

**Return of Organization Exempt From Income Tax**  
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Department of the Treasury  
Internal Revenue Service

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

**A For the 2010 calendar year, or tax year beginning , 2010, and ending , 20**

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization COUNCIL FOR ECONOMIC EDUCATION			<b>D</b> Employer identification number 13-1623848	
	Doing Business As			<b>E</b> Telephone number (212) 730-7007	
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 122 E 42ND STREET ROOM 2600		<b>G</b> Gross receipts \$ 10,071,316.		
	City or town, state or country, and ZIP + 4 NEW YORK, NY 10168-2699			<b>H(a)</b> Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)	
<b>F</b> Name and address of principal officer: NAN J. MORRISON 122 E 42ND STREET ROOM 2600 NEW YORK, NY 10168-2699			<b>H(c)</b> Group exemption number ▶		
<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527					
<b>J</b> Website: ▶ WWW.COUNCILFORECONED.ORG					
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶				<b>L</b> Year of formation: 1949 <b>M</b> State of legal domicile: DC	

**Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: TO ADVOCATE FOR BETTER AND GREATER SCHOOL-BASED ECONOMIC AND PERSONAL FINANCE EDUCATION AT THE K-12 LEVEL AND TO EMPOWER YOUNG PEOPLE AROUND THE WORLD, THROUGH WELL-PREPARED TEACHERS, WITH ECONOMIC LITERACY.			
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.			
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	26.	
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	26.	
	<b>5</b> Total number of individuals employed in calendar year 2010 (Part V, line 2a)	<b>5</b>	36.	
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	15.	
	<b>7a</b> Total gross unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	0.	
	<b>b</b> Net unrelated business taxable income from Form 990-T, line 34	<b>7b</b>	0.	
	<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h)	<b>Prior Year</b>	<b>Current Year</b>
		<b>9</b> Program service revenue (Part VIII, line 2g)	9,269,180.	8,876,879.
<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)		0.	0.	
<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		30,271.	15,878.	
<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,062,626.	390,989.	
<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)		10,362,077.	9,283,746.	
<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)		3,760,572.	3,192,621.	
<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	0.	
<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)		3,730,442.	3,065,698.	
<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ 397,267.		0.	0.	
<b>Expenses</b>	<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	5,142,859.	4,209,568.	
	<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	12,633,873.	10,467,887.	
	<b>19</b> Revenue less expenses. Subtract line 18 from line 12	-2,271,796.	-1,184,141.	
	<b>Net Assets or Fund Balances</b>	<b>20</b> Total assets (Part X, line 16)	<b>Beginning of Current Year</b>	<b>End of Year</b>
		<b>21</b> Total liabilities (Part X, line 26)	6,279,839.	4,753,883.
		<b>22</b> Net assets or fund balances. Subtract line 21 from line 20.	1,404,381.	1,021,955.
			4,875,458.	3,731,928.

**Part II Signature Block**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

<b>Sign Here</b>	▶ Signature of officer	Date			
	▶ Type or print name and title				
<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	Firm's name ▶ GRANT THORNTON LLP				P00741490
	Firm's address ▶ 666 THIRD AVENUE NEW YORK, NY 10017-4011			Firm's EIN ▶ 36-6055558	Phone no. 212-599-0100
May the IRS discuss this return with the preparer shown above? (see instructions)					<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

For Paperwork Reduction Act Notice, see the separate instructions.

**Part III Statement of Program Service Accomplishments**

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

1 Briefly describe the organization's mission:

ATTACHMENT 1

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?  Yes  No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?  Yes  No

If "Yes," describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: ) (Expenses \$ 3,105,758. including grants of \$ 1,159,310. ) (Revenue \$ 0. )

CORE PROGRAMS - SEEKS TO IMPROVE THE QUALITY OF ECONOMIC EDUCATION IN AMERICA'S SCHOOLS. EACH YEAR, THROUGH BOTH A NATIONWIDE NETWORK AND DIRECTLY, BY USING STANDARDS-SETTING MATERIALS AND RESOURCES, THOUSANDS OF TEACHERS ARE ABLE TO TEACH MILLIONS OF STUDENTS HOW THE "REAL" WORLD WORKS BEFORE THEY GO TO WORK IN IT.

4b (Code: ) (Expenses \$ 4,324,906. including grants of \$ 0. ) (Revenue \$ 0. )

ECONOMICS INTERNATIONAL: FUNDED BY GRANTS FROM THE U.S. DEPT. OF EDUCATION, OFFICE OF SAFE AND DRUG FREE SCHOOL, SUPPORTS EDUCATIONAL REFORM IN TRANSITION ECONOMIES AND EMERGING MARKET ECONOMIES BY CREATING INSTRUCTIONAL MATERIALS, CONDUCTING TEACHER TRAINING AND PROMOTING EDUCATIONAL EXCHANGE.

4c (Code: ) (Expenses \$ 29,804. including grants of \$ 0. ) (Revenue \$ 0. )

PROGRAM DEVELOPMENT, COORDINATION AND OVERSIGHT - CONCEIVES, DEVELOPS, OVERSEES AND ASSESSES THE EFFECTIVENESS OF ALL PROGRAMS INCLUDING IDENTIFYING NEED, MONITORING PROJECT PROGRESS AND SATUS, CONDUCTING RESEARCH AND USING ASSESSMENTS TO EVALUATE PROGRAM EFFECTIVENESS.

4d Other program services. (Describe in Schedule O.) ATTACHMENT 2 (Expenses \$ 485,674. including grants of \$ 0. ) (Revenue \$ 0. )

4e Total program service expenses ▶ 7,946,142.

Part IV Checklist of Required Schedules

Table with 3 columns: Question number, Yes, No. Rows 1-20b detailing various organizational requirements and reporting obligations.

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question number, Yes, No. Rows 21-38 detailing various organizational requirements and reporting obligations.

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with columns for question number, description, and Yes/No checkboxes. Includes questions 1a-14b regarding Form 1096, Form W-2G, backup withholding, Form W-3, unrelated business gross income, foreign accounts, prohibited tax shelter transactions, and contributions.

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

Check if Schedule O contains a response to any question in this Part VI [X]

Section A. Governing Body and Management

Table with columns for question number, description, and Yes/No checkboxes. Questions 1a-1b, 2-9 cover governing body composition and documentation.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with columns for question number, description, and Yes/No checkboxes. Questions 10a-16b cover organizational policies on chapters, conflicts of interest, whistleblower, and joint ventures.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed NY,
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.
20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: BELLA BOKMAN 122 E 42ND STREET ROOM 2600 NEW YORK, NY 10168-2699 212-730-7007

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

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

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) MICHAEL E BANNISTER DIRECTOR	1.00	X					0.	0.	0.	
(2) IVAN BERKOWITZ DIRECTOR	1.00	X					0.	0.	0.	
(3) HAROLD BURSON DIRECTOR (NON-VOTING)	1.00	X					0.	0.	0.	
(4) ROBERT ALAN CHLEBOWSKI DIRECTOR	1.00	X					0.	0.	0.	
(5) MARY CREGO DIRECTOR	1.00	X					0.	0.	0.	
(6) JOHN T DILLON DIRECTOR (NON-VOTING)	1.00	X					0.	0.	0.	
(7) CRAIG S DONOHUE CHAIRMAN	1.00	X		X			0.	0.	0.	
(8) LISA EGBUONU DAVIS DIRECTOR	1.00	X					0.	0.	0.	
(9) SHARON EPPERSON DIRECTOR	1.00	X					0.	0.	0.	
(10) BENJAMIN FRIEDMAN DIRECTOR	1.00	X					0.	0.	0.	
(11) CLAIRE GAUDIANI DIRECTOR	1.00	X					0.	0.	0.	
(12) BARRY HAIMES VICE CHAIRMAN	1.00	X		X			0.	0.	0.	
(13) JULIA A HEATH DIRECTOR	1.00	X					0.	0.	0.	
(14) JENNIFER JUST DIRECTOR	1.00	X					0.	0.	0.	
(15) HARLAN DAY DIRECTOR	1.00	X					0.	0.	0.	
(16) MICHAEL A MACDOWELL DIRECTOR	1.00	X					0.	0.	0.	

**Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** (continued)

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(17) RAYMOND W MCDANIEL DIRECTOR	1.00	X					0.	0.	0.	
(18) HAROLD MCGRAW III DIRECTOR (NON-VOTING)	1.00	X					0.	0.	0.	
(19) R MADISON MURPHY DIRECTOR (NON-VOTING)	1.00	X					0.	0.	0.	
(20) WILLIAM E ODOM DIRECTOR (NON-VOTING)	1.00	X					0.	0.	0.	
(21) ARYEH RUBIN DIRECTOR	1.00	X					0.	0.	0.	
(22) S BUFORD SCOTT SECRETARY	1.00	X		X			0.	0.	0.	
(23) JOHN SIEGFRIED DIRECTOR	1.00	X					0.	0.	0.	
(24) MATTHEW SMITH DIRECTOR	1.00	X					0.	0.	0.	
(25) JEFFREY M. LACKER DIRECTOR	1.00	X					0.	0.	0.	
(26) GARY H STERN DIRECTOR	1.00	X					0.	0.	0.	
(27) KENNETH L THOME TREASURER	1.00	X		X			0.	0.	0.	
(28) DOUG WOODHAM VICE CHAIRMAN	1.00	X		X			0.	0.	0.	
<b>1b Sub-total</b>							0.	0.	0.	
<b>c Total from continuation sheets to Part VII, Section A ATTACHMENT 3</b>							952,691.	0.	67,908.	
<b>d Total (add lines 1b and 1c)</b>							952,691.	0.	67,908.	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **5**

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		X

**Section B. Independent Contractors**

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization.

(A) Name and business address	(B) Description of services	(C) Compensation
ATTACHMENT 4		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **3**



**Part VIII Statement of Revenue**

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
<b>Contributions, gifts, grants and other similar amounts</b>	<b>1a</b> Federated campaigns . . . . .	<b>1a</b>					
	<b>b</b> Membership dues . . . . .	<b>1b</b>					
	<b>c</b> Fundraising events . . . . .	<b>1c</b>	359,600.				
	<b>d</b> Related organizations . . . . .	<b>1d</b>					
	<b>e</b> Government grants (contributions) . .	<b>1e</b>	6,427,551.				
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above .	<b>1f</b>	2,089,728.				
	<b>g</b> Noncash contributions included in lines 1a-1f: \$						
	<b>h Total.</b> Add lines 1a-1f . . . . .			8,876,879.			
<b>Program Service Revenue</b>	<b>2a</b> _____	<b>Business Code</b>					
	<b>b</b> _____						
	<b>c</b> _____						
	<b>d</b> _____						
	<b>e</b> _____						
	<b>f</b> All other program service revenue . . . . .						
	<b>g Total.</b> Add lines 2a-2f . . . . .			0.			
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts) . . . . .			15,878.			15,878.
	<b>4</b> Income from investment of tax-exempt bond proceeds . . .			0.			
	<b>5</b> Royalties . . . . .			0.			
	<b>6a</b> Gross Rents . . . . .	(i) Real	(ii) Personal				
	<b>b</b> Less: rental expenses . . . . .						
	<b>c</b> Rental income or (loss) . . . . .						
	<b>d</b> Net rental income or (loss) . . . . .			0.			
	<b>7a</b> Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
	<b>b</b> Less: cost or other basis and sales expenses . . . . .						
	<b>c</b> Gain or (loss) . . . . .						
	<b>d</b> Net gain or (loss) . . . . .			0.			
	<b>8a</b> Gross income from fundraising events (not including \$ 359,600. of contributions reported on line 1c). See Part IV, line 18 . . . . .	a		42,000.			
	<b>b</b> Less: direct expenses . . . . .	b		132,482.			
	<b>c</b> Net income or (loss) from fundraising events . . . . .			-90,482.			-90,482.
	<b>9a</b> Gross income from gaming activities. See Part IV, line 19 . . . . .	a					
<b>b</b> Less: direct expenses . . . . .	b						
<b>c</b> Net income or (loss) from gaming activities . . . . .			0.				
<b>10a</b> Gross sales of inventory, less returns and allowances . . . . .	a		1,102,514.				
<b>b</b> Less: cost of goods sold . . . . .	b		655,088.				
<b>c</b> Net income or (loss) from sales of inventory . . . . .			447,426.			447,426.	
<b>Miscellaneous Revenue</b>		<b>Business Code</b>					
<b>11a</b> OTHER INCOME		900099		34,045.			34,045.
<b>b</b> _____							
<b>c</b> _____							
<b>d</b> All other revenue . . . . .							
<b>e Total.</b> Add lines 11a-11d . . . . .				34,045.			
<b>12 Total revenue.</b> See instructions . . . . .				9,283,746.			406,867.

**Part IX Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

<b>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</b>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 . . .	1,138,060.	1,138,060.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22 . . . . .	21,250.	21,250.		
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 . . . . .	2,033,311.	2,033,311.		
4 Benefits paid to or for members . . . . .	0.			
5 Compensation of current officers, directors, trustees, and key employees . . . . .	499,606.	321,578.	178,028.	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . . .	0.			
7 Other salaries and wages . . . . .	1,955,340.	1,291,779.	397,103.	266,458.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) . . . . .	167,701.	123,200.	27,919.	16,582.
9 Other employee benefits . . . . .	279,463.	150,025.	84,107.	45,331.
10 Payroll taxes . . . . .	163,588.	104,232.	39,211.	20,145.
11 Fees for services (non-employees):				
a Management . . . . .	356,882.	61,099.	288,304.	7,479.
b Legal . . . . .	63,191.		63,191.	
c Accounting . . . . .	44,716.		44,716.	
d Lobbying . . . . .	26,446.	26,446.		
e Professional fundraising services. See Part IV, line 17	0.			
f Investment management fees . . . . .	2,800.		2,800.	
g Other . . . . .	1,158,068.	1,023,240.	118,523.	16,305.
12 Advertising and promotion . . . . .	28,103.	28,103.		
13 Office expenses . . . . .	280,271.	169,413.	102,342.	8,516.
14 Information technology . . . . .	12,137.	12,137.		
15 Royalties . . . . .	6,891.	6,891.		
16 Occupancy . . . . .	785,095.	224,692.	560,403.	
17 Travel . . . . .	851,268.	805,261.	30,662.	15,345.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0.			
19 Conferences, conventions, and meetings . . . . .	160,230.	160,230.		
20 Interest . . . . .	1,043.		1,043.	
21 Payments to affiliates . . . . .	0.			
22 Depreciation, depletion, and amortization . . . . .	167,708.		167,708.	
23 Insurance . . . . .	18,418.		18,418.	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.)				
a COMMUNICATION MATERIALS	257,214.	257,214.		
b PRINTING & PRINTING COS	644,175.	643,069.		1,106.
c COST OF SALES	-655,088.	-655,088.		
d -----				
e -----				
f All other expenses -----				
25 <b>Total functional expenses.</b> Add lines 1 through 24f	10,467,887.	7,946,142.	2,124,478.	397,267.
26 <b>Joint Costs.</b> Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation . . . . .				

**Part X Balance Sheet**

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing . . . . .	9,064.	<b>1</b>	8,530.
	<b>2</b> Savings and temporary cash investments . . . . .	3,424,380.	<b>2</b>	2,592,959.
	<b>3</b> Pledges and grants receivable, net . . . . .	678,120.	<b>3</b>	641,296.
	<b>4</b> Accounts receivable, net . . . . .	250,505.	<b>4</b>	53,948.
	<b>5</b> Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L . . . . .		<b>5</b>	
	<b>6</b> 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 employees' beneficiary organizations (see instructions) . . . . .		<b>6</b>	
	<b>7</b> Notes and loans receivable, net . . . . .		<b>7</b>	
	<b>8</b> Inventories for sale or use . . . . .	542,865.	<b>8</b>	255,046.
	<b>9</b> Prepaid expenses and deferred charges . . . . .	4,485.	<b>9</b>	86,600.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D . . . . .	<b>10a</b> 329,093.		
	<b>b</b> Less: accumulated depreciation . . . . .	<b>10b</b> 130,941.		
		359,653.	<b>10c</b>	198,152.
	<b>11</b> Investments - publicly traded securities . . . . .	873,389.	<b>11</b>	889,264.
	<b>12</b> Investments - other securities. See Part IV, line 11 . . . . .		<b>12</b>	
	<b>13</b> Investments - program-related. See Part IV, line 11 . . . . .		<b>13</b>	
	<b>14</b> Intangible assets . . . . .		<b>14</b>	
<b>15</b> Other assets. See Part IV, line 11 . . . . .	137,378.	<b>15</b>	28,088.	
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 34) . . . . .	6,279,839.	<b>16</b>	4,753,883.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .	1,106,757.	<b>17</b>	720,204.
	<b>18</b> Grants payable . . . . .		<b>18</b>	
	<b>19</b> Deferred revenue . . . . .	0.	<b>19</b>	0.
	<b>20</b> Tax-exempt bond liabilities . . . . .		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D . . . . .		<b>21</b>	
	<b>22</b> Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . . . . .		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties . . . . .		<b>23</b>	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties . . . . .		<b>24</b>	
	<b>25</b> Other liabilities. Complete Part X of Schedule D . . . . .	297,624.	<b>25</b>	301,751.
	<b>26 Total liabilities.</b> Add lines 17 through 25 . . . . .	1,404,381.	<b>26</b>	1,021,955.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 29, and lines 33 and 34.</b>			
	<b>27</b> Unrestricted net assets . . . . .	1,784,736.	<b>27</b>	1,392,296.
	<b>28</b> Temporarily restricted net assets . . . . .	2,966,088.	<b>28</b>	2,314,998.
	<b>29</b> Permanently restricted net assets . . . . .	124,634.	<b>29</b>	24,634.
	<b>Organizations that do not follow SFAS 117, check here</b> <input type="checkbox"/> <b>and complete lines 30 through 34.</b>			
	<b>30</b> Capital stock or trust principal, or current funds . . . . .		<b>30</b>	
	<b>31</b> Paid-in or capital surplus, or land, building, or equipment fund . . . . .		<b>31</b>	
	<b>32</b> Retained earnings, endowment, accumulated income, or other funds . . . . .		<b>32</b>	
<b>33</b> Total net assets or fund balances . . . . .	4,875,458.	<b>33</b>	3,731,928.	
<b>34</b> Total liabilities and net assets/fund balances . . . . .	6,279,839.	<b>34</b>	4,753,883.	

**Part XI Reconciliation of Net Assets**

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

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12) . . . . .	<b>1</b>	9,283,746.
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25) . . . . .	<b>2</b>	10,467,887.
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1 . . . . .	<b>3</b>	-1,184,141.
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . . . . .	<b>4</b>	4,875,458.
<b>5</b>	Other changes in net assets or fund balances (explain in Schedule O) . . . . .	<b>5</b>	40,611.
<b>6</b>	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B)) . . . . .	<b>6</b>	3,731,928.

**Part XII Financial Statements and Reporting**

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

		Yes	No
<b>1</b>	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
<b>2a</b>	Were the organization's financial statements compiled or reviewed by an independent accountant? . . . . .		X
<b>2b</b>	Were the organization's financial statements audited by an independent accountant? . . . . .	X	
<b>2c</b>	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? . . . . . If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
<b>2d</b>	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
<b>3a</b>	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? . . . . .	X	
<b>3b</b>	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	X	

**SCHEDULE A**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Public Charity Status and Public Support**

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

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No. 1545-0047

**2010**

**Open to Public Inspection**

<b>Name of the organization</b> COUNCIL FOR ECONOMIC EDUCATION	<b>Employer identification number</b> 13-1623848
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**Part I Reason for Public Charity Status** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1  A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2  A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3  A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4  A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: \_\_\_\_\_
- 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6  A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8  A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9  An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)

10  An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.

11  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.

- a  Type I      b  Type II      c  Type III - Functionally integrated      d  Type III - Other

e  By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).

f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

	Yes	No
(i) 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? .....	11g(i)	
(ii) A family member of a person described in (i) above? .....	11g(ii)	
(iii) A 35% controlled entity of a person described in (i) or (ii) above? .....	11g(iii)	

h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
<b>Total</b>									

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule A (Form 990 or 990-EZ) 2010

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Table with 7 columns: (a) 2006, (b) 2007, (c) 2008, (d) 2009, (e) 2010, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Tax revenues levied for the organization's benefit; 3 The value of services or facilities furnished by a governmental unit; 4 Total. Add lines 1 through 3; 5 The portion of total contributions by each person; 6 Public support. Subtract line 5 from line 4.

Section B. Total Support

Table with 7 columns: (a) 2006, (b) 2007, (c) 2008, (d) 2009, (e) 2010, (f) Total. Rows include: 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; 10 Other income. Do not include gain or loss from the sale of capital assets; 11 Total support. Add lines 7 through 10; 12 Gross receipts from related activities, etc. (see instructions); 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.

Section C. Computation of Public Support Percentage

Table with 3 columns: Line number, Description, and Percentage. Rows include: 14 Public support percentage for 2010; 15 Public support percentage from 2009 Schedule A, Part II, line 14; 16a 33 1/3% support test - 2010; b 33 1/3% support test - 2009; 17a 10%-facts-and-circumstances test - 2010; b 10%-facts-and-circumstances test - 2009; 18 Private foundation.

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	3,663,573.	6,874,003.	1,874,007.	9,269,180.	8,876,879.	30,557,642.
<b>2</b> 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 . . . . .	6,326,606.	8,260,050.	7,391,482.	1,600,011.	1,102,514.	24,680,663.
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 . . . . .						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . .						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge . . . . .						
<b>6 Total.</b> Add lines 1 through 5 . . . . .	9,990,179.	15,134,053.	9,265,489.	10,869,191.	9,979,393.	55,238,305.
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons . . . . .	0.	0.	0.	335,000.	160,000.	495,000.
<b>b</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 . . . . .	5,092,698.	5,714,919.	605,136.	183,440.	255,101.	11,851,294.
<b>c</b> Add lines 7a and 7b. . . . .	5,092,698.	5,714,919.	605,136.	518,440.	415,101.	12,346,294.
<b>8 Public support</b> (Subtract line 7c from line 6.) . . . . .						42,892,011.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
<b>9</b> Amounts from line 6. . . . .	9,990,179.	15,134,053.	9,265,489.	10,869,191.	9,979,393.	55,238,305.
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . . . .	129,635.	167,245.	68,618.	13,417.	15,878.	394,793.
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 . . . . .						
<b>c</b> Add lines 10a and 10b . . . . .	129,635.	167,245.	68,618.	13,417.	15,878.	394,793.
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on . . . . .						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) <u>ATCH 1</u> . . . . .	0.	0.	400,851.	157,853.	76,045.	634,749.
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.) . . . . .	10,119,814.	15,301,298.	9,734,958.	11,040,461.	10,071,316.	56,267,847.

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

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2010 (line 8, column (f) divided by line 13, column (f)). . . . .	<b>15</b>	76.23%
<b>16</b> Public support percentage from 2009 Schedule A, Part III, line 15 . . . . .	<b>16</b>	66.45%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for <b>2010</b> (line 10c, column (f) divided by line 13, column (f)) . . . . .	<b>17</b>	.70%
<b>18</b> Investment income percentage from <b>2009</b> Schedule A, Part III, line 17 . . . . .	<b>18</b>	.80%

**19a 33 1/3% support tests - 2010.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ►

**b 33 1/3% support tests - 2009.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ►

**20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ►

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

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ATTACHMENT 1

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SCHEDULE A, PART III - OTHER INCOME

DESCRIPTION	2006	2007	2008	2009	2010	TOTAL
SPECIAL EVENT INCOME	0.	0.	377,685.	43,000.	42,000.	462,685.
SPONSORSHIP INCOME	0.	0.	0.	100,000.	0.	100,000.
OTHER INCOME	0.	0.	23,166.	14,853.	34,045.	72,064.
<b>TOTAL</b>	<u>0.</u>	<u>0.</u>	<u>400,851.</u>	<u>157,853.</u>	<u>76,045.</u>	<u>634,749.</u>



**Schedule of Contributors**

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

**2010**

<b>Name of the organization</b> COUNCIL FOR ECONOMIC EDUCATION	<b>Employer identification number</b> 13-1623848
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**Organization type** (check one):

**Filers of:**

**Section:**

Form 990 or 990-EZ

501(c)(3) ( ) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**General Rule**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

**Special Rules**

For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33<sup>1</sup>/<sub>3</sub> % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. . . . . ▶ \$ \_\_\_\_\_

**Caution.** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization **COUNCIL FOR ECONOMIC EDUCATION**Employer identification number  
13-1623848**Part I** Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	BARRY HAIMES 21 EAST POINT LANE OLD GREENWICH, CT 06870-2403	\$ 130,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2	STATE FARM INSURANCE ONE STATE FARM PLAZA BLOOMINGTON, IL 61710	\$ 816,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
3	VERIZON FOUNDATION ONE VERIZON WAY, VC63S417 BASKING RIDGE, NJ 07920	\$ 333,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
4	ARLINGTON ADVISORY PARTNERS 17 ARLINGTON STREET BOSTON, MA 02116	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
5	THE ARMSTRONG FOUNDATION P.O. BOX 470338 FORT WORTH, TX 76147	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
6	FINRA INVESTOR EDUCATION FOUNDATION 1735 K STREET NW WASHINGTON, DC 20006-1506	\$ 195,680.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization **COUNCIL FOR ECONOMIC EDUCATION**Employer identification number  
13-1623848**Part I** Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7	CITI FOUNDATION ----- 850 THIRD AVENUE - 13TH FLOOR ----- NEW YORK, NY 10022 -----	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II if there is a noncash contribution.)
8	DART FOUNDATION ----- 500 HOGSBACK ROAD ----- MASON, MI 48854 -----	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II if there is a noncash contribution.)
9	DOUG WOODHAM ----- 145 WEST 67TH STREET, #43G ----- NEW YORK, NY 10023 -----	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II if there is a noncash contribution.)
10	GENERAL MILLS INC. ----- P.O. BOX 1113 ----- MINNEAPOLIS, MN 55440 -----	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II if there is a noncash contribution.)
11	THE MCGRAW HILL COMPANIES ----- 1221 AVENUE OF THE AMERICAS ----- NEW YORK, NY 10020 -----	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II if there is a noncash contribution.)
12	JOHNSON CUSTOM STRATEGIES ----- 640 WEST PUTNAM AVENUE ----- GREENWICH, CT 06830 -----	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II if there is a noncash contribution.)

Name of organization **COUNCIL FOR ECONOMIC EDUCATION**Employer identification number  
13-1623848**Part I** Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
13	KENNETH L. THOME ----- 2008 BLACKBERRY LANE ----- WAYZATA, MN 55391 -----	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
14	MURPHY FOUNDATION ----- 200 N. JEFFERSON, SUITE 400 ----- EL DORADO, AK 71730 -----	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
15	CHARLES SCHWAB FOUNDATION ----- 101 MONTGOMERY STREET ----- SAN FRANCISCO, CA 94104 -----	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
16	MOODY'S FOUNDATION ----- 99 CHURCH STREET ----- NEW YORK, NY 10007 -----	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
17	THE WALTON FAMILY FOUNDATION ----- 125 WEST CENTRAL, SUITE 217 ----- BENTONVILLE, AR 72712 -----	\$ 20,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
18	F. M. KIRBY FOUNDATION ----- 17 DEHART STREET - P. O. BOX 151 ----- MORRISTOWN, NJ 07963-0151 -----	\$ 7,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization **COUNCIL FOR ECONOMIC EDUCATION**Employer identification number  
13-1623848**Part I** Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
19	THE JEROME V. BRUNI FOUNDATION 1528 N. TEJON STREET COLORADO SPRINGS, CO 80907	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
20	JENNIFER JUST 141 W. JACKSON BOULEVARD - SUITE 500 CHICAGO, IL 60604	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
21	DR. LISA EGBUONU-DAVIS 22 BELLEGROVE DRIVE MONTCLAIR, NJ 07043	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
22	S. BUFORD SCOTT 909 EAST MAIN STREET, P.O. 1575 RICHMOND, VA 23218	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
23	CME GROUP 20 S. WACKER DRIVE CHICAGO, IL 60606-7499	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
24	MAYTIV FOUNDATION 5150 OVERLAND AVE. CULVER CITY, CA 90230	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization **COUNCIL FOR ECONOMIC EDUCATION**Employer identification number  
13-1623848**Part I** Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
25	DEPT OF EDUC - INT'L EDUCATION EXCHANGE 400 MARYLAND AVENUE, SW WASHINGTON, DC 20202	\$ 5,198,893.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
26	DEPT OF EDUC - FUND FOR IMPRVMT OF EDUC 400 MARYLAND AVENUE, SW WASHINGTON, DC 20202	\$ 1,228,657.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
27	MONROE COLLEGE 434 MAIN STREET NEW ROCHELLE, NY 10801	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
28	PETER R & CYNTHIA K KELLOGG FOUNDATION 48 WALL STREET, 30TH FLOOR NEW YORK, NY 10005	\$ 20,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
29	ROBERT CHLEBOWSKI 1319 DOLORES STREET SAN FRANCISCO, CA 94110	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
30	SIMON MENDELSON 1175 PARK AVENUE, APT. 5C NEW YORK, NY 10128	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization **COUNCIL FOR ECONOMIC EDUCATION**

Employer identification number  
13-1623848

**Part I** Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
31	THE STILES-NICHOLSON FOUNDATION 3400 BARROW ISLAND ROAD JUPITER, FL 33477	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
32	THE UPS FOUNDATION 55 GLENLAKE PARKWAY, NE ATLANTA, GA 30328	\$ 200,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
33	ING DIRECT ONE S ORANGE STREET WILMINGTON, DE 19801	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

**SCHEDULE C**  
**(Form 990 or 990-EZ)**

**Political Campaign and Lobbying Activities**  
**For Organizations Exempt From Income Tax Under section 501(c) and section 527**

OMB No. 1545-0047

**2010**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

▶ **Complete if the organization is described below.**  
▶ **Attach to Form 990 or Form 990-EZ.** ▶ **See separate instructions.**

**If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then**

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

**If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then**

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

**If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35a (Proxy Tax), then**

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization <b>COUNCIL FOR ECONOMIC EDUCATION</b>	Employer identification number <b>13-1623848</b>
---	---

**Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

- 1** Provide a description of the organization's direct and indirect political campaign activities on behalf of or in opposition to candidates for public office in Part IV.
- 2** Political expenditures . . . . . ▶ \$ \_\_\_\_\_
- 3** Volunteer hours . . . . . \_\_\_\_\_

**Part I-B Complete if the organization is exempt under section 501(c)(3).**

- 1** Enter the amount of any excise tax incurred by the organization under section 4955 . . . . . ▶ \$ \_\_\_\_\_
- 2** Enter the amount of any excise tax incurred by organization managers under section 4955 . . . . . ▶ \$ \_\_\_\_\_
- 3** If the organization incurred a section 4955 tax, did it file Form 4720 for this year? . . . . .  Yes  No
- 4a** Was a correction made? . . . . .  Yes  No
- b** If "Yes," describe in Part IV.

**Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).**

- 1** Enter the amount directly expended by the filing organization for section 527 exempt function activities . . . . . ▶ \$ \_\_\_\_\_
- 2** Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities . . . . . ▶ \$ \_\_\_\_\_
- 3** Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b . . . . . ▶ \$ \_\_\_\_\_
- 4** Did the filing organization file **Form 1120-POL** for this year? . . . . .  Yes  No
- 5** Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
(1)	-----			
(2)	-----			
(3)	-----			
(4)	-----			
(5)	-----			
(6)	-----			

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule C (Form 990 or 990-EZ) 2010

JSA  
0E1264 0.040



**Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

- A** Check  if the filing organization belongs to an affiliated group.
- B** Check  if the filing organization checked box A and "limited control" provisions apply.

<b>Limits on Lobbying Expenditures</b> (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
<b>1 a</b>	Total lobbying expenditures to influence public opinion (grass roots lobbying) . . . . .														
<b>b</b>	Total lobbying expenditures to influence a legislative body (direct lobbying) . . . . .														
<b>c</b>	Total lobbying expenditures (add lines 1a and 1b) . . . . .														
<b>d</b>	Other exempt purpose expenditures . . . . .														
<b>e</b>	Total exempt purpose expenditures (add lines 1c and 1d) . . . . .														
<b>f</b>	Lobbying nontaxable amount. Enter the amount from the following table in both columns.														
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%;">If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
<b>g</b>	Grassroots nontaxable amount (enter 25% of line 1f) . . . . .														
<b>h</b>	Subtract line 1g from line 1a. If zero or less, enter -0- . . . . .														
<b>i</b>	Subtract line 1f from line 1c. If zero or less, enter -0- . . . . .														
<b>j</b>	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? . . . . .		<input type="checkbox"/> Yes <input type="checkbox"/> No												

**4-Year Averaging Period Under Section 501(h)**  
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

<b>Lobbying Expenditures During 4-Year Averaging Period</b>					
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total
<b>2 a</b> Lobbying nontaxable amount					
<b>b</b> Lobbying ceiling amount (150% of line 2a, column (e))					
<b>c</b> Total lobbying expenditures					
<b>d</b> Grassroots nontaxable amount					
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					
<b>f</b> Grassroots lobbying expenditures					

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

Table with 3 main columns: (a) Yes/No, (b) Amount. Rows include: 1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation...; 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

Table with 3 columns: Question, Yes, No. Rows include: 1 Were substantially all (90% or more) dues received nondeductible by members?; 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?; 3 Did the organization agree to carryover lobbying and political expenditures from the prior year?

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes."

Table with 2 columns: Question, Amount. Rows include: 1 Dues, assessments and similar amounts from members; 2 Section 162(e) nondeductible lobbying and political expenditures; 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues; 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?; 5 Taxable amount of lobbying and political expenditures (see instructions)

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and Part II-B, line 1i. Also, complete this part for any additional information.

SEE PAGE 4

Horizontal dashed lines for supplemental information input.

**Part IV** Supplemental Information (continued)

## SCHEDULE C, PART II-B

## LOBBYING EXPENSES

THE COUNCIL FOR ECONOMIC EDUCATION CONDUCTS VERY MINIMAL LOBBYING ACTIVITIES ON ISSUES THAT SUPPORT THE ORGANIZATION'S PRIMARY TAX-EXEMPT MISSION. IN 2010, THE COUNCIL'S PRIMARY LOBBYING ACTIVITIES WERE CONDUCTED BY A CONSULTING FIRM THAT LOBBIED ON ITS BEHALF. THE COUNCIL PAID THIS LOBBYING FIRM \$26,446 IN 2010 (PLEASE REFER BACK TO PART IX, LINE 11(D)). ALSO, SOME OF THE COUNCIL'S OFFICERS AND/OR KEY EMPLOYEES DO SPEND TIME ON LEGISLATIVE MATTERS AND, TO THAT END, THE COUNCIL ALLOCATES A PORTION OF THEIR SALARY TO LOBBYING ACTIVITIES. IN RELEVANT PART, THE COUNCIL ALLOCATED THE FOLLOWING OFFICER AND EMPLOYEE SALARIES AND BENEFITS TO LOBBYING ACTIVITIES:

N. MORRISON	3,551
M. BLANUSA	1,228
B. DEVITA	891
P. ELDER	829
S. GORDON	316
L. WILLIAMS	1,688

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

2010

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Attach to Form 990. See separate instructions.

Name of the organization

COUNCIL FOR ECONOMIC EDUCATION

Employer identification number

13-1623848

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

Table with 3 columns: Line number, Description, (a) Donor advised funds, (b) Funds and other accounts. Rows 1-4 for totals, 5-6 for Yes/No questions.

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

Table with 3 columns: Line number, Description, Held at the End of the Tax Year. Rows 1-9 for various conservation easement questions and a summary table.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

Table with 3 columns: Line number, Description, Amount. Rows 1a, 1b, 2, 2a, 2b for art and historical treasures reporting.

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

Schedule D (Form 990) 2010

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a Public exhibition, b Scholarly research, c Preservation for future generations, d Loan or exchange programs, e Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

b If "Yes," explain the arrangement in Part XIV and complete the following table:

Table with 2 columns: Description, Amount. Rows: 1c Beginning balance, 1d Additions during the year, 1e Distributions during the year, 1f Ending balance.

2a Did the organization include an amount on Form 990, Part X, line 21?

b If "Yes," explain the arrangement in Part XIV.

Part V Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10.

Table with 6 columns: (a) Current year, (b) Prior year, (c) Two years back, (d) Three years back, (e) Four years back. Rows: 1a-1g (Beginning of year balance, Contributions, Net investment earnings, gains, and losses, Grants or scholarships, Other expenditures for facilities and programs, Administrative expenses, End of year balance).

2 Provide the estimated percentage of the year end balance held as:

- a Board designated or quasi-endowment %
b Permanent endowment %
c Term endowment %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) unrelated organizations
(ii) related organizations

Table with 2 columns: Yes, No. Rows: 3a(i), 3a(ii), 3b.

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIV the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Table with 5 columns: Description of investment, (a) Cost or other basis (investment), (b) Cost or other basis (other), (c) Accumulated depreciation, (d) Book value. Rows: 1a Land, b Buildings, c Leasehold improvements, d Equipment, e Other, Total.

**Part VII Investments - Other Securities.** 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 . . . . .		
(2) Closely-held equity interests . . . . .		
(3) Other _____		
(A) _____		
(B) _____		
(C) _____		
(D) _____		
(E) _____		
(F) _____		
(G) _____		
(H) _____		
(I) _____		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

**Part VIII Investments - Program Related.** See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) _____		
(2) _____		
(3) _____		
(4) _____		
(5) _____		
(6) _____		
(7) _____		
(8) _____		
(9) _____		
(10) _____		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

**Part IX Other Assets.** See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) _____	
(2) _____	
(3) _____	
(4) _____	
(5) _____	
(6) _____	
(7) _____	
(8) _____	
(9) _____	
(10) _____	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

**Part X Other Liabilities.** See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Amount	
(1) Federal income taxes		
(2) CAPITAL LEASE OBLIGATIONS	95,756.	
(3) DEFERRED RENT	205,995.	
(4) _____		
(5) _____		
(6) _____		
(7) _____		
(8) _____		
(9) _____		
(10) _____		
(11) _____		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	301,751.	

2. FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

Table with 10 rows and 3 columns: Line number, Description, and Amount. Total revenue is 9,283,746; total expenses are 10,467,887; excess/deficit is -1,184,141.

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Table with 5 main rows and sub-rows (a-e) for adjustments. Total revenue is 9,283,746.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

Table with 5 main rows and sub-rows (a-e) for adjustments. Total expenses are 10,467,887.

Part XIV Supplemental Information

Complete this part to 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, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

SEE PAGE 5

**Part XIV** Supplemental Information (continued)

FIN 48 FOOTNOTE

FORM 990, SCHEDULE D, PART X

CEE FOLLOWS GUIDANCE THAT REQUIRES THAT A TAX POSITION BE RECOGNIZED OR DERECOGNIZED BASED ON A "MORE LIKELY THAN NOT" THRESHOLD. THIS APPLIES TO POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN. DURING FISCAL 2010, CEE EVALUATED ITS TAX POSITIONS AND CONCLUDED THAT IT DOES NOT HAVE ANY UNCERTAIN TAX POSITIONS THAT MEET THE ABOVE CRITERIA. ACCORDINGLY, NO PROVISION HAS BEEN REPORTED IN ACCOMPANYING FINANCIAL STATEMENTS. THE TAX YEARS ENDED 2007, 2008, AND 2009 ARE STILL OPEN TO AUDIT FOR BOTH FEDERAL AND STATE PURPOSES.

REVENUES ON BOOKS NOT ON RETURN

FORM 990 SCHEDULE D PART XII LINE 2

COST OF GOODS SOLD                      \$655,088

EXPENSES ON BOOKS NOT ON RETURN

FORM 990 SCHEDULE D PART XIII LINE 2

COST OF GOODS SOLD                      \$655,088



**SCHEDULE F  
(Form 990)**

**Statement of Activities Outside the United States**

OMB No. 1545-0047

**2010**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization

COUNCIL FOR ECONOMIC EDUCATION

Employer identification number

13-1623848

**Part I** **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

**1 For grantmakers.** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . .  **Yes**  **No**

**2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of grant funds outside the United States.

**3 Activities per Region.** (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1) SUB-SAHARAN AFRICA	0.	0.	PROGRAM SERVICES	TEACHER WORKSHOP	533,442.
(2) SOUTH AMERICA	0.	0.	PROGRAM SERVICES	TEACHER WORKSHOP	572,799.
(3) EAST ASIA AND THE PACIFIC	0.	0.	PROGRAM SERVICES	TEACHER WORKSHOP	428,468.
(4) MIDDLE EAST AND NORTH AFRICA	0.	0.	PROGRAM SERVICES	TEACHER WORKSHOP	74,024.
(5) RUSSIA/INDEPENDENT STATES	0.	0.	PROGRAM SERVICES	TEACHER WORKSHOP	185,427.
(6) EUROPE	0.	0.	PROGRAM SERVICES	TEACHER WORKSHOP	45,930.
(7) NORTH AMERICA	0.	0.	PROGRAM SERVICES	TEACHER WORKSHOP	193,221.
(8)					
(9)					
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
<b>3a</b> Sub-total . . . . .	0.	0.			2,033,311.
<b>b</b> Total from continuation sheets to Part I . . . . .					
<b>c</b> <b>Totals</b> (add lines 3a and 3b)	0.	0.			2,033,311.

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

Schedule F (Form 990) 2010

**Part II Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000  Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			EAST ASIA/PACIFIC	EDUCATION	8,456.	EFT OR WIRE			
(2)			EAST ASIA/PACIFIC	EDUCATION	8,500.	EFT OR WIRE			
(3)			EAST ASIA/PACIFIC	EDUCATION	8,500.	EFT OR WIRE			
(4)			EAST ASIA/PACIFIC	EDUCATION	8,500.	EFT OR WIRE			
(5)			EAST ASIA/PACIFIC	EDUCATION	8,500.	EFT OR WIRE			
(6)			EAST ASIA/PACIFIC	EDUCATION	8,500.	EFT OR WIRE			
(7)			EAST ASIA/PACIFIC	EDUCATION	9,500.	EFT OR WIRE			
(8)			EAST ASIA/PACIFIC	EDUCATION	18,625.	EFT OR WIRE			
(9)			EAST ASIA/PACIFIC	EDUCATION	20,275.	EFT OR WIRE			
(10)			EAST ASIA/PACIFIC	EDUCATION	29,600.	EFT OR WIRE			
(11)			EAST ASIA/PACIFIC	EDUCATION	49,704.	EFT OR WIRE			
(12)			EAST ASIA/PACIFIC	EDUCATION	76,681.	EFT OR WIRE			
(13)			EAST ASIA/PACIFIC	EDUCATION	86,009.	EFT OR WIRE			
(14)			EUROPE/ICELAND/GREENLAND	EDUCATION	7,437.	EFT OR WIRE			
(15)			EUROPE/ICELAND/GREENLAND	EDUCATION	10,000.	EFT OR WIRE			
(16)			EUROPE/ICELAND/GREENLAND	EDUCATION	21,450.	EFT OR WIRE			

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

3 Enter total number of other organizations or entities

**Part II Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000  Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			MIDDLE EAST/NORTH AFRICA	EDUCATION	60,424.	EFT OR WIRE			
(2)			NORTH AMERICA	EDUCATION	5,230.	EFT OR WIRE			
(3)			NORTH AMERICA	EDUCATION	6,280.	EFT OR WIRE			
(4)			NORTH AMERICA	EDUCATION	26,653.	EFT OR WIRE			
(5)			NORTH AMERICA	EDUCATION	71,606.	EFT OR WIRE			
(6)			RUSSIA	EDUCATION	6,295.	EFT OR WIRE			
(7)			RUSSIA	EDUCATION	8,500.	EFT OR WIRE			
(8)			RUSSIA	EDUCATION	8,000.	EFT OR WIRE			
(9)			RUSSIA	EDUCATION	8,500.	EFT OR WIRE			
(10)			RUSSIA	EDUCATION	8,500.	EFT OR WIRE			
(11)			RUSSIA	EDUCATION	8,500.	EFT OR WIRE			
(12)			RUSSIA	EDUCATION	8,520.	EFT OR WIRE			
(13)			RUSSIA	EDUCATION	8,500.	EFT OR WIRE			
(14)			RUSSIA	EDUCATION	8,500.	EFT OR WIRE			
(15)			RUSSIA	EDUCATION	17,000.	EFT OR WIRE			
(16)			RUSSIA	EDUCATION	67,500.	EFT OR WIRE			

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

3 Enter total number of other organizations or entities

**Part II** **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 . . . . .   
 Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			SOUTH AMERICA	EDUCATION	6,790.	EFT OR WIRE			
(2)			SOUTH AMERICA	EDUCATION	15,276.	EFT OR WIRE			
(3)			SOUTH AMERICA	EDUCATION	15,559.	EFT OR WIRE			
(4)			SOUTH AMERICA	EDUCATION	16,226.	EFT OR WIRE			
(5)			SOUTH AMERICA	EDUCATION	17,393.	EFT OR WIRE			
(6)			SOUTH AMERICA	EDUCATION	28,057.	EFT OR WIRE			
(7)			SOUTH AMERICA	EDUCATION	28,663.	EFT OR WIRE			
(8)			SOUTH AMERICA	EDUCATION	36,630.	EFT OR WIRE			
(9)			SOUTH AMERICA	EDUCATION	58,397.	EFT OR WIRE			
(10)			SOUTH AMERICA	EDUCATION	83,329.	EFT OR WIRE			
(11)			SOUTH AMERICA	EDUCATION	102,157.	EFT OR WIRE			
(12)			SOUTH AMERICA	EDUCATION	124,540.	EFT OR WIRE			
(13)			SUB-SAHARAN AFRICA	EDUCATION	8,500.	EFT OR WIRE			
(14)			SUB-SAHARAN AFRICA	EDUCATION	6,375.	EFT OR WIRE			
(15)			SUB-SAHARAN AFRICA	EDUCATION	7,536.	EFT OR WIRE			
(16)			SUB-SAHARAN AFRICA	EDUCATION	8,475.	EFT OR WIRE			

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . .

3 Enter total number of other organizations or entities . . . . .

**Part II** **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000  Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			SUB-SAHARAN AFRICA	EDUCATION	10,276.	EFT OR WIRE			
(2)			SUB-SAHARAN AFRICA	EDUCATION	13,033.	EFT OR WIRE			
(3)			SUB-SAHARAN AFRICA	EDUCATION	27,175.	EFT OR WIRE			
(4)			SUB-SAHARAN AFRICA	EDUCATION	34,324.	EFT OR WIRE			
(5)			SUB-SAHARAN AFRICA	EDUCATION	52,964.	EFT OR WIRE			
(6)			SUB-SAHARAN AFRICA	EDUCATION	60,777.	EFT OR WIRE			
(7)			SUB-SAHARAN AFRICA	EDUCATION	61,695.	EFT OR WIRE			
(8)			SUB-SAHARAN AFRICA	EDUCATION	95,726.	EFT OR WIRE			
(9)			SUB-SAHARAN AFRICA	EDUCATION	98,274.	EFT OR WIRE			
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter  52.

3 Enter total number of other organizations or entities  0.

**Part III** **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 16.  
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1) PROGRAM FEES	SUB-SAHARAN AFRICA	13.	15,250.	EFT OR WIRE			
(2) PROGRAM FEES	SOUTH AMERICA	9.	12,995.	EFT OR WIRE			
(3) PROGRAM FEES	RUSSIA	1.	2,106.	EFT OR WIRE			
(4) PROGRAM FEES	MIDDLE EAST/NORTH AFRICA	6.	7,974.	EFT OR WIRE			
(5) PROGRAM FEES	NORTH AMERICA	8.	11,503.	EFT OR WIRE			
(6) PROGRAM FEES	EAST ASIA/PACIFIC	10.	17,177.	EFT OR WIRE			
(7) MURTINI PENDIT	EAST ASIA/PACIFIC	1.	5,916.	EFT WIRE			
(8) DWI AMIDJONO	EAST ASIA/PACIFIC	1.	6,423.	EFT WIRE			
(9) DWI WULANDARI	EAST ASIA/PACIFIC	1.	6,540.	EFT WIRE			
(10) C. CAJUMBAN	EAST ASIA/PACIFIC	1.	8,055.	EFT WIRE			
(11) EBI JUNAIIDI	EAST ASIA/PACIFIC	1.	14,173.	EFT WIRE			
(12) ANGGINI SETIWAN	EAST ASIA/PACIFIC	1.	14,458.	EFT WIRE			
(13) ISMAEL SOLONO	CENT. AMERICA/CARIBBEAN	1.	5,674.	EFT WIRE			
(14) JORGE CHACON	CENT. AMERICA/CARIBBEAN	1.	7,176.	EFT WIRE			
(15) CARMEN REYNOSO	CENT. AMERICA/CARIBBEAN	1.	8,298.	EFT WIRE			
(16) FLOR SANCHEZ	CENT. AMERICA/CARIBBEAN	1.	21,673.	EFT WIRE			
(17) PATRICIA IBANEZ	CENT. AMERICA/CARIBBEAN	1.	24,676.	EFT WIRE			
(18) O.RESHETNYAK	RUSSIA	1.	15,147.	EFT WIRE			

Schedule F (Form 990) 2010

**Part III** **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 16.  
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1) ROMINA KASMAN	SOUTH AMERICA	1.	6,100.	EFT WIRE			
(2) CARLOS KNAPPS	SOUTH AMERICA	1.	10,640.	EFT WIRE			
(3) E. OOSTHUIZEN	SUB-SAHARAN AFRICA	1.	7,499.	EFT WIRE			
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

**Part IV Foreign Forms**

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* . . . . .  Yes  No
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)* . . . . .  Yes  No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see Instructions for Form 5471)* . . . . .  Yes  No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)* . . . . .  Yes  No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see Instructions for Form 8865)* . . . . .  Yes  No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)* . . . . .  Yes  No



**Part V Supplemental Information**

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

## SCHEDULE F

## PART I, LINE 2

TO QUALIFY FOR ASSISTANCE FROM CEE, THE RECIPIENT MUST BE A REGISTERED EDUCATIONAL ORGANIZATION OR A NON-PROFIT NON-GOVERNMENTAL ORGANIZATION INVOLVED IN TEACHER TRAINING IN ECONOMIC EDUCATION. CEE SELECTS ORGANIZATIONS AND INDIVIDUALS TO SERVE AS LOCAL COORDINATORS OF TRAINING PROGRAMS BASED ON PAST EXPERIENCE AND INVOLVEMENT IN ECONOMIC EDUCATION IN EACH COUNTRY. EITHER THE ORGANIZATION OR INDIVIDUAL SIGNS A CONTRACTUAL AGREEMENT WITH CEE OUTLINING THEIR RESPONSIBILITIES AND COMPENSATION. THE ORGANIZATION MONITORS USE OF FUNDS OUTSIDE OF THE US BY REQUIRING DETAILED NARRATIVE AND FINANCIAL REPORTS FROM EVERY ORGANIZATION. FULL REPORTS MAY BE SUBMITTED IN THE LOCAL LANGUAGE BUT ALL REPORTS MUST INCLUDE AN EXECUTIVE SUMMARY AND DESCRIPTION.

**SCHEDULE G**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information Regarding  
Fundraising or Gaming Activities**

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

OMB No. 1545-0047

**2010**

**Open To Public  
Inspection**

Name of the organization

COUNCIL FOR ECONOMIC EDUCATION

Employer identification number

13-1623848

**Part I**

**Fundraising Activities.** Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

**1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a**  Mail solicitations
- b**  Internet and email solicitations
- c**  Phone solicitations
- d**  In-person solicitations
- e**  Solicitation of non-government grants
- f**  Solicitation of government grants
- g**  Special fundraising events

**2a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?  **Yes**  **No**

**b** If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
			Yes	No			
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
<b>Total</b> .....							

**3** List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

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**Part II Fundraising Events.** Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other Events	(d) Total events	
		AWARDS DINNER (event type)	(event type)	0. (total number)	(add col. (a) through col. (c))	
Revenue	1	Gross receipts . . . . .	401,600.		401,600.	
	2	Less: Charitable contributions . . . . .	359,600.		359,600.	
	3	Gross income (line 1 minus line 2) . . . . .	42,000.		42,000.	
Direct Expenses	4	Cash prizes . . . . .				
	5	Noncash prizes . . . . .				
	6	Rent/facility costs . . . . .	35,772.		35,772.	
	7	Food and beverages . . . . .	29,268.		29,268.	
	8	Entertainment . . . . .				
	9	Other direct expenses . . . . .	67,442.		67,442.	
	10	Direct expense summary. Add lines 4 through 9 in column (d) . . . . . ▶				( 132,482.)
	11	Net income summary. Combine line 3, column (d), and line 10 . . . . . ▶				-90,482.

**Part III Gaming.** Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))	
Revenue	1	Gross revenue . . . . .				
Direct Expenses	2	Cash prizes . . . . .				
	3	Noncash prizes . . . . .				
	4	Rent/facility costs . . . . .				
	5	Other direct expenses . . . . .				
	6	Volunteer labor . . . . .	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7	Direct expense summary. Add lines 2 through 5 in column (d) . . . . . ▶				( )
	8	Net gaming income summary. Combine line 1, column d, and line 7 . . . . . ▶				

9 Enter the state(s) in which the organization operates gaming activities: \_\_\_\_\_

a Is the organization licensed to operate gaming activities in each of these states?  Yes  No

b If "No," explain: \_\_\_\_\_

10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?  Yes  No

b If "Yes," explain: \_\_\_\_\_

- 11 Does the organization operate gaming activities with nonmembers?  Yes  No
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?  Yes  No
- 13 Indicate the percentage of gaming activity operated in:
 

a The organization's facility	<b>13a</b>	%
b An outside facility	<b>13b</b>	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ \_\_\_\_\_

Address ▶ \_\_\_\_\_

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?  Yes  No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ \_\_\_\_\_ and the amount of gaming revenue retained by the third party ▶ \$ \_\_\_\_\_.
- c If "Yes," enter name and address of the third party:

Name ▶ \_\_\_\_\_

Address ▶ \_\_\_\_\_

16 Gaming manager information:

Name ▶ \_\_\_\_\_

Gaming manager compensation ▶ \$ \_\_\_\_\_

Description of services provided ▶ \_\_\_\_\_

Director/officer       Employee       Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  Yes  No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ \_\_\_\_\_

**Part IV** **Supplemental Information.** Complete this part to provide the explanation required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

**SCHEDULE I  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Grants and Other Assistance to Organizations,  
Governments, and Individuals in the United States**

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

OMB No. 1545-0047

**2010**

**Open to Public  
Inspection**

Name of the organization

COUNCIL FOR ECONOMIC EDUCATION

Employer identification number

13-1623848

**Part I General Information on Grants and Assistance**

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II Grants and Other Assistance to Governments and Organizations in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(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
(1)	TEXAS COUNCIL ON ECONOMIC ED 1801 ALLEN PARKWAY HOUSTON, TX 77019	23-7024573	501 (C) (3)	62,707.				EDUCATION
(2)	MISSISSIPPI COUNCIL ON ECON ED MILLSAPS COLLEGE JACKSON, MS 39210	82-0563444	501 (C) (3)	40,414.				EDUCATION
(3)	NH JUMPSTART COALITION FOR PERSONAL FINANCIAL LITERACY	02-0520342	501 (C) (3)	11,350.				EDUCATION
(4)	KU ENDOWMENT ASSN FOR THE CEE 1122 W. CAMPUS ROAD, ROOM 331	48-0547734	501 (C) (3)	21,439.				EDUCATION
(5)	WV FINANCIAL EDUCATION FDN 600 QUARRIER STREET CHARLESTON, WV 25301	04-3610357	501 (C) (3)	17,762.				EDUCATION
(6)	SALEM STATE COLLEGE 352 LAFAYETTE STREET SALEM, MA 01970	04-2325342		9,788.				EDUCATION
(7)	AREA COOPERATIVE EDUC SVCS 350 STATE STREET NORTH HAVEN, CT 06473	06-0881700	501 (C) (3)	23,333.				EDUCATION
(8)	MISSISSIPPI STATE UNIV OFFICE OF THE COMPTROLLER	64-6000819	501 (C) (3)	41,667.				EDUCATION
(9)	SYRACUSE UNIVERSITY BURSARS OPERATIONS, 102 ARCHIBOLD GYMNASIUM	15-0532081	501 (C) (3)	16,667.				EDUCATION
(10)	SUPT OF PUBLIC INSTRUCTION OLD CAPITOL BLDG PO BOX 47200	91-600112		10,000.				EDUCATION
(11)	NATL FOUNDATION FOR TEACHING 120 WALL STREET, 29TH ST.	13-3408731	501 (C) (3)	8,750.				EDUCATION
(12)	NFTE - GREATER LOS ANGELES 350 S. BIXEL ST., SUITE 280	13-3408731	501 (C) (3)	5,001.				EDUCATION

- 2 Enter total number of section 501(c)(3) and government organizations
- 3 Enter total number of other organizations

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

Schedule I (Form 990) (2010)

**SCHEDULE I  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Grants and Other Assistance to Organizations,  
Governments, and Individuals in the United States**

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

OMB No. 1545-0047

**2010**

**Open to Public  
Inspection**

Name of the organization

COUNCIL FOR ECONOMIC EDUCATION

Employer identification number

13-1623848

**Part I General Information on Grants and Assistance**

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II Grants and Other Assistance to Governments and Organizations in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(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
(1)	FLORIDA COUNCIL ON ECONOMIC EDUCATION 121 N WESTSHORE BOULEVARD, SUITE 305	59-1643458	501 (C) (3)	18,333.				EDUCATION
(2)	RHODE IS JUMPSTART COALITION FOR PERSONAL FINANCL LITERACY	20-1101662	501 (C) (3)	21,667.				EDUCATION
(3)	AMERICAN CREDIT ALLIANCE 2 SOUTH DELMORR AVE. 501	22-3183518	501 (C) (3)	8,080.				EDUCATION
(4)	NJ COALITION FOR FIN EDUCATION ATTN: KENNY LEE, TREASURER	22-3743460	501 (C) (3)	19,333.				EDUCATION
(5)	ALABAMA COUNCIL ON ECON EDUC 205 20TH ST N STE 908	23-7048024	501 (C) (3)	13,430.				EDUCATION
(6)	VIRGINIA COUNCIL ON EC ED VA COMMONWEALTH UNIV RICHMOND, VA 23284	23-7087052	501 (C) (3)	12,384.				EDUCATION
(7)	MISSOURI COUNCIL ON ECON EDUC UNIVERSITY OF MO - KANSAS CITY	23-7112100	501 (C) (3)	27,175.				EDUCATION
(8)	KENTUCKY COUNCIL ON ECON EDUC 11601 BLUEGRASS PKWY LOUISVILLE, KY 40299	23-7356635	501 (C) (3)	19,484.				EDUCATION
(9)	ECON CTR FOR EDUC & RESEARCH UNIVERSITY OF CINCINNATI	31-0898481	501 (C) (3)	21,295.				EDUCATION
(10)	CALIFORNIA COUNCIL ON ECON ED CSU - SAN BERNARDINO	33-0237320	501 (C) (3)	13,312.				EDUCATION
(11)	INDIANA COUNCIL ON ECON EDUC PURDUE UNIVERSITY WEST LAFAYETTE, IN 47907	35-6002041	501 (C) (3)	5,200.				EDUCATION
(12)	ILLINOIS COUNCIL ON ECON ED NORTHERN ILLINOIS UNIVERSITY	36-2650453	501 (C) (3)	17,476.				EDUCATION

2 Enter total number of section 501(c)(3) and government organizations

3 Enter total number of other organizations

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

Schedule I (Form 990) (2010)

**SCHEDULE I  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Grants and Other Assistance to Organizations,  
Governments, and Individuals in the United States**

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

OMB No. 1545-0047

**2010**

**Open to Public  
Inspection**

Name of the organization

COUNCIL FOR ECONOMIC EDUCATION

Employer identification number

13-1623848

**Part I General Information on Grants and Assistance**

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II Grants and Other Assistance to Governments and Organizations in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(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
(1)	U OF IL AT URBANA-CHAMPAIGN CTR FOR ECONOMIC EDUCATION URBANA, IL 61801	37-6000511	501 (C) (6)	20,667.				EDUCATION
(2)	U OF IL AT CHICAGO CTR FOR ECONOMIC EDUCATION	37-6000061	501 (C) (6)	8,625.				EDUCATION
(3)	COOPERATIVE EDUCATIONAL SVC AGENCY #11 TURTLE LAKE, WI 54889	39-1483818		9,969.				EDUCATION
(4)	ECONOMICS WISCONSIN 7635 W. BLUEMOUND ROAD MILWAUKEE, WI 53213	39-6076951	501 (C) (3)	16,466.				EDUCATION
(5)	MN COUNCIL ON ECON EDUCATION U OF MN DEPT OF APPL ECONOMICS	41-6040647	501 (C) (3)	37,108.				EDUCATION
(6)	PROBASCO CHAIR OF FREE U OF TENN-CHATTANOOG SUITE 313 FLETCHER HALL	62-6001636		5,525.				EDUCATION
(7)	UNO CTR FOR ECONOMIC EDUCATION COLLEGE OF BUSINESS ADMIN	47-0049123	501 (C) (3)	7,000.				EDUCATION
(8)	UNIVERSITY OF NE FOUNDATION 1010 LINCOLN MALL, STE 300	47-0379839	501 (C) (3)	15,000.				EDUCATION
(9)	NEBRASKA COUNCIL ON ECON EDUC UNIV OF NEBRASKA-LINCOLN	47-6036149	501 (C) (3)	36,756.				EDUCATION
(10)	KANSAS COUNCIL ON ECON EDUC WICHITA STATE UNIVERSITY	48-6116794	501 (C) (3)	5,214.				EDUCATION
(11)	DELAWARE CEE & ENTRPRENEURSHIP UNIVERSITY OF DELAWARE NEWARK, DE 19716	51-6000279	501 (C) (3)	9,000.				EDUCATION
(12)	MARYLAND COUNCIL ON ECON ED TOWSON UNIV - STEPHENS HL 112	52-0743956	501 (C) (3)	26,225.				EDUCATION

- 2 Enter total number of section 501(c)(3) and government organizations
- 3 Enter total number of other organizations

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

Schedule I (Form 990) (2010)

**SCHEDULE I  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Grants and Other Assistance to Organizations,  
Governments, and Individuals in the United States**

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.  
▶ Attach to Form 990.

OMB No. 1545-0047

**2010**

**Open to Public  
Inspection**

Name of the organization

COUNCIL FOR ECONOMIC EDUCATION

Employer identification number

13-1623848

**Part I General Information on Grants and Assistance**

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II Grants and Other Assistance to Governments and Organizations in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(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
(1)	NATIONAL ASSOCIATION OF ECON EDUCATORS UIC CENTER FOR ECONOMIC EDUCATION	31-1093778	501 (C) (6)	7,500.				EDUCATION
(2)	FIRST NATIONS OWEESTA CORP 910 5TH STREET, SUITE 101	54-1970097	501 (C) (3)	8,333.				EDUCATION
(3)	NC COUNCIL ON ECONOMIC EDUCATION 3825 BARRETT DRIVE SUITE 103	23-7115503	501 (C) (3)	34,275.				EDUCATION
(4)	S.CAROLINA COUNCIL ON ECON ED U OF SOUTH CAROLINA COLUMBIA, SC 29208	57-0706566	501 (C) (3)	7,940.				EDUCATION
(5)	GEORGIA COUNCIL ON ECON EDUC P.O.BOX 1619 ATLANTA, GA 30301-1619	58-1137332	501 (C) (3)	39,250.				EDUCATION
(6)	GEORGIA COLLEGE & STATE UNIV CAMPUS BOX 22 MILLEDGEVILLE, GA 31061	58-6043972	501 (C) (3)	8,333.				EDUCATION
(7)	EASTERN KENTUCKY UNIVERSITY 520 LANCASTER AVE RICHMOND, KY 40475	61-1011211	501 (C) (3)	25,923.				EDUCATION
(8)	JR ACHIEVEMENT OF GREATER NEW ORLEANS 5100 ORLEANS AVENUE NEW ORLEANS, LA 70124	72-0469314	501 (C) (3)	10,000.				EDUCATION
(9)	OKLAHOMA COUNCIL ON ECON EDUC UNIV OF CENTRAL OKLAHOMA EDMOND, OK 73034	73-6102613	501 (C) (3)	27,427.				EDUCATION
(10)	IDAHO STATE UNIVERSITY CTR FOR ECONOMIC EDUCATION	82-6000924	501 (C) (3)	5,092.				EDUCATION
(11)	COLORADO COUNCIL ON ECON EDUC 3443 S. GALENA STREET DENVER, CO 80231	84-0646077	501 (C) (3)	15,278.				EDUCATION
(12)	ARIZONA COUNCIL ON EC ED 6991 E. CAMELBACK ROAD SCOTTSDALE, AZ 85251	86-0896574	501 (C) (3)	19,533.				EDUCATION

- 2 Enter total number of section 501(c)(3) and government organizations
- 3 Enter total number of other organizations

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

Schedule I (Form 990) (2010)



**SCHEDULE I  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Grants and Other Assistance to Organizations,  
Governments, and Individuals in the United States**

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.  
▶ Attach to Form 990.

OMB No. 1545-0047

**2010**

**Open to Public  
Inspection**

Name of the organization

COUNCIL FOR ECONOMIC EDUCATION

Employer identification number

13-1623848

**Part I General Information on Grants and Assistance**

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II Grants and Other Assistance to Governments and Organizations in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(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
(1)	LABOR-RELIGION COALITION NYS 800 TROY-SCHENECTADY ROAD	14-1798943	501 (C) (3)	5,084.				EDUCATION
(2)	WASHINGTON COUNCIL ON EC ED W. WASH UNIV - MS 9074	91-6061016	501 (C) (3)	5,294.				EDUCATION
(3)	FINANCIAL BEGINNINGS 7327 SW BARNES ROAD, #213	20-3530960	501 (C) (3)	6,008.				EDUCATION
(4)	RIVERSIDE UNIFIED SCHOOL DIST 6050 INDUSTRIAL AVENUE RIVERSIDE, CA 92504	95-2883296	501 (C) (3)	7,500.				EDUCATION
(5)	HAWAII COUNCIL ON ECON ED 111 HEKILI STREET, SUITE A232	99-6010090	501 (C) (3)	10,000.				EDUCATION
(6)	BEN DAVIS HIGH SCHOOL 1200 NORTH GIRLS SCHOOL ROAD	35-1072270		8,000.				EDUCATION
(7)	CENTRAL INDIANA EDUCATIONAL SERVICES CENTER 6321 LA PAS TRAIL, SUITE 200	35-1811036	501 (C) (3)	8,650.				EDUCATION
(8)	NORTHERN MICHIGAN UNIVERSITY ECON DEPT - CHOHDAS 203A	38-6022906		6,599.				EDUCATION
(9)	GOVERNORS STATE UNIVERSITY OFFICE OF ECONOMIC EDUCATION, 1 UNIVERSITY	36-2684803	501 (C) (3)	6,415.				EDUCATION
(10)	EAST BAY ASIAN LOCAL DEVELOPMENT CORPORATIO 30 EIGHT STREET OAKLAND, CA 94607	51-0171851	501 (C) (3)	8,280.				EDUCATION
(11)								
(12)								

2 Enter total number of section 501(c)(3) and government organizations 59.

3 Enter total number of other organizations 0.

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

Schedule I (Form 990) (2010)

**Part III Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" on 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
1 SCHOLARSHIPS	29.	21,250.			
2					
3					
4					
5					
6					
7					

**Part IV Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information.

SCHEDULE I

PART I, LINE 2

THE COUNCIL FOR ECONOMIC EDUCATION UNDERTAKES A THOROUGH REVIEW PROCESS TO ENSURE THAT ALL GRANT MONIES IT REMITS ARE USED IN A MANNER THAT IS CONSISTENT WITH THE ORGANIZATION'S TAX-EXEMPT MISSION. ONCE THE COUNCIL DISBURSES THE GRANT FUNDS, THE COUNCIL WILL MONITOR THE GRANT BY REQUIRING GRANTEES TO SUBMIT REGULAR REPORTS INDICATING WHAT THE FUNDS WERE USED FOR. CONTINUED SUPPORT THROUGH FUTURE GRANTS IS TYPICALLY CONDITIONED UPON THE RECEIPT OF REPORTS THAT SATISFY THE COUNCIL'S CRITERIA THAT THE FUNDS BE USED FOR EDUCATIONAL PURPOSES. FINALLY, THE

**Part III Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" on 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
1					
2					
3					
4					
5					
6					
7					

**Part IV Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information.

COUNCIL'S PROGRAM OFFICERS WILL FREQUENTLY COMMUNICATE WITH GRANTEEES TO  
ENSURE THAT PROJECTS ARE ON SCHEDULE AND THAT FUNDS ARE BEING USED  
WISELY.

**SCHEDULE J  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Compensation Information**

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

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

**2010**

**Open to Public Inspection**

Name of the organization

COUNCIL FOR ECONOMIC EDUCATION

Employer identification number

13-1623848

**Part I Questions Regarding Compensation**

**1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- |  |  |
|--|--|
| <input type="checkbox"/> First-class or charter travel             | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions                     | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees   |
| <input type="checkbox"/> Discretionary spending account            | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) |

**b** If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain . . . . .

**2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? . . . . .

**3** Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply.

- |  |   |
|--|---|
| <input type="checkbox"/> Compensation committee              | <input checked="" type="checkbox"/> Written employment contract                     |
| <input type="checkbox"/> Independent compensation consultant | <input type="checkbox"/> Compensation survey or study                               |
| <input type="checkbox"/> Form 990 of other organizations     | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

**4** During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment from the organization or a related organization? . . . . .
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan? . . . . .
- c** Participate in, or receive payment from, an equity-based compensation arrangement? . . . . .
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

**Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.**

**5** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization? . . . . .
- b** Any related organization? . . . . .
- If "Yes" to line 5a or 5b, describe in Part III.

**6** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization? . . . . .
- b** Any related organization? . . . . .
- If "Yes" to line 6a or 6b, describe in Part III.

**7** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III . . . . .

**8** Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III . . . . .

**9** If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? . . . . .

	Yes	No
<b>1b</b>		
<b>2</b>		
<b>4a</b>	X	
<b>4b</b>		X
<b>4c</b>		X
<b>5a</b>		X
<b>5b</b>		X
<b>6a</b>		X
<b>6b</b>		X
<b>7</b>	X	
<b>8</b>		X
<b>9</b>		

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

Schedule J (Form 990) 2010

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

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

**Note.** The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 NAN J. MORRISON	(i)	233,333.	0.	305.	0.	0.	233,638.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
2 RENEE M COLOMBO	(i)	167,544.	0.	343.	14,280.	6,891.	189,058.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
3 PATRICIA K ELDER	(i)	176,272.	0.	91,426.	10,200.	440.	278,338.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
4	(i)							
	(ii)							
5	(i)							
	(ii)							
6	(i)							
	(ii)							
7	(i)							
	(ii)							
8	(i)							
	(ii)							
9	(i)							
	(ii)							
10	(i)							
	(ii)							
11	(i)							
	(ii)							
12	(i)							
	(ii)							
13	(i)							
	(ii)							
14	(i)							
	(ii)							
15	(i)							
	(ii)							
16	(i)							
	(ii)							

**Part III Supplemental Information**

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

FORM 990, SCHEDULE J, LINE 4A

TOP 5 HIGHEST PAID EMPLOYEE, PATRICIA ELDER, SEPARATED FROM SERVICE FROM  
THE COUNCIL IN 2010. MS. ELDER RECEIVED \$90,000. THIS PAYMENT HAS BEEN  
REFLECTED IN SCHEDULE J, PART III, COLUMN (B) (III).

**SCHEDULE O**  
(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

Name of the organization

COUNCIL FOR ECONOMIC EDUCATION

**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.

OMB No. 1545-0047

**2010**

**Open to Public  
Inspection**

Employer identification number

13-1623848

FORM 990, PART VI, LINE 11

THE FORM 990 WAS PREPARED BY A NATIONALLY RENOWNED ACCOUNTING FIRM IN CONJUNCTION WITH THE ORGANIZATION'S FINANCIAL DEPARTMENT. A COPY OF THE DRAFT FORM 990 WAS CIRCULATED TO THE FULL BOARD OF DIRECTORS FOR DISCUSSION AND COMMENT. EACH BOARD MEMBER WAS PROVIDED AMPLE OPPORTUNITY TO COMMENT ON THE INFORMATION CONTAINED IN THE 990 PRIOR TO ITS ELECTRONIC FILING WITH THE INTERNAL REVENUE SERVICE.

FORM 990, PART VI, LINE 12

EACH OFFICER, DIRECTOR, TRUSTEE AND KEY EMPLOYEE OF THE ORGANIZATION IS REQUIRED TO ANNUALLY DISCLOSE ANY CONFLICTS OF INTEREST THAT ARISE BY VIRTUE OF THEIR EMPLOYMENT, BOARD SERVICE, OR POSITION WITH THE ORGANIZATION. THE ORGANIZATION MONITORS COMPLIANCE WITH ITS CONFLICT OF INTEREST POLICY THROUGH AN ANNUAL QUESTIONNAIRE/DISCLOSURE STATEMENT THAT IS DISTRIBUTED TO THESE INDIVIDUALS. POTENTIAL CONFLICTS ARE INVESTIGATED IMMEDIATELY.

FORM 990, PART VI, LINE 15

THE ORGANIZATION UNDERTAKES A THOROUGH PROCESS TO ENSURE THAT THE EXECUTIVE COMPENSATION IT PAYS TO ITS TOP MANAGEMENT OFFICIAL AND ALL ITS OFFICERS AND KEY EMPLOYEES IS REASONABLE GIVEN THE MARKET IN WHICH THE ORGANIZATION OPERATES.

FORM 990, PART VI, LINE 19

THE ORGANIZATION MAKES ITS FORM 990 AVAILABLE TO THE PUBLIC BY RETAINING

Name of the organization COUNCIL FOR ECONOMIC EDUCATION	Employer identification number 13-1623848
--	--

A COPY AT ITS PLACE OF BUSINESS AND ON ITS WEBSITE. THE FORM 990 IS  
 LIKEWISE PUBLISHED ON THE INTERNET AT WWW.GUIDESTAR.ORG. THE  
 ORGANIZATION'S FINANCIAL STATEMENTS, GOVERNING DOCUMENTS AND CONFLICT OF  
 INTEREST POLICY ARE NOT ORDINARILY MADE AVAILABLE TO THE PUBLIC, BUT, IF  
 REQUESTED, WILL BE PROVIDED AT MANAGEMENT'S DISCRETION.

FORM 990, PART XI, LINE 5

UNREALIZED GAIN ON INVESTMENTS \$40,611

ATTACHMENT 1

FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

VISION:

THE COUNCIL FOR ECONOMIC EDUCATION ENVISIONS A WORLD IN WHICH PEOPLE  
 ARE EMPOWERED THROUGH ECONOMIC AND FINANCIAL LITERACY TO MAKE  
 INFORMED AND RESPONSIBLE CHOICES THROUGHOUT THEIR LIVES AS CONSUMERS,  
 SAVERS, INVESTORS, WORKERS, CITIZENS, AND PARTICIPANTS IN OUR GLOBAL  
 ECONOMY.

MISSION:

THE MISSION OF THE COUNCIL FOR ECONOMIC EDUCATION IS TWO-FOLD: TO  
 ADVOCATE FOR BETTER AND GREATER SCHOOL-BASED ECONOMIC AND PERSONAL  
 FINANCE EDUCATION AT THE K-12 LEVEL; AND TO EDUCATE YOUNG PEOPLE IN  
 THE UNITED STATES AND AROUND THE WORLD, PRIMARILY THROUGH  
 WELL-PREPARED TEACHERS, SO THEY MAY BECOME EMPOWERED WITH ECONOMIC



Name of the organization

COUNCIL FOR ECONOMIC EDUCATION

Employer identification number

13-1623848

ATTACHMENT 1 (CONT'D)

FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

AND FINANCIAL LITERACY.

DESCRIPTION:

THE COUNCIL FOR ECONOMIC EDUCATION OFFERS COMPREHENSIVE, BEST-IN-CLASS K-12 ECONOMIC AND PERSONAL FINANCE EDUCATION PROGRAMS, INCLUDING THE BASICS OF ENTREPRENEURSHIP, CONSISTING OF TEACHING RESOURCES ACROSS THE CURRICULUM, PROFESSIONAL DEVELOPMENT FOR TEACHERS, AND NATIONALLY-NORMED ASSESSMENT INSTRUMENTS. EACH YEAR, THE COUNCIL'S PROGRAMS REACH MORE THAN 150,000 K-12 TEACHERS AND OVER 15 MILLION STUDENTS IN THE UNITED STATES AND IN MORE THAN 30 OTHER COUNTRIES. THESE PROGRAMS ARE DELIVERED THROUGH A DIVERSIFIED SYSTEM: DIRECTLY FROM THE COUNCIL, THROUGH A NETWORK OF AFFILIATED STATE COUNCILS AND UNIVERSITY-BASED CENTERS FOR ECONOMIC EDUCATION, AND THROUGH OTHER PARTNER ORGANIZATIONS.

ATTACHMENT 2

FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES

<u>DESCRIPTION</u>	<u>GRANTS</u>	<u>EXPENSES</u>	<u>REVENUE</u>
OTHER PROGRAMS DESIGNED TO ADVANCE EDUCATION AMONG STUDENTS	0.	485,674.	0.
TOTALS	<u>0.</u>	<u>485,674.</u>	<u>0.</u>

ATTACHMENT 3

PART VII - CONTINUATION OF OFFICERS, DIRECTORS, TRUSTEES, KEY EMPLOYEES AND HIGHEST COMPENSATED EMPLOYEES

(1)=IND.TRUSTEE/DIR. (2)=INS.TRUSTEE (3)=OFFICER (4)=KEY EMP. (5)=HIGHEST COMP. (6)=FORMER

(A) NAME AND TITLE	(B) HOURS	(C) POSITION						COMPENSATION FROM		
		(1)	(2)	(3)	(4)	(5)	(6)	(D) ORG.	(E) REL. ORG.	(F) OTHER
29 NAN J. MORRISON PRESIDENT & CEO	35.00	X	X					233,638.	0.	0.
30 SIMON MENDELSON										

Name of the organization COUNCIL FOR ECONOMIC EDUCATION	Employer identification number 13-1623848
--	--

				<u>ATTACHMENT 3 (CONT'D)</u>		
	DIRECTOR	1.00	X	0.	0.	0.
31	CATHY E. MINEHAN					
	DIRECTOR	1.00	X	0.	0.	0.
32	JOSEPH A. PERI					
	EVP & COO (THROUGH 2/10)	35.00	X	38,872.	0.	0.
33	RENEE M COLOMBO					
	VP OF DEVELOPMENT (THRU 12/31)	35.00	X	167,887.	0.	21,171.
34	PATRICIA K ELDER					
	VP-INTERNATIONAL (THRU 08/10)	35.00	X	267,698.	0.	10,640.
35	CHRISTOPHER M CALTABIANO					
	VP OF PROGRAM ADMIN	35.00	X	125,239.	0.	10,625.
36	IGOR KUROCHKIN					
	DIR - INFO TECH	35.00	X	119,357.	0.	25,472.

ATTACHMENT 4990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

<u>NAME AND ADDRESS</u>	<u>DESCRIPTION OF SERVICES</u>	<u>COMPENSATION</u>
GRAPHIC EXECUTIONS, INC. 333 HUDSON STREET, 6TH FL NEW YORK, NY 10013	MARKETING SERVICES	149,999.
MACRO INTERNATIONAL INC. P.O. BOX 8500-7030 PHILADELPHIA, PA 19178	PRGM & EVAL SVS	126,982.
BRIDGET ELIAS 146 STERLING PLACE BROOKLYN, NY 11217	MANAGEMENT	126,367.
	TOTAL COMPENSATION	<u>403,348.</u>