### Form **990**

**Return of Organization Exempt From Income Tax** 

OMB No 1545-0047

2015

Department of the Treasury Internal Revenue Service

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
 Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

A	For	the 2015 calen	dar year, or tax year beginning , 2015, and ending			·
В	Chec	k if applicable	C Name of organization Foundation for Rational Economics and Education	n, Inc.	D Employer identi	fication number
	$\Box$	Address change	Doing business as		- 74-20668	341
	$\prod$	Name change	Number and street (or P O box if mail is not delivered to street address) Room/suit	ite	E Telephone numb	er
	П	Initial return	PO Box 1776		(979) 26	65-3034
	$\sqcap$	Final return/terminated	City or town, state or province, country, and ZIP or foreign postal code			
	H	Amended return	Lake Jackson TX 77566		G Gross receipts	₹ 317 <b>,</b> 985.
	$\vdash$	Application pending		l(a) Is this a	group return for subor	
	البا	***************************************	LORI PYEATT PO Box 1776 Lake Jackson TX 77566	l(b) Are all s	subordinates included? attach a list (see instru	
1	Ta	x-exempt status	X 501(c)(3)   501(c) ( )   4 (Insert no )   4947(a)(1) or   527	If 'No,' a	attach a list (see instru	ictions)
<u></u>		ebsite: ► N/	<del> </del>	lie). Group e	exemption number	
ĸ	_	m of organization	X Corporation Trust Association Other L Year of formation	<del></del>		gal domicile TX
Pa		Summar		1976	) IVI State of the	gar connicie 17
ra	1	Briefly descrit	be the organization's mission or most significant activities  The Found	at 100	for Patio	n 2 ]
	·	Economic	s & Education, Inc. (F.R.E.E.) is a non-partisa	arton	anization	dedicated
ည			c education on the principles of free-market ed			
na			government.	201101111	55/_ 554.37	
Activities & Governance	2	Check this bo		an 25% of	f its net assets	
ၓ	3		ting members of the governing body (Part VI, line 1a)			2
<b>୦</b> ୪	4		dependent voting members of the governing body (Part VI, line 1b)			2
Ë	5	Total number	of individuals employed in calendar year 2015 (Part V, line 2a)		5	4
ξį	6	Total number	of volunteers (estimate if necessary)	<i>.</i> .	6	5
Ac			d business revenue from Part VIII, column (C), line 12			0,
_	!	Net unrelated	business taxable income from Form 990-T, line 34		. 7b	0.
1				Pı	rior Year	Current Year
Revenue	8		and grants (Part VIII, line 1h) RECEIVED		501,281.	280,725.
	9		ice revenue (Part VIII, line 2g)		22,519.	11,211.
	10	Investment in	come (Part VIII, column (A), lines 4, and 7d)	ļ		
"	11	Other revenue	e (Part VIII, column (A), lines 5, 6 (28c, 9 (10)), 4 (12) (6	<u> </u>	8,750.	26,049.
1	12			<b>-</b>	532,550.	317,985.
- [	13	Grants and si	milar amounts paid (Part IX, column (A) lines 13)	<u> </u>		<del> </del>
	14	Benefits paid	to or for members (Part IX, column (A), meable N, UT	ļ	<del></del>	<del></del>
S	15		r compensation, employee benefits (Part IX, column (A), lines 5-10)	<b></b>	279,728.	234,677.
Sus	16	a Professional f	undraising fees (Part IX, column (A), line 11e)			<del></del>
Expenses	1	<b>b</b> Total fundrais	ing expenses (Part IX, column (D), line 25) ► 48,691.			
- "	17	Other expens	es (Part IX, column (A), lines 11a-11d, 11f-24e)		275,495.	176,407.
	18	Total expense	es Add lines 13-17 (must equal Part IX, column (A), line 25)		555,223.	411,084.
	19	Revenue less	expenses Subtract line 18 from line 12		-22,673.	-93,099.
8 8				Beginnin	g of Current Year	End of Year
gast	20		Part X, line 16)		242,066.	148,967.
A B	21	Total liabilities	s (Part X, line 26)			
Not Assets Fund Baland	22	Net assets or	fund balances Subtract line 21 from line 20		242,066.	148,967.
Pa	rt II	Signatur	e Block	·		
Unde	r pena	alties of penjury, I dec	lare that I have examined this return, including accompanying schedules and statements, and to the best of other than officer) is based on all information of which preparer has any knowledge	of my knowle	edge and belief, it is tri	ue, correct, and
comp	lete [	Declaration of pregan	or (other than officer) is based on all information of which preparer has any knowledge			
			Wryth		11-15-1	ا ــــــــــــــــــــــــــــــــــــ
Sig	n	Signatu	re of officer	Dat	e	
He	re	Lor	ı Pyeatt			
		Type or	print name and title			
		Print/Type p	reparer's name Preparer's signature			
Pai	d	James	T. Phipps James T. Phipps			
	pa					
	O					
		-	ALVIN			

May the IRS discuss this return with the preparer shown above? (see instruction BAA For Paperwork Reduction Act Notice, see the separate instructions

	990 (2015) Foundation for Rational Economics and Education, Inc.	74-2066841	Page 2
Par			
	Check if Schedule O contains a response or note to any line in this Part III	· · · · · · · · · · · · · · · · · · ·	
1	Briefly describe the organization's mission		
	The Foundation for Rational		
	Economics & Education, Inc. (F.R.E.E.) is a non-partisan organiza	tion dedica	ited
	See Form 990, Page 2, Part III, Line 1 (continued)		
2	Did the organization undertake any significant program services during the year which were not listed on the pr	nor	<del></del>
	Form 990 or 990-EZ?	🗆 🐧	∕es X No
	If 'Yes,' describe these new services on Schedule O		<u></u>
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	🖂 ,	Yes 🛛 No
	If 'Yes,' describe these changes on Schedule O	L_J	
4		s measured by exc	enses
-	Describe the organization's program service accomplishments for each of its three largest program services, as Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other	ners, the total expe	nses,
	and revenue, if any, for each program service reported		
4 a	(Code) (Expenses \$ 411,084. including grants of \$ 0.) (Re	evenue \$	317,985.)
	CONTINUED EMPHASIS ON THE EDUCATION OF ECONOMIC & SOCIAL ISSUES		
	THROUGH PUBLICATION OF THE FREEDOM REPORT.		
	<del></del>	<del></del>	
4 b	(Code) (Expenses \$ including grants of \$) (Re	evenue \$	)
4.0	(Code ) (Expenses \$ including grants of \$ ) (Re	evenue \$	
70	/(Code/(Experiess \upsilon/(No.		
		- <b>-</b>	
			<b>-</b> -
		<b>-</b>	<b>-</b>
		<b>-</b>	
		<b>_</b>	
		_ <b></b>	
4 0	Other program services (Describe in Schedule O.)		
	(Expenses \$including grants of \$ ) (Revenue \$		)
4 e	Total program service expenses 411,084.		
BAA	TEEA0102 10/12/15		Form <b>990</b> (2015)

Form 990 (2015) Foundation for Rational Economics and Education, Inc. 74-2066841 Page 3 Partiv Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Х Х Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? . . . . . . 2 3 Χ 4 Х Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III . Х 5 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, 6 Х Х 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If Yes, complete Schedule D, Part III. 8 Χ Χ 9 Х 10 If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, 7 C 3 or X as applicable a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule Х 11 a b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total Х 11 b Χ 11 c 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 Χ 11 d Χ e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X . . . . 11 e 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 11 f Х 12a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Х Schedule D. Parts XI, and XII. 12a 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 . . . . . . . Χ 12 b Х Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E. . . . . . 13 14a Did the organization maintain an office, employees, or agents outside of the United States? . . . . . . . . 14a Х b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV X 14b

Page 4 Form 990 (2015) Foundation for Rational Economics and Education, Inc. 74-2066841 Part IV Checklist of Required Schedules (continued) Yes No 20a 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? . . . . . . 20h 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 22 Х Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Х 23 24a Х 24h c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease 24c 24d 25 a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit Х transaction with a disqualified person during the year? If 'Yes,' complete Schedule L. Part I . . . 25a b 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 Χ 25b Х 26 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member Х 27 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions) a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV . . . . . . . Х 28a b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Х 28b Х 28c Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M . . . . . . . X 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or gualified conservation 30 X 30 Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I . . . . . . . . X 31 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II . Х 32 . . . . . . . . . . Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 33 Χ Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, X

37

Form 990 (2015)

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Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If Yes, complete Schedule R, Part V, line 2

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

	n 990 (2015) Foundation for Rational Economics and Education, Inc. 74-206684	1	F	age :
Par	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V	<u>· · ·</u>	· · ·	<u> </u>
			Yes	No
	a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	( !		ļ
	b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	:		
C	c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	X	
2 a	a 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 2 a 4			
Ł	b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3 a	a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		Х
t	b If 'Yes' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O	3 b		
4 a	a 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)?	4 a		x
t	b If Yes, enter the name of the foreign country	<del>-                                    </del>		<b>†</b>
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)	!		
5 a	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		X
	b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		X
	c If Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		<del>                                     </del>
	a 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?	6 a		X
Ŀ	b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 ь		Ì
7	Organizations that may receive deductible contributions under section 170(c).	0.0		-
	•			
a	a 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?	7 a		X
ŀ	b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b		<del></del>
	c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file	<del></del>		<del>} -</del>
	Form 8282?	7 с		X
c	d If Yes,' indicate the number of Forms 8282 filed during the year			
•	e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		X
f	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		Х
ç	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899			
	as required?	7 g		ļ
ŀ	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring	<b>—</b> "		
	organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
a	a Did the sponsoring organization make any taxable distributions under section 4966?	9 a		
b	b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b		
10	Section 501(c)(7) organizations. Enter			
a	a Initiation fees and capital contributions included on Part VIII, line 12			
k	b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			1
11	Section 501(c)(12) organizations. Enter			
a	a Gross income from members or shareholders			1
t	b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			İ
12 a	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12 a		
	b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year   12 b			
13				
	a is the organization licensed to issue qualified health plans in more than one state?	13 a		
	Note. See the instructions for additional information the organization must report on Schedule O			
t	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			

 $\boldsymbol{c}$  Enter the amount of reserves on hand  $\ \ldots \ \ldots$ 14a Did the organization receive any payments for indoor tanning services during the tax year? . .

13 b 13 c

14 b

Form 990 (2015)

Form	1990 (2015) Foundation for Rational Economics and Education, Inc. 74-2066841		Р	age 6
Par	<b>t VI</b> Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes a Schedule O. See instructions.	iń		
	Check if Schedule O contains a response or note to any line in this Part VI	• • •	<u> </u>	. X
<u>Sec</u>	tion A. Governing Body and Management			
			Yes	No
1 a	Enter the number of voting members of the governing body at the end of the tax year			
b	Enter the number of voting members included in line 1a, above, who are independent 1 b			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents			
_	since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6 7 a	Did the organization have members or stockholders?	6 7 a		X
t	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7 b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a	The governing body?	8 a	X	
t	Each committee with authority to act on behalf of the governing body?	8 b	X	
	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O	9		
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C	ode l	
	The second of th		Yes	No
10 a	Did the organization have local chapters, branches, or affiliates?	10 a		X
	of Yes, did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10 b		
44.		_	- V	<del> </del>
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11 a	X	<u> </u>
	Describe in Schedule O the process, if any, used by the organization to review this Form 990			<u></u> j
	Did the organization have a written conflict of interest policy? If 'No,' go to line 13	12 a		<u> </u>
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12 b		
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done	12 c		
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15 a		X
b	Other officers or key employees of the organization	15 b		Х
	If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions)			
16 a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16 a		- <u>-</u> J
b	olf 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16 b		
	tion C. Disclosure		_	
17	List the states with which a copy of this Form 990 is required to be filed Texas	- <b>-</b> -		
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a for public inspection. Indicate how you made these available. Check all that apply	availab	le	
	Own website			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available the public during the tax year	e to		
20	State the name, address, and telephone number of the person who possesses the organization's books and records.			
	Lori Pyeatt 837 W PLANTATION DR. CLUTE TX 77531 (9)	79) :	265-	3034

Form 990 (2015) Foundation for Rational Econ	omics ar	nd E	duc	atı	on,	Inc			74-20668	41 Page <b>7</b>
Part VII Compensation of Officers, Director Independent Contractors	ors, Tru	ste	es,	Key	/ E	mpl	oye	es, Highest C	ompensated Er	nployees, and
Check if Schedule O contains a response or	note to an	y line	e in	this I	Part	VII .				
Section A. Officers, Directors, Trustees, Ko				_	_	<del></del> -		<del></del>	<del></del> _	
1 a Complete this table for all persons required to be listed organization's tax year	Report of	omp	ens	atıor	for	the c	aler	ndar year ending w	ith or within the	
<ul> <li>List all of the organization's current officers, directo compensation. Enter -0- in columns (D), (E), and (F) if no</li> </ul>						duals	or c	organizations), reg	ardless of amount of	
List all of the organization's current key employees.	-									
<ul> <li>List the organization's five current highest compens who received reportable compensation (Box 5 of Form Worganization and any related organizations</li> </ul>										
<ul> <li>List all of the organization's former officers, key em of reportable compensation from the organization and any</li> </ul>					omp	ensa	ted	employees who re	ceived more than \$1	00,000
<ul> <li>List all of the organization's former directors or tru organization, more than \$10,000 of reportable compensat</li> </ul>										
List persons in the following order: individual trustees or demployees, and former such persons	irectors, ir	stıtu	tion	al tru	stee	es; of	fice	rs, key employees;	highest compensate	ed
Check this box if neither the organization nor any rela	ted organı	zatio	n cc	<u> </u>		ted a	ıny c	current officer, dire	ctor, or trustee	
<b>(A)</b>	(5)	Pos	sition	(C) (do no		ck mor	re	(5)	<b>(</b>	 
(A) Name and Title	(B) Average hours per	thar	n one s both	box in an of	inless ficer	perso	on	(D)  Reportable compensation from	(E)  Reportable compensation from	(F) Estimated amount of other
	week (list any	or dir	nsta	Officer	Key	emp!	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization
	hours for related organiza-	or director	nstitutional trustee	ব্	employee	Highest compensated employee	र्ष			and related organizations
	tions below dotted	การเอ	ਫ਼		yee	mpen	ļ		ļ	
	line)	i ă	8			sated				
(1) CAROL PAUL	3.00			Х				0		
PRESIDENT & SEC  (2) LORI PYEATT	30.00	-	-	^	_	_	<del> </del>	0.	0.	0.
VP & TREASURER			_	Х		<u> </u>		0.	0.	0.
(3) DANIEL MCADAMS SPECIAL PROJECTS DIRECTOR	50.00					x		110 000		0
(4)		-	┢				-	110,000.	0.	0.
(5)		<u> </u>	<u> </u>	_			ļ_,			
_(5)										
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(11)										
(12)							-			
(13)					_	_				
(14)			-			_	H			
· /			1	r	1				1	

\$100,000 of compensation from the organization

Total number of independent contractors (including but not limited to those listed above) who received more than

	990 (2015) Foundation for Rational Econom	nics and Education,	Inc.	74-2066841	Page 9
Par	t VIII Statement of Revenue	any line in this Bort VIII			Г
	Check if Schedule O contains a response or note to	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns 1 a  b Membership dues 1 b  c Fundraising events 1 c  d Related organizations 1 d  e Government grants (contributions) . 1 e  f All other contributions, gifts, grants, and similar amounts not included above . 1 f  g Noncash contributions included in lines 1a-1f \$				
<u>ة ن</u>	h Total. Add lines 1a-1f				
Program Service Revenue	2a Publications Sales 511130 b c d	11,211.	11,211.	0.	0.
Program	f All other program service revenue g Total. Add lines 2a-2f	11,211.			
	other similar amounts)	26,049.	26,049.	0.	0.
	d Net rental income or (loss)	21			
Other Revenue	8 a Gross income from fundraising events (not including \$\\$280,725.\) of contributions reported on line 1c) See Part IV, line 18				
	c Net income or (loss) from gaming activities  10 a Gross sales of inventory, less returns and allowances a  b Less cost of goods sold b				
	c Net income or (loss) from sales of inventory				
	Miscellaneous Revenue Business Co	ode			
	c d All other revenue				

e Total. Add lines 11a-11d . .

12 Total revenue. See instructions .

37,260.

0.

Part IX Statement of Functional Expenses

Sec	Check if Schedule O contains a res				
Do i	not include amounts reported on lines 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.				
2	Grants and other assistance to domestic individuals See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees				-
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	218,000.	130,800.	54,500.	32,700.
7	Other salaries and wages	210,000.	130,000.		<u> </u>
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	-			
9	Other employee benefits				<u></u>
10	Payroll taxes	16,677.	10,006.	4,169.	2,502.
11	Fees for services (non-employees)			17103.	
a	Management	i			
	Legal				
	: Accounting	1,320.	0.	1,320.	0.
	Lobbying			1,520.	,
	Professional fundraising services See Part IV, line 17				
	Investment management fees				
-	Other (If line 11g amount exceeds 10% of line 25, column	<del></del>			<del></del>
	(A) amount, list line 11g expenses on Schedule O)				
	Advertising and promotion	407.	407.	0.	0.
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy	62,976.	27,581.	28,987.	6,408.
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	4,728.	1,318.	3,410.	0.
19	·`.	2,553.	2,553.	0.	0.
20	Interest				
21					
22	Depreciation, depletion, and amortization	3,072.	0.	3,072.	0.
23	Insurance				
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
а	Credit Card Fees	3,539.	0.	0.	3,539.
	Printing & Copying	3,169.	3,169.	0.	0.
	Supplies	3,164.	886.	1,949.	329.
	Website Expense	6.346	6.346.	0.	0.
	All other expenses	85,133.	65,580.	16,340.	3,213.
25	Total functional expenses Add lines 1 through 24e	411,084.	248,646.	113,747.	48,691.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► if following SOP 98-2 (ASC 958-720)				

L F &	III A	Dailance Sneet			<del></del>
_		Check if Schedule O contains a response or note to any line in this Part X		· · ·	
			(A) Beginning of year		(B) End of year
	1	Cash — non-interest-bearing	199,463.	1	109,451.
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	15.	4	0.
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			
				5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	
\$	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
Ř	9	Prepaid expenses and deferred charges		9	
	400	Land, buildings, and equipment cost or other basis.			
	IVa	Complete Part VI of Schedule D		1 1	
	ь	Less accumulated depreciation 10b 150, 332.	42,023.	10 c	38,951.
	11	Investments – publicly traded securities		11	
	12	Investments – other securities See Part IV, line 11		12	
	13	Investments – program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	565.	15	565.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	242,066.	16	148,967.
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
es	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	<del></del>
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	0.	26	0.
		Organizations that follow SFAS 117 (ASC 958), check here ▶ 🗓 and complete			
Ses		lines 27 through 29, and lines 33 and 34.		1	
ă	27	Unrestricted net assets	242,066.	27	148,967.
3aj	28	Temporarily restricted net assets		28	
Ď	29	Permanently restricted net assets		29	
Net Assets or Fund Balano		Organizations that do not follow SFAS 117 (ASC 958), check here ► and complete lines 30 through 34.			
Š	30	Capital stock or trust principal, or current funds		30	
8	31	Paid-ın or capıtal surplus, or land, building, or equipment fund		31	
As	32	Retained earnings, endowment, accumulated income, or other funds		32	
ē	33	Total net assets or fund balances	242,066.	33	148,967.
Z	34	Total liabilities and net assets/fund balances	242,066.	34	148,967.
BA	A			-	Form 990 (2015)

TEEA0111 10/12/15

Onn	1990 (2013) Foundation for Rational Economics and Education, Inc. 74-2066	,041		Pa	ge 12		
Par	t XI Reconciliation of Net Assets						
	Check if Schedule O contains a response or note to any line in this Part XI				$\Box$		
1	Total revenue (must equal Part VIII, column (A), line 12)		31	7,9	85.		
2	Total expenses (must equal Part IX, column (A), line 25)				84.		
3	Revenue less expenses Subtract line 2 from line 1		-9	3,0	99.		
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))							
5 Net unrealized gains (losses) on investments							
6	Donated services and use of facilities						
7	Investment expenses						
8	Prior period adjustments						
9	Other changes in net assets or fund balances (explain in Schedule O)						
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,	1					
Dom	column (B))		14	8,9	67.		
Par	t XII Financial Statements and Reporting						
	Check if Schedule O contains a response or note to any line in this Part XII						
		_		res	No		
1	Accounting method used to prepare the Form 990 X Cash Accrual Other	i					
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O						
2 a	Were the organization's financial statements compiled or reviewed by an independent accountant?	1	2a		X		
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both						
	Separate basis Consolidated basis Both consolidated and separate basis	1-	— †-				
ь	Were the organization's financial statements audited by an independent accountant?		2 b		Х		
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both						
	Separate basis Consolidated basis Both consolidated and separate basis	- 1			[		
С	If Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2 c				
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O						
3 a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	[	3 a		Х		
	If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit			I			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3 b				
BAA		F	orm 9	90 (2	(015)		

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

Department of the Treasury Internal Revenue Service

**Public Charity Status and Public Support** 

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

2015

Open to Public Inspection

Schedule A (Form 990 or 990-EZ) 2015

Name	ame of the organization Employer identification number										
Fou	nd	ation for Rational	Economics and	l Education, In	c.		74-206684	1			
Par	_	Reason for Public Cha				e this p	art.) See instruction	ns.			
The o	rga	nization is not a private foundat									
1	Ť	A church, convention of church	hes, or association of c	churches described in se	ction 17	о(b)(1)(	A)(i).				
2	۲	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ))									
3	-	A hospital or a cooperative ho		,			).				
4	-				, ,,		•	he hospital's			
-	L_	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii) Enter the hospital's name, city, and state									
5	_	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section									
•	L	170(b)(1)(A)(iv). (Complete Part II)									
6		A federal, state, or local gover	nment or governmenta	il unit described in <b>sectio</b>	on 170(b	)(1)(A)(	v).				
7		An organization that normally in section 170(b)(1)(A)(vi).	receives a substantial ¡ Complete Part II )	part of its support from a	governn	nental u	nit or from the general p	ublic described			
8		A community trust described in	n section 170(b)(1)(A)	(vi). (Complete Part II)							
9	X	An organization that normally from activities related to its exinvestment income and unrela June 30, 1975. See section 5	empt functions – subje ted business taxable ir	ect to certain exceptions, acome (less section 511	and (2)	no more	than 33-1/3% of its sup	port from gross			
10	L	An organization organized and	doperated exclusively	to test for public safety 3	See <b>sec</b> t	ion 509	(a)(4).				
11		An organization organized and or more publicly supported organized and the state of	janizations described ii	n <b>section 509(a)(1)</b> or se	ection 5	09(a)(2)	See section 509(a)(3).	urposes of one Check the box in			
а	lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g  Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must										
	_	complete Pàrt IV, Sections A					•				
b		Type II. A supporting organiza management of the supporting must complete Part IV, Secti	organization vested in	trolled in connection with the same persons that	its supp control c	orted or or manag	ganization(s), by having ge the supported organiz	control or ration(s). <b>You</b>			
С		Type III functionally integrat organization(s) (see instruction	ed. A supporting organis) You must comple	nization operated in conn ete Part IV, Sections A,	ection w <b>D, and E</b>	ith, and	functionally integrated w	rith, its supported			
d		Type III non-functionally inte functionally integrated. The organistructions). You must comp	ganization generally mi	ust satisfy a distribution i	connecti equirem	on with ent and	its supported organization an attentiveness require	on(s) that is not ement (see			
е		Check this box if the organizat integrated, or Type III non-fund	on received a written o	determination from the IF	RS that it	ıs a Typ	pe I, Type II, Type III fun	ctionally			
f	En	iter the number of supported or	ganizations								
g	Pr	ovide the following information a	about the supported or	ganızatıon(s)							
		(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above (see instructions))	(lv) is organizate in your go docun	on listed overning	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)			
					Yes	No					
(A)								·			
(B)											
(C)											
<u>(D)</u>	<u>D)</u>							<u> </u>			
<u>(E)</u>											
Total											

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

# 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						
	ndar year (or fiscal year nning in) ►	(a) 2011	<b>(b)</b> 2012	(c) 2013	( <b>d)</b> 2014	(e) 2015	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any 'unusual grants')						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						
Sec	tion B. Total Support						
	ndar year (or fiscal year nning in) ►	(a) 2011	<b>(b)</b> 2012	(c) 2013	( <b>d)</b> 2014	(e) 2015	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
	Total support. Add lines 7 through 10						
12	Gross receipts from related activiti	es, etc (see instru	ctions)			12	
13	First five years. If the Form 990 is organization, check this box and s						▶ []
Sec	tion C. Computation of Pu	blic Support P	ercentage				
14	Public support percentage for 201	5 (line 6, column (f	) divided by line 1	1, column (f))		14	%
15	Public support percentage from 20	114 Schedule A, Pa	art II, line 14			15	%%
16 a	33-1/3% support test — 2015. If and stop here. The organization of	the organization diqualifies as a public	d not check the bo ly supported orga	ox on line 13, and li nization	ne 14 is 33-1/3% o	r more, check this	box ▶ []
k	33-1/3% support test — 2014. If the and stop here. The organization of	ne organization did ualifies as a public	I not check a box only supported orga	on line 13 or 16a, a inization	ind line 15 is 33-1/3	3% or more, check	this box
17 a	10%-facts-and-circumstances te or more, and if the organization method the organization meets the 'facts-a	eets the 'facts-and-	circumstances' te:	st, check this box a	ind stop here. Exp	lain in Part VI how	_
t	10%-facts-and-circumstances te or more, and if the organization me organization meets the 'facts-and-	eets the 'facts-and-	circumstances' te:	st, check this box a	ind stop here. Exp	lain in Part VI how	the —
18	Private foundation. If the organiz	ation did not check	a box on line 13,	16a, 16b, 17a, or 1	17b, check this box	and see instruction	ons · · · . ▶ 📋

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

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

Sec	tion A. Public Support						
	dar year (or fiscal year beginning in)	(a) 2011	<b>(b)</b> 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
	Gifts, grants, contributions and membership fees received (Do not include any 'unusual grants')	192,757.	80,825.	453,553.	501,281.	(6) 2310	1,228,416.
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	198,718.	196,023.				
3	Gross receipts from activities that are not an unrelated trade or business under section 513	190,710.	196,023.	310,890.	22,519.		728,150.
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
	Total. Add lines 1 through 5.  Amounts included on lines 1, 2, and 3 received from disqualified persons	391,475.	276,848.	764,443.	523,800.		1,956,566.
t	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						
c	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6)						1,956,566.
Sec	tion B. Total Support						
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2011	<b>(b)</b> 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9	Amounts from line 6	391,475.	276,848.	764,443.	523,800.		1,956,566.
	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	18,169.	31,744.	17,758.	8,750.		76,421.
С	Add lines 10a and 10b	18,169.	31,744.	17,758.	8,750.		76,421.
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
	<b>Total support.</b> (Add lines 9, 10c, 11, and 12)	409,644.	308,592.		532,550.		2,032,987.
14	First five years. If the Form 990 is organization, check this box and s	s for the organization top here	on's first, second, tr	nird, fourth, or fifth	tax year as a secti	on 501(c)(3)	▶ 🗍
Sec	tion C. Computation of Pul	blic Support P	ercentage				
15	Public support percentage for 2015	5 (line 8, column (f)	divided by line 13,	column (f))		15	96.24 %
16	Public support percentage from 20	14 Schedule A, Pa	rt I <u>II,</u> line 15	<u></u> .	<u> </u>	16	
Sec	tion D. Computation of Inv	estment Incon	ne Percentage				
17	Investment income percentage for	2015 (line 10c, col	umn (f) divided by	line 13, column (f)	)	17	3.76 %
18	Investment income percentage fro	m <b>2014</b> Schedule A	A, Part III, line 17			18	<del></del>
19 a	<b>33-1/3% support tests</b> — <b>2015</b> . If is not more than 33-1/3%, check the						
	33-1/3% support tests — 2014. If line 18 is not more than 33-1/3%, o	check this box and	stop here. The org	anızatıon qualifies	as a publicly supp	orted organizat	ion ▶ 📙
20	Private foundation. If the organiz	ation did not check	a box on line 14, 1	9a, or 19b, check	this box and see in	structions	· · · · · · · ► []

Part IV Supporting Organizations
(Complete only if you checked a box in line 11 on Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents?			1
	If 'No,' describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain	1		
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 <b>Part VI</b> how the organization determined that the supported organization was			
	described in section 509(a)(1) or (2)	2		
3	a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b) and (c) below	3a		
	<b>b</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 <b>Part VI</b> when and how the organization made the determination	3b		
	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 <b>Part VI</b> what controls the organization put in place to ensure such use	3c		
	- West and a second of the Hart of Obstance (if			
4	a Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked 11a or 11b in Part I, answer (b) and (c) below	4a		
	b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If 'Yes,' describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled			
	or supervised by or in connection with its supported organizations	4b	_	
	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 <b>Part VI</b> 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	4 c		
5	a Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' answer (b) and (c) below (if applicable). Also, provide detail in <b>Part VI</b> , 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)	5a		
	<b>b Type i or Type ii only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
	c Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
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 <b>Part VI</b>	6		
7	(defined in section 4958(c)(3)(Č)), 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 or 990-EZ)	7		<b> </b>
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ)	8		
9	a 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	9a		
	b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If 'Yes,' provide detail in Part VI	9b		
	c Did a disqualified person (as defined in 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 <b>Part VI</b>	9с		
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 10b below	10a		
		ıva		
	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).	10h		

_	edule A (Form 990 or 990-EZ) 2015 Foundation for Rational Economics and Education, Inc. 74-2066841		P	'age <b>5</b>
Pai	rt IV   Supporting Organizations (continued)		V	l Na
11	Has the organization accepted a gift or contribution from any of the following persons?		Yes	No
ē	a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the			<u> </u>
	governing body of a supported organization?	11a	<b> </b>	<u> </u>
	b A family member of a person described in (a) above?	11b	ļ	
	c A 35% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part VI	11c		
Sec	tion B. Type I Supporting Organizations			
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint		Yes	No
•	or elect at least a majority of the organization's 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 directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1		
2	Did the 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 <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization	2		
Sec	tion C. Type II Supporting Organizations			
	·		Yes	No
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 <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1		ļ
Sec	etion 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? If 'No,' explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s)	2		
3	By reason of the relationship described in (2), 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? If 'Yes,' describe in Part VI the role the organization's supported organizations played in this regard	3		
Sec	tion E. Type III Functionally-Integrated Supporting Organizations			
	Charly the how pays to the method that the exceptation used to extens the Interval Book Test disease the uses (see instructions).			
1				
a	a ∐ The organization satisfied the Activities Test Complete line 2 below			
t	The organization is the parent of each of its supported organizations. Complete line 3 below			
•	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instruction	ons)		
2	Activities Test. Answer (a) and (b) below.		Yes	No
ā	a 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		
ŀ	Did the activities described in (a) 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	2b		ļ
3	Parent of Supported Organizations Answer (a) and (b) below.			
á	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? Provide details in Part VI	3a		
ŀ	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	3 b		

Sch	edule A (Form 990 or 990-EZ) 2015 Foundation for Rational Economics and Ed	ucat:	lon, Inc. 74-20	66841 Page 6
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	niza	tions	
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on N other Type III non-functionally integrated supporting organizations must complete Sect	lovem tions /	ber 20, 1970 <b>See instru</b> A through E	ctions. All
Sec	tion A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		į
7	Other expenses (see instructions)	7	<del></del>	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	<del></del>	1
	tion B — Minimum Asset Amount		(A) Prior Year	(B) Current 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)			
	Average monthly value of securities	1 a		
	Average monthly cash balances	1 b		
	Fair market value of other non-exempt-use assets	1 c		
	I Total (add lines 1a, 1b, and 1c)	1 d		
	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		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
_ 8	Minimum Asset Amount (add line 7 to line 6)	8		
Sec	tion C — Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
_2	Enter 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		<u> </u>
_ 5	Income tax imposed in prior year	5		1
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	·	
7	Check here if the current year is the organization's first as a non-functionally-integrated (see instructions)	d Type	e III supporting organizati	on

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Schedule A (Form 990 or 990-EZ) 2015

			56841 Page <b>7</b>
t V Type III Non-Functionally Integrated 509(a)(3) Su	pporting Organiz	ations (continued)	
tion D – Distributions			Current Year
Amounts paid to supported organizations to accomplish exempt purpose	es		
Amounts paid to perform activity that directly furthers exempt purposes in excess of income from activity	of supported organization	ons, 	
Qualified set-aside amounts (prior IRS approval required)			
Other distributions (describe in Part VI) See instructions			
Total annual distributions. Add lines 1 through 6			
Distributions to attentive supported organizations to which the organization	de details		
Distributable amount for 2015 from Section C, line 6			
tion E — Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
Distributable amount for 2015 from Section C, line 6			
Underdistributions, if any, for years prior to 2015 (reasonable cause required — see instructions)			
Excess distributions carryover, if any, to 2015			
From 2013			
From 2014			
Total of lines 3a through e			
Applied to 2015 distributable amount			
***			
Applied to underdistributions of prior years			
Applied to 2015 distributable amount			
Remainder Subtract lines 4a and 4b from 4			
Subtract lines 3g and 4a from line 2 (if amount greater than			
Excess distributions carryover to 2016. Add lines 3 <sub>1</sub> and 4c			
Breakdown of line 7			
	<del> </del>	<del></del>	
		-	
		<u> </u>	
	tion D — Distributions  Amounts paid to supported organizations to accomplish exempt purposes in excess of income from activity that directly furthers exempt purposes in excess of income from activity.  Administrative expenses paid to accomplish exempt purposes of suppo Amounts paid to acquire exempt-use assets.  Qualified set-aside amounts (prior IRS approval required).  Other distributions (describe in Part VI) See instructions.  Total annual distributions. Add lines 1 through 6.  Distributions to attentive supported organizations to which the organization Part VI) See instructions.  Distributable amount for 2015 from Section C, line 6.  Line 8 amount divided by Line 9 amount.  tion E — Distribution Allocations (see instructions)  Distributable amount for 2015 from Section C, line 6.  Underdistributions, if any, for years prior to 2015 (reasonable cause required — see instructions)  Excess distributions carryover, if any, to 2015  From 2013 .  From 2014 .  Total of lines 3a through e .  Applied to underdistributions of prior years .  Applied to 2015 distributable amount .  Carryover from 2010 not applied (see instructions) .  Remainder Subtract lines 3g, 3h, and 3i from 3f .  Distributions for 2015 from Section D, line 7 .  Applied to underdistributions of prior years .  Applied to 2015 distributable amount .  Remainder Subtract lines 4a and 4b from 4 .  Remaining underdistributions for years prior to 2015, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions) .  Excess distributions carryover to 2016. Add lines 3j and 4c .	tv   Type III Non-Functionally Integrated 509(a)(3) Supporting Organization D — Distributions  Amounts paid to supported organizations to accomplish exempt purposes	tV   Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) tion D - Distributions Amounts paid to supported organizations to accomplish exempt purposes Amounts paid to supported organizations to accomplish exempt purposes of supported organizations, in excess of income from activity in excess of income from activity that directly furthers exempt purposes of supported organizations, in excess of income from activity Administrative expenses paid to accomplish exempt purposes of supported organizations.  Amounts paid to acquire exempt-use assets Qualified set-aside amounts (prior IRS approval required) Other distributions (describe in Part VI) See instructions  Total annual distributions. Add lines 1 through 6  Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions.  Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions.  Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions.  Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions.  Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions.  Distributions for 2015 from Section C, line 6  Underdistributions and for 2015 from Section C, line 6  Underdistributions, if any, for years prior to 2015 (reasonable cause required – see instructions)  Excess distributions carryover, if any, to 2015  From 2013  From 2013  From 2014  Total of lines 3a through e  Applied to underdistributions of prior years  Applied to underdistributions of prior years  Applied to 2015 distributiable amount  Carryover from 2010 not applied (see instructions)  Distributions for 2015 from Section D, line 7  § Applied to 2015 distributiable amount  Remaining underdis

e Excess from 2015 . . . . . . . . . . . .

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 D (Form 990)

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.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047 2015

Department of the Treasury Internal Revenue Service Name of the organization

n990. Open to Public Inspection
Employer identification number

	Foundation for Rational Economics and Education, Inc.	74-2066841
Par	Organizations Maintaining Donor Advised Funds or Other Similar Funds Complete if the organization answered 'Yes' on Form 990, Part IV, line 6.	nds or Accounts.
	(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 donor ad 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 funds can for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpo impermissible private benefit?	se conferring
Par	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)	
	Preservation of land for public use (e.g., recreation or education)	f a historically important land area
	Protection of natural habitat Preservation of	f a certified historic structure
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the fo last day of the tax year	rm of a conservation easement on the
		Held at the End of the Tax Year
	Total number of conservation easements	
t	Total acreage restricted by conservation easements	. 2b
c	Number of conservation easements on a certified historic structure included in (a) $\dots \dots$	. 2c
c	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	. 2d
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by tax year ►	the organization during the
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, handling and enforcement of the conservation easements it holds?	
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing or •	onservation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conse ► \$	rvation easements during the year
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section and section $170(h)(4)(B)(n)$ ?	170(h)(4)(B)(ı)
9	In Part XIII, describe how the organization reports conservation easements in its revenue and experinclude, if applicable, the text of the footnote to the organization's financial statements that describe	ense statement, and balance sheet, and es the organization's accounting for
Par	conservation easements  Ill Organizations Maintaining Collections of Art, Historical Treasures, or Complete if the organization answered 'Yes' on Form 990, Part IV, line 8.	Other Similar Assets.
1 a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue start, historical treasures, or other similar assets held for public exhibition, education, or research in fin Part XIII, the text of the footnote to its financial statements that describes these items.	
t	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue staten historical treasures, or other similar assets held for public exhibition, education, or research in furth following amounts relating to these items	erance of public service, provide the
	(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 assets for final amounts required to be reported under SFAS 116 (ASC 958) relating to these items	ncial gain, provide the following
a	Revenue included on Form 990, Part VIII, line 1	
	Access included in Form 990. Part X	• •

Schedule <b>D</b> (Form 990) 2015	Foundation for R	<u>ational Ecor</u>	omics and E	ducation, Inc.	74-206	6841		Page 2
Part III Organizations	Maintaining Coll	ections of A	rt, Historica	al Treasures, or	Other Similar Ass	ets (c	ontinu	ed)
3 Using the organization's a items (check all that apply	cquisition, accession,	and other recor	ds, check any o	of the following that a	re a significant use of its	s collecte	on	
a Public exhibition		d	Loan or ex	change programs				
<b>b</b> Scholarly research		е	Other					
c Preservation for future	e generations							
4 Provide a description of the Part XIII	-	•	·	-				
5 During the year, did the or to be sold to raise funds ra	ather than to be mainta	ained as part of	the organizatio	n's collection?	<u> </u>	Yes		No
Part IV Escrow and Cu	istodial Arranger ed an amount on F	<b>nents.</b> Comp Form 990, Pa	olete if the o art X, line 21	rganization answ	vered 'Yes' on Form	i 990, F	⊃art IV	/,
1 a Is the organization an age on Form 990, Part X?	nt, trustee, custodian	or other interme	diary for contril	outions or other asse	ts not included	Yes		No
<b>b</b> If 'Yes,' explain the arrang							L	
						Amount		
<b>c</b> Beginning balance								
d Additions during the year					. 1 d			
<ul> <li>Distributions during the year</li> </ul>	ar				. 1 e			
f Ending balance					. 1f			
2 a Did the organization include	de an amount on Form	990, Part X, Im	ie 21, for escro	w or custodial accou	nt liability?	Yes		No
<b>b</b> If 'Yes,' explain the arrang	ement in Part XIII Ch	eck here if the e	xplanation has	been provided on Pa	art XIII	<del></del>	[	]
Part V   Endowment Fu	nds. Complete if	the organiza	tion answer	ed 'Yes' on Form	990, Part IV, line 1	0.		
	(a) Current	year (1	b) Prior year	(c) Two years back	(d) Three years back	(e) F	our years	back
1 a Beginning of year balance								
<b>b</b> Contributions						1		
c Net investment earnings, and losses								
d Grants or scholarships .					<del></del>	+		
e Other expenditures for fac	alities							
f Administrative expenses								
g End of year balance				T				
2 Provide the estimated per		year end balan	ce (line 1g, coli	ımn (a)) held as	<del></del>	<u> </u>		
a Board designated or guas		•	e					
b Permanent endowment		<u> </u>						
c Temporarily restricted end		용						
The percentages on lines		egual 100%						
		•						
3 a Are there endowment fund organization by	ds not in the possession	on of the organiz	ation that are h	neld and administere	d for the		Yes	No
(i) unrelated organization	ns				• • • • • • • • • •	. 3a(i)		<u> </u>
(ii) related organizations						. 3a(ii)		<u> </u>
<b>b</b> If 'Yes' on line 3a(ii), are the	ne related organizatior	is listed as requ	ired on Schedu	le R?		. 3b_	_	
4 Describe in Part XIII the in	tended uses of the org	ganızatıon's end	lowment funds					
Part VI   Land, Building	s, and Equipmen	t.						
Complete if the	organization answ	vered 'Yes' o	n Form 990,	Part IV, line 11a	a. See Form 990, Pa	art X, li	ine 10	! <b>.</b>
Description of pr		(a) Cost or other	· <del> '</del>	) Cost or other	(c) Accumulated		Book va	
		(investme		basis (other)	depreciation	(4)		
1 a Land								
<b>b</b> Buildings				156,547.	119,200.		37.	,347.
c Leasehold improvements								<del>~ · · ·</del>
d Equipment				32,736.	31,132.		1	,604.
e Other					21,134.			· FOO
Total Add lines 1a through 1e		al Form 990 Pa	ert X. column (F	) line 10c )			38	951

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Schedule **D** (Form 990) 2015

	D (Form 990) 2015 Foundation for Rationa	l Economics and Edu	<u>ıcatıon, Inc.</u>	<u>74-206684</u> 1	Page 3
Part VII	Investments — Other Securities. Complete if the organization answered	'Yes' on Form 990,	Part IV, line 11b. Se	e Form 990, Part X, line	e 12.
(a) Des	cription of security or category (including name of security)	(b) Book value		iation Cost or end-of-year market v	
(1) Finance	cial derivatives				
	y-held equity interests		<u> </u>		
(3) Other		·	<del>                                       </del>		
$\frac{(A)}{(B)}$		- <del></del>	<del> </del>		
(B) (C)		<del></del>	<del></del>		
(D)		<del></del>			
(E)			ļ <del></del>		
(F)					
(G)					
(H)					
(I)	mp (h) must amul Form 200 Part V salump (P) has 12)		<del> </del>		
Part VIII	mn (b) must equal Form 990, Part X, column (B) line 12) > Investments — Program Related.	<u> </u>	<u> </u>		
Tart VIII	Complete if the organization answered				
	(a) Description of investment	(b) Book value	(c) Method of valuat	on Cost or end-of-year mark	ket value
(1)	····		<del> </del>		
(2)	<del></del>	<del> </del>	<del> </del>		
(3)	<del></del>	<del> </del>	<del> </del>		
(5)	<del></del>	<del> </del>	<del>                                     </del>	<del></del>	
(6)					
(7)					
(8)		ļ	<u> </u>		
(9)		<del> </del>	<del> </del>		
(10)	mn (b) must equal Form 990, Part X, column (B) line 13) .				
Part IX	Other Assets.		L	<del></del>	
	Complete if the organization answered		<u>Part IV, line 11d. Se</u>		
(1)	(a) De	escription		( <b>b</b> ) Boo	k value
(2)			<del></del>		
(3)					
(4)					
<u>(5)</u> (6)_			<del></del>	<del>+</del> -	
(7)					
(8)					
(9)				<del></del>	
(10)	olumn (h) must squal Form 990. Bod V. solumn (B)	lino 15 \			
Part X	Other Liabilities.	<u> </u>			
FaltA	Complete if the organization answered 'Yes' on I	Form 990, Part IV, line 1	1e or 11f. See Form 990	, Part X, line 25	
	(a) Description of liability	(b) Book value			
(1) Fede	eral income taxes				
(3)					
(4)					
(5)					
(6)			<del> </del>		
(8)			<del></del>		
(9)					
(10)					
(11)					
	mn (b) must equal Form 990, Part X, column (B) line 25)		and alsterness to the state of	harman de labor de la	
•	or uncertain tax positions. In Part XIII, provide the text of the foo under FIN 48 (ASC 740). Check here if the text of the footnote	•		•	ain 
BAA	.,	TEEA3303 06/03/15		Schedule D (Forn	<u>ب</u> 2015 (n 990

Schedule D (Form 990) 2015 Foundation for Rational Economics and Education, Inc. 74	<u>-2066841                                   </u>	Page 4
Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Re	turn.	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		
1 Total revenue, gains, and other support per audited financial statements	1	
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a Net unrealized gains (losses) on investments		
b Donated services and use of facilities		
c Recoveries of prior year grants		
d Other (Describe in Part XIII )		
e Add lines 2a through 2d	2 e	
3 Subtract line 2e from line 1	3	
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b Other (Describe in Part XIII )		
c Add lines 4a and 4b	4 c	
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per I	Return.	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		
1 Total expenses and losses per audited financial statements	1	
2 Amounts included on line 1 but not on Form 990, Part IX, line 25.	1	
a Donated services and use of facilities		
b Prior year adjustments		
c Other losses		
d Other (Describe in Part XIII )		
e Add lines 2a through 2d	2 e	
3 Subtract line 2e from line 1	3	
4 Amounts included on Form 990, Part IX, line 25, but not on line 1		
a Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b Other (Describe in Part XIII )		
C Add lines 4a and 4b	4 c	
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	
Part XIII   Supplemental Information.		

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

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Schedule **D** (Form 990) 2015

#### SCHEDULE L (Form 990 or 990-EZ)

#### **Transactions With Interested Persons**

► Complete if the organization answered 'Yes' on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b. ► Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

Employer identification number

Department of the Treasury Internal Revenue Service Information about Schedule L (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open To Public Inspection

Foundation for Rational Economics and Education, Inc. 74-2066841 Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only). Complete if the organization answered 'Yes' on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b Part I (b) Relationship between disqualified (d) Corrected? (a) Name of disqualified person 1 person and organization Yes Νo (1) (2) (3) (4) (5) (6) Enter the amount of tax incurred by the organization managers or disqualified persons during the year under ► S Enter the amount of tax, if any, on line 2, above, reimbursed by the organization Part II Loans to and/or From Interested Persons. Complete if the organization answered 'Yes' on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

(a) Name of interested person	(b) Relationship with organization (c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	e) Onginal (f) Balance due crpal amount	(g) In default?		(h) Approved by board or committee?		(i) Written agreement		
			То	From			Yes	No	Yes	No	Yes	No
(1)							T					Ī
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												
(8)												
(9)												
(10)							1					
Total					▶\$							

#### Part III Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 27.

	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

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

Schedule L (Form 990 or 990-EZ) 2015

chedule L (Form 990 or 990-EZ) 2015	Foundation for Rational	Economics an	d Education	, Inc

74-2066841 Page 2

Business Transactions Involving Interested Persons.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 28a, 28b, or 28c Part IV

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sha organiz reven	ation's
				Yes	No
(1) Ronald E. Paul	Officer's spouse	26,049.	Book Royalties	1	Х
(2)					
(3)					
(4)					
(5)					
(6)				- 1	
(7)					
(8)					
(9)					
(10)					

Part V Supplemental Information
Provide additional information for responses to questions on Schedule L (see instructions).

#### **SCHEDULE 0** (Form 990 or 990-EZ)

### Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047 2015

Inspection

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

Foundation for Rational Economics and Education, Inc.

74-2066841

Pt VI, Line 2

Lori Pyeatt is Carol Paul's daughter

The organization's accountant approved the 2015 form 990 before it was

Pt VI, Line 11b filed with the IRS.