23-3100062

BRIAN WHALEN, PRESIDENT/CEO

COMPENSATION: \$183,025

BENEFITS: \$37,334

FORM 990, PART VI, SECTION A, LINE 6:

EXPLANATION: THERE ARE THE FOLLOWING TYPES OF MEMBERSHIPS: CHARITABLE

ORGANIZATION, INDIVIDUAL, ASSOCIATE MEMBER, INTERNATIONAL INSTITUTION,

PROVIDER, UNDERREPRESENTED, UNIVERSITY SYSTEM, AND US INSTITUTION.

FORM 990, PART VI, SECTION A, LINE 7B:

EXPLANATION: MEMBERS APPROVE CHANGES TO THE BY-LAWS.

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

EXPLANATION: COPY OF TAX RETURN IS PROVIDED FOR BOARD REVIEW PRIOR TO FILING.

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

EXPLANATION: SUBJECT TO ANNUAL REVIEW AND, IF NECESSARY, UPDATES.

FORM 990, PART VI, SECTION B, LINE 15A:

EXPLANATION: IT IS THE RESPONSIBILITY OF THE BOARD EXECUTIVE COMMITTEE TO

ANNUALLY REVIEW THE PERFORMANCE OF THE FORUM ON EDUCATION ABROAD'S (THE

FORUM) CEO AND TO RECOMMEND COMPENSATION FOR THE CEO FOR THE SUBSEQUENT

YEAR. COMPENSATION OF THE CEO, FORUM STAFF, AND ADDITIONAL SUPPORT IS

NEGOTIATED ANNUALLY WITH DICKINSON COLLEGE IN CONJUNCTION WITH THE

MANAGEMENT CONTRACT.

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Name of the organization			Employer identification number			
THE FOR	UM ON EDUCATION ABROAD,	INC.	23-3100062			

FORM 990, PART VI, SECTION C, LINE 19:

EXPLANATION: GOVERNING DOCUMENTS ARE HELD AT THE FORUM'S OFFICE, AND ARE

AVAILABLE UPON REQUEST.

FORM 990, PART XII, LINE 2C:

EXPLANATION: MANAGEMENT ULTIMATELY BEARS RESPONSIBILITY FOR THE

INFORMATION PRESENTED IN THE FINANCIAL STATEMENTS AND TAX RETURNS.