Southern Education Foundation, Inc.

Public Inspection Copy For the Year Ended December 31, 2022

TAX RETURNS



SOUTHERN EDUCATION FOUNDATION, INC. INSTRUCTIONS FOR FILING FORM 8879-TE IRS E-FILE SIGNATURE AUTHORIZATION FOR FORM 990 FOR THE YEAR ENDED DECEMBER 31, 2022

THE ORIGINAL IRS E-FILE SIGNATURE AUTHORIZATION FORM SHOULD BE SIGNED (USE FULL NAME) AND DATED BY AN AUTHORIZED OFFICER OF THE ORGANIZATION.

RETURN YOUR SIGNED IRS E-FILE SIGNATURE AUTHORIZATION FORM 8879-TE TO:

SMITH & HOWARD ADVISORY, LLC 271 17TH STREET, NW SUITE 1600 ATLANTA GA 30363

THERE IS NO TAX DUE WITH THE FILING OF THIS RETURN.

AN ADDITIONAL COPY OF THE RETURN SHOULD BE FILED WITH: GEORGIA DEPARTMENT OF REVENUE P.O. BOX 740395 ATLANTA, GA 30374-0395

DO NOT SEPARATELY FILE FORM 990 WITH THE INTERNAL REVENUE SERVICE. DOING SO WILL DELAY THE PROCESSING OF YOUR RETURN. WE MUST RECEIVE YOUR SIGNED FORM BEFORE WE CAN ELECTRONICALLY TRANSMIT YOUR RETURN, WHICH IS DUE ON OR BEFORE NOVEMBER 15, 2023. WE WOULD APPRECIATE YOU RETURNING THIS FORM AS SOON AS POSSIBLE AS THIS WILL EXPEDITE THE PROCESSING OF YOUR RETURN. THE INTERNAL REVENUE SERVICE WILL NOTIFY US WHEN YOUR RETURN IS ACCEPTED. YOUR RETURN IS NOT CONSIDERED FILED UNTIL THE INTERNAL REVENUE SERVICE CONFIRMS THEIR ACCEPTANCE, WHICH MAY OCCUR AFTER THE DUE DATE OF YOUR RETURN.

PUBLIC INSPECTION COPY

Form 8	879	9-T	Ε
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IRS e-file Signature Authorization

Go to www.irs.gov/Form8879TE for the latest information.

OMB No. 1545-0047

tor	al	ax	Exempt Entit	

For calendar year 2022, or fiscal year beginning and ending Do not send to the IRS. Keep for your records.

2022

Department of the Treasury Internal Revenue Service Name of filer

SOUTHERN EDUCATION FOUNDATION, INC Name and title of officer or person subject to tax

13-5562388

EIN or SSN

LEIGHTON O'SULLIVAN, CFO

Type of Return and Return Information Part I

Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

1a	Form 990 check here	Χ	b Total revenue, if any (Form 990, Part	VIII, column (A), line 12)	1b	8,861,264.		
2a	Form 990-EZ check here		b Total revenue, if any (Form 990-EZ, li	ne 9)	2b			
3a	Form 1120-POL check here		b Total tax (Form 1120-POL, line 22) .		3b			
4a	Form 990-PF check here		b Tax based on investment income (Fo	orm 990-PF, Part V, line 5)	4b			
5a	Form 8868 check here		b Balance due (Form 8868, line 3c)		5b			
6a	Form 990-T check here		b Total tax (Form 990-T, Part III, line 4)		6b			
7a	Form 4720 check here		b Total tax (Form 4720, Part III, line 1)					
8a	Form 5227 check here		b FMV of assets at end of tax year (For	orm 5227, Item D)	8b			
9a	Form 5330 check here		b Tax due (Form 5330, Part II, line 19)		9b			
10a	Form 8038-CP check here		b Amount of credit payment requested	I (Form 8038-CP, Part III, line 22)	.10b			
Part	II Declaration and Signa	ture	Authorization of Officer or Perso	n Subject to Tax				
Under	penalties of perjury, I declare that		I am an officer of the above entity or	I am a person subject to tax wit	h resp	pect to (name		
of ent	ity)		, (EIN)	and that I have examine	d a co	py of the		
2022	electronic return and accompanying	j sch	dules and statements, and, to the best o	f my knowledge and belief, they are	true, d	correct, and		
			New 1					

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

PIN: check one box only

X I authorize	SMITH & HOWARD ADVISORY,	to enter my PIN 2 6 1 1 3 as my signature
	ERO firm name	Enter five numbers, but do not enter all zeros

on the tax year 2022 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2022 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Signature of officer or person subject to tax

11/15/2023

Part III	Certification	and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

6	7	8	8	2	7	9	2	0	7	4	
Do not enter all zeros											

Date

I certify that the above numeric entry is my PIN, which is my signature on the 2022 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

The fidele for Bael			1
ERO's signature	alre	Ama	han

Date

ERO Must Retain This Form - See Instructions Do Not Submit This Form to the IRS Unless Requested To Do So

For Privacy Act and Paperwork Reduction Act Notice, see back of form. JSA 2X3008 2.000

Form 8879-TE (2022)

1TYRZN 9242 11 P13/2023 C3 INSPECTION COPY

Form **990** Department of the Treasury

Return of Organization Exempt From Income Tax

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

▶ Do not enter Social Security numbers on this form as it may be made public. ~~~ ~~~

Open to Public

OMB No. 1545-0047

		■ Information about Form 990 and its instructions is		-	Inspection
AF	or th	e 2022 calendar year, or tax year beginning	and ending		
P o		C Name of organization		D Employer ide	entification number
DC	heck if ap	SOUTHERN EDUCATION FOUNDATION, INC.			
	Addre chang			13-	-5562388
	Name	change Number and street (or P.O. box if mail is not delivered to street address) R	Room/suite	E Telephone nu	umber
	Initial	return 101 MARIETTA ST, NW 1650		(40	04)523-0001
	Termi	Other and the second se			· · ·
	Amen			G Gross receipt	ts\$ 9,253,562.
-	return Applic	F Name and address of principal officer:		H(a) Is this a grou	Ip return for Yes X No
	_ pendi	101 MARIETTA ST, NW SUITE 1650, ATLANTA, GA	30303	subordinates' H(b) Are all subordi	?
	Tax				h a list. (see instructions)
		empt status: X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or te: ► WWW.SOUTHERNEDUCATION.ORG	527		
				H(c) Group exemp	
-		of organization: X Corporation Trust Association Other	L Year of to	ormation: 1867 M	State of legal domicile: GA
P	art I	Summary			
	1	Briefly describe the organization's mission or most significant activities: _TO_IMP			LIFE FOR
Ce		DISADVANTAGED RESIDENTS IN THE SOUTHERN UNITED STA	ATES BY 1	PROMOTING	
nar		EQUITY AND EXCELLENCE IN EDUCATION.			
Governance		Check this box > if the organization discontinued its operations or disposed			3 .
ő	3	Number of voting members of the governing body (Part VI, line 1a)			3 9
Activities &	4	Number of independent voting members of the governing body (Part VI, line 1b)			4 9
itie	5	Total number of individuals employed in calendar year 2022 (Part V, line 2a)			5 21
÷		Total number of volunteers (estimate if necessary)			6 9
¥	7a	Total unrelated business revenue from Part VIII, column (C), line 12			7a
		Net unrelated business taxable income from Form 990-T, line 34			7b
				Prior Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)	[_]	3,988,85	50. 7,556,460.
nue		Program service revenue (Part VIII, line 2g)	-		ONE NONE
Revenue		Investment income (Part VIII, column (A), lines 3, 4, and 7d)	SPECTION	985,60	
Ř		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	_	28,81	
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		5,003,27	
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		6,37	
		Benefits paid to or for members (Part IX, column (A), line 4)			DNE NONE
		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		1,598,74	
ses					
Expenses		Professional fundraising fees (Part IX, column (A), line 11e)	••••	321,64	IG. NONE
ĔX		Total fundraising expenses (Part IX, column (D), line 25) ▶184,528.	-	004 73	
		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	••••	804,73	
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	••••	2,731,50	
- s	19	Revenue less expenses. Subtract line 18 from line 12		2,271,76	
Net Assets or Fund Balances				Beginning of Current Y	
sse	20	Total assets (Part X, line 16)		32,697,61	
d E A	21	Total liabilities (Part X, line 26)	_	1,181,92	
		Net assets or fund balances. Subtract line 21 from line 20		31,515,68	8. 29,222,431.
	rt II	Signature Block			
Une	der per	nalties of perjury, I declare that I have examined this return, including accompanying schedule ct, and complete. Declaration of preparer (other than officer) is based on all information of which	es and stateme	nts, and to the best of	my knowledge and belief, it is
	, 00110				
0:-				11/1	L5/2023
Sig		Signature of officer		Date	
He	re	LEIGHTON O'SULLIVAN CFO			
		Type or print name and title			
		Print/Type preparer's name	Date	Check	if PTIN
Paic		SABRE J LINAHAN Jalky Amahan	4	self-employe	ed P01372980
	parer	Firm's name ► SMITH & HOWARD ADVISORY, LLC		Firm's EIN	92-0749631
Use	Only	Firm's address > 271 17TH STREET, NW SUITE 1600 ATLANTA, GA 30363		Phone no.	404-874-6244
May	the II	RS discuss this return with the preparer shown above? (see instructions)			X Yes No
		work Reduction Act Notice, see the separate instructions.		<u></u>	Form 990 (2022)

SOUTHERN	EDUCATION	FOUNDATION,	INC.
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For	m 990 (2022	2)			Page 2
Pa		Statement of Program Service			
1		escribe the organization's missic	a response or note to any line in this Pa on:	rt III	х Х
	-	HEDULE O			
2	Did the (organization undertake any sigr	nificant program services during the ye	ear which were not listed on the	
	prior For	m 990 or 990-EZ?			Yes X No
•		describe these new services on a		kann it ann duata anns mar mar	
3			g, or make significant changes in		Yes X No
	If "Yes," o	describe these changes on Sche	edule O.		
4			ervice accomplishments for each of		
			 e)(4) organizations are required to reported to report each program service reported. 	port the amount of grants and and	
4a			, 293, 250. including grants of \$)
			EGIES, ACTIVITIES AND ACCO		
	-	ULE O.	RAM AREA, PLEASE SEE CONTIN	NUATION ON	
4b	(Code: _) (Expenses \$	including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$	including grants of \$) (Revenue \$)
4d	-	ogram services (Describe on Scl	-		
<u></u>	(Expense			ie\$)	
JSA		gram service expenses			Form 990 (2022)
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SOUTHERN EDUCATION FOUNDATION, INC.

Part	V Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
-	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I.	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	–		
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes,"</i>	-		
0	-	8		x
•	<i>complete Schedule D, Part III</i> Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a	0		
9				
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			37
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	X	L
b	Did the organization report an amount for investments-other securities in Part X, line 12, that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments-program related in Part X, line 13, that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	х	
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII.	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	144		
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	140		
15		45		37
4.0	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		Х
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
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Page **3**

Form 990 (2022)	
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Form 990 (2022)

Part	V Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the			<u> </u>
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
			37	
	employees? If "Yes," complete Schedule J.	23	X	<u> </u>
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			<u> </u>
20 a	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		v
		25a		X
D	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II.	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			
	persons? If "Yes," complete Schedule L, Part III	27		v
~~		21		X
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L,			
	Part IV, instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
		51		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II.	32		<u> </u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34		Х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			\vdash
00	related organization? If "Yes," complete Schedule R, Part V, line 2.	36		v
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			X
31				37
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and			
	19? Note: All Form 990 filers are required to complete Schedule O	38	Х	
Part				
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
	Did the organization comply with backup withholding rules for reportable payments to vendors and			
Ū		1c	Х	
JSA	reportable gaming (gambling) winnings to prize winners?			(2022)
2E1030		rorm	330	(2022)
	ITIKAN 9242 II/I3/2023 I3:44:4I V2Z=/./F /IIIO			

SOUTHERN EDUCATION FOUNDATION, INC.

Form	990 (2022)		F	Page 5
Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return. 2a 21			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
с	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		L
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		<u> </u>
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		<u> </u>
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12 10a	-		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	-		
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders	-		
b	Gross income from other sources. (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	-		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	10		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
-	the organization is licensed to issue qualified health plans			
		14a		X
	Did the organization receive any payments for indoor tanning services during the tax year?	14a 14b		
	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i>	140		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		v
		13		X
40	If "Yes," see the instructions and file Form 4720, Schedule N.	16		х
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	10		Δ
17				
.,	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953?	17		
	If "Yes," complete Form 6069.			

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Form 9	990 (2022	2) SOUTHERN EDUCATION FOUNDATION, INC. 13-556	2388	F	Page 6
Part	t VI	Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b belo			
		response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule C	. See ir	nstruc	tions.
		Check if Schedule O contains a response or note to any line in this Part VI	<u></u>		Х
Sect	ion A.	Governing Body and Management			
				Yes	No
1a	Enter	the number of voting members of the governing body at the end of the tax year 1a	2		
	If ther	e are material differences in voting rights among members of the governing body, or			
	if the	governing body delegated broad authority to an executive committee or similar ittee, explain on Schedule O.			
b		the number of voting members included on line 1a, above, who are independent	9		
2		ny officer, director, trustee, or key employee have a family relationship or a business relationship with			
_		her officer, director, trustee, or key employee?.	2		Х
3		e organization delegate control over management duties customarily performed by or under the direct			
•		<i>v</i> ision of officers, directors, trustees, or key employees to a management company or other person?	3		Х
4		e organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5		e organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6		e organization have members or stockholders?	6		Х
7a		e organization have members, stockholders, or other persons who had the power to elect or appoint			
14		more members of the governing body?	7a		х
h		ny governance decisions of the organization reserved to (or subject to approval by) members,			
N N		nolders, or persons other than the governing body?	7b		х
8		e organization contemporaneously document the meetings held or written actions undertaken during			
0		ar by the following:			
•	-	by the following.	8a	X	
a h		committee with authority to act on behalf of the governing body?	8b	X	
9		e any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
9	the or	ganization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		x
Secti		Policies (This Section B requests information about policies not required by the Internal Revenue	-	ـــــــــــــــــــــــــــــــــــــ	
				Yes	No
10a	Did th	e organization have local chapters, branches, or affiliates?	10a		X
		s," did the organization have written policies and procedures governing the activities of such chapters,			
b		es, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a		e organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b		ibe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a		e organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
		officers, directors, or trustees, and key employees required to disclose annually interests that could give			
D D		conflicts?	12b	X	
~		e organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	,		
U		be on Schedule O how this was done	12c	X	
13		e organization have a written whistleblower policy?	13	X	
14		e organization have a written document retention and destruction policy?	14	X	
15		e process for determining compensation of the following persons include a review and approval by			
15		endent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	-	ganization's CEO, Executive Director, or top management official	15a	x	
a h			15b	X	
U		officers or key employees of the organization			
160					
16a		e organization invest in, contribute assets to, or participate in a joint venture or similar arrangement taxable entity during the year?	16a		х
ь		s," did the organization follow a written policy or procedure requiring the organization to evaluate its			
a		pation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	ordan	zation's exempt status with respect to such arrangements?	16b		
Secti		Disclosure	100		L
17			T (a a a		04(.)
18	(3)s oi	n 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990 nly) available for public inspection. Indicate how you made these available. Check all that apply. Dwn website Another's website X Upon request Other <i>(explain on Schedule O)</i>	-I (sec	tion 5	01(C)
19		be on Schedule O whether (and if so, how) the organization made its governing documents, conflict	of into	reet r	oliov
		nancial statements available to the public during the tax year.	Si into		, oney,
20		the name, address, and telephone number of the person who possesses the organization's books and reco	rde		
		HTON O'SULLIVAN 101 MARIETTA ST, NW, STE 1650 ATLANTA, GA 30303	40		
		523-0001	Form	990	(2022)
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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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.

See the instructions for the order in which to list the persons above.

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

					C)					
(A)	(B)	(do r	not cl		sition	e than c	no	(D)	(E)	(F)
Name and title	Average hours	`						Reportable	Reportable	Estimated amount of other
	per week					compensation compensation contrustee) from the from related		compensation		
	(list any	9 -	Ξ	0	2	역 표	Т	organization (W-2/	organizations (W-2/	from the
	hours for related	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	1099-MISC/	1099-MISC/	organization and
	organizations	fual	tion		nplo	st cc yee	۳	1099-NEC)	1099-NEC)	related organizations
	below	trus	al tri		yee	mp				
	dotted line)	lee	Iste			ssue				
			G G			Ited				
(1) RAYMOND PIERCE	40.00									
PRESIDENT	NONE			Х				335,175.	NONE	50,973.
(2) KENITA WILLIAMS	40.00	-								
CHIEF OPERATING OFFICER	NONE			Х				210,000.	NONE	36,673.
(3) LEIGHTON O'SULLIVAN	40.00	-								
CHIEF FINANCIAL OFFICER	NONE			Х				150,834.	NONE	27,798.
(4) FRED JONES, JR.	40.00	-								
SENIOR DIRECTOR OF PUBLIC POLI	NONE					X		124,370.	NONE	33,971.
(5) MAX ALTMAN	40.00									
DIRECTOR OF RESEARCH AND POLIC	NONE					X		130,833.	NONE	11,098.
(6) DR. MICHAEL NETTLES	2.00	-								
CHAIRMAN	NONE	X						NONE	NONE	NONE
(7) DR. HAKIM LUCAS	2.00	-								
VICE CHAIR	NONE	X						NONE	NONE	NONE
(8) KENNETH JONES II	2.00	-								
SECRETARY	NONE	X						NONE	NONE	NONE
(9) JUDITH LEONARD	2.00	-								
TRUSTEE	NONE	X						NONE	NONE	NONE
(10) LARRY BERGER	2.00	-								
TRUSTEE	NONE	X						NONE	NONE	NONE
(11) AJAY MEHROTA	2.00									
TRUSTEE	NONE	X						NONE	NONE	NONE
(12) MICHELLE WARMAN	2.00									
TRUSTEE	NONE	X						NONE	NONE	NONE
(13) CARESHIA MOORE	2.00									
TRUSTEE	NONE	X						NONE	NONE	NONE
(14) CHARLOTTE MORRIS	2.00									NOVE
TRUSTEE	NONE	Х						NONE	NONE	NONE
										Form 990 (2022)

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SOUTHERN EDUCATION FOUNDATION, INC.

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(A) Name and title		(B) Average				C)			(D)	(E)	(F)
		hours per week (list any hours for related organizations	box, office	unle: er an	heck ss pe d a d	erson lirect	e than o is both or/trust emplo	an	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization
		below dotted line)	Individual trustee or director	Institutional trustee	эг	Key employee	Highest compensated employee	er	(11 2/1000 11100)		and related organizations
			-								
			-								
			-								
			-								
			-								
			-								
			-								
			-								
			-								
			-								
b Sub-total c Total from continuation sheets to P d Total (add lines 1b and 1c)	art VII, Se	ection A							951,212. NONE 951,212.	NON NON NON	
Total number of individuals (including reportable compensation from the or	g but not l	imited to t						o re		\$100,000 of	1
Did the organization list any for employee on line 1a? <i>If "Yes," comple</i>											Yes No 3 2
For any individual listed on line 1a organization and related organiza <i>individual</i>	itions gre	eater than	\$15	50,0 • •	00?	• If	"Yes	s," (• •	complete Schedu	le J for such	4 X
Did any person listed on line 1a re for services rendered to the organization											5
Section B. Independent Contractors										there \$100,000	- f
Complete this table for your five hig compensation from the organization. year.											
(SEE SCHEDULE O Name and bu	(A) usiness add	ress							(B) Description of se	ervices	(C) Compensation
P. Total number of independent contr	actors (in	icludina bi	ut not	t lin	nite	d to	thos	e li	sted above) who	received	
more than \$100,000 in compensatio									2		Form 990 (202

Form 990 (2022)

SOUTHERN EDUCATION FOUNDATION, INC. Part VIII Statement of Revenue

r

		Check if Schedule O contains a respor	nse or note to ar	-			
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ŝ,ŝ,	1a	Federated campaigns 1a					
Contributions, Gifts, Grants, and Other Similar Amounts	b	Membership dues					
ΰÊ	c	Fundraising events					
fts, r A	d	Related organizations					
i Gi	e	Government grants (contributions)	306,213.				
ns, Sin	f	All other contributions, gifts, grants,					
er (and similar amounts not included above 1	7,250,247.				
2 P	g	Noncash contributions included in					
dt		lines 1a-1f	\$ 430,305.				
ag	h			7,556,460.			
			Business Code				
<u>c</u> e	2a						
ervi Ie	b						
Program Service Revenue	c						
ran	d						
<u>бо</u>	е						
Ē	f	All other program service revenue					
	g	Total. Add lines 2a-2f		NONE			
	3	Investment income (including dividends,	interest, and				
		other similar amounts).		768,331.			768,331.
	4	Income from investment of tax-exempt bond		NONE			
	5	Royalties		NONE			
		(i) Real	(ii) Personal				
	6a	Gross rents 6a					
	b	Less: rental expenses 6b					
	C .	Rental income or (loss) 6c NONE					
	d Zo	Net rental income or (loss)	(ii) Other	NONE			
	7a	sales of assets					
		other than inventory 7a 850,116.					
đ	b	Less: cost or other basis					
'nu		and sales expenses 7b 392,298.					
Revenue	c	Gain or (loss) 7c 457,818.					
		Not goin or (loss)		457,818.			457,818.
Other	8a	Gross income from fundraising					
ō		events (not including \$					
		of contributions reported on line					
		1c). See Part IV, line 18	NONE				
	b	Less: direct expenses 8b	NONE				
	c	Net income or (loss) from fundraising events		NONE			
	9a	Gross income from gaming					
		activities. See Part IV, line 19 9a	NONE				
	b	Less: direct expenses	NONE				
	с	Net income or (loss) from gaming activities.		NONE			
	10a	Gross sales of inventory, less					
		returns and allowances •••••••10a	NONE				
	b	Less: cost of goods sold 10b	NONE				
	c	Net income or (loss) from sales of inventory.		NONE			
sne			Business Code				_
Miscellaneous Revenue	11a	OTHER INCOME	900099	78,655.			78,655.
ven	b						
Sce	c						
Ϊ	d	All other revenue		78,655.			
	<u>е</u> 12	Total. Add lines 11a-11d Total revenue. See instructions		78,655. 8,861,264.			1,304,804.
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SOUTHERN EDUCATION FOUNDATION, INC.

Section 501(c)(3) and 501(c)(4) organizations must				
Check if Schedule O contains a respo				
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	150,000.	150,000.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	NONE			
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	NONE			
4 Benefits paid to or for members	NONE			
5 Compensation of current officers, directors,	016 600			
 6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and 	816,683.	653,346.	98,002.	65,335
persons described in section 4958(c)(3)(B)	NONE			
7 Other salaries and wages	973,270.	778,616.	116,792.	77,862
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	56,275.	45,020.	6,753.	4,502
9 Other employee benefits	73,051.	58,441.	8,766.	5,844
10 Payroll taxes	123,770.	99,016.	14,852.	9,902
11 Fees for services (nonemployees):				
a Management	1,090,214.	955,916.	117,620.	16,678
b Legal	54,337.	5,944.	48,393.	
c Accounting	47,075.		47,075.	
d Lobbying	NONE			
e Professional fundraising services. See Part IV, line 17.	NONE			
f Investment management fees	128,281.		128,281.	
g Other. (If line 11g amount exceeds 10% of line 25, column				
(A), amount, list line 11g expenses on Schedule O.)	74,564.	74,564.		
12 Advertising and promotion	40,477.	27,054.	13,423.	
13 Office expenses	80,881.	45,887.	34,048.	946
I4 Information technology	10,731.	1,530.	9,201.	
15 Royalties	NONE	184.050	10.201	
16 Occupancy	193,613.	174,252.	19,361.	
17 Travel 18 Payments of travel or entertainment expenses	NONE			
for any federal, state, or local public officials	NONE			
19 Conferences, conventions, and meetings	197,237.	113,613.	81,190.	2,434
20 Interest	NONE			
21 Payments to affiliates	NONE			
22 Depreciation, depletion, and amortization	63,933.	63,933.		
23 Insurance	3,737.		3,737.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column				
(A), amount, list line 24e expenses on Schedule O.)				
a DUES AND SUBSCRIPTIONS	57,408.	26,618.	29,765.	1,025
b HONORARIA	27,000.	19,500.	7,500.	
c TAXES & LICENSES	4,973.		4,973.	
d				
e All other expenses				
 25 Total functional expenses. Add lines 1 through 24e 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if 	4,267,510.	3,293,250.	789,732.	184,528

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following SOP 98-2 (ASC 958-720)

Form 990 (2022)

Form 990 (2022)

Page	1	1
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		Check if Schedule O contains a response or note to any line in this Pa		•••	
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	NONE 1	1	NON
	2	Savings and temporary cash investments	1,981,934. 2	2	169,925
	3	Pledges and grants receivable, net	2,000,000. 3	3	1,278,450
	4	Accounts receivable, net	NONE 4	4	NOI
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons	NONE 5	5	NOI
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)	NONE 6	6	NOI
ts	7	Notes and loans receivable, net	NONE 7	7	NOI
Assets	8	Inventories for sale or use	NONE 8	3	NOI
τļ	9	Prepaid expenses and deferred charges	NONE 9	Э	NOI
	10 a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 478,694.			
	b	Less: accumulated depreciation	223,866.10	Dc	159,933
	11	Investments - publicly traded securities	27,761,743. 1		28,159,369
	12	Investments - other securities. See Part IV, line 11	NONE 1		NO
	13	Investments - program-related. See Part IV, line 11	NONE 1		NO
	14	Intangible assets	NONE 1		NO
	15	Other assets. See Part IV, line 11	730,073. 1		637,048
	16	Total assets. Add lines 1 through 15 (must equal line 33)	32,697,616. 1		30,404,725
	17	Accounts payable and accrued expenses	75,923. 1		280,085
	18	Grants payable	NONE 1		NO
	19	Deferred revenue SEE SCHEDULE O	NONE 1		200,000
	20	Tax-exempt bond liabilities	NONE 2		NO
	21	Escrow or custodial account liability. Complete Part IV of Schedule D	NONE 2		NO
	22	Loans and other payables to any current or former officer, director,			1.0.
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons	NONE 2	2	NO
	23	Secured mortgages and notes payable to unrelated third parties	NONE 2		NO
	24	Unsecured notes and loans payable to unrelated third parties	NONE 2		NO
	25	Other liabilities (including federal income tax, payables to related third		-	110.
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D	1,106,005. 2	5	702,209
	26	Total liabilities. Add lines 17 through 25.	1,181,928. 2		1,182,294
	20	Organizations that follow FASB ASC 958, check here X and complete lines 27, 28, 32, and 33.	1,101,920.		1,102,25
an	27	Net assets without donor restrictions	17,831,927. 2	7	16,517,736
09	28	Net assets with donor restrictions.	13,683,761. 2		12,704,695
U Fuild Balailces		Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.	15,005,701.		12,701,055
Б	29	Capital stock or trust principal, or current funds	2	9	
212	30	Paid-in or capital surplus, or land, building, or equipment fund	3		
ASSELS	31	Retained earnings, endowment, accumulated income, or other funds	3		
E	32	Total net assets or fund balances			20 222 121
Net	33	Total liabilities and net assets/fund balances	31,515,688. 3 32,697,616. 3	3	29,222,431 30,404,725

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1 Total revenue (must equal Part VIII, column (A), line 12) 2 Total expenses (must equal Part IX, column (A), line 25)

Form 990 (2022) Part XI

Reconciliation of Net Assets	
Check if Schedule O contains a response or note to any line in this Part XI	<u> </u>
revenue (must equal Part VIII, column (A), line 12)	<u>,861,264</u> .
	<u>,267,510</u> .
nue less expenses. Subtract line 2 from line 1	<u>,593,754</u> .
assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	<u>,515,688</u> .

3	Revenue less expenses. Subtract line 2 from line 1	3		4,5	93,	<u>754</u> .
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	3	<u>31,5</u>	15,	<u>688</u> .
5	Net unrealized gains (losses) on investments	5	-	-6,8	87,	<u>011</u> .
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O).	9				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	32, column (B))	10	2	29,2	22,	431.
Part						
	Check if Schedule O contains a response or note to any line in this Part XII					
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," ex	olain	on			
	Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were com					
	reviewed on a separate basis, consolidated basis, or both:	p	•.			
	Separate basis Consolidated basis Both consolidated and separate basis					
h	Were the organization's financial statements audited by an independent accountant?			2b	x	
b	If "Yes," check a box below to indicate whether the financial statements for the year were audit					
	separate basis, consolidated basis, or both:	50 01	ıa			
	X Separate basis Consolidated basis Both consolidated and separate basis					
-			. of			
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for ove	-		2c	x	
	the audit, review, or compilation of its financial statements and selection of an independent accountar			20		
	If the organization changed either its oversight process or selection process during the tax year, ex	piain	on			
-	Schedule O.					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set for			20		v
-	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?			3a		<u>X</u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under	•		24		
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such au	aits .	• •	3b	000	(0000)

Form **990** (2022)

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(Form	990)	

Total

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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.

OMB No. 1545-0047 **Open to Public**

Go to www.irs.gov/Form990 for instructions and the latest information

	e of the organization					Employer identifi	inspection
	-						
	UTHERN EDUCATION FOUND rt I Reason for Public Cha		organizations must	comple	ete this r		562388
	organization is not a private four		<u> </u>			/	
1	A church, convention of chu			-	-	-	
2	A school described in secti						
3	A hospital or a cooperative			-		(1)(A)(iii).	
4	A medical research organiz		-				(iii). Enter the
	hospital's name, city, and st	-	,	•			()
5	An organization operated f		a college or universit	ty owned	d or ope	erated by a governme	ental unit described in
	section 170(b)(1)(A)(iv). (C	Complete Part II.)					
6	A federal, state, or local go	vernment or gove	rnmental unit describe	d in sect	ion 170(b)(1)(A)(v).	
7	X An organization that norma	ally receives a sub	ostantial part of its su	pport fro	om a go	vernmental unit or fro	om the general public
	described in section 170(b)	(1)(A)(vi). (Compl	ete Part II.)				
8	A community trust describe	ed in section 170(b	o)(1)(A)(vi). (Complete	e Part II.)			
9	An agricultural research org	ganization describe	ed in section 170(b)(1)(A)(ix)	operated	I in conjunction with a	land-grant college
	or university or a non-land-	grant college of ag	griculture (see instruct	tions). Ei	nter the	name, city, and state o	f the college or
	university:						
10	An organization that norma receipts from activities rela support from gross investm acquired by the organizatio	ted to its exempt f rent income and u	unctions, subject to c nrelated business tax	ertain ex able inco	ceptions	s; and (2) no more thar s section 511 tax) from	n 331/3 % of its
11	An organization organized a	•	•				
12	An organization organized a		-	-			
	one or more publicly support	-			-		
	the box on lines 12a throug					-	-
а	U U U U U			-			
	the supported organizatio				ajority of	f the directors or truste	es of the
	supporting organization.						
b							
	control or management o			the sam	e persor	is that control of man	age the supported
с	organization(s). You must	-		ated in c	onnectio	n with and functional	lly integrated with
U	its supported organization	- · ·	·				ny integrated with,
d							ted organization(s)
	that is not functionally inte						
	requirement (see instructi			-			
е	Check this box if the orga	,	•				I, Type III
	functionally integrated, or						
f	Enter the number of supported						
g	Provide the following information	on about the suppo	orted organization(s).				
	(i) Name of supported organization	(ii) EIN	(iii) Type of organization		organization	(v) Amount of monetary	(vi) Amount of
			(described on lines 1-10 above (see instructions))		ur governing ment?	support (see instructions)	other support (see instructions)
				Yes	No	,	,
(A)							
(B)							
(C)							
(D)							
(E)							
_							

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

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Schedule A (Form 990) 2022

Page 2

Schedule A (Form 990) 2022

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.)

Sec	tion A. Public Support								
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total		
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1,565,117.	724,240.	1,389,634.	3,988,850.	1,556,460.	9,224,301.		
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						NONE		
3	The value of services or facilities furnished by a governmental unit to the organization without charge						NONE		
4	Total. Add lines 1 through 3	1,565,117.	724,240.	1,389,634.	3,988,850.	1,556,460.	9,224,301.		
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount								
	shown on line 11, column (f)						2,772,786.		
6	Public support. Subtract line 5 from line 4						6,451,515.		
Sec	tion B. Total Support								
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total		
7	Amounts from line 4	1,565,117.	724,240.	1,389,634.	3,988,850.	1,556,460.	9,224,301.		
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	646,420.	540,226.	426,957.	564,377.	768,331.	2,946,311.		
9	Net income from unrelated business activities, whether or not the business is regularly carried on						NONE		
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	1,286.	24,668.	11,311.	28,818.	78,655.	144,738.		
11	Total support. Add lines 7 through 10						12,315,350.		
12	Gross receipts from related activities, etc. (se	ee instructions)				12			
13	First 5 years. If the Form 990 is for organization, check this box and stop here			, third, fourth,	or fifth tax yea	r as a section	501(c)(3)		
Sec	tion C. Computation of Public Supp								
14	Public support percentage for 2022 (lin					14	52.39 %		
15	Public support percentage from 2021 \$					15	47.11 %		
16a	331/3% support test - 2022. If the org								
	box and stop here. The organization qu			-					
b	331/3% support test - 2021. If the org								
	this box and stop here. The organizatio	-		-					
17a	10%-facts-and-circumstances test - 2	-							
	10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in								
	Part VI how the organization meets t			-	-				
	organization								
b	10%-facts-and-circumstances test - 2	-							
	15 is 10% or more, and if the organiz					•			
	in Part VI how the organization meets			-					
10	organization								
18	•								
	instructions						<u></u>		

Schedule A (Form 990) 2022

Schedule .	A (Form	990) 2022

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons						
b	Amounts included on lines 2 and 3						
	received from other than disqualified persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
с	Add lines 7a and 7b.						
8	Public support. (Subtract line 7c from						
	line 6.)						
	tion B. Total Support		I	1	I		F
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9	Amounts from line 6						
10 a	Gross income from interest, dividends, payments received on securities loans,						
	rents, royalties, and income from similar sources						
h	Unrelated business taxable income (less						
b	section 511 taxes) from businesses						
	acquired after June 30, 1975						
•	Add lines 10a and 10b						
11 11	Net income from unrelated business						
	activities not included on line 10b, whether						
	or not the business is regularly carried on.						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
13	(Explain in Part VI.) Total support. (Add lines 9, 10c, 11,						
13	and 12.)						
14	First 5 years. If the Form 990 is for	the organizati	on's first secon	d third fourth	or fifth tax ve	ar as a section	501(c)(3)
14	organization, check this box and stop here.	-			•		
Sec	tion C. Computation of Public Sup						
15	Public support percentage for 2022 (line 8,		•	ımn (f))		15	%
16	Public support percentage from 2021 Sche	.,	•	.,, = = = = =		16	%
	tion D. Computation of Investment						
17	Investment income percentage for 2022 (lir			13, column (f))		17	%
18	Investment income percentage from 2021					18	%
	331/3% support tests - 2022. If the or						
	17 is not more than 331/3%, check this						
b	331/3% support tests - 2021. If the orga	-	-				
	line 18 is not more than 331/3%, check						
20	Private foundation. If the organization of		•	•			
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(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If "Yes," describe in Part VI when and how the organization made the determination.*
- **c** Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in **Part VI**, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in Part VI.*
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990).*
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI.**
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in Part VI.*
- **c** Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in Part VI.*
- **10 a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If "Yes," answer line 10b below.*
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

Yes No

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

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Schedule A (Form 990) 2022

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V Supporting Organizations (continued)			
	`	Yes	No
Has the organization accepted a gift or contribution from any of the following persons?			
A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
11c below, the governing body of a supported organization?	1a		
A family member of a person described on line 11a above?	1b		
A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c,			
provide detail in Part VI.	1c		

Section B. Type I Supporting Organizations

Part IV

a A 11 b A c A

11

Yes No
 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,

Section C. Type II Supporting Organizations

supervised, or controlled the supporting organization.

 1
 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).
 1
 1
 1

Section D. All Type III Supporting Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously			
	provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how</i>			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's</i>			
	supported organizations played in this regard.	3		

Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).				
а	The organization satisfied the Activities Test. Complete line 2 below.				
b	The organization is the parent of each of its supported organizations. Complete line 3 below.				
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (se	e instr	uctions	s).	
			Yes	No	
2	Activities Test. Answer lines 2a and 2b below.				
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of				
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify				
	those supported organizations and explain how these activities directly furthered their exempt purposes,				
	how the organization was responsive to those supported organizations, and how the organization determined				
	that these activities constituted substantially all of its activities.	2a			

- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If* "Yes," explain in *Part VI* the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. *Answer lines 3a and 3b below.*
- **a** Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If* "Yes" or "No," provide details in **Part VI.**
- **b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in Part VI the role played by the organization in this regard.*

2b

3a

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Schedule A (Form 990) 2022 Page 6 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Part V Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See 1 instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E. (B) Current Year Section A - Adjusted Net Income (A) Prior Year (optional) 1 Net short-term capital gain 1 Recoveries of prior-year distributions 2 2 3 3 Other gross income (see instructions) 4 Add lines 1 through 3. 4 5 5 Depreciation and depletion 6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of 6 property held for production of income (see instructions) 7 Other expenses (see instructions) 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 (B) Current Year Section B - Minimum Asset Amount (A) Prior Year (optional) 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): a Average monthly value of securities 1a **b** Average monthly cash balances 1b c Fair market value of other non-exempt-use assets 1c 1d d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI): 2 Acquisition indebtedness applicable to non-exempt-use assets 2 3 Subtract line 2 from line 1d. 3 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, 4 4 see instructions). 5 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 6 Multiply line 5 by 0.035. 6 7 7 Recoveries of prior-year distributions 8 Minimum Asset Amount (add line 7 to line 6) 8 Section C - Distributable Amount **Current Year** Adjusted net income for prior year (from Section A, line 8, column A) 1 1 2 Enter 0.85 of line 1. 2 3 Minimum asset amount for prior year (from Section B, line 8, column A) 3 4 Enter greater of line 2 or line 3. 4 5 Income tax imposed in prior year 5 6 Distributable Amount. Subtract line 5 from line 4, unless subject to

emergency temporary reduction (see instructions).

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

6

Schedule A (Form 990) 2022

Schedu	le A (Form 990) 2022				Page 7
Part	V Type III Non-Functionally Integrated 509(a)(3)	Supporting Organizat	tions (continued)		
Secti	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish ex			1	
2	Amounts paid to perform activity that directly furthers exer	npt purposes of support	ed		
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpo	ses of supported organi	zations	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - p	rovide details in Part VI)		5	
	Other distributions (<i>describe in Part VI</i>). See instructions.			6	
	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which	the organization is resp	onsive		
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2022 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2022	าร	(iii) Distributable Amount for 2022
_1	Distributable amount for 2022 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2022				
	(reasonable cause required - <i>explain in Part VI)</i> . See				
	instructions.				
3	Excess distributions carryover, if any, to 2022				
a	From 2017				
b	From 2018				
C	From 2019				
d	From 2020				
e	From 2021				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2022 distributable amount				
i	Carryover from 2017 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2022 from				
	Section D, line 7: \$				
<u>a</u>	Applied to underdistributions of prior years				
b	Applied to 2022 distributable amount				
	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2022, if				
	any. Subtract lines 3g and 4a from line 2. For result				
	greater than zero, <i>explain in Part VI</i> . See instructions.				
6	Remaining underdistributions for 2022. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, <i>explain in</i>				
	Part VI. See instructions.				
7	Excess distributions carryover to 2023. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
	Excess from 2018				
	Excess from 2019				
- C	Excess from 2020				
	Excess from 2021				
е	Excess from 2022				

Schedule A (Form 990) 2022

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

PART II, LINE 1

THE ORGANIZATION RECEIVED A ONE-TIME, UNEXPECTED GRANT DURING THE 2022

YEAR OF \$6,000,000. IT HAS NOT BEEN REPORTED IN THE 2022 COLUMN FOR

GRANTS RECEIVED DURING THE YEAR AS IT WAS DEEMED TO MEET THE DEFINITION

OF AN UNUSUAL GRANT.

13-5562388

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

SCHEDULE	Δ	DART	ΤТ	_	OTHER	INCOME
SCUEDOPE	А,	PARI	T T		OINER	TINCOME

DESCRIPTION	2018	2019	2020	2021	2022	TOTAL
OTHER REVENUES	1,286.	24,668.	11,311.	28,818.	78,655.	144,738.
TOTALS	1,286.	24,668.	11,311.	28,818.	78,655.	144,738.

Schedule B (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

OMB No. 1545-0047

Attach to Form 990 or Form 990-PF. Go to www.irs.gov/Form990 for the latest information.

Employer identification number

SOUTHERN EDUCATION FOU	JNDATION, INC.	13-5562388
Organization type (check one):		
Filers of:	Section:	
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private four	ndation
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	on
	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, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions 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 an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled 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. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), 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 its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

	rganization SOUTHERN EDUCATION FOUNDATION, INC.		13-5562388
Part I	Contributors (see instructions). Use duplicate copies of I	Part I if additional space is n	eeded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	N/A	\$250,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	N/A	\$200,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	<u>N/A</u>	\$306,213.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	N/A	\$430,305.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	N/A	\$6,000,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Page **2**

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Schedule B (Form 990) (2022)

Schedule B	(Form 990) (2022)		Page 3
Name of o	rganization SOUTHERN EDUCATION FOUNDATION, INC.		entification number 5562388
Part II	Noncash Property (see instructions). Use duplicate copies of	of Part II if additional space is nee	eded.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
4	STOCK		0.5 (0.0 (0.0.0.0
		<u> 430,305.</u>	06/22/2022
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		_	
		\$	

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Schedule B	(Form 990) (2022)			Page 4					
Name of o	rganization			Employer identification number					
	SOUTHERN EDUCATION FO			13-5562388					
Part III	Exclusively religious, charitable, etc. (10) that total more than \$1,000 for the following line entry. For organizati contributions of \$1,000 or less for the Use duplicate copies of Part III if addit	the year from any ons completing Par e year. (Enter this in	one contributor. (t III, enter the total formation once. S	Complete columns (a) through (e) and of <i>exclusively</i> religious, charitable, etc.,					
(a) No. from Part I	(b) Purpose of gift	(c) Use		(d) Description of how gift is held					
	Transferee's name, address, a	(e) Transf and ZIP + 4	_	ship of transferor to transferee					
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held					
	(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee								
(a) No									
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held					
		(e) Transfer of gift							
	Transferee's name, address, a	and ZIP + 4	Relations	ship of transferor to transferee					
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held					
	Transferee's name, address, a	(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee							
		··· • •		• • • • • • • • • • • • • • • • • • • •					

Schedule B (Form 990) (2022)

	Section 501(c)(4), (5), or (6) or ne of organization			Employer ide	entification number
	UTHERN EDUCATION FO				562388
		organization is exempt unde	r section 501(c) o		
1	•	the organization's direct and in		•	
	definition of "political cam		·		
2	Political campaign activity	expenditures. See instructions		\$	
	Volunteer hours for politica	al campaign activities. See instruct	ions		
Pai		organization is exempt under			
1	Enter the amount of any e	xcise tax incurred by the organizat	ion under section 49	955\$	
2		xcise tax incurred by organization			
3		a section 4955 tax, did it file Form			
	If "Yes," describe in Part IV		• • • • • • • • • • • •	• • • • • • • • • • • • • • • •	Yes N
		organization is exempt unde	r section 501(c).	except section 501(c)(3).
1	Enter the amount directly	expended by the filing organization	on for section 527 e	exempt function	·
2	Enter the amount of the fil	ing organization's funds contribute ities	ed to other organiza	tions for section	
3 4 5	line 17b Did the filing organization f Enter the names, addresse organization made payme the amount of political co	benditures. Add lines 1 and 2. E file Form 1120-POL for this year? es and employer identification nun nts. For each organization listed, on ntributions received that were pro- und or a political action committee	nber (EIN) of all sec enter the amount pa omptly and directly o	\$ tion 527 political organiz aid from the filing organi delivered to a separate p	Yes Yes N zations to which the filir zation's funds. Also ent olitical organization, su
4	line 17b Did the filing organization f Enter the names, addresse organization made payme the amount of political co	file Form 1120-POL for this year? and employer identification nun nts. For each organization listed, o	nber (EIN) of all sec enter the amount pa omptly and directly o	\$ tion 527 political organiz aid from the filing organi delivered to a separate p	Yes Nuzations to which the filir zation's funds. Also ent olitical organization, suc information in Part IV. (e) Amount of political
4 5	line 17b Did the filing organization Enter the names, addresse organization made payme the amount of political co as a separate segregated f	file Form 1120-POL for this year? as and employer identification nun nts. For each organization listed, on ntributions received that were pro- und or a political action committee	nber (EIN) of all sec enter the amount pa omptly and directly of (PAC). If additional	tion 527 political organiz aid from the filing organi delivered to a separate p space is needed, provide (d) Amount paid from filing organization's	Yes N zations to which the filir zation's funds. Also ent olitical organization, suc information in Part IV. (e) Amount of political contributions received ar promptly and directly delivered to a separate political organization.
4 5	line 17b Did the filing organization Enter the names, addresse organization made payme the amount of political co as a separate segregated f	file Form 1120-POL for this year? as and employer identification nun nts. For each organization listed, on ntributions received that were pro- und or a political action committee	nber (EIN) of all sec enter the amount pa omptly and directly of (PAC). If additional	tion 527 political organiz aid from the filing organi delivered to a separate p space is needed, provide (d) Amount paid from filing organization's	Yes Nuczations to which the filir zation's funds. Also ent olitical organization, suc information in Part IV. (e) Amount of political contributions received an promptly and directly delivered to a separate political organization.
4 5 1) 2)	line 17b Did the filing organization Enter the names, addresse organization made payme the amount of political co as a separate segregated f	file Form 1120-POL for this year? as and employer identification nun nts. For each organization listed, on ntributions received that were pro- und or a political action committee	nber (EIN) of all sec enter the amount pa omptly and directly of (PAC). If additional	tion 527 political organiz aid from the filing organi delivered to a separate p space is needed, provide (d) Amount paid from filing organization's	Yes N zations to which the filir zation's funds. Also ent olitical organization, suc information in Part IV. (e) Amount of political contributions received ar promptly and directly delivered to a separate political organization.
4 5 1) 2) 3)	line 17b Did the filing organization Enter the names, addresse organization made payme the amount of political co as a separate segregated f	file Form 1120-POL for this year? as and employer identification nun nts. For each organization listed, on ntributions received that were pro- und or a political action committee	nber (EIN) of all sec enter the amount pa omptly and directly of (PAC). If additional	tion 527 political organiz aid from the filing organi delivered to a separate p space is needed, provide (d) Amount paid from filing organization's	Yes N zations to which the filin zation's funds. Also ent olitical organization, su information in Part IV. (e) Amount of political contributions received ar promptly and directly delivered to a separate political organization.
4	line 17b Did the filing organization Enter the names, addresse organization made payme the amount of political co as a separate segregated f	file Form 1120-POL for this year? as and employer identification nun nts. For each organization listed, on ntributions received that were pro- und or a political action committee	nber (EIN) of all sec enter the amount pa omptly and directly of (PAC). If additional	tion 527 political organiz aid from the filing organi delivered to a separate p space is needed, provide (d) Amount paid from filing organization's	Yes N zations to which the filin zation's funds. Also ent olitical organization, su information in Part IV. (e) Amount of political contributions received ar promptly and directly delivered to a separate political organization.

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for instructions and the latest information.

Internal Revenue Service If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, 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.

SCHEDULE C

Department of the Treasury

(Form 990)

JSA

If the organization answered "Yes," on 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.

OMB No. 1545-0047 ഹ **Open to Public**

Inspection

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Sch	edule C (Form 990) 2022 SOUTHE	RN EDUCATION FOUNDATION, INC	С.	13-5562	2388	Page 2
Pa	art II-A Complete if the organization section 501(h)).	on is exempt under section 501(c)	(3) and filed Form	ι 5768 (election ι	under	
Α		ongs to an affiliated group (and list in Pa of excess lobbying expenditures).	art IV each affiliated	group member's n	ame, a	ddress,
В	Check if the filing organization che	ecked box A and "limited control" provisi	ions apply.			
		ying Expenditures eans amounts paid or incurred.)	(a) Fi organizatio) Affiliat oup tota	
1a	a Total lobbying expenditures to influence	public opinion (grassroots lobbying)				
b	• Total lobbying expenditures to influence	a legislative body (direct lobbying)				
C	: Total lobbying expenditures (add lines 1a	a and 1b)				
c	d Other exempt purpose expenditures		4,26	57,510.		
e	e Total exempt purpose expenditures (add	l lines 1c and 1d)	4,26	57,510.		
f	Lobbying nontaxable amount. Enter the	e amount from the following table in	both			
	columns.		36	53,376.		
	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 \$1,00	00,000.			
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500	0,000.			
	Over \$17,000,000	\$1,000,000.				
ç	g Grassroots nontaxable amount (enter 25	% of line 1f)	· · · ·	90,844.		
h	n Subtract line 1g from line 1a. If zero or le	ss, enter -0-				
i	Subtract line 1f from line 1c. If zero or les	ss, enter -0-				
j	If there is an amount other than zero	on either line 1h or line 1i, did the o	organization file For	m 4720	_	
	reporting section 4911 tax for this year?			· · · · · · · · · · · · · · · · · · ·	Yes	X 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 separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period									
	Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) Total			
2a	Lobbying nontaxable amount	369,663.	316,900.	286,575.	363,376.	1,336,514.			
b	Lobbying ceiling amount (150% of line 2a, column (e))					2,004,771.			
с	Total lobbying expenditures								
d	Grassroots nontaxable amount	92,416.	79,225.	71,644.	90,844.	334,129.			
е	Grassroots ceiling amount (150% of line 2d, column (e))					501,194.			
f	Grassroots lobbying expenditures								

Schedule C (Form 990) 2022

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)).

For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed		(b)			
	cription of the lobbying activity.	Yes	No	Am	ount	
1	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?.					
С	Media advertisements?					
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities?					
j	Total. Add lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Pa	t III-A Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6).	(c)(5)	, or s	section		
					Yes	No
						(

			res	NO
1	Were substantially all (90% or more) dues received nondeductible by members?	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		
3	Did the organization agree to carry over lobbying and political campaign activity 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) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
а	Current year	2a	
	Carryover from last year.		
	Total.	-	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
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 expenditures next year?	4	
5	Taxable amount of lobbying and political expenditures. See instructions.	5	

Part IV **Supplemental Information**

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (See instructions); and Part II-B, line 1. Also, complete this part for any additional information.

SCHEE	DULE D
(Form	990)

Department of the Treasury

Supplemental Financial Statements Complete if the organization answered "Yes" on Form 990,

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information. **Open to Public** Inspection

2

OMB No. 1545-0047

Internal Revenue	e Service		Go
Name of the org	ganization		
SOUTHERN	EDUCATI	ON FOU	NDATIC
Part I	Organiza	tions M	aintainin

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Employer identification number

SOU	JTHERN EDUCATION FOUNDATION, INC.	13-5562388
Pa	rt I Organizations Maintaining Donor Advised Funds or Other Similar Funds or A	Accounts.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 6.	
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate value of contributions to (during year).	
3	Aggregate value of grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in	
	funds are the organization's property, subject to the organization's exclusive legal control?	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant fun	
	only for charitable purposes and not for the benefit of the donor or donor advisor, or for any	
	conferring impermissible private benefit?	Yes 🛄 No
Pa	Int II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the organization (check all that apply).	
•		a historically important land area
		a certified historic structure
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the	he form of a conservation
-	easement on the last day of the tax year.	Held at the End of the Tax Year
а		2a
b		2b
С		2c
d	Number of conservation easements included in (c) acquired after July 25, 2006, and not on	
		2d
3	Number of conservation easements modified, transferred, released, extinguished, or termina	ated by the organization during the
	tax year	
4	Number of states where property subject to conservation easement is located	
5	Does the organization have a written policy regarding the periodic monitoring, inspection	-
	violations, and enforcement of the conservation easements it holds?	
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing co	onservation easements during the year
_		
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing con	iservation easements during the year
•	Does each conservation easement reported on line 2(d) above satisfy the requirements of section	170/h)//)/D)/i)
8		
9	and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its reve	Yes V No
5	balance sheet, and include, if applicable, the text of the footnote to the organization's final	-
	organization's accounting for conservation easements.	
Pa	rt III Organizations Maintaining Collections of Art, Historical Treasures, or Other S	Similar Assets.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB ASC 958, not to report in its revenue of art, historical treasures, or other similar assets held for public exhibition, education, o	statement and balance sheet works
	of art, historical treasures, or other similar assets held for public exhibition, education, o service, provide in Part XIII the text of the footnote to its financial statements that describes the	r research in furtherance of public
b	If the organization elected, as permitted under FASB ASC 958, to report in its revenue sta	
~	art, historical treasures, or other similar assets held for public exhibition, education, or resea	arch in furtherance of public service,
	provide the following amounts relating to these items:	-
	(i) Revenue included on Form 990, Part VIII, line 1	
	(ii) Assets included in Form 990, Part X	
2	If the organization received or held works of art, historical treasures, or other similar as	sets for financial gain, provide the
	following amounts required to be reported under FASB ASC 958 relating to these items:	
a L	Revenue included on Form 990, Part VIII, line 1.	
b	Assets included in Form 990, Part X	\$ Schedule D (Form 990) 2022
FOR JSA	Paperwork Reduction Act Notice, see the instructions for Form 990.	

Sche		THERN EDUCAT							562388	
Ра	rt III Organizations Maintaini	ng Collections of	of Art, Histo	orical Tre	asures	s, or O	ther Similar A	Assets (C	continue	ed)
3	Using the organization's acquisitio collection items (check all that appl		l other recor	ds, check	k any o	of the fo	ollowing that n	nake sign	iificant u	ise of its
а	Public exhibition	,	d	Loan d	or excha	ande pr	ogram			
b	Scholarly research		e	Other		5 1	5			
c	Preservation for future gener	ations								
4	Provide a description of the organ		ns and expl	ain how t	hev fur	ther th	e organization'	s exemnt	nurnos	e in Part
•	XIII.				iney rui		lo organization	o oxompi	puipoo	o in i uit
5	During the year, did the organizatio	n solicit or receive	e donations c	of art, histo	orical tr	easures	s, or other simil	ar		
	assets to be sold to raise funds rath	er than to be mai	ntained as pa	art of the o	organiza	ation's o	collection?	L	Yes	No
Pa	rt IV Escrow and Custodial An Complete if the organiza		Yes" on For	m 990, F	Part IV,	line 9,	or reported a	n amour	nt on Fo	rm
	990, Part X, line 21.									
1a	Is the organization an agent, trust			-				ets not	_	
	included on Form 990, Part X?							L	Yes	No
b	If "Yes," explain the arrangement in	n Part XIII and co	mplete the fo	llowing tab	ole:					
								Amount		
С	Beginning balance					1c				
d	Additions during the year					1d				
е	Distributions during the year					1e				
f	Ending balance					1f				
2a	Did the organization include an am	ount on Form 990), Part X, line	e 21, for e	scrow	or custo	odial account lia	bility?	Yes	No No
b	If "Yes," explain the arrangement in	n Part XIII. Check	here if the e	xplanation	has be	en prov	ided on Part XII	۱		
Pa	rt V Endowment Funds. Complete if the organiza	tion answered "	Yes" on For	m 990, F	Part IV,	line 10	D.			
		(a) Current year	(b) Pric	or year	(c) Tw	o years b	ack (d) Three y	ears back	(e) Four	years back
1a	Beginning of year balance	21,683,761.	19,9	97,624.	19,	944,961	. 21,54	16,559.	22,5	530,704.
	Contributions	259,200.		00,000.		868,028		9,119.		393,933.
b										
С	Net investment earnings, gains,	-110,353.		74,239.		54,026	F	58,574.	-	-25,383.
ام	and losses	150,000.		6,379.		580,391		33,964.		197,221.
a	Grants or scholarships	100,0001		070701		500,551		,5,5011		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
е	Other expenditures for facilities	788,722.	2	99,009.		152,780	1 60	93,368.	1 4	128,989.
	and programs	189,191.		82,714.		136,220		91,959.		126,985.
t	Administrative expenses	20,704,695.		83,761.		997,624		4,961.		
g	End of year balance							14,901.	21,5	546,559.
2 a	Provide the estimated percentage Board designated or quasi-endowm			e (line 1g,	column	i (a)) he	eld as:			
b	Permanent endowment 2.180	<u>)0</u> %								
С	Term endowment59.1800 %									
	The percentages on lines 2a, 2b, a	nd 2c should equa	al 100%.							
3a	Are there endowment funds not in t	the possession of	the organiza	ation that	are hel	d and a	administered for	the	_	
	organization by:									Yes No
	(i) Unrelated organizations								3a(i)	Х
	(ii) Related organizations								3a(ii)	Х
b	If "Yes" on line 3a(ii), are the relate	d organizations lis	ted as require	ed on Sch	edule R	?			3b	
4	Describe in Part XIII the intended u	ses of the organi	zation's endo	wment fur	nds.					
Ра	rt VI Land, Buildings, and Equ Complete if the organization	i ipment. ation answered "	Yes" on Fo	rm 990, I	Part IV	, line 1	1a. See Form	990, Pa	rt X, line	e 10.
	Description of property		or other basis vestment)	(b) Cost o	or other ba ther)	asis (c) Accumulated depreciation	(d)) Book val	ue
1a	Land	,	oounonuj	0,			Septemation			
b	Buildings			,	318,05	53	222,700.		0	5,353.
	_				, 10, 05		222,100.		9	
c C	Leasehold improvements									
d	Equipment			-	<u> </u>	11	00.001			4 500
e Tota	Other I. Add lines 1a through 1e. <i>(Column</i>	(d) must source [F	rm 000		<u>60,64</u>		96,061.			<u>4,580.</u>
Tota	n. Auu illies la lillough le. (Column	(u) must equal F	лпі 990, Pan	∧, coiumi	и (D), III	ie 100.)		Sahadi		9,933. m 990) 2022

Schedule D (Form 990) 2022

JSA 2E1269 1.000 **Investments - Other Securities.**

Part VII

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12. (a) Description of security or category (b) Book value (c) Method of valuation: (including name of security) 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) Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) **Investments - Program Related.** Part VIII Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13. (a) Description of investment (b) Book value (c) Method of valuation: Cost or end-of-year market value (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15. (a) Description (b) Book value (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.). Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. 1. (a) Description of liability (b) Book value (1) Federal income taxes (2) OPERATING LEASE LIABILITY 702,209 (3) PAYCHECK PROTECTION LOAN NONE (4)(5) (6)(7)(8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) 702,209 2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII . Х

Schedu	ILE D (Form 990) 2022 SOUTHERN EDUCATION FOUNDATION, INC.	13-	-5562388 Page 4
Part	XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Retur Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	n.	
1	Total revenue, gains, and other support per audited financial statements	1	1,845,972.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments 2a 6,887,011.		
b	Donated services and use of facilities 2b		
с	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	-6,887,011.
3	Subtract line 2e from line 1	3	8,732,983.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIII.) 4b		
с	Add lines 4a and 4b	4c	128,281.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	8,861,264.
Dent	VII Decenciliation of European new Audited Einspeich Otatements Mith. European Pat		
Part	XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Retu Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	urn.	
Part	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	urn.	4,139,229.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements		4,139,229.
1	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:		4,139,229.
1 2	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities		4,139,229.
1 2 a	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments		4,139,229.
1 2 a b	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements		4,139,229.
1 2 a b c	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)		4,139,229.
1 2 b c d	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d	1	4,139,229.
1 2 b c d e	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1	1 2e	
1 2 b c d e 3	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 2e	
1 2 b c d e 3 4	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b	1 2e	
1 2 b c d 8 3 4 2	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.Total expenses and losses per audited financial statementsAmounts included on line 1 but not on Form 990, Part IX, line 25:Donated services and use of facilitiesPrior year adjustmentsOther lossesOther lossesOther (Describe in Part XIII.)Add lines 2a through 2dSubtract line 2e from line 1Amounts included on Form 990, Part IX, line 25, but not on line 1:Investment expenses not included on Form 990, Part VIII, line 7b4a128, 281.4b	1 2e	
1 2 b c d e 3 4 a b	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)	1 2e 3	4,139,229.

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

SEE SUPPLEMENTAL PAGE

JSA

INTENDED USES OF THE ORGANIZATION'S ENDOWMENT FUNDS

ENDOWMENT FUNDS ARE USED TO SUPPORT THE FOUNDATION'S VARIOUS RESEARCH, ANALYSIS, ADVOCACY, TECHNICAL ASSISTANCE AND OUTREACH PROGRAMS.

PART X, LINE 1

IN MAY 2020, THE FOUNDATION OBTAINED A SMALL BUSINESS ADMINISTRATION ("SBA") LOAN UNDER THE PAYCHECK PROTECTION PROGRAM ("PPP") IN THE AMOUNT OF \$360,625. DURING 2021, THE FOUNDATION OBTAINED COMPLETE LOAN FORGIVENESS AND INCLUDED THE AMOUNT IN OTHER CHANGES IN THE STATEMENT OF ACTIVITIES AND CHANGES IN NET ASSETS AT DECEMBER 31, 2021.

IN JUNE 2021, THE FOUNDATION OBTAINED A SECOND SMALL BUSINESS ADMINISTRATION ("SBA") LOAN UNDER THE PAYCHECK PROTECTION PROGRAM("PPP") IN THE AMOUNT OF \$306,213. THE PPP LOAN BEARS INTEREST AT 1% AND MAY REQUIRE REPAYMENT UNDER CERTAIN CIRCUMSTANCES. UNDER THE TERMS OF CORONAVIRUS AID, RELIEF, AND ECONOMIC SECURITIES ACT (THE "CARES ACT") AND THE PAYCHECK PROTECTION PROGRAM FLEXIBILITY ACT ("PPPFA"), THE FOUNDATION MAY APPLY WITH THE LENDING INSTITUTION FOR PPP LOAN PROCEEDS USED TO COVER CERTAIN PAYROLL AND OTHER EXPENSES AS DEFINED BY THE CARES ACT AND PPPFA. INITIAL REPAYMENTS OF THE LOAN ARE DEFERRED UNTIL THE DATE THE SBA REMITS THE LOAN FORGIVENESS FUNDS TO THE LENDING INSTITUTION, OR UNTIL 10 MONTHS AFTER THE END OF THE FORGIVENESS COVERAGE PERIOD IF THE FOUNDATION DOES NOT APPLY FOR FORGIVENESS. DURING 2022, THE FOUNDATION OBTAINED COMPLETE LOAN FORGIVENESS AND INCLUDED THE AMOUNT IN OTHER CHANGES IN THE STATEMENT OF ACTIVITIES AND CHANGES IN NET ASSETS AT

2E1226 1.000

DECEMBER 31, 2022.

PART X, LINE 2

THE FOUNDATION IS RECOGNIZED AS AN ORGANIZATION EXEMPT FROM FEDERAL INCOME TAX UNDER SECTION 501 (A) OF THE INTERNAL REVENUE CODE AS AN ORGANIZATION DESCRIBED IN SECTION 501 (C)(3).

THE FOUNDATION ANNUALLY EVALUATES ALL FEDERAL AND STATE INCOME TAX POSITIONS. THIS PROCESS INCLUDES AN ANALYSIS OF WHETHER THESE INCOME TAX POSITIONS THE FOUNDATION TAKES MEET THE DEFINITION OF AN UNCERTAIN TAX POSITION UNDER THE INCOME TAXES TOPIC OF THE FINANCIAL ACCOUNTING STANDARDS CODIFICATION.

IN THE NORMAL COURSE OF BUSINESS, THE FOUNDATION IS SUBJECT TO EXAMINATION BY FEDERAL AND STATE TAXING AUTHORITIES. THE FOUNDATION BELIEVES IT IS NO LONGER SUBJECT TO TAX EXAMINATIONS FOR TAX YEARS ENDING BEFORE DECEMBER 31, 2019.

SCHEDULE I Grants and Other Assistance to Organizations, (Form 990) Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.								OMB No. 1545-0047		
			-	ach to Form 990.		, 1110 21 01 22.		Open to Public		
Department of the Treasury Internal Revenue Service		Go to	o www.irs.gov/l	Form990 for the la	test information.			Inspection		
Name of the organization							Employer identifica	tion number		
SOUTHERN EDUCAT	FION FOUNDATION, IN	C.					13-5562388	3		
	nformation on Grants ar		Э							
	zation maintain records to s teria used to award the gran							X Yes No		
	: IV the organization's proce									
	nd Other Assistance to I		<u> </u>			aplata if the organiz	vation answord "	Voc" on Form 000		
	ne 21, for any recipient f	-	•					res on Form 990,		
	d address of organization government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance		
(1) THE DUVAL COUNTY	SCHOOL BOARD									
1701 PRUDENTIAL DRIVE		59-6000589		65,000.		BOOK		SUPPORT		
(2) FULTON COUNTY SCH	IOOLS									
6201 POWERS FERRY ROA	D NW ATLANTA, GA 30339	58-6000246		75,000.		воок		SUPPORT		
(3)		_								
(4)		_								
(5)		_								
(6)		_								
(7)		_								
(8)		_								
(9)		_								
(10)		_								
(11)		_								
(12)		_								
2 Enter total numb	per of section 501(c)(3) and	aovernment c	rganizations lis	ted in the line 1 tab			l			
	per of other organizations lis	•	•					2.		
	on Act Notice, see the Instruc							chedule I (Form 990) 2022		

PUBLIC INSPECTION COPY

SOUTHERN EDUCATION FOUNDATION, INC.

13-5562388

Part III Grants and Other Assistance to Domestic Individuals. 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. Provide the information.	information re	equired in Part I,	line 2, Part III, o	column (b); and any c	ther additional

PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS

THE ORGANIZATION SELECTS RECIPIENTS BASED ON NEED AND REQUESTS AN ANNUAL

REPORT DETAILING THE OUTCOME OF THE PROJECT FUNDED AND AN ACCOUNTING FOR

THE MONIES RECEIVED.

(Form 990) For certain Officers, D C Department of the Treasury		Compen	sa	tion Information	1	OMB No.	1545-0	047
		For certain Officers, Directors, Trustees, Key Employees, and Highest)
			Compensated Employees ne organization answered "Yes" on Form 990, Part IV, line 23.					
		A	ttac	h to Form 990. r instructions and the latest information.		Open t	o Puk ectio	
			Employer identifica			11		
SOUT	THERN EDUC	ATION FOUNDATION, INC.			13-5562	388		
Part		ns Regarding Compensation			10 0001			
							Yes	No
1a		propriate box(es) if the organization pro		, , , , , , , , , , , , , , , , , , , ,		orm		
	990, Part VII,	Section A, line 1a. Complete Part III to	prov	ide any relevant information regarding	g these items.			
		ss or charter travel		Housing allowance or residence for	•			
		or companions		Payments for business use of perso				
		emnification and gross-up payments		Health or social club dues or initiation				
	Discretio	onary spending account		Personal services (such as maid, ch	auffeur, chef)			
b	b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding pa or reimbursement or provision of all of the expenses described above? If "No," complete Part		plete Part III	to				
2	explain	anization require substantiation prior	• •	reimburging or allowing expenses	incurred by	. 1b		
2	-	anization require substantiation prior stees, and officers, including the CEC			-			
					S CHECKED ON H	. 2		
3		h, if any, of the following the organization			+ +			
3		CEO/Executive Director. Check all the						
		ization to establish compensation of th						
	X Comper	nsation committee	X	Written employment contract				
	Indepen	dent compensation consultant	X	Compensation survey or study				
	X Form 99	90 of other organizations	Х	Approval by the board or compensation	ation committee			
4		ar, did any person listed on Form 990, or a related organization:	Par	t VII, Section A, line 1a, with respect t	o the filing			
а		verance payment or change-of-control pa	aym	ent?		. 4a		X
b	-	or receive payment from a supplemen						X
С	-	or receive payment from an equity-bas				. 4c		X
	If "Yes" to an	y of lines 4a-c, list the persons and pr	ovid	le the applicable amounts for each i	tem in Part III.			
	Only costion	E(1/2)/2 $E(1/2)/4$ and $E(1/2)/20$ at		izationa muat complete lines E O				
5	-	501(c)(3), 501(c)(4), and 501(c)(29) or listed on Form 990, Part VII, Secti	-		av or accrue a			
5		n contingent on the revenues of:		A, line ra, did the organization pa	ay of accide a			
а	•	ion?				. 5a		x
	-	rganization?						X
	-	e 5a or 5b, describe in Part III.						
6		listed on Form 990, Part VII, Secti	on /	A, line 1a, did the organization pa	ay or accrue a	any		
	compensatior	n contingent on the net earnings of:						
а	The organizat	ion?				. 6a		Х
b		rganization?	• •			. 6b		X
	If "Yes" on lin	e 6a or 6b, describe in Part III.						
7		listed on Form 990, Part VII, Sectio						
~		t described on lines 5 and 6? If "Yes," d				. 7	X	
8	Were any amounts reported on 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			iha				
		•	-					v
9		line 8, did the organization also foll						X
3		ection $53.4958-6(c)$?						
For Pa		ction Act Notice, see the Instructions for Fo				hedule J (F	orm 99	0) 2022

Schedule J (Form 990) 2022

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 on 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 aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 a	nd/or 1099-MISC and/or	1099-NEC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
RAYMOND PIERCE	(i)	308,175.	15,000.	12,000.	44,300.	8,646.	388,121.	
1 PRESIDENT	(ii)							
KENITA WILLIAMS	(i)	200,000.	10,000.	NONE	30,000.	8,361.	248,361.	
2 CHIEF OPERATING OFFICER	(ii)							
LEIGHTON O'SULLIVAN	(i)	140,834.	10,000.	NONE	21,125.	8,242.	180,201.	
3 CHIEF FINANCIAL OFFICER	(ii)							
FRED JONES, JR.	(i)	116,870.	7,500.	NONE	18,428.	17,142.	159,940.	
4 SENIOR DIRECTOR OF PUBLIC POLI	(ii)							
	(i)							
5	(ii)							
	(i)							
6	(ii)							
	(i)							
7	(ii)							
	(i)							
8	(ii)							
	(i)							
9	(ii)							
	(i)							
10	(ii)							
	(i)							
11	(ii)							
	(i)							
12	(ii)							
	(i)							
13	(ii)							
-	(i)							
14	(ii)							
	(i)							
15	(ii)							
	(i)							
16	(ii)							

Schedule J (Form 990) 2022

Page 2

Schedule J (Form 990) 2022

13-5562388

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PART I, LINE 7

BONUSES WERE BASED ON PERFORMANCE EVALUATIONS.

PART II COLUMN (B)(III)

AUTOMOBILE EXPENSE

Page 3

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047 2

2

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information. **Open to Public** Inspection

Department of the Treasury Internal Revenue Service Name of the organization

SOUTHERN EDUCATION FOUNDATION, INC.

Employer identification number 13-5562388

Par	t Types of Property							
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method o noncash con			
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household							
-	goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded		2	430,305.	FMV			
10	Securities - Closely held stock				-			
11	Securities - Partnership, LLC,							
••	or trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation							
	contribution - Historic							
	structures							
14	Qualified conservation							
	contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ►()							
26	Other ►()							
27	Other ►()							
28	Other ►()							
	Number of Forms 8283 received	by the ora	anization during the tax ve	ear for contributions for				
-	which the organization completed I				29			
	5		·				Yes	No
30a	During the year, did the organizat	ion receive	by contribution any prope	rty reported in Part I, line	s 1 through			
	28, that it must hold for at least th	hree years f	rom the date of the initial	contribution, and which is	sn't required			
	to be used for exempt purposes for	the entire h	olding period?			30a		Х
b	If "Yes," describe the arrangement i		.		_			
31	Does the organization have a		tance policy that require	es the review of any	nonstandard			
	contributions?	•		-		31	Х	
32a	Does the organization hire or use							
	contributions?	-	-			32a	Х	
b	If "Yes," describe in Part II.	-			_			
33	If the organization didn't report an	amount in c	olumn (c) for a type of pro	perty for which column (a) is checked,			

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

describe in Part II.

JSA

2E1298 1.000

SOUTHERN EDUCATION FOUNDATION, INC

Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

PART I, COLUMN B - ITEMS CONTRIBUTED:

COLUMN B REPORTS NUMBER OF ITEMS RECEIVED.

PART I, LINE 32 B

THE ORGANIZATION USES THEIR INVESTMENT BROKER TO SELL DONATED STOCK.

Department of the Treasury

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.



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

 Name of the organization
 Employer ide

SOUTHERN EDUCATION FOUNDATION, INC.

PART III, LINE 4A (1)

CONTINUED FROM FORM 990,

THE SOUTHERN EDUCATION FOUNDATION'S MISSION IS TO ADVANCE EQUITY AND EXCELLENCE IN EDUCATION FOR ALL STUDENTS IN THE SOUTH, PARTICULARLY LOW-INCOME STUDENTS AND STUDENTS OF COLOR. SEF USES COLLABORATION, ADVOCACY, AND RESEARCH TO IMPROVE OUTCOMES FROM EARLY CHILDHOOD TO ADULTHOOD. OUR CORE BELIEF IS THAT EDUCATION IS THE VEHICLE BY WHICH ALL STUDENTS GET FAIR CHANCES TO DEVELOP THEIR TALENTS AND CONTRIBUTE TO THE COMMON GOOD.

SEF STRIVES TO FULFILL ITS MISSION THROUGH THE FOLLOWING CORE PROGRAM AREAS: EXPANDING EARLY LEARNING OPPORTUNITIES, ADVANCING PUBLIC EDUCATION AND IMPROVING COLLEGE ACCESS AND COMPLETION. SEF EXECUTES FIVE PRIMARY STRATEGIES ACROSS OUR PROGRAMS:

-LEVERAGING KNOWLEDGE OF THE FIELD: BY ESTABLISHING AND OPERATING TASK FORCES, WORK GROUPS, AND LEARNING COMMUNITIES TO ORGANIZE KNOWLEDGE AND ADVANCE NEW SOLUTIONS TO LONG STANDING PROBLEMS; -PUTTING GOOD IDEAS TO A FAIR TEST: PROMOTING, CONDUCTING, USING PILOTS AND EVALUATIONS TO SHAPE POLICY AND PRACTICE; -MOBILIZING THE PUBLIC: THROUGH DIRECT ENGAGEMENT TO EDUCATE AND ORGANIZE, PROVIDING RESEARCH, TOOLS, AND IN SOME CASES CAPITAL ASSISTANCE TO ORGANIZATIONS FOR ADVANCING PUBLIC EDUCATION THROUGH POLICY AND PRACTICE REFORMS THAT IMPROVE LEARNING OPPORTUNITIES FOR VULNERABLE

Supplemental Information to Form 990 or 990-EZ

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SOUTHERN EDUCATION FOUNDATION, INC.

CHILDREN AND YOUTH;

-LEADERSHIP DEVELOPMENT: ADVANCING THE WILL, SKILL, AND CAPACITY OF CHANGE AGENTS FOCUSED ON EQUITY IN EDUCATION IN THE SOUTH THROUGH FELLOWSHIPS FROM UNDERGRADUATES TO C-SUITE PROFESSIONALS; -COMMUNICATIONS AS A CHANGE STRATEGY: CONDUCTING AND COMMISSIONING RESEARCH AND MESSAGING CAMPAIGNS TO SUPPORT PROGRESSIVE PUBLIC POLICY AND PRACTICE REFORMS IN EDUCATION, FROM EARLY LEARNING THROUGH HIGHER EDUCATION.

A SUMMARY OF OUR STRATEGIES, ACTIVITIES AND ACCOMPLISHMENTS IN 2022 FOLLOWS FOR EACH PROGRAM AREA.

ADVANCING PUBLIC EDUCATION:

PUBLIC EDUCATION FOR ALL CHILDREN HAS LONG BEEN A CORNERSTONE OF DEMOCRACY IN THE UNITED STATES, AND THE AMERICAN SOUTH HAS BEEN THE CENTER OF THE BATTLE TO ACHIEVE THIS GOAL. A PERENNIAL THREAT IS THE DISINVESTMENT IN OUR PUBLIC SCHOOLS AND INCREASING EFFORTS TO DIVERT FUNDS TO PRIVATE AND CHARTER SCHOOLS AS A HINDRANCE FROM ACHIEVING EQUITY IN EDUCATION FOR ALL, AND WE WORK TO PUSH BACK ON THESE EFFORTS AND ADVANCE WELL-FUNDED, SAFE, SUPPORTIVE, AND DIVERSE PUBLIC SCHOOLS THAT ARE HELD TO MEANINGFUL AND FAIR STANDARDS.

OUR STRATEGY:

-INFORMING AND SUPPORTING PUBLIC EDUCATION CAMPAIGNS ACROSS THE SOUTH, TO

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HELP ENGAGE, CONNECT, AND ALIGN DIVERSE COALITIONS WITHIN AND ACROSS STATES TO EMPLOY MULTI-STRATEGY APPROACHES TO ADVANCE PUBLIC EDUCATION; -REGIONALIZING EFFORTS THROUGH POLICY RESEARCH AND COMMUNICATIONS EFFORTS, TO HELP MARSHAL EVIDENCE ABOUT WHAT WORKS IN THE REGION AND STRENGTHEN THE PUBLIC EDUCATION NARRATIVE; AND -ADVANCING IDEAS ABOUT TEACHING AND LEARNING TO PROVIDE EDUCATION ADVOCATES WITH WHERE DEFENSIVE BATTLES CAN BECOME OFFENSIVE ONES THAT SHIFT FROM SIMPLY PROTECTING PUBLIC EDUCATION TO RE-ENVISIONING PUBLIC

EDUCATION SYSTEMS THAT SUPPORT ALL CHILDREN.

IN 2022, SEF USED A NUMBER OF INITIATIVES TO IMPLEMENT THIS STRATEGY -SUPPORT FOR ADVOCACY CAMPAIGNS, COMMUNICATIONS, POLICY RESEARCH AND DATA SHARING ACROSS THE COUNTRY AND ACROSS THE SOUTH. SEF REDEFINED PRINCIPLES AND POSITIONS CONSIDERED TO BE CRITICAL TO IMPROVING K-12 PUBLIC EDUCATION. MOST OF THIS WORK WAS DONE BY WORKING CLOSELY THROUGHOUT THE YEAR WITH BOTH NATIONAL AND REGIONAL STAKEHOLDERS INTERESTED IN EDUCATION JUSTICE IN THE AMERICAN SOUTH. SEF JOINED APPROXIMATELY 104 PARTNER ORGANIZATIONS IN A COLLABORATIVE EFFORT ON K-12 AND HIGHER EDUCATION ISSUES THROUGHOUT COMMUNITIES IN THE SOUTH. OUR VISION FOR EDUCATION EQUITY INCLUDES A FOCUS ON; MEANINGFUL LEARNING, PROFESSIONAL CAPACITY, SUFFICIENT RESOURCES, AND CONNECTED COMMUNITIES.

SOUTHERN EDUCATION LEADERSHIP INITIATIVE

EMBEDDED ACROSS THE THREE PROGRAMS' STRATEGY, IS SEF'S LEADERSHIP

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DEVELOPMENT INITIATIVE, THE SOUTHERN EDUCATION LEADERSHIP INITIATIVE (SELI). SELI WAS DEVELOPED IN 2004 TO HONOR THE 50 YEAR ANNIVERSARY OF BROWN V. BOARD OF EDUCATION. FOR A DECADE, SELI HAS PROVIDED INTENSIVE TRAININGS AND PAID SUMMER FELLOWSHIPS TO A DIVERSE AND INSPIRED GROUP OF 260 COLLEGE AND GRADUATE LEVEL STUDENTS INTERESTED IN WORKING WITH NONPROFIT ORGANIZATIONS TO MAKE SYSTEMIC CHANGES IN EDUCATION POLICY AND PRACTICE.

FELLOWSHIP OVERVIEW

THE SOUTHERN EDUCATION LEADERSHIP INITIATIVE (SELI) IS AN INTENSIVE, EIGHT-WEEK, PAID SUMMER FELLOWSHIP FOR UNDERGRADUATE, GRADUATE, AND PROFESSIONAL STUDENTS INTERESTED IN ADVANCING RACIAL EQUITY AND IMPROVING EDUCATION ACROSS THE PRE-KINDERGARTEN TO COLLEGE CONTINUUM. A CONTINUATION OF SEF'S LEGACY OF EDUCATING LEADERS IN THE SOUTH, WHICH SPANS MORE THAN A CENTURY, SELI'S 2004 LAUNCH MARKED THE 50TH ANNIVERSARY OF THE U.S. SUPREME COURT'S LANDMARK BROWN V. BOARD OF EDUCATION DECISION. OUR INITIATIVE RECOGNIZED THAT THERE IS STILL IMPORTANT WORK TO BE DONE TO ENSURE THAT ALL CHILDREN, IRRESPECTIVE OF RACE OR CLASS, RECEIVE AN EXCELLENT EDUCATION.

PLACED IN NONPROFITS, SCHOOL DISTRICTS, HIGHER EDUCATION INSTITUTIONS, OR STATE EDUCATION AGENCIES IN THE SOUTH, SELI FELLOWS SPEND THE SUMMER DEVELOPING AS LEADERS, ENGAGING WITH VALUABLE STAKEHOLDERS, AND ACQUIRING PRACTICAL JOB SKILLS THROUGH DIRECT LEARNING EXPERIENCES. OVER SELI'S

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TENURE, MORE THAN 280 TALENTED AND DIVERSE YOUNG LEADERS HAVE CONDUCTED IMPORTANT RESEARCH, POLICY ANALYSIS, ADVOCACY, AND ORGANIZING EFFORTS FOR OVER 110 PARTNER ORGANIZATIONS. SELI ALUM CAN BE FOUND TODAY WORKING AS EDUCATORS, POLICYMAKERS, RESEARCHERS, COMMUNITY ORGANIZERS, AND COMMITTED CIVIC LEADERS DEDICATED TO IMPROVING THE LIFE CHANCES OF ALL CHILDREN.

THE FELLOWSHIP IS DELIVERED VIA THREE KEY ACTIVITIES: ORIENTATION TRAINING, PLACEMENT, AND THE CLOSING MEETING. THE ORIENTATION TRAINING TAKES PLACE IN MAY EACH SUMMER AND EXPOSES STUDENTS TO RESEARCH AND DATA AROUND RACIAL AND SOCIO-ECONOMIC DISPARITIES IN EDUCATION, STRESSES THE IMPORTANCE OF EDUCATION EQUITY, OFFERS SITE VISITS TO SEE TOP ISSUES IN EDUCATION FIRSTHAND, AND PROVIDES OPPORTUNITIES TO LEARN FROM INSPIRING LEADERS. STUDENTS DEPART FROM ORIENTATION TO THEIR PLACEMENT SITES, WHERE THEY WORK FOR EIGHT WEEKS ON PROJECTS TO ADVANCE THE CAPACITY OF THEIR HOST SITES, WHILE DEVELOPING THEIR OWN LEADERSHIP POTENTIAL IN THE EDUCATIONAL EQUITY FIELD. THE CLOSING MEETING, HELD EVERY JULY, PRESENTS AN OPPORTUNITY FOR FELLOWS TO SHARE LESSONS LEARNED, REFLECT, AND BRAINSTORM ON HOW TO CONTINUE MAKING CHANGE AS PART OF A NETWORK OF EMERGING LEADERS IN THE SECTOR.

PART III, LINE 4A (1) CONT.

RACIAL EQUITY LEADERSHIP NETWORK

IN DISTRICTS ALL OVER THE UNITED STATES, RACE AND CLASS REMAIN AMONG THE MOST RELIABLE PREDICTORS OF STUDENT SUCCESS IN SCHOOL. CURRENTLY, IN SOUTHERN STATES, MORE THAN HALF OF ALL THE STUDENTS ENROLLED IN PUBLIC

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SOUTHERN EDUCATION FOUNDATION, INC.

SCHOOL ARE FROM LOW-INCOME FAMILIES, WITH A GROWING NUMBER OF FAMILIES LIVING IN EXTREME POVERTY. THE MAJORITY OF PUBLIC SCHOOL STUDENTS IN THE SOUTH ARE ALSO CHILDREN OF COLOR, RAPIDLY CHANGING THE DEMOGRAPHICS OF LARGE AND SMALL DISTRICTS. THE INCREASING DIVERSITY AND INEQUITIES STUDENTS AND FAMILIES CONFRONT, CREATES AN IMPERATIVE FOR US TO REIMAGINE HOW WE CREATE A SYSTEM THAT INCREASES ACCESS AND OPPORTUNITY FOR ALL CHILDREN TO LEARN, DEVELOP, AND THRIVE.

WE THINK THE SYSTEM WE NEED NOW REQUIRES A BOLD AND SIGNIFICANT SHIFT IN EDUCATIONAL LEADERSHIP AND PRACTICE. LEADERS IN EVERY CORNER OF OUR NATION ARE BEING CALLED TO THINK, ENGAGE AND ACT DIFFERENTLY IN THE FACE OF THE COMPLEX CHALLENGES THEY NAVIGATE. STRENGTHENING THE WILL, SKILL AND CAPACITY OF DISTRICT LEADERS AND THEIR TEAMS IS AN IMPORTANT LEVER FOR ADVANCING AUTHENTIC AND ENDURING EQUITY-CENTERED SYSTEM CHANGE.

FUNDED BY THE ATLANTIC PHILANTHROPIES, THE SOUTHERN EDUCATION FOUNDATION IS ANSWERING THIS CALL BY LAUNCHING AN INNOVATIVE RACIAL EQUITY LEADERSHIP NETWORK (RELN) TO ADVANCE THE CAPACITY OF DISTRICT LEADERS COMMITTED TO ENDURING EQUITY-CENTERED SYSTEMS CHANGE AS A SOLUTION TO ADDRESSING RACIAL, ECONOMIC AND ACADEMIC DISPARITIES IN DISTRICTS ACROSS THE SOUTH.

FELLOWSHIP OVERVIEW AND THEORY OF CHANGE

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SOUTHERN EDUCATION FOUNDATION, INC.

DELIVERED IN PARTNERSHIP WITH THE NATIONAL EQUITY PROJECT AND LEARNING POLICY INSTITUTE, RELN IS AN 18-MONTH, COHORT-STYLE FELLOWSHIP PROGRAM FOR SCHOOL DISTRICT LEADERS WHO ARE COMMITTED TO ADDRESSING PERSISTENT DISPARITIES IN THEIR SYSTEMS AND ENSURING THAT RACE AND CLASS ARE NO LONGER THE MOST RELIABLE PREDICTORS OF STUDENT SUCCESS.

EACH RELN COHORT IS COMPRISED OF UP TO TWELVE (12) EXECUTIVE LEADERS (I.E., SUPERINTENDENTS, DEPUTY SUPERINTENDENTS, CHIEF ACADEMIC OFFICERS, ETC.) FROM SCHOOL SYSTEMS ACROSS THE SOUTH.

OVER THE COURSE OF THEIR FELLOWSHIP EXPERIENCE, RELN FELLOWS ATTEND FIVE (5) TWO-AND-A-HALF-DAY NETWORK CONVENING'S FOCUSED ON THE ESSENTIAL LEVERS FOR EQUITY-CENTERED LEADERSHIP AND SYSTEM TRANSFORMATION. IN BETWEEN NETWORK CONVENING'S, THE FELLOWS ALSO RECEIVE CUSTOMIZED COACHING AND WEBINARS TO SUPPORT THE IDENTIFICATION OF A CONTEXT-SPECIFIC EQUITY CHALLENGE. FINALLY, FELLOWS RECEIVE GRANT SUPPORT AND OTHER TECHNICAL ASSISTANCE TO IMPLEMENT AN ACTION PLAN ADDRESSING THEIR UNIQUE EQUITY CHALLENGE DURING A SIX-MONTH IN-DISTRICT WORK PERIOD.

THE RELN LEADERSHIP DEVELOPMENT MODEL FOLLOWS A DOUBLE HELIX APPROACH INCORPORATING TWO DISTINCT, BUT INTRINSICALLY LINKED, STRANDS OF LEARNING, ENGAGING, AND TESTING OVER THE COURSE OF THE 18-MONTH FELLOWSHIP. FELLOWS SHARPEN THEIR INDIVIDUAL RACIAL EQUITY LENS AND RECEIVE TOOLS TO ENHANCE THEIR CAPACITY FOR INFLUENCING EDUCATION POLICY AND PRACTICE. BECAUSE THIS INDIVIDUAL DEVELOPMENT IS INSUFFICIENT TO

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SOUTHERN EDUCATION FOUNDATION, INC.

CREATE SUSTAINABLE CHANGE WITHIN SYSTEMS, FELLOWS SIMULTANEOUSLY IDENTIFY

SPECIFIC POLICY OR PRACTICE CHALLENGES TO ADDRESS WITHIN THEIR

DISTRICTS, RECEIVE RESOURCES FOR ENGAGING WITH OTHERS, AND OBSERVE MODEL

DISTRICTS MAKING PROGRESS TOWARDS RACIAL EQUITY.

FELLOWSHIP OUTCOMES

AS MEMBERS OF THE RACIAL EQUITY LEADERSHIP NETWORK, FELLOWS (IDEALLY)

WILL:

1) DEEPEN AWARENESS AND UNDERSTANDING OF THE HISTORICAL AND CONTEXTUAL DRIVERS OF RACIAL INEQUITY IN SCHOOLS AND MAKE CONNECTIONS TO PRESENT-DAY EDUCATION POLICIES AND PRACTICES THAT PERPETUATE RACIAL DISPARITIES IN STUDENT OPPORTUNITY AND OUTCOMES.

2) CHALLENGE TO EXAMINE THEIR OWN ATTITUDE, BELIEFS, AND ASSUMPTIONS ABOUT STUDENTS' ABILITY TO LEARN, REGARDLESS OF BACKGROUND.

3) ESTABLISH CLEAR STEPS FOR AN EXPLICIT RACIAL EQUITY VISION FOR THEIR SYSTEMS AND ESTABLISHING RACIAL EQUITY AS A FUNDAMENTAL VALUE THAT IS CLEARLY ARTICULATED AND CHAMPIONED BY ALL SCHOOL COMMUNITY MEMBERS, WHO WORK COLLABORATIVELY TO ADVANCE SUSTAINABLE, EQUITABLE OPPORTUNITIES AND OUTCOMES FOR STUDENTS.

4) STRENGTHEN ABILITY TO DIAGNOSE, AND ULTIMATELY CREATE SOLUTIONS TO ADDRESS, THE INEQUITIES THAT THEY WITNESS IN THEIR SYSTEM.5) GAIN A PEER NETWORK AND PROFESSIONAL LEARNING COMMUNITY OF

EQUITY-ORIENTED DISTRICT LEADERS THROUGHOUT THE SOUTH.

PART VI, LINE 11A

Department of the Treasury

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IN ACCORDANCE WITH IRS REQUIREMENTS, THE 990 WAS PROVIDED TO EACH BOARD MEMBER PRIOR TO FILING.

PART VI, LINE 12C

ANNUALLY, EACH TRUSTEE AND SEF STAFF MEMBER EXECUTE A DISCLOSURE FORM IDENTIFYING ANY RELATIONSHIPS, POSITIONS OR CIRCUMSTANCES IN WHICH HE/SHE IS INVOLVED THAT COULD CONTRIBUTE TO A REAL OR PERCEIVED CONFLICT OF INTEREST. ANY INFORMATION REGARDING BUSINESS INTEREST OF A TRUSTEE IS TREATED AS CONFIDENTIAL AND IS GENERALLY MADE AVAILABLE TO THE CHAIR, THE PRESIDENT, AND ANY COMMITTEE APPOINTED TO ADDRESS CONFLICTS OF INTEREST, EXCEPT TO THE EXTENT ADDITIONAL DISCLOSURE IS NECESSARY IN CONNECTION WITH THE IMPLEMENTATION OF THIS POLICY. TRUSTEES DO NOT VOTE ON ANY MATTER IN WHICH THEY BELIEVE THERE IS DUALITY OF INTEREST AND MAY, IF ASKED, BE CALLED UPON TO SHARE WITH FELLOW TRUSTEES SUCH INFORMATION RELATED TO THE DUALITY OF INTEREST AS MAY BE NECESSARY AND APPROPRIATE. THE MINUTES OF BOARD MEETINGS WILL SHOW THAT THE TRUSTEE HAVING A DUALITY OF INTEREST DISCLOSED SAME AND ABSTAINED FROM VOTING ON RELATED MATTERS. A COPY OF THIS POLICY IS FURNISHED TO EACH PERSON WHO IS OR BECOMES A MEMBER OF THE BOARD OF TRUSTEES OR STAFF. EACH SUCH PERSON IS REQUIRED TO REVIEW A COPY OF THIS POLICY AND ACKNOWLEDGE IN WRITING THAT HE OR SHE HAS DONE SO.

PART VI, LINE 15

IN ORDER TO DETERMINE STAFF COMPENSATION LEVELS FOR ITS SMALL STAFF AND CONSERVATIVE MODEST RESOURCES, SEF CONSULTS SOURCES SUCH AS THE ANNUALLY COMPENSATION SURVEY PUBLISHED BY THE COUNCIL ON FOUNDATIONS, REPORTS IN THE CHRONICLE OF PHILANTHROPY, AND THE CHRONICLE OF HIGHER EDUCATION,

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RATHER THAN HIRING INDEPENDENT CONSULTANTS TO CONDUCT DETAILED COMPENSATION SURVEYS AND AUDITS. SEF BOARD MEMBERS AND STAFF, AS APPROPRIATE, ALSO CONSULT WITH PEER ORGANIZATIONS TO ASCERTAIN APPROPRIATE COMPENSATION RANGES FOR STAFF. MANY SEF BOARD MEMBERS SERVE, AS WELL, ON OTHER NON -PROFIT ORGANIZATIONAL BOARDS AND BRING THAT KNOWLEDGE AND PERSPECTIVE TO BEAR IN SETTING COMPENSATION FOR SEF STAFF.

SEF'S FINANCE, AUDIT AND ADMINISTRATION COMMITTEE REVIEWS COMPENSATION AS PART OF THE ANNUAL BUDGET-SETTING CYCLE AND DETERMINES COMPENSATION OF THE PRESIDENT BASED UPON AN ANNUAL APPRAISAL OF PERFORMANCE. THAT APPRAISAL CONSIDERS ALL ASPECTS OF THE PRESIDENT'S WORK INCLUDING FUNDRAISING, MANAGEMENT, PROGRAM DEVELOPMENT AND IMPLEMENTATION, GOVERNANCE AND COMMUNICATIONS. SEF'S PRESIDENT APPRAISES THE PERFORMANCE OF OTHER SUBORDINATE SEF STAFF ANNUALLY. ALL SEF STAFF ARE PART OF A MERIT PAY PROGRAM IN WHICH THERE ARE NO AUTOMATIC OR COST OF LIVING INCREASES.

PART VI, LINE 19

ALL SEF PUBLIC DOCUMENTS ARE AVAILABLE UPON REQUEST. ONCE A REQUEST IS RECEIVED THE DOCUMENTS CAN BE SENT EITHER ELECTRONICALLY OR THROUGH THE US POSTAL SYSTEM. THE 2021 CPA AUDIT, CONFLICT OF INTEREST POLICY AND WHISTLEBLOWER POLICY CAN ALSO BE FOUND ON THE SEF WEB SITE IN THE "PUBLIC DOCUMENTS LISTING."

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

THE SOUTHERN EDUCATION FOUNDATION'S MISSION IS TO ADVANCE EQUITY AND EXCELLENCE IN EDUCATION FOR ALL STUDENTS IN THE SOUTH, PARTICULARLY LOW-INCOME STUDENTS AND STUDENTS OF COLOR. SEF USES COLLABORATION, ADVOCACY, AND RESEARCH TO IMPROVE OUTCOMES FROM EARLY CHILDHOOD TO ADULTHOOD. OUR CORE BELIEF IS THAT EDUCATION IS THE VEHICLE BY WHICH ALL STUDENTS GET FAIR CHANCES TO DEVELOP THEIR TALENTS AND CONTRIBUTE TO THE COMMON GOOD.

SEF STRIVES TO FULFILL ITS MISSION THROUGH THE FOLLOWING CORE PROGRAM AREAS: EXPANDING EARLY LEARNING OPPORTUNITIES, ADVANCING PUBLIC EDUCATION AND IMPROVING COLLEGE ACCESS AND COMPLETION. SEF EXECUTES FIVE PRIMARY STRATEGIES ACROSS OUR PROGRAMS: LEVERAGING KNOWLEDGE OF THE FIELD: BY ESTABLISHING AND OPERATING TASK

FORCES, WORK GROUPS, AND LEARNING COMMUNITIES TO ORGANIZE KNOWLEDGE AND ADVANCE NEW SOLUTIONS TO LONG STANDING PROBLEMS;

PUTTING GOOD IDEAS TO A FAIR TEST: PROMOTING, CONDUCTING, AND USING DEMONSTRATIONS, PILOTS, AND EVALUATIONS TO SHAPE POLICY AND PRACTICE; MOBILIZING THE PUBLIC: THROUGH DIRECT ENGAGEMENT TO EDUCATE AND ORGANIZE, PROVIDING RESEARCH, TOOLS, AND IN SOME CASES CAPITAL ASSISTANCE TO ORGANIZATIONS FOR ADVANCING PUBLIC EDUCATION THROUGH POLICY AND PRACTICE REFORMS THAT IMPROVE LEARNING OPPORTUNITIES FOR VULNERABLE CHILDREN AND YOUTH;

LEADERSHIP DEVELOPMENT: TRAINING THE NEXT GENERATION OF CHANGE AGENTS FOCUSED ON EQUITY IN EDUCATION IN THE SOUTH THROUGH FELLOWSHIPS FROM UNDERGRADUATE TO MID-CAREER; AND

COMMUNICATIONS AS A CHANGE STRATEGY: CONDUCTING AND COMMISSIONING RESEARCH AND MESSAGING CAMPAIGNS TO SUPPORT PROGRESSIVE PUBLIC POLICY AND PRACTICE REFORMS IN EDUCATION, FROM EARLY LEARNING THROUGH HIGHER EDUCATION.

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FORM 990, PART VII-COMPENSATION OF THE 5 H	HIGHEST PAID IND. CONTRACTORS	
NAME AND ADDRESS	DESCRIPTION OF SERVI	CES COMPENSATION
C & G CONSULTING, LLC		
1502 WINTER VALLEY DRIVE		
TUPELO, MS 38801	OUTCOMES BASED	110,000.
THIRD SECTOR CAPITAL PARTNERS		
P.O. BOX 962001		
BOSTON, MA 02196	OUTCOMES BASED	196,000.
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FORM 990, PART X - DEFERRED REVENUE

DESCRIPTION

DEFERRED REVENUE

TOTALS

ENDING BOOK VALUE 200,000.

200,000.