2013 TAX RETURN

CLIENT COPY

_		
C	ient:	
u	lienτ:	

17500

Prepared for:

GIRLS EDUCATION COLLABORATIVE, INC.

P.O. BOX 2191

BUFFALO, NY 14231

(716)725-8869

Prepared by:

DONALD J. LENDA, CPA

BRODY WEISS ZUCARELLI & URBANEK CPAS, PC

2495 KENSINGTON AVENUE AMHERST, NY 14226-4991

(716)839-2024

Date:

SEPTEMBER 30, 2014

Comments:

Route to:

FEDERAL FILING INSTRUCTIONS

GIRLS EDUCATION COLLABORATIVE, INC.

61-1578303

ELECTRONICALLY FILED:

FORM 990-EZ - 2013 SHORT FORM RETURN OF ORGANIZATION EXEMPT FROM INCOME TAX

THE ABOVE TAX RETURN WILL BE ELECTRONICALLY FILED WITH THE INTERNAL REVENUE SERVICE UPON RECEIPT OF A SIGNED FORM 8879-E0 - IRS E-FILE SIGNATURE AUTHORIZATION.

PAYMENT:

NO PAYMENT IS REQUIRED.

Form **8879-EO**

IRS e-file Signature Authorization for an Exempt Organization For calendar year 2013, or fiscal year beginning ______, 2013, and ending _____,

ALIO	NI.	1545	107

Department of the Treasury Internal Revenue Service	 Do not send to the IRS. Keep for your records. Information about Form 8879-EO and its instructions is at www.irs.gov/formic 	3879eo. 2013
Name of exempt organization		Employer identification number
GIRLS EDUCATION (Name and title of officer	COLLABORATIVE, INC.	61-1578303
CAROLE PETRO	BOARD CHAIR	
	rn and Return Information (Whole Dollars Only)	
Check the box for the return the check the box on line 1a, 2 eave line 1b, 2b, 3b, 4b, o	on for which you are using this Form 8879-EO and enter the applicable amount, if ta, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with r 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the not complete more than 1 line in Part I.	this form was blank, then
1 a Form 990 check here	b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1 b
2a Form 990-EZ check h	nere X b Total revenue, if any (Form 990-EZ, line 9)	2b 120,667.
3a Form 1120-POL chec	k here b Total tax (Form 1120-POL, line 22)	3b
4a Form 990-PF check h	nere	5) 4b
5a Form 8868 check her	e ▶ D b Balance Due (Form 8868, Part I, line 3c or Part II, line 8c)	5b
Partilla Declaration a	nd Signature Authorization of Officer	
electronic return and accomp further declare that the ain the IRS (a) an acknowledge efund, and (c) the date of funds withdrawal (direct de organization's federal taxe contact the U.S. Treasury I authorize the financial inst answer inquiries and resolverganization's electronic re-	I declare that I am an officer of the above organization and that I have examined banying schedules and statements and to the best of my knowledge and belief, they are mount in Part I above is the amount shown on the copy of the organization's elective, transmitter, or electronic return originator (ERO) to send the organization's retement of receipt or reason for rejection of the transmission, (b) the reason for any any refund. If applicable, I authorize the U.S. Treasury and its designated Financiabit) entry to the financial institution account indicated in the tax preparation softwists owed on this return, and the financial institution to debit the entry to this account financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment of taxes to receive cover issues related to the payment. I have selected a personal identification number sturn and, if applicable, the organization's consent to electronic funds withdrawal.	rue, correct, and complete. ronic return. I consent to allow my urn to the IRS and to receive from delay in processing the return or al Agent to initiate an electronic are for payment of the t. To revoke a payment, I must lent (settlement) date. I also onfidential information necessary to
Officer's PIN: check one b		
XI authorize <u>BRODY</u>	WEISS ZUCARELLI & URBANEK CPAS, PC to enter my PIN ERO firm name End do	17500 as my signature ar five numbers, but not enter all zeros
on the organization's tax a state agency(ies) reg the return's disclosure	year 2013 electronically filed return. If I have indicated within this return that a copy of tulating charities as part of the IRS Fed/State program, I also authorize the aforem	he return is being filed with
indicated within this ref	nization, I will enter my PIN as my signature on the organization's tax year 2013 electron ourn that a copy of the return is being filed with a state agency(ies) regulating chain y PIN on the return's disclosure consent screen.	ically filed return. If I have rities as part of the IRS Fed/State
Officer's signature	Date ▶	
Rart III Certification	and Authentication	-
RO's EFIN/PIN. Enter you	r six-digit electronic filing identification	
number (EFIN) followed by	your five-digit self-selected PIN	16375990712 do not enter all zeros
certify that the above nurabove. I confirm that I am Authorized IRS <i>e-file</i> Provi	neric entry is my PIN, which is my signature on the 2013 electronically filed return submitting this return in accordance with the requirements of Pub 4163 , Modernized ders for Business Returns.	for the organization indicated ed e-File (MeF) Information for
ERO's signature ►	Date ▶	
	ERO Must Retain This Form — See Instructions Do Not Submit This Form To the IRS Unless Requested To Do So	

BAA For Paperwork Reduction Act Notice, see instructions.

Form **8879-EO** (2013)

Form 990-E7

Short Form Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2013

OMB No. 1545-1150

ស្រែកលើក្រៅជាមេ វាកាស្រកលើក

Department of the Treasury Internal Revenue Service

► Do not enter Social Security numbers on this form as it may be made public. ► Information about Form 990-EZ and its instructions is at www.irs.gov/form990.

For the 2013 calendar year, or tax year beginning 2013, and ending Check if applicable: C D Employer identification number Address change GIRLS EDUCATION COLLABORATIVE, INC. 61-1578303 Name change Telephone number P.O. BOX 2191 Initial return BUFFALO, NY 14231 (716) 725-8869 Terminated Amended return Group Exemption Number. . . . Application pending Accrual Other (specify) if the organization is not Accounting Method: X Cash required to attach Schedule B (Form WWW.GIRLSEDCOLLABORATIVE.ORG 990, 990-EZ, or 990-PF). 4947(a)(1) or X 501(c)(3) 501(c) () (insert no.) Tax-exempt status (check only one) -X Corporation Trust Association Other Form of organization: Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ 120,667. Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I) Check if the organization used Schedule O to respond to any question in this Part L..... Contributions, gifts, grants, and similar amounts received 119,079 2 Program service revenue including government fees and contracts..... Membership dues and assessments..... 3 4 1,588. 5a Gross amount from sale of assets other than inventory..... 5a **b** Less: cost or other basis and sales expenses..... 5с Gaming and fundraising events a Gross income from gaming (attach Schedule G if greater than \$15,000) 6a b Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000) 6 b c Less; direct expenses from gaming and fundraising events Net income or (loss) from gaming and fundraising events (add lines 6a and 6 d 7 a Gross sales of inventory, less returns and allowances...... 7 a **b** Less: cost of goods sold..... c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)..... 7 c Other revenue (describe in Schedule O)..... 8 9 **Total revenue.** Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8..... 120,667. 10 10 Grants and similar amounts paid (list in Schedule O)..... 11 Benefits paid to or for members 11 12 21,703. 12 13 Professional fees and other payments to independent contractors..... 2,068. 13 14 14 Occupancy, rent, utilities, and maintenance..... Printing, publications, postage, and shipping 15 143. 15 Other expenses (describe in Schedule O). SEE SCHEDULE O 16 34,643. 16 Total expenses. Add lines 10 through 16..... 17 58,557. 17 Excess or (deficit) for the year (Subtract line 17 from line 9)..... 18 18 62,110. Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year 19 figure reported on prior year's return) 19 104,505. 20 Other changes in net assets or fund balances (explain in Schedule O)..... 20

BAA For Paperwork Reduction Act Notice, see the separate instructions.

Form 990-EZ (2013)

166,615.

21

Net assets or fund balances at end of year. Combine lines 18 through 20.....

TEEA0812L 11/27/13

Form 990-EZ (2013)

b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes.'

d If 'Yes' to line 44c, has the organization filed a Form 720 to report these payments?

44 d

45 a

45 b

Form **990-EZ** (2013)

	" (KO'O) GINDO DECONTION COL	HIDOIGHT THE TI	<u> </u>			
46 Did th	ne organization engage, directly or indire	ctly, in political campai	gn activities on b	ehalf of or in opposition	to A	Yes No
	dates for public office? If 'Yes,' complete	,	- 		46	X
RäitiVI 3	Section 501(c)(3) organizations All section 501(c)(3) organization for lines 50 and 51.	s only ons must answer qu	uestions 47-49	b and 52, and com	plete the table	: S
	Check if the organization used Schedul	e O to respond to any	question in this P	art VI		
47 Did th	e organization engage in lobbying activities	or have a section 501(h)	election in effect of	during the tax year? If 'Ye	s,'	Yes No
	lete Schedule C, Part II					X
	organization a school as described in se				,	X
	ne organization make any transfers to an s,' was the related organization a sectior					
	lete this table for the organization a section					
	byees) who each received more than \$100,00					
	(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compe (Forms W-2/1099-N	nsation IISC) (d) Health benefit contributions to empl benefit plans, and det compensation	loyee (e) Estimated	d amount of pensation
NONE						
	number of other employees paid over \$1					
51 Comp	lete this table for the organization's five high ensation from the organization. If there i	nest compensated indepensions, none, enter 'None,'	endent contractors	who each received more	:han \$100,000 of	
	(a) Name and business address of each independent of		(b) Type of service	(c) Comp	ensation
NONE						···-
NONE _						
		. <u> </u>				
52 Did th	number of other independent contractors ne organization complete Schedule A? Natable trusts must attach a completed Sch	ote. All section 501(c)(3	3) organizations a	and 4947(a)(1) nonexem	► npt ► X _{Yes}	
	s of perjury, I declare that I have examined this return, and complete. Declaration of preparer (other than office					
true, correct, a	nd complete. Declaration of preparer (other than office	r) is based on all information of	f which preparer has a	ny knowledge.		
C:	Signature of officer			Date		
Sign Here	CAROLE PETRO			BOARD CHAIR	₹	
	Type or print name and title		<u></u>	20.112		
	Print/Type preparer's name	Preparer's signature	Date	Check	PTIN if	
Paid	DONALD J. LENDA, CPA	<u>, , ,</u>		self-employ		2
Preparer	Firm's name ► BRODY WEISS ZUC.		EK CPAS, PC		b 46 4655	
Use Only	Firm's address > 2495 KENSINGTON			Firm's EIN Phone no.	16-1233 (716) 839-2	
Marrie 12	AMHERST, NY 142 S discuss this return with the preparer sh		etions	rnone no.	► X Yes	
WISH TOP IN	a discuss this return with the brenafer st	IUMII ADOVC! DEE IIISIII	JUDITE		IALIES	, IIIU

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

2013 October Employer identification number

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

GIR	LS	EDUCATION COL	LLABORATIVE, I	INC.			_		61-15	578303	}		
Rain		Reason for Publ	lic Charity Status	(All organizations	must c	omple	te this	part.)	See in	nstructi	ons.		
				e it is: (For lines 1 thro									
1	Ň	A church, convention	of churches or asso	ciation of churches des	cribed in	section	1 70(b)	(1)(A)(i)					
2	Г	A school described in	n section 170(b)(1)(A)	(ii). (Attach Schedule E	Ξ.)								
3	\vdash			ce organization describe	-	tion 17	осьхі ха	A)(iii).					
4	\vdash			in conjunction with a h					C(b)(1)(A	Xiii). En	ter the hos	pital's	
•	Ш	name, city, and state	•										
5		An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)											
6	П			overnmental unit descri	ibed in s	ection 1	70(b)(1)	(A)(v).					
7		An organization that n		stantial part of its suppor					the ger	eral publ	ic described	l	
8		A community trust de	escribed in section 17	70(b)(1)(A)(vi). (Comple	te Part I	l.)							
9	X	from activities related investment income a	to its exempt functions	nore than 33-1/3% of its s — subject to certain exc s taxable income (less implete Part III.)	entions a	and (2) r	io more i	than 33-	1/3% Of I	is sunnoi	n trom aros:	S	fter
10		An organization orga	nized and operated e	exclusively to test for pu	ublic safe	ety. See	section	1 509(a)	(4).				
11		An organization organi more publicly suppor describes the type of	ized and operated excl rted organizations des f supporting organiza	usively for the benefit of, scribed in section 509(a tion and complete lines	to perfor a)(1) or s i 11e thro	m the fu ection s ough 11	nctions (509(a) (2) h.). See s	ection 5	509(a)(3)	. Check the	box t	
		a ∏Type I b	Type II c	Type III - Function	nally inte	grated	•	d [] 1	Гуре III -	– Non-fu	ınctionally	integra	ated
е		By checking this box other than foundation section 509(a)(2).	, I certify that the org managers and other th	anization is not control an one or more publicly s	led direct supported	tly or in Lorganiz	directly ations de	by one escribed	or more in section	disquali n 509(a)	fied persor (1) or	IS	
f		If the organization rece	eived a written determi	nation from the IRS that	is a Type	I, Type	II or Typ	e III sup	porting o	rganizati	on,		. 🗌
g		Since August 17, 200	06, has the organizati	on accepted any gift o	r contrib	ution fr	om any	of the fo	ollowing	persons	?		
_												Yes	No
		below, the gove	erning body of the su	ontrols, either alone or pported organization?.	· · · · · · · ·			• • • • • • •	• • • • • • •		11 g (i)		
		(ii) A family memb	er of a person descri	bed in (i) above?							11 g (ii)		
		(iii) A 35% controlle	ed entity of a person	described in (i) or (ii) a	bove?		<i>.</i>				11 g (iii)		
h		Provide the following	information about th	e supported organization	on(s).								
		(I) Name of supported organization	(II) EIN	(III) Type of organization (described on lines 1-9 above or IRC section (see instructions))	organiz) listed in verning	(v) Did yo the organi column (supp	ization in I) of your	organiz colun	s the ation in nn (i) ed in the 5.?	(vli) Amount sup		etary
					Yes	No	Yes	No	Yes	No			
(A)													
(B)													
<u>,</u>					1		<u> </u>	 					
(C)													
(D)													
(E)													
<u> </u>			Mark Strategy Services	Control of the Contro					- 1202.N				
Total				Leonard Street		en e	usa Ki		a James or warmen				

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

Schedule A (Form 990 or 990-EZ) 2013

Partill Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support						
Cale begi	endar year (or fiscal year inning 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 organization's benefit and either paid to or expended on its behalf				:		
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
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				and the second s		
Sec	tion B. Total Support						
Cale begi	ndar year (or fiscal year nning 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.)		****				
	Total support. Add lines 7 through 10		e de la composition della comp	en e		i ja	
	Gross receipts from related activ						
	First five years. If the Form 990 is organization, check this box and	stop here					▶□
<u>Sec</u>	tion C. Computation of Pul Public support percentage for 20	olic Support P	ercentage	. 11 (0)	·····	1 4 4 1	
	Public support percentage for 20 Public support percentage from 2						<u>%</u> %
	33-1/3% support test — 2013. If and stop here. The organization	the organization of	did not check the	box on line 13, ar	nd the line 14 is 3	3-1/3% or more.	check this box
Ь	33-1/3% support test — 2012. If t and stop here. The organization	he organization d qualifies as a pul	id not check a bo blicly supported o	x on line 13 or 16a	a, and line 15 is 3	33-1/3% or more,	check this box
17a	10%-facts-and-circumstances te or more, and if the organization the organization meets the 'facts	meets the 'facts-a	ind-circumstances	i test, check this l	box and stop her	e. Explain in Part	IV how
	10%-facts-and-circumstances te or more, and if the organization organization meets the 'facts-and	meets the 'facts-a d-circumstances' t	ind-circumstances est. The organiza	s' test, check this i ition qualifies as a	box and stop her publicly supporte	e. Explain in Part ed organization	IV how the ▶ □
18	Private foundation. If the organize	zation did not che	ck a box on line 1	13, 16a, 16b, 17a,	or 17b, check thi	s box and see ins	structions ►

61-1578303

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.)

<u> 3ec</u>	tion A. Public Support						
	dar year (or fiscal yr 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.')				115,616.	119,079.	234,695.
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose.				1137010.	123,013.	0.
3	Gross receipts from activities that are not an unrelated trade or business under section 513.			, .			0.
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
	Total. Add lines 1 through 5	0.	0.	0.	115,616.	119,079.	234,695.
7 a	Amounts included on lines 1, 2, and 3 received from disqualified persons	0.	0.	0.	0.	0.	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 amount on line 13 for the year.	0	0	0	0.	0.	0
_	for the year	0.	0.	0.	0.	0.	0.
	Add lines 7a and 7b	0.	0.	0.	U.	U. J	<u> </u>
	Public support (Subtract line 7c from line 6.)		riid (feg. 39 () Linda Lina Lina Lina Lina				234,695.
	tion B. Total Support	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	dar year (or fiscal yr beginning in) Amounts from line 6	(a) 2009 0.		0.			234,695.
9	Amounts from line b				115,616.	119,079.	234.595.
-			0.				
10 a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources		U.	0.			0.
10 a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources		0.	0.	0.	0.	0.
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	0.				0.	0.
10 a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources				706.	1,588.	0. 0. 0.
10 a b c 11	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources				0.		0. 0. 0.
10 a b c 11 12	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets. (Explain in Part IV.) SEE PART IV.	0.	0.	0. d, third, fourth, or	706. 116,322.	1,588. 120,667. a section 501(c)(3	0. 0. 0. 0. 2,294. 236,989.
10 a b c c 11 12 13 14	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) SEE FART IV. Total Support. (Add Ins 9,10c, 11 and 12.) First five years. If the Form 990 organization, check this box and	0. is for the organiza	0. ation's first, secon	0. d, third, fourth, or	706. 116,322.	1,588. 120,667. a section 501(c)(3	0. 0. 0. 0. 2,294. 236,989.
10 a b c c 11 12 13 14 Sec:	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets. (Explain in Variety). SEE PART TV Total Support. (Add lins 9,10c, 11 and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pulices.	0. is for the organiza stop here	0. ation's first, secon	0. d, third, fourth, or	706. 116,322. r fifth tax year as	1,588. 120,667. a section 501(c)(3	0. 0. 0. 0. 2,294. 236,989.
10 a b c 11 12 13 14 Secci 15	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in V.) Total Support. (Add Ins 9,10c, 11 and 12.) First five years. If the Form 990 organization, check this box and tion C. Computation of Pul Public support percentage for 20.	0. is for the organiza stop hereblic Support P	0. ation's first, secon ercentage	0. d, third, fourth, or	706. 116,322.	1,588. 120,667. a section 501(c)(3	0. 0. 0. 0. 2,294. 236,989.
10 a b c 11 12 13 14 Sec: 15 16	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in IV). Total Support. (Add lins 9,10c, 11 and 12). First five years. If the Form 990 organization, check this box and tion C. Computation of Pulpublic support percentage from 200 Public support percentage from 200 progenication of pulpublic support percentage from 200 public support percentage from 200 progenication of pulpublic support percentage from 200 public support percentage from 200 progenication of pulpublic pulp	0. is for the organiza stop here	0. ation's first, secon ercentage n (f) divided by lin Part III, line 15.	0. d, third, fourth, or e 13, column (f)).	706. 116,322.	1,588. 120,667. a section 501(c)(3	0. 0. 0. 0. 2,294. 236,989.
10 a b c 11 12 13 14 Sec: 15 16 Sec:	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain In V.) Total Support. (Add lins 9,10c, 11 and 12.) First five years. If the Form 990 organization, check this box and tion C. Computation of Pul Public support percentage from the support support percentage from the support percenta	0. is for the organiza stop here blic Support P 113 (line 8, column 2012 Schedule A, estment Incon	0. ation's first, secon ercentage (f) divided by lin Part III, line 15 ne Percentage	0. d, third, fourth, or e 13, column (f)).	706. 116,322. fifth tax year as	1,588. 120,667. a section 501(c)(3	0. 0. 0. 0. 2,294. 236,989. (X)
10 a b c 11 12 13 14 Sec: 15 16 Sec: 17	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Variety). Total Support. (Add lins 9,10c, 11 and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pul Public support percentage from the support percentage for percentage from the support percentage for	0. is for the organiza stop here	0. ation's first, secon ercentage n (f) divided by lin Part III, line 15. ne Percentage column (f) divided	0. d, third, fourth, or e 13, column (f)).	706. 116, 322. fifth tax year as	1,588. 120,667. a section 501(c)(3	0. 0. 0. 0. 2,294. 236,989. (X) %
10 a b c 11 12 13 14 Sec: 15 16 Sec: 17 18	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Variety). Total Support. (Add lins 9,10c, 11 and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pul Public support percentage from a computation of Investment income percentage for Investment Income Investment Investment Investment In	0. is for the organiza stop here	0. ation's first, secon ercentage n (f) divided by lin Part III, line 15. ne Percentage column (f) divided e A, Part III, line	0. d, third, fourth, or e 13, column (f)). d by line 13, column	706. 116, 322. fifth tax year as	1,588. 120,667. a section 501(c)(3 	0. 0. 0. 0. 2,294. 236,989. X %
10 a b c 11 12 13 14 Sec: 17 18 19 a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Vertica) and 12). First five years. If the Form 990 organization, check this box and tion C. Computation of Pulpublic support percentage from the	0. is for the organizastop here blic Support P 13 (line 8, column 2012 Schedule A, estment Incorr or 2013 (line 10c, rom 2012 Schedul it the organization this box and stop	0. ation's first, secon ercentage n (f) divided by lin Part III, line 15. ne Percentage column (f) divided e A, Part III, line did not check the bere. The organ	0. d, third, fourth, or e 13, column (f)). d by line 13, colur 17. box on line 14, a ization qualifies a	706. 116, 322. r fifth tax year as	1,588. 120,667. a section 501(c)(3	0. 0. 0. 0. 2,294. 236,989. X 8 8 8 and line 17
10 a b c 11 12 13 14 Sec: 17 18 19 a b	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain Inv.) Total Support. (Add lins 9,10c, 11 and 12.) First five years. If the Form 990 organization, check this box and tion C. Computation of Pul Public support percentage from the support percentage from t	o. is for the organization the organization of the organization the organization of th	0. ation's first, secon ercentage n (f) divided by lin Part III, line 15. ne Percentage column (f) divided le A, Part III, line did not check the bere. The organ did not check a be and stop here. The	0. d, third, fourth, or e 13, column (f)). d by line 13, colur 17 box on line 14, a ization qualifies a ox on line 14 or line e organization qua	706. 116, 322. If fifth tax year as mn (f))	1,588. 120,667. a section 501(c)(3	0. 0. 0. 0. 2,294. 236,989. X X 8 8 8 and line 17

Schedule A	(Form 990 or 990-E	Z) 2013 G	IRLS	EDUCATION	COLLABORA'	TIVE,	INC.	61-1578303	Page 4
Peter V	Supplemental or 17b; and Pa (See instruction	Information art III, line 12	n. Prov 2. Also	vide the exp complete t	lanations requ nis part for ar	uired by ny addi	y Part II tional in	, line 10; Part II, line 17a formation.	
								~	
									-
					. _				<u></u>
				·					
				· 					
									
			- -						
		- -	- -						
			- 						
		-							
									

2013

SCHEDULE A, PART IV - SUPPLEMENTAL INFORMATION PAGE 5

GIRLS	EDUC	TION (COLLA	ABORATIVE,	INC.
--------------	-------------	--------	-------	------------	------

61-1578303

PART III. LINE 12 - OTHER INCOM

NATURE AND SOURCE		 2013	_	2012	2011	2010	2009
INVESTMENT INCOME MISCELLANEOUS		\$ 1,588.	\$	106. 600.			
•	TOTAL	\$ 1,588.	\$	706.	\$ 0.	\$ 0.	\$ 0.

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2013

Name of the organization		Employer identification number
GIRLS EDUCATION COLLABORATIVE	, INC.	61-1578303
Organization type (check one):		
Filers of:	Section:	
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a	private foundation
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a priva	ate foundation
	501(c)(3) taxable private foundation	
Check if your organization is covered by the Ge	neral Rule or a Special Rule	
Note. Only a section 501(c)(7), (8), or (10) orga	nization can check boxes for both the General Rule and a S	Special Rule. See instructions.
General Rule X For an organization filing Form 990, 990-EZ, or contributor. (Complete Parts I and II.)	990-PF that received, during the year, \$5,000 or more (in mone	y or property) from any one
Special Rules		
For a section 501(c)(3) organization filing For 509(a)(1) and 170(b)(1)(A)(vi) and received (2) 2% of the amount on (i) Form 990, Part	orm 990 or 990-EZ that met the 33-1/3% support test of the from any one contributor, during the year, a contribution of VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I a	regulations under sections the greater of (1) \$5,000 or nd II.
For a section 501(c)(7), (8), or (10) organizatio total contributions of more than \$1,000 for the prevention of cruelty to children or anim	n filing Form 990 or 990-EZ that received from any one contribut ise <i>exclusively</i> for religious, charitable, scientific, literary, or als. Complete Parts I, II, and III.	or, during the year, educational purposes, or
If this box is checked, enter here the total contr purpose. Do not complete any of the parts unle	n filing Form 990 or 990-EZ that received from any one contribut haritable, etc, purposes, but these contributions did not total to n ibutions that were received during the year for an exclusively reless the General Rule applies to this organization because it receiv,000 or more during the year	igious, charitable, etc, ved nonexclusively
Caution: An organization that is not covered by 990-PF) but it must answer 'No' on Part IV, line Part I, line 2, to certify that it does not meet the	the General Rule and/or the Special Rules does not file Sci 2, of its Form 990; or check the box on line H of its Form 9 filing requirements of Schedule B (Form 990, 990-EZ, or 990)	nedule B (Form 990, 990-EZ, or 990-EZ or on its Form 990-PF, 90-PF).
BAA For Paperwork Reduction Act Notice, see or 990-PF.	the Instructions for Form 990, 990EZ, Schedule B (F	Form 990, 990-EZ, or 990-PF) (2013

1 to

1 of Part II

Name of organization

GIRLS EDUCATION COLLABORATIVE, INC.

Employer identification number

61-1578303

'artill Noncash Property (see instructions)	. Use duplicate copies of Part II if additional space is needed.
---	--

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	799 SHARES OF NEW YORK TIMES CO CLASS A		
		\$10,007.	7/11/13
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 - \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		(see instructions)	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		Ÿ	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$ 	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
BAA	Scher	l dule B (Form 990, 990-EZ, d	or 990-PF) (2013)

1 to

Schedule **B** (Form 990, 990-EZ, or 990-PF) (2013)

of Part III

Name of organization

Employer identification number

GTRLS I	nization EDUCATION COLLABORATIVE, INC.			61-1578303	
	Exclusively religious, charitable, et		ns to section		
	organizations that total more than	\$1,000 for the year. Comple	te columns (a)	through (e) and the following line entry.	
	For organizations completing Part III, enter tota contributions of \$1,000 or less for the year.	I of exclusively religious, charitable	le, etc.,	s.) > \$ N/A	
	Use duplicate copies of Part III if additional	space is needed.	ee iristituctions	YN	
(a)	(b)			(d)	
(a) No. from	Purpose of gift	(c) Use of gift		(d) Description of how gift is held	
Part I	37.73				
	N/A		- 		
			+		
		(e) Transfer of gift	<u> </u>		
	-	Transfer of gift	Doloi	tionship of transferor to transferee	
	Transferee's name, addres	5, and ZIP + 4		Housellh of datisteror to datisteree	
	 				
	 				
(a) No. from	(b)	(c)		(d) Description of how gift is held	
No. from Part I	Purpose of gift	Use of gift		Description of how gift is held	
					
			†		
			- †		
	(e) Transfer of gift				
	Transferee's name, addres		Relationship of transferor to transferee		
	,				
					
(a) No. from	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held	
Part I	r arpose or girt	330 01 971			
			+		
		(-)			
		(e) Transfer of gift	1		
	Transferee's name, addres	s, and ZIP + 4	Relationship of transferor to transferee		
			_ 		
	45	(a)	·	(4)	
(a) No. from	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held	
Part I					
	 				
			- +		
		(e)			
		(e) Transfer of gift			
	Transferee's name, addres	s, and ZIP + 4	Relat	tionship of transferor to transferee	
					
	L		L		

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

(क) स्वतातिक समिति । विकास स्वतिकार

Employer identification number

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

GIRLS EDUCATION COLLABORATIVE, INC.	61-1578303
FORM 990-EZ, PART III - ORGANIZATION'S PRIMARY EXEMPT PURPOSE	
TO IMPROVE OPPORTUNITIES FOR GIRLS; TO FORGE PARTNERSHIPS THAT	SUPPORT
EDUCATION-CENTERED, COMMUNITY-DRIVEN INITIATIVES IN DEVELOPING	COUNTRIES TO
IMPROVE OPPORTUNITIES FOR GIRLS TO REALIZE THEIR FULLEST POTENT	TIAL AND CREATE
CHANGE IN THEIR COMMUNITIES.	
FORM 990-EZ, PART V - REGARDING TRANSFERS ASSOCIATED WITH PERSONAL	
(A) DID THE ORGANIZATION, DURING THE YEAR, RECEIVE ANY FUNDS,	DIRECTLY OR
INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL BENEFIT CONTRACT?	NO
(B) DID THE ORGANIZATION, DURING THE YEAR, PAY PREMIUMS, DIREC	TLY OR
INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT?	NO
	·
	·

2013	SCHEDULE O - SUPPLEMENTAL INFORMATION		PAGE 2
	GIRLS EDUCATION COLLABORATIVE, INC.		61-1578303
FORM 990-I OTHER EXF	EZ, PART I, LINE 16 PENSES		
DEPRECIAT FUNDRAISI INSURANCE OFFICE EX OTHER PRO PAYROLL P SUPPLIES. TELEPHONE TRAVEL	G/LIBRARY MASTER PLAN ION. NG EXPENSES. PENSES GRAM EXPENSES. ROCESSING.	\$	120. 9,993. 1,212. 4,311. 2,359. 56. 1,461. 257. 342. 1,122. 9,185.
MERSILE D	EVELOPMENT TOTAL	\$	4,225. 34,643.
FORM 990-F OTHER ASS	EZ, PART II, LINE 24 SETS		
FURNITURE	AND FIXTURES	- - . \$	ENDING 2,924. 2,924.

NEW YORK FILING INSTRUCTIONS

GIRLS EDUCATION COLLABORATIVE, INC.

61-1578303

FORM TO FILE:

FORM CHAR500 - ANNUAL FINANCIAL REPORT FOR CHARITABLE ORGANIZATIONS

SIGNATURE:

SIGN AND DATE FORM CHAR500, PAGE 1. TWO DISTINCT OFFICIALS OF THE ORGANIZATION MUST SIGN.

PAYMENT:

THERE IS A BALANCE DUE OF \$75 WHICH IS PAYABLE BY AUGUST 15, 2014. ATTACH A CHECK OR MONEY ORDER FOR THE FULL AMOUNT PAYABLE TO "DEPARTMENT OF LAW", AND WRITE THE NEW YORK STATE REGISTRATION NUMBER, THE TAX PERIOD TO WHICH IT APPLIES AND "FORM CHAR500" ON THE PAYMENT.

WHEN TO FILE:

ON OR BEFORE AUGUST 15, 2014.

WHERE TO FILE:

NYS OFFICE OF THE ATTORNEY GENERAL CHARITIES BUREAU REGISTRATION SECTION 120 BROADWAY NEW YORK, NY 10271

CHAR500

NYS Annual Filing for Charitable Organizations www.CharitiesNYS.com

Send with fee and attachments to: NYS Office of the Attorney General Charities Bureau Registration Section 120 Broadway New York, NY 10271 2013

Open to Public Inspection

1.	Genera	ıl Info	rmation
----	--------	---------	---------

1. General Information	1				
For Fiscal Year Beginning (r	mm/dd/yyyy)	01/01 / 2013 and Er	nding (mm/dd/yyyy)		
Check if Applicable: Address Change Name Change	Name of Organizat	ion: JCATION COLLABO	ORATIVE, INC.	'	yer Identification Number (EIN): 1578303
Initial Filing Final Filing	Mailing Address: P.O. BOX City/State/Zip:	2191		,	gistration Number:
Amended Filing Reg ID Pending	BUFFALO, Website:	NY 14231 SEDCOLLABORATIV	VE. ORG	'	6)725-8869
Check your organization's registration category:	··	nly X DUAL (7A & EP	_	Find your registration ca Charities Registration at	ategory in the twww.CharitiesNYS.com
2. Certification	-				
See instructions for certifica	tion requirements. Imp	proper certification is a	violation of law that	may be subject to penal	ties.
We certify under penaltie they are true,	s of perjury that we re correct and complete	viewed this report, incl in accordance with the	uding all attachment laws of the State of	s, and to the best of our New York applicable to	knowledge and belief, this report.
President or Authorized Officer:	 	CAROLE		BOARD CHAIR	
Tresident of Addionized Officer.	Signature	Printed Name	•	Title	Date
Chief Financial Officer or Treasu	urer: Signature	LOIS A Printed Name		TREASURER Title	Date
3. Annual Reporting E	xemption				
Check the exemption(s) that a both categories (DUAL filers schedules, or additional atta you must file applicable schedules). 3a. 7A filing exemptions \$25,000 and the organiza the fiscal year. Or the o) that apply to your re ichments are required, edules and attachmen s: Total contributions fi tion did not engage a pi	gistration, complete on If you cannot claim an ts and pay applicable for rom NY State including rofessional fund raiser (P	ly parts 1, 2, and 3, and some an exemption or are an ees. residents, foundation (FR) or fund raising co	and submit the certified of DUAL filer that claims of ns, government agencie	char500. No tee, only one exemption, s, etc did not exceed
3b. EPTL filing exemption during the fiscal year.	: Gross receipts did not	exceed \$25,000 and the	market value of asset	s did not exceed \$25,000	at any time
4. Schedules and Atta	chments				
See the following page for a checklist of schedules and attachments to complete your filing.		o-venturer for fund raisi	ng activity in NY Sta	raiser, fund raising courte? If yes, complete Sch	edule 4a.
5. Fee					
See the checklist on the next page to calculate your fee(s). Indicate fee(s) you are submitting here:	7A filing fee: \$25.	EPTL filling fee:	Total fee: 75.	pay	neck or money order able to: nent of Law'

CHAR500 Annual Filing for Charitable Organizations (Updated June 2014)

CHAR500

Annual Filing Checklist

Simply submit the certified CHAR500 with no fee, schedule, or additional attachments IF:

- Your organization is registered as 7A only and you marked the 7A filing exemption in Part 3.
- Your organization is registered as EPTL only and you marked the EPTL filing exemption in Part 3.
- Your organization is registered as DUAL and you marked both the 7A and EPTL filing exemption in Part 3.

Checklist of Schedules and Attachments

Check the schedules you must submit with your CHAR500 as described in Part 4:	
If you answered 'yes' in Part 4a, submit Schedule 4a: Professional Fund Raisers Co-Venturers (CCV)	(PFR), Fund Raising Counsel (FRC), Commercial
If you answered 'yes' in Part 4b, submit Schedule 4b: Government Grants	
Check the financial attachments you must submit with CHAR500:	
X IRS Form 990, 990-EZ, or 990-PF, and 990-T if applicable	
X All additional IRS Form 990 Schedules including Schedule B (Schedule of Contri	ibutors).
RS Form 990-T if applicable	
If you are a 7A only or DUAL filer, submit the applicable independent Certified Public	Accountant's Review or Audit Report:
Review Report if you received total revenue and support greater than \$250,000 a	and up to \$500,000.
Audit Report if you received total revenue and support greater than \$5000,000	
No Review Report or Audit Report is required because total revenue and support	t is less than \$250,000
Note: The Audit and Review requirements are set to change in 2017 and 2021 in according to the following the following set to change in 2017 and 2021 in according to the following set in the following set in according to the following set in the following set in according to the following set in the following set in according to the following set in according to the following set in the following set in according to the following set in accordi	ordance with the Non Profit Revitalization Act of 2013.
Calculate Your Fee	
For 7A and DUAL filers, calculate the 7A fee:	is my organization a 7A, EPTL or DUAL filer? - 7A filers are registered to solicit contributions in New York
\$0, if you marked the 7A exemption in Part 3a	under Article 7-A of the Executive Law ('7A') - EPTL filers are registered under the Estates, Powers & Trusts
\$25, if you did not mark the 7A exemption in Part 3a	Law ('EPTL') because they hold assets and/or conduct activities for charitable purposes in NY. - DUAL filers are registered under both 7A and EPTL.
For EPTL and DUAL filers, calculate the EPTL fee:	Check your registration category and learn more about NY
\$0, if you marked the EPTL exemption in Part 3b	law at www.CharitiesNYS.com
\$25, if the NET WORTH is less than \$50,000	Where do I find my organization's NET WORTH? NET WORTH for fee purposes is calculated on: - IRS Form 990 Part I, line 22
X \$50, if the NET WORTH is \$50,000 or more but less than \$250,000	 IRS Form 990 EZ Part I, line 21 IRS Form 990 PF, calculate the difference between
\$100, if the NET WORTH is \$250,000 or more but less than \$1,000,000	Total Assets at Fair Market Value (Part II, line 16(c)) and Total Liabilities (Part II, line 23(b)).
$\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ $	
\$750, if the NET WORTH is \$10,000,000 or more but less than \$50,000,000	0
\$1500, if the NET WORTH is \$50,000,000 or more	

Send Your Filing

Send your CHAR500, all schedules and attachments, and total fee to:

NYS Office of the Attorney General Charities Bureau Registration Section 120 Broadway New York, NY 10271

CHAR500 Annual Filing for Charitable Organizations (Updated June 2014)

Form **990-EZ**

Short Form Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2013

OMB No. 1545-1150

्राताना स्थापित । विकास समिता

Form 990-EZ (2013)

Department of the Treasury Internal Revenue Service

► Do not enter Social Security numbers on this form as it may be made public. ► Information about Form 990-EZ and its instructions is at www.irs.gov/form990.

Α	For 1	the 2013 calendar year, or tax year beginning , 2013, and ending	,	
뭐	Check	x if applicable: C D En	nployer identificati	ion number
┝	{		1-1578303	3
\vdash	1	- Villarigo	elephone number	
\vdash	Termi	ו וועד אוויסווסו	(716) 725-8	3869
-				
F	(i j	roup Exemptio umber	
G		ounting Method: Cash	if the organiz	zation is not
l			attach Schedu	
J			Z, or 990-PF).	
K	Form	of organization: X Corporation Trust Association Other		
L	Add asse	lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if tota ts (Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ	al . ►\$	120,667.
R	Iay la	Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instruct	ions for Par	t I)
		Check if the organization used Schedule O to respond to any question in this Part L		X
	1	Contributions, gifts, grants, and similar amounts received	1	119,079.
	2	Program service revenue including government fees and contracts	2	
	3	Membership dues and assessments	3	
	4	Investment income	4	1,588.
	5 a	Gross amount from sale of assets other than inventory		
	b	Less: cost or other basis and sales expenses		
		Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5 c	
	6	Gaming and fundraising events		
R	a	Gross income from gaming (attach Schedule G if greater than \$15,000) 6a		
Ϋ́Ε	b	Gross income from fundraising events (not including \$ of contributions		
REVENUE		from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)		
	c	Less: direct expenses from gaming and fundraising events		
	d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6 d	
	7a	Gross sales of inventory, less returns and allowances	V-50 - 33	
		Less: cost of goods sold		
	c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a).	7 c	
	8	Other revenue (describe in Schedule O)	8	
	9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	120,667.
	10	Grants and similar amounts paid (list in Schedule O)	10	
	11	Benefits paid to or for members	11	
Ē	12	Salaries, other compensation, and employee benefits	12	21,703.
EXPENSES	13	Professional fees and other payments to independent contractors	13	2,068.
Ň	14	Occupancy, rent, utilities, and maintenance	14	_,
Ē	15	Printing, publications, postage, and shipping	15	143.
5	16	Printing, publications, postage, and shipping. Other expenses (describe in Schedule O). SEE SCHEDULE O	16	34,643.
	17	Total expenses. Add lines 10 through 16	17	58,557.
	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	62,110.
A S S E T S	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year	<u> </u>	
Ë	' "	figure reported on prior year's return)	19	104,505.
' T S	20	Other changes in net assets or fund balances (explain in Schedule O)	20	
-	21	Net assets or fund balances at end of year. Combine lines 18 through 20▶	21	166,615.

BAA For Paperwork Reduction Act Notice, see the separate instructions.

Pa	Balance Sheets (see the inst Check if the organization used Sche	ructions for Part II)	estion in this Part II		<u>X</u>
	Oncer if the organization used bene	duic o to respond to driy qu) Beginning of year	
22	Cash, savings, and investments			101,917.	
23	Land and buildings Other assets (describe in Schedule O)	······································			23
24				2,588.	2,924.
25	Total assets			104,5 <u>05</u> .	25 166,615.
26	Total liabilities (describe in Schedule O)				26 0.
27	Net assets or fund balances (line 27 of c			104,505.	27 166,615.
lea.	Statement of Program Service Ac Check if the organization used Sci	complishments (see the inst	tructions for Part III)	X (F	Expenses Required for section 501
What	is the organization's primary exempt purpose? SEE	CCUEDITE O	question in this rait inc)(3) and 501(c)(4)
Desc	ribe the organization's program service a	ccomplishments for each of	its three largest program	n services, as	ganizations and section 947(a)(1) trusts; optional
mea	ribe the organization's program service a sured by expenses. In a clear and concise fited, and other relevant information for e	e manner, describe the servi-	ces provided, the numb	er of persons fo	r others.)
28	EDUCATED PUBLIC ON NEEDS				
	BUILDING A LIBRARY IN THE				
	EDUCATION OF CIDIC IN MOD	TUEDN TANTANTA		1	
	(Grants \$) If th	is amount includes foreign g	rants, check here		8a 58,557.
29					
					
	(Grants \$) If the	is amount includes foreign g	rants, check here		9 a
30					
	(Grants \$) If thi Other program services (describe in Sch	is amount includes foreign g	rants, check here		0 a
31	Other program services (describe in Sch	edule O)			
	(Grants \$) If thi	is amount includes foreign g	rants, check here	▶ ∏∣з	1 a
32	Total program service expenses (add lin	nes 28a through 31a)		▶ 3	2 58,557.
	List of Officers, Directors,	Frustees, and Kev Emp	lovees (list each one even	if not compensated - see	
į ir	Check if the organization used Scl				
		(b) Average hours per week devoted to	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employe	e (e) Estimated amount of
	(a) Name and Title	week devoted to position	(Forms W-2/1099-MISC) (If not paid, enter -0-)	politoni piano, ana acioni	other compensation
	OLD DEMDO		, , , , , , , , , , , , , , , , , , , ,	compensation	
	ROLE_PETRO	~			
	ARD CHAIR	3	0.	(0.
	IN CROSBY	2			
	E CHAIR		0.	\ <u>\</u>	0.
	ZABETH_BAUMAN	4		l ,	
	RECTOR		0.	<u>'</u>	0.
	ISON SAGRAVES	3	0.		o. <u>o.</u>
	CASURER DMAS HONAN	3	0.		
	RETARY	3	0.		0.
	IN POWERS		0.		
	RECTOR	1	0.	,	0.
	INIFER MEKA		<u> </u>).
	RECTOR	1	0.		0.
	BERT BERGER	<u>+</u>	0,		<u>, </u>
	RECTOR	1	0.		o. <u>o.</u>
	JL LAROU		<u> </u>	,	,,
	RECTOR	1	0.	1	0.
ודת	CECTOR .		· · · · · · · · · · · · · · · · · · ·	`	,,
		- · ·			1
		· · · · · · · · · · · · · · · · · · ·			1
			_		
		·			<u> </u>
BAA		TEEA0812L 1	1/27/13		Form 990-EZ (2013)

Pa	Other Information (Note the Schedule A and personal benefit contract statement re the instructions for Part V) Check if the organization used Schedule O to respond to an	quirements in SEE SCHED question in this Part V	ULE	0 <u></u>	. X
33	Did the organization engage in any significant activity not previously reported to the IRS?	- · · ·		Yes	No
	Did the organization engage in any significant activity not previously reported to the IRS? If 'Yes,' provide a detailed description of each activity in Schedule O		33		Х
34	Were any significant changes made to the organizing or governing documents? If 'Yes,' attach a conformed copy of the				
	a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)		34		Х
35 a	Did the organization have unrelated business gross income of \$1,000 or more during the year from		25-		17
_	(such as those reported on lines 2, 6a, and 7a, among others)?		35 a		X
	olf 'Yes,' to line 35a, has the organization filed a Form 990-T for the year? If 'No,' provide an		35 b		
•	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section reporting, and proxy tax requirements during the year? If 'Yes,' complete Schedule C, Part I		35 c		Х
	Did the organization undergo a liquidation, dissolution, termination, or significant			- 1	
	disposition of net assets during the year? If 'Yes,' complete applicable parts of Schedule N.		36		X
	Enter amount of political expenditures, direct or indirect, as described in the instructions.				
Ŀ	Did the organization file Form 1120-POL for this year?		37 b		X
38 a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key	employee or were	20	100	
	any such loans made in a prior year and still outstanding at the end of the tax year covered	by this return a	38 a		X
	If 'Yes,' complete Schedule L, Part II and enter the total amount involved	38b N/A	/ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		1005 160
39					
	Initiation fees and capital contributions included on line 9	39a N/A			
	Gross receipts, included on line 9, for public use of club facilities	39 b N/A			
	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the				
	section 4911 ► 0 ; section 4912 ► 0 ; section 495				
k	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 49	958 excess benefit		ŀ	
	transaction during the year or did it engage in an excess benefit transaction in a prior year that has		40 b		Х
_	on any of its prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I		700		
•	managers or disqualified persons during the year under sections 4912, 4955, and 4958	▶ 0.			
c	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed				
	by the organization	<u>0.</u>		70	
e	All organizations. At any time during the tax year, was the organization a party to a prohibite shelter transaction? If 'Yes,' complete Form 8886-T	ed tax	40 e		Х
41	List the states with which a copy of this return is filed NY		-40 E	ļ	
42.	The organization's				
726	books are in care of ANNE WADSWORTH	Telephone no. ►(716)	<u> 725-</u>	<u>8869</u>	<u></u>
	Located at ► 94 WALTON DRIVE AMHERST NY	ZIP + 4 ► 14226	,		
k	At any time during the calendar year, did the organization have an interest in or a signature or othe financial account in a foreign country (such as a bank account, securities account, or other f	r authority over a inancial account)?	42 b	Yes	No X
	If 'Yes,' enter the name of the foreign country:▶				1 1 7 7
					10 A
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Fina	ncial Accounts.			البد
c	At any time during the calendar year, did the organization maintain an office outside of the U	J.S.?	42 c		X
	If 'Yes,' enter the name of the foreign country:▶				
	··				
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - C		• • • • •		N/A
	and enter the amount of tax-exempt interest received or accrued during the tax year			Yes	N/A
				res	No
44 a	Did the organization maintain any donor advised funds during the year? If 'Yes,' Form 990 must be of Form 990-EZ.	completed instead	44 a		X
	Did the organization operate one or more hospital facilities during the year? If 'Yes,' Form 990 must		صّ	1 1 7/2	
	instead of Form 990-EZ		44 b		Х
	Did the organization receive any payments for indoor tanning services during the year?		44 c		Х
	If 'Yes' to line 44c, has the organization filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O				
	If 'No,' provide an explanation in Schedule O	- F10/b)/13/3	44 d		 -
	Did the organization have a controlled entity of the organization within the meaning of section		45 a	 af	Х
ŧ	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)	j or section 512(b)(13)? It 'Yes,'	45 b		Х

Form **990-EZ** (2013)

Form 990	-EZ (2013) GIRLS EDUCATION CO.	<u>LLABORATIVE, IN</u>	<u></u>	61-15/	8303	Page 4
46 Did	the organization engage, directly or indire	ectly, in political campai	gn activities on behalf o	of or in opposition to		— ا
	didates for public office? If 'Yes,' complet				46	X
LERNA	Section 501(c)(3) organization: All section 501(c)(3) organization for lines 50 and 51.		uestions 47-49b and	d 52, and complete	the table	S
	Check if the organization used Schedu	lle O to respond to any	question in this Part VI.			
						Yes No
com	the organization engage in lobbying activities uplete Schedule C, Part II	• • • • • • • • • • • • • • • • • • • •				Х
	ne organization a school as described in s		· ·			X
	the organization make any transfers to ar 'es,' was the related organization a sectio					X
	es, was the related organization a section plete this table for the organization's five high					
emp	loyees) who each received more than \$100,0	000 of compensation from	the organization. If there	is none, enter 'None.'	,	
	(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated other comp	I amount of sensation
NONE	· · · · · · · · · · · · · · · · · · ·					
		_				
		-				
		-				
f Tota	al number of other employees paid over \$	100,000▶				
51 Com	plete this table for the organization's five hig	hest compensated indepe	endent contractors who ea	ich received more than \$1	100,000 of	
	(a) Name and business address of each independent		(b) Type (of service	(c) Comp	ensation
NONE						
						
					 -	
		<u></u>				
	al number of other independent contractor					
cha	the organization complete Schedule A? No ritable trusts must attach a completed Sch	nedule A			► XYes	No
Under penalitrue, correct	ties of perjury, I declare that I have examined this return and complete. Declaration of preparer (other than office	, including accompanying sche er) is based on all information of	dules and statements, and to the	e best of my knowledge and beli edge.	ef, it is	 ·
	.					
Sign	Signature of officer			Date		
Here	CAROLE PETRO			BOARD CHAIR	-	
	Type or print name and title	Preparer's signature	Date	lon lon	ΓΙΝ	
	Print/Type preparer's name	r reparer a signature	Date	Check L if		2
Paid	DONALD J. LENDA, CPA	ADELLE C MODAN	EK CPAS. PC	self-employed P	0029071:	۷
Preparer	Firm's name ► BRODY WEISS ZUC Firm's address ► 2495 KENSINGTON		ER CPAS, PC	Firm's EIN	16-1233	795
Use Only	AMHERST, NY 142		-		6) 839-20	

AMHERST, NY 14226-4991

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Total

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

2013

(बेट्या:कार्मितिः) महारक्षीमा

Name of the organization Employer identification number GIRLS EDUCATION COLLABORATIVE, INC. 61-1578303 Reason for Public Charity Status (All organizations must complete this part.) See instructions The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 5 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.) 7 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after 9 June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h. 11 Type II Type III — Functionally integrated Type III — Non-functionally integrated By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box... Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? Yes No A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?.... (i) 11 g (i) A family member of a person described in (i) above?..... 11 g (ii) A 35% controlled entity of a person described in (i) or (ii) above?..... 11 g (iii) Provide the following information about the supported organization(s). h (vi) is the organization in column (i) organized in the U.S.? (I) Name of supported (II) EIN (iii) Type of organization (described on lines 1-9 above or IRC section (see instructions)) (lv) is the (v) Did you notify (vil) Amount of monetary the organization in column (I) of your support? organization organization in column (i) listed in your governing document? support No Yes Yes Yes No No (A) (B) (C) (D) (E)

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

Schedule A (Form 990 or 990-EZ) 2013

61-1578303

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support						
Cale beg	endar year (or fiscal year inning 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							
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)	ja j		de la companya de la			
6	Public support. Subtract line 5 from line 4				10 mm		
Sec	tion B. Total Support						
Cale begi	endar year (or fiscal year inning 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.)						
	Total support. Add lines 7 through 10			the state of the leaves of		al and property of the same	
12	Gross receipts from related active	vities, etc (see ins	tructions)				
	First five years. If the Form 990 is organization, check this box and	stop here		ird, fourth, or fifth t	ax year as a sectio	n 501(c)(3)	▶ □
Sec	etion C. Computation of Pu Public support percentage for 20	blic Support P	ercentage	44 1 (0)		1 4 4 1	
14	Public support percentage for 20	013 (line 6, columi	n (f) divided by lir	ne 11, column (t)).		14	<u>%</u>
	Public support percentage from						
	 33-1/3% support test — 2013. If and stop here. The organization 	qualifies as a pul	blicly supported o	rganization			
	b 33-1/3% support test — 2012. If and stop here. The organization	n qualifies as a pu	blicly supported o	organization			▶∐
17:	a 10%-facts-and-circumstances to or more, and if the organization the organization meets the 'fact	meets the 'facts-a	and-circumstance	s test check this	box and stop her	e. Explain in Part	IV how
	o 10%-facts-and-circumstances to or more, and if the organization organization meets the 'facts-an	meets the 'facts-a d-circumstances'	and-circumstance: test. The organiza	s' test, check this ation qualifies as a	box and stop her a publicly support	e. Explain in Part ed organization	IV how the ►
18	Private foundation. If the organi	ization did not che	eck a box on line	13, 16a, 16b, 17a,	or 17b, check thi	s box and see ins	tructions

Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support						<u></u>
	dar year (or fiscal yr 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.)				115,616.	119,079.	234,695.
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose.				113,010.	113,073.	0.
3	Gross receipts from activities that are not an unrelated trade or business under section 513.						0.
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
	facilities furnished by a governmental unit to the organization without charge				· ·		0.
	Total. Add lines 1 through 5	0.	0.	0.	115,616.	119,079.	234,695.
7 a	Amounts included on lines 1, 2, and 3 received from disqualified persons	0.	0.	0.	0.	0.	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 amount on line 13					0	
	for the year	0.	0.	0.	0.	0.	0.
		0.	0.	0.	0.		0.
	Public support (Subtract line 7c from line 6.)tion B. Total Support					The state depending to the following	234,695.
	dar year (or fiscal yr beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	*						
9 10 a	Amounts from line 6	0.	0.	0.	115,616.	119,079.	234,695.
9 10 a	Amounts from line 6	0.	0.	0.	115,616.	119,079.	234,695. 0.
9 10 a	Amounts from line 6						0. 0.
9 10 a b	Amounts from line 6	0.	0.	0.	115,616.	0.	234,695. 0.
9 10 a b	Amounts from line 6	0.	0.	0.	0. 706.	1,588.	0. 0. 0. 0.
9 10 a b	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	0. 0. is for the organiza	0. 0. ation's first, secon	0. 0. d, third, fourth, o	706. 116, 322. r fifth tax year as	1,588. 120,667. a section 501(c)(3)	234,695. 0. 0. 2,294. 236,989.
9 10 a 11 12 13 14 Sec	Amounts from line 6	0. 0. is for the organiza stop here	0. ation's first, secon	0. 0. d, third, fourth, o	706. 116, 322.	1,588. 120,667. a section 501(c)(3	234,695. 0. 0. 0. 2,294. 236,989.) [X]
9 10 a 11 12 13 14 Sec	Amounts from line 6	0. is for the organize stop here blic Support P	0. ition's first, secon ercentage n (f) divided by lin	0. 0. d, third, fourth, one	706. 116, 322.	119,079. 0. 1,588. 120,667. a section 501(c)(3)	234,695. 0. 0. 0. 0. 2,294. 236,989. X
9 10 a 11 12 13 14 Sec 15 16	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in V) Total Support. (Add Ins 9,10c, 11 and 12.) First five years. If the Form 990 organization, check this box and tion C. Computation of Public support percentage from	0. is for the organiza stop here blic Support P 13 (line 8, column 2012 Schedule A,	0. ation's first, secon ercentage n (f) divided by lin Part III, line 15.	0. 0. d, third, fourth, or	706. 116, 322.	119,079. 0. 1,588. 120,667. a section 501(c)(3)	234,695. 0. 0. 0. 2,294. 236,989. X
9 10 a 11 12 13 14 Sec 15 16	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in V.) Total Support. (Add ins 9,10c, 11 and 12.) First five years. If the Form 990 organization, check this box and tion C. Computation of Public support percentage from the computation of Inv	0. is for the organiza stop here	0. ation's first, secon ercentage n (f) divided by lin Part III, line 15 ne Percentage	0. 0. d, third, fourth, or	706. 116,322.	1,588. 1,588. 120,667. a section 501(c)(3	234,695. 0. 0. 0. 0. 2,294. 236,989.)
9 10 a th 11 12 13 14 Sec 15 16 Sec 17	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets for the sale of capital assets. Factor the sale of capital sale	0. is for the organiza stop here	0. otion's first, secon ercentage n (f) divided by lin Part III, line 15. ne Percentage column (f) divided	0. 0. d, third, fourth, or e 13, column (f)).	706. 116,322. r fifth tax year as	119,079. 0. 1,588. 120,667. a section 501(c)(3) 15 16	234,695. 0. 0. 0. 0. 2,294. 236,989.)
9 10 a 11 12 13 14 Sec 15 16 Sec 17 18	Amounts from line 6	0. is for the organize stop here blic Support P 113 (line 8, column 2012 Schedule A, restment Incorror 2013 (line 10c, rom 2012 Schedu	0. 0. ation's first, secon ercentage n (f) divided by lin Part III, line 15. ne Percentage column (f) divided le A, Part III, line	0. 0. d, third, fourth, or e 13, column (f)).	706. 116, 322. r fifth tax year as	119,079. 0. 1,588. 120,667. a section 501(c)(3)	234,695. 0. 0. 0. 2,294. 236,989. X %
9 10 a 11 12 13 14 Sec 17 18 19 a	Amounts from line 6	0. is for the organization this box and stop here	0. otion's first, secon ercentage n (f) divided by lin Part III, line 15. ne Percentage column (f) divided le A, Part III, line did not check the bere. The organi	0. d, third, fourth, one 13, column (f)). d by line 13, column 17. box on line 14, a station qualifies a	706. 116, 322. r fifth tax year as mn (f)	119,079. 0. 1,588. 120,667. a section 501(c)(3) 15 16 17 18 e than 33-1/3%, an orted organization	234,695. 0. 0. 0. 2,294. 236,989. X % % ad line 17. □
9 10 a 11 12 13 14 Sec 15 16 Sec 17 18 19 a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets from the sale of capital assets. Explain in V Total Support. (Add ins 9,10c, 11 and 12.) First five years. If the Form 990 organization, check this box and tion C. Computation of Public support percentage for 20 Public support percentage from the sale of capital assets. If the Form 990 organization, check this box and tion C. Computation of Public support percentage from the sale of capital assets. If the Form 990 organization, check this box and tion C. Computation of Public support percentage from the sale of capital support percentage from the sale of ca	0. is for the organization the organization the organization, check this box and store.	0. ation's first, secon ercentage (f) divided by lin Part III, line 15. ne Percentage column (f) divided le A, Part III, line did not check the ben here. The organi	0. d, third, fourth, or e 13, column (f)). d by line 13, column 17 box on line 14, a lization qualifies a corganization qualifies a corganization qualifies and	706. 116, 322. r fifth tax year as mn (f)) nd line 15 is more a publicly suppone 19a, and line alifies as a public	119,079. 0. 1,588. 120,667. a section 501(c)(3) 15 16 17 18 e than 33-1/3%, an orted organization of the section solution of the section of the secti	234,695. 0. 0. 0. 2,294. 236,989. X 8 8 d line 17 -1/3%, and ization

Schedule A	(Form 990 or 990-EZ) 2013	GIRLS EDUCATI	ON COLLABORATIVE	INC	61-1578303	Page 4
	Supplemental Informat or 17b; and Part III, line (See instructions).	t ion. Provide the e e 12. Also complet	explanations required e this part for any add	by Part II, lir ditional infor	ne 10; Part II, line 17a mation.	
						
	 -					
						

2013

SCHEDULE A, PART IV - SUPPLEMENTAL INFORMATION PAGE 5

GIRLS	EDUC	ATION	COLLA	BORATIVE	INC.
--------------	-------------	--------------	--------------	----------	------

61-1578303

PART III,	LINE 1	12 - 01	THER	INCOME
-----------	--------	---------	------	--------

NATURE AND SOURCE		2013	2012	2011	2010 2009	_
INVESTMENT INCOME	\$	1,588.	\$ 106. 600.			
TO	TAL \$	1,588.	\$ 706.	\$ 0.	\$ 0. \$ 0.	<u>-</u>

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2013

Name of the organization		Employer identification number
GIRLS EDUCATION COLLABORATIVE	, INC.	61-1578303
Organization type (check one):		
Filers of:	Section:	
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a	private foundation
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a priva	ate foundation
	501(c)(3) taxable private foundation	
Check if your organization is covered by the Ge	neral Rule or a Special Rule	
Note Only a section 501(c)(7) (8) or (10) orga	nization can check boxes for both the General Rule and a S	necial Rule. See instructions.
-	The action of the control of the con	
General Rule X For an organization filing Form 990, 990-EZ, or contributor. (Complete Parts I and II.)	990-PF that received, during the year, \$5,000 or more (in mone	y or property) from any one
Special Rules		
\square 509(a)(1) and 170(b)(1)(A)(vi) and received	orm 990 or 990-EZ that met the 33-1/3% support test of the from any one contributor, during the year, a contribution of VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I at	the greater of (1) \$5,000 or
For a section 501(c)(7), (8), or (10) organization total contributions of more than \$1,000 for unthe prevention of cruelty to children or animals.	n filing Form 990 or 990-EZ that received from any one contribut use <i>exclusively</i> for religious, charitable, scientific, literary, or als. Complete Parts I, II, and III.	or, during the year, educational purposes, or
purpose. Do not complete any of the parts unle	n filing Form 990 or 990-EZ that received from any one contribut haritable, etc, purposes, but these contributions did not total to nibutions that were received during the year for an exclusively relist the General Rule applies to this organization because it receive,000 or more during the year.	ved nonexclusively
Caution: An organization that is not covered by 990-PF) but it must answer 'No' on Part IV, line Part I, line 2, to certify that it does not meet the	the General Rule and/or the Special Rules does not file Sci 2, of its Form 990; or check the box on line H of its Form 9 e filing requirements of Schedule B (Form 990, 990-EZ, or 99	nedule B (Form 990, 990-EZ, or 190-EZ or on its Form 990-PF, 90-PF).
BAA For Paperwork Reduction Act Notice, see or 990-PF.	e the Instructions for Form 990, 990EZ, Schedule B (F	Form 990, 990-EZ, or 990-PF) (2013

1 of

2 of Part 1

GIRLS EDUCATION COLLABORATIVE, INC.

Employer Identification number 61-1578303

Partill Contributors	(see instructions). Use duplicate copies of Part I if additional space is needed.
-----------------------------	---

(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	NORTHERN TRUST COMPANY 50 SOUTH LASALLE CHICAGO, IL 60675	\$10,007.	Person Payroll Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	BERTINI TRUST FUND FOR GIRLS EDUCAT 1725 I STREET N.W., SUITE 510 WASHINGTON , DC 20006	\$20,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	STONE FAMILY FOUNDATION P.O. BOX 30304 SANTA BARBARA, CA 93130	\$ 20,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
(a) Number	Name, address, and ZIP + 4 COMMUNITY FOUND FOR GREATER BUFFALO	\$10,000.	Type of contribution Person X Payroll
Number	Name, address, and ZIP + 4 COMMUNITY FOUND FOR GREATER BUFFALO 726 EXCHANGE STEET, SUITE 525	\$10,000.	Person X Payroll Noncash (Complete Part II for
Number	Name, address, and ZIP + 4 COMMUNITY FOUND FOR GREATER BUFFALO 726 EXCHANGE STEET, SUITE 525 BUFFALO, NY 14210 (b)	\$ 10,000.	Person X Payroll
4 (a) Number	Name, address, and ZIP + 4 COMMUNITY FOUND FOR GREATER BUFFALO 726 EXCHANGE STEET, SUITE 525 BUFFALO, NY 14210 Name, address, and ZIP + 4 KATHERINE BENOIT AND JOHN BROOKS 1328 LAKE PARK DRIVE	\$ 10,000. (c) Total contributions	Person X Payroll
4 (a) Number	Name, address, and ZIP + 4 COMMUNITY FOUND FOR GREATER BUFFALO 726 EXCHANGE STEET, SUITE 525 BUFFALO, NY 14210 Name, address, and ZIP + 4 KATHERINE BENOIT AND JOHN BROOKS 1328 LAKE PARK DRIVE BIRMINGHAM, MI 48009	\$10,000. (c) Total contributions \$10,000.	Person X Payroll

Schedule **B** (Form 990, 990-EZ, or 990-PF) (2013)

2 of

2 of Part 1

GIRLS EDUCATION COLLABORATIVE, INC.

Employer identification number 61-1578303

Rank Contributors	(see instructions).	Use duplicate copies of Pa	art I if additional space is needed.
-------------------	---------------------	----------------------------	--------------------------------------

(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	ROBERT BERGER 7 CLOISTER COURT AMHERST, NY 14226	\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions.)
BAA	TECANON 190702	Cabadula D (Casa 000	990 E7 or 990 DE\ (2013)

1 to

1 of Part II

Name of organization

GIRLS EDUCATION COLLABORATIVE, INC.

Employer identification number

61-1578303

Part II Moncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	799 SHARES OF NEW YORK TIMES CO CLASS A		_
		\$ <u>10,007.</u>	7/11/13
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$ 	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$ 	
AA	Sche	ulle B (Form 990, 990-EZ, c	r 990-PF) (2013)

BAA

Schedule **B** (Form 990, 990-EZ, or 990-PF) (2013)

of Part III

Employer identification number

61-1578303

	organizations that total more than \$1,						
	For organizations completing Part III, enter total of contributions of \$1,000 or less for the year. (En	iter this information once. See ii	nstructions.)				
	Use duplicate copies of Part III if additional spa						
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
	N/A						
	(e) Transfer of gift						
	Transferee's name, address, a		Relationship of transferor to transferee				
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
Part I	· · ·						
		(e)					
	(e) Transfer of gift		Relationship of transferor to transferee				
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee				
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
No. from Part I	Purpose of gift	Use of gift	Description of now girt is neid				
		(e) Transfer of gift					
	Transferee's name, address, a		Relationship of transferor to transferee				
	<u> </u>						
7-5	7.		\				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
Рап							
	 						
	_ (e)						
	(e) Transfer of gift Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee				
	,,,						
	L						

SCHEDULE 0 (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

2013 (भे जातिनीत्रमंतिः तिर्भे द्वारिता

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

GIRLS EDUCATION COLLABORATIVE, INC.	61-1578303
FORM 990-EZ, PART III - ORGANIZATION'S PRIMARY EXEMPT PURPOSE	
TO IMPROVE OPPORTUNITIES FOR GIRLS; TO FORGE PARTNERSHIPS THAT	SUPPORT
EDUCATION-CENTERED, COMMUNITY-DRIVEN INITIATIVES IN DEVELOPING	COUNTRIES TO
IMPROVE OPPORTUNITIES FOR GIRLS TO REALIZE THEIR FULLEST POTENT	TIAL AND CREATE
CHANGE IN THEIR COMMUNITIES.	
FORM 990-EZ, PART V - REGARDING TRANSFERS ASSOCIATED WITH PERSONAL	BENEFIT CONTRACTS
(A) DID THE ORGANIZATION, DURING THE YEAR, RECEIVE ANY FUNDS,	DIRECTLY OR
INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL BENEFIT CONTRACT?	NO
(B) DID THE ORGANIZATION, DURING THE YEAR, PAY PREMIUMS, DIREC	CTLY OR
INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT?	NO

20	11	9
Z 1	JI	J

SCHEDULE O - SUPPLEMENTAL INFORMATION

PAGE 2

GIRLS EDUCATION COLLABORATIVE, INC.

61-1578303

FORM 990-EZ, PART I, LINE 16 OTHER EXPENSES

BOARD EXPENSES.	\$ 120.
CONSULTING/LIBRARY MASTER PLAN	9,993.
DEPRECIATION	1,212.
FUNDRAISING EXPENSES	4.311.
INSURANCE	2 359
OFFICE EXPENSES	2,000.
	1 /61
OTHER PROGRAM EXPENSES	257
PAYROLL PROCESSING	20
SUPPLIES	342.
TELEPHONE	1,122.
TRAVEL	9,185.
WEBSITE DEVELOPMENT	4,225.
TOTAL	\$ 34,643.

FORM 990-EZ, PART II, LINE 24 OTHER ASSETS

	BEG	SINNING	 ENDING
FURNITURE AND FIXTURES	\$	2,588.	\$ 2,924.
TOTAL	\$	2,588.	\$ 2,924.