# Exhibit 4

### **Return of Organization Exempt From Income Tax**

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury

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.

Internal Revenue Service For the 2014 calendar year, or tax year beginning and ending Check if applicable C Name of organization Institute For Global Education, Equality Of Opportunity Employer identification number Doing business as Address change Number and street (or PO box if mail is not delivered to street address) Room/suite 55-0610012 Name change 11125 Snowshoe lane E Telephone number Initial return City or town ZIP code 301-770-2130 Rockville MD 20852 Final return/terminated Foreign country name Foreign province/state/county Foreign postal code 154,304 Amended return G Gross receipts \$ F Name and address of principal officer Yes X No Application pending H(a) Is this a group return for subordinates? SANTOSH JIWRAJKA 104 ORION WAY, NESHANIC STATION, NJ 088 H(b) Are all subordinates included? If "No," attach a list (see instructions) 501(c)(3) ) < (insert no ) 4947(a)(1) or Tax-exempt status Website: ▶ H(c) Group exemption number X Corporation K Form of organization Trust Association Other > L Year of formation M State of legal domicile 2006 MD Part I Summary Briefly describe the organization's mission or most significant activities TO PROMOTE CHARITABLE, SCIENTIFIC, AND Activities & Governance **EDUCATIONAL PURPOSES** Check this box | If the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) 4 Total number of individuals employed in calendar year 2014 (Part V, line 2a) 5 Total number of volunteers (estimate if necessary) 6 Total unrelated business revenue from Part VIII, column (C), line 12 7a 0 Net unrelated business taxable income from Form 990-T, line 34 0 **Prior Year** Current Year Contributions and grants (Part VIII, line 1h) 151,867 87,871 RECEIVED 9 Program service revenue (Part VIII, line 2g) 0 Investment income (Part VIII, column (A), lines 3, 4 and 7d) 10 1,593 2,437 Other revenue (Part VIII, column (A), lines 5, 6d, 8d, 9c, 10d land (1e) 2015 11 0 Total revenue—add lines 8 through 11 (must equal Part VIII) column (A), line 12 12 89,464 154,304 104,140 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 13 45,000 14 Benefits paid to or for members (Part IX, column (A), line 4000 EM. UT 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 15 0 0 16a Professional fundraising fees (Part IX, column (A), line 11e) 0 b Total fundraising expenses (Part IX, column (D), line 25) ▶ 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 5.256 774 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 50,256 104,914 19 Revenue less expenses Subtract line 18 from line 12 39,208 49,390 Beginning of Current Year 20 Total assets (Part X, line 16) 292,948 230,371 21 Total liabilities (Part X, line 26) Net assets or fund balances Subtract line 21 from line 20 230,371 292.948 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sign Signature of officer Here Secretary Anne Type or print name and title Print/Type preparer's name Date PTIN Paid 5/13/2015 self-employed Sanjay Suri P00543826 **Preparer** Suri and Associates Chartered Firm's EIN ► 52-2020842 **Use Only** Firm's address > 4710 Rosedale Ave #300, Bethesda, MD 20814 Phone no (301) 767-1018

Form 990 (20)4

No

Yes

May the IRS discuss this return with the preparer shown above? (see instructions) .

Form 9	90 (20 <u>1</u> 4		55-0610012	Page Z
Pai	rt III	Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III	<u></u>	
1	Briefly	describe the organization's mission		
	TO P	OMOTE CHARITABLE, SCIENTIFIC, AND EDUCATIONAL PURPOSES		
2		e organization undertake any significant program services during the year which were not listed on	□ v <sub>a</sub> ,	₩.
		or Form 990 or 990-EZ?	Yes	X No
_		" describe these new services on Schedule O		
3	servic	e organization cease conducting, or make significant changes in how it conducts, any program	Yes	X No
		," describe these changes on Schedule O	res	<u> </u>
4		be the organization's program service accomplishments for each of its three largest program services	as measured by	
•		ses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and all		
		al expenses, and revenue, if any, for each program service reported		ı
4a	(Code	) (Expenses \$ 104,140 including grants of \$ 104,140 ) (Revenue	ie \$	)
		grants to organizations that promote charitable, scientific and educational purposes		
			<b></b>	
4b	(Code	) (Expenses \$ including grants of \$ ) (Revenue	 ле \$	)
4c	(Code	) (Expenses \$ including grants of \$ ) (Revenu	ле \$	)
	(			· ′
				·
			<del>-</del>	
	O41	program convices (Describe in Schedule O.)		
4d		program services (Describe in Schedule O ) nses \$ 0 including grants of \$ 0 ) (Revenue \$	0)	
	(⊏xpe	nses \$ 0 including grants of \$ 0 ) (Revenue \$		

Institute For Global Education, Equality Of Opportunity And Prosperity, Inc. 55-0610012 Form 990'(2014) Page 3 Part IV **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 Schedule A Х Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 2 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to 3 candidates for public office? If "Yes," complete Schedule C, Part I Х 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 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, 5 Х Part III 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 6 Х "Yes," complete Schedule D, Part I Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D. Part II 7 Х Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," Χ complete Schedule D, Part III 8 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV. 9 Х Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 10 Х 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D. Parts VI. VII, VIII, IX, 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 D, Part VI 11a Х b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 11b Х c 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 e 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 Χ 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 12a Х b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 12b Χ 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 14a 14a Did the organization maintain an office, employees, or agents outside of the United States? b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 14b Х 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or Х for any foreign organization? If "Yes," complete Schedule F, Parts II and IV 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other 16 Х

assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 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)

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

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

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? Х

Χ

17

18

19

20a

Form 990'(2014)
Part IV

			Yes	NO
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
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	<del>-</del>		
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			.,
	employees? If "Yes," complete Schedule J	23		X
24a	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		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		$\frac{\hat{x}}{x}$
	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		Х
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Х
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		_X_
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	256		Х
26	990-EZ? If "Yes," complete Schedule L, Part I  Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any	25b		
20	current or former officers, directors, trustees, key employees, highest compensated employees, or	1		
	disqualified persons? If "Yes," complete Schedule L, Part II	26		Х
27	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 of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	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 current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	200	-	Х
a b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	28a		
	Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30	_	Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	31		х
32	Part I  Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?	31		
J2	If "Yes," complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II,		,	
	III, or IV, and Part V, line 1 .	34		Х
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled	0.51-		
26	entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2  Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related	35b		
36	organization? If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part			
	VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note. All Form 990 filers are required to complete Schedule O .	38	$\frac{1}{2}$	
		Form	990	(2014)

Form 990 (2014)	Institute For Global Education, Equality Of Opportunity And Prosperity, Inc
Part 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>
				Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	0		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	reportable			
	gaming (gambling) winnings to prize winners?		1c	X	
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	0 .		l
b	If at least one is reported on line 2a, did the organization file all required federal employment tax re	turns?	2b		X
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructi			1	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedu	ıle O	3b		<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other				
	over, a financial account in a foreign country (such as a bank account, securities account, or other	financial	1		
	account)?		4a		X
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	<u> </u>	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter trans	saction?	5b_		X
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	I the			,
	organization solicit any contributions that were not tax deductible as charitable contributions?		6a	├	X
b	If "Yes," did the organization include with every solicitation an express statement that such contribu	itions or			
_	gifts were not tax deductible?		6b		<del> </del>
7	Organizations that may receive deductible contributions under section 170(c).		ļ		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for	or goods	70		
	and services provided to the payor?		7a 7b	<u> </u>	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?  Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it	Was	15		$\vdash$
С	required to file Form 8282?	was	7c		×
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	10	ļ	<del>  ^ </del>
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit		7e	İ	x
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit col		7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8		7g		X
h h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization				X
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintain				
•	sponsoring organization have excess business holdings at any time during the year?	•	8		X
9	Sponsoring organizations maintaining donor advised funds.				
а	Did the sponsoring organization make any taxable distributions under section 4966?		9a		X
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b		X
10	Section 501(c)(7) organizations. Enter	1 1		1	
а	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	1 1			
а	Gross income from members or shareholders	11a		1	
b	Gross income from other sources (Do not net amounts due or paid to other sources			:	
	against amounts due or received from them )	11b	<b>—</b> ]		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Fo		12a	<b>_</b>	<del> </del>
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.			<del> </del>	+
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	1405		1	1
	the organization is licensed to issue qualified health plans	13b			1
С	Enter the amount of reserves on hand	13c		1	+-
14a	Did the organization receive any payments for indoor tanning services during the tax year?	lulo O	14a		X
<u> </u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in School	uie U	14b		<u> </u>
			Forn	1 330	(2014)

Part VI

<u>Sect</u>	ion A. Governing Body and Management				
		l		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year.	<b>1a</b> 2			
	If there are material differences in voting rights among members of the governing body, or		1		
	If the governing body delegated broad authority to an executive committee or similar		1		
	committee, explain in Schedule O				
b	Enter the number of voting members included in line 1a, above, who are independent .	1 <b>b</b> 2	4		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relations	ship with			,
	any other officer, director, trustee, or key employee?	•	2		X
3	Did the organization delegate control over management duties customarily performed by or under		ļ		
	supervision of officers, directors, or trustees, or key employees to a management company or other	•	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 w	as filed?	4		Χ.
5	Did the organization become aware during the year of a significant diversion of the organization's a	assets?	5		X
6	Did the organization have members or stockholders?		6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or	appoint			
	one or more members of the governing body?		7a	Х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members	<b>5,</b>			
	stockholders, or persons other than the governing body?		7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertake	n during			
	the year by the following				
а	The governing body?		8a	Х	
b	Each committee with authority to act on behalf of the governing body?		8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re	eached			
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		Х
Sect	ion B. Policies (This Section B requests information about policies not required by the	Internal Revenue	<u>Code</u>		
				Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such	-			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt pu		10b		_X_
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before	ore filing the form?.	11a	Χ	
ь	Describe in Schedule O the process, if any, used by the organization to review this Form 990				' ۔ ۔ ۔ '
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a		X
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could	-	12b		X
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If	"Yes,"	40-		
	describe in Schedule O how this was done		12c		X
13	Did the organization have a written whistleblower policy?		13		X
14	Did the organization have a written document retention and destruction policy?		14		_X_
15	Did the process for determining compensation of the following persons include a review and appro	-			ĺ '
_	independent persons, comparability data, and contemporaneous substantiation of the deliberation	and decision?			
a	The organization's CEO, Executive Director, or top management official	•	15a		<del>  ×</del>
b	Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)		15b		Х
40-	· · · · · · · · · · · · · · · · · · ·				
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange with a taxable entity during the year?	gement .	40-	-	- , -
	· · · · · · · · · · · · · · · · · · ·	4_ 4_	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evalue participation in joint venture arrangements under applicable federal tax law, and take steps to safe				
	the organization's exempt status with respect to such arrangements?	yuaiu	16b		
Saat	·	<del></del>	100		L
<u> 3ect</u> 17	List the states with which a copy of this Form 990 is required to be filed ► MD				
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 99	0-T (Section 501/a)/2	le onl		
10	available for public inspection. Indicate how you made these available. Check all that apply	0-1 (Oecilon 301(C)(3	ااان در	()	
		kplain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents,		10V 25	d	
13	financial statements available to the public during the tax year	commercial interest por	icy, ai	iu	
20	State the name, address, and telephone number of the person who possesses the organization's l	nooks and records	_		
20	ANNE CHIELA	301-770-2130			
	11125 SNOWSHOF LE ROCKVILLE MD 20852	001-770-2100		<b>-</b>	

Form 990 (2014)	Institute For Global Education, Equ	iality Of Opportu	nity A	\nd	Pro:	spe	rity, Ir	nc		55-06100	12 Page <b>7</b>
Part VII	Compensation of Officers, Dire	ctors, Trustee	es, K	ey	Em	ıplo	yee	s, ŀ	lighest Comp	ensated	
	Employees, and Independent C Check if Schedule O contains a re		te to	any	y lir	ne ii	n this	s Pa	art VII...		🔲
Section A.	Officers, Directors, Trustees, Key E	mployees, and	High	est	Con	npe	nsate	ed E	imployees		
1a Complete t	his table for all persons required to be I	listed Report co	mper	satı	on 1	for t	he ca	lend	dar year ending v	with or within the	
organization's	•										
of compensati List all o List the who received	of the organization's <b>current</b> officers, di on Enter -0- in columns (D), (E), and (lof the organization's <b>current</b> key emplo organization's five <b>current</b> highest con reportable compensation (Box 5 of Fori and any related organizations	F) if no compens yees, if any See npensated emplo	ation instr oyees	wa ucti (ot	s pa ons her	aid for thai	defin	ition offici	of "key employe er, director, trusto	ee " ee, or key emplo	
\$100,000 of re	of the organization's <b>former</b> officers, ke eportable compensation from the organ	ization and any i	relate	d o	rgar	ıızat	tions				
organization, r	of the organization's <b>former directors o</b> more than \$10,000 of reportable compe	ensation from the	orga	anız	atıoı	n ar	nd an	y rel	ated organizatio	ns	the
compensated	n the following order individual trustees employees, and former such persons.										
X Check thi	s box if neither the organization nor any	y related brigariiz	auon				. <del></del>	ily C	arrent onicer, dir		
	(A) Name and Title	(B) Average hours per	(C)  Position (do not check more the box, unless person is officer and a director/			ıs botl or/trust	an ee)	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of	
		week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) SANTO	SH JIWRAJKA	10 00									
PRESIDENT		10 00			Х						
(2) ANAST	ASIA SHUKLA	10 00									
SECRETARY		10 00	ļ	<u> </u>	X	<u> </u>	ļ	<u> </u>	ļ		
(3)											
(4)											
(5)											
(6)											
(7)											
(8)											
(9)										_	
(10)											
(11)											
(12)					_			_			
(13)											
(14)		l	I	1	1	1	I	1	1	1	ŀ

	990 (2014) Institute For Global Education,									55-061	_	P	age 8
Pä	(A) Name and title	(B) Average hours per week (list any hours for related organizations	(do r	Po (do not check box, unless p officer and a		(C) Position leck more this person is a director/		one n an ee)	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	con f org	(F) stimate mount of other spensarom the janizati	of tion e on
		below dotted line)	rustee	il trustee		yee	Highest compensated employee					d relate anızatı	
15)													
16)											•		
17)						_							
18)													
19)													
20)													
21)													
22)													
23)												_	
24)													
25)													
1b c	Sub-total  Total from continuation sheets to Part VII, S	ection A .						<b>&gt;</b>	0				0
<u>d</u> 2	Total (add lines 1b and 1c)  Total number of individuals (including but not lii	mited to those lis	sted a	bov	e) v	vho	recei	<u>►</u> ved	more than \$100	<del></del>			0
	reportable compensation from the organization	•			0							Yes	No
3	Did the organization list any <b>former</b> officer, dire employee on line 1a? If "Yes," complete Sched		-		oye	e, c	r higi	hest	compensated		3		x
4	For any individual listed on line 1a, is the sum the organization and related organizations great	of reportable cor	npen	satio								***	
5	individual  Did any person listed on line 1a receive or acci	•			-			_		vidual	4	-	X
Sec	for services rendered to the organization? If "Y	es," complete So	chedu	ıle J	for	suc	h pei	rson			5		X
1	Complete this table for your five highest compecompensation from the organization. Report coyear										tax		
	(A) Name and business add	lress							(B) Description of ser	vices	(C Compe		
													0
													0
								₩					0

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

O

	90 (20		Equality Of	Opportunity And	Prosperity, Inc		55-0610	012 Page <b>9</b>
Far	t VIII	Statement of Revenue Check if Schedule O contains a re	snonse or r	note to any line in	this Part VIII			
1		Chest, i con lectio d'estitatio d'ic		oto to uny mie m	(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	1a b c d e f	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contributions) All other contributions, gifts, grants, a similar amounts not included above Noncash contributions included in lines Total. Add lines 1a–1f	1f	0 0 0 0 0 0 151,867 0	151,867			
97				Business Code			1	
Program Service Revenue	2a b			-	0			<del> </del>
<u>8</u>	, ה ה				0	<del></del> .		<del> </del>
er.	d				0			<del> </del>
E	e				0			
ogr.	f	All other program service revenue	•		0			
<u> </u>	g	Total. Add lines 2a–2f			0			
	3 4	Investment income (including dividen other similar amounts) Income from investment of tax-exemptors		▶	2, <b>43</b> 7 0			
	5	Royalties		<b>•</b>	0			
	6a b c	Gross rents Less rental expenses Rental income or (loss)	(ı) Real	(ii) Personal				
	d 7a	Net rental income or (loss)  Gross amount from sales of	) Securities	(II) Other	0			
		assets other than inventory Less cost or other basis and sales expenses Gain or (loss) Net gain or (loss)	0 0 0	0	0			
Other Revenue	8a b	Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 Less direct expenses	0 a b	0				
0	С	Net income or (loss) from fundraising	events	<b>•</b>	0			
	b	Gross income from gaming activities See Part IV, line 19 Less direct expenses Net income or (loss) from gaming act	a b	0	0			
		Gross sales of inventory, less returns and allowances . Less cost of goods sold .	a b	0	0			
	С	Net income or (loss) from sales of inv	entory		0			
		Miscellaneous Revenue		Business Code	_		_	
	11a				ō			

d All other revenue

e Total. Add lines 11a–11d12 Total revenue. See instructions

0

0

154,304

Part IX	Statement	of Functiona	l Expenses

Section	on 501(c)(3) and 501(c)(4) organizations must complete all	columns All other o	rganizations must c	omplete column (A)	
	Check if Schedule O contains a response or note	to any line in this Pa	art IX		
	not include amounts reported on lines 6b, 7b, 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				
	domestic governments See Part IV, line 21	3,500	3,500		
2	Grants and other assistance to domestic				
	individuals See Part IV, line 22	0			
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals See Part IV, lines 15 and 16	100,640	100,640		
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors,				
	trustees, and key employees	0			
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	0			
8	Pension plan accruals and contributions (include	0			
•	section 401(k) and 403(b) employer contributions)	0			
9 10	Other employee benefits Payroll taxes	0			
11	Fees for services (non-employees)				<del></del>
	Management .	o			
a b	Legal	0			
c	Accounting	600	<del></del>	600	
d	Lobbying	0			
e	Professional fundraising services See Part IV, line 17	0		· · · · · · · · · · · · · · · · · · ·	
f	Investment management fees	0			
g	Other (If line 11g amount exceeds 10% of line 25, column				
9	(A) amount, list line 11g expenses on Schedule O)	o			
12	Advertising and promotion	0			
13	Office expenses .	52		52	
14	Information technology	0			
15	Royalties	0			
16	Occupancy	0			
17	Travel .	0			
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	0			<u>.</u>
20	Interest .	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	0	0	0	
23	Insurance .	0			<del></del>
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)				
a	Bank service charges	100		100	
b	Licenses and permits	0		100	
C		0			<del></del>
d	All other expenses	0			
e 25	Total functional expenses. Add lines 1 through 24e	104,914		774	
25 26	Joint costs. Complete this line only if the	104,814	107,140	,,,,	- · · · · ·
20	organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation. Check here				
	following SOP 98-2 (ASC 958-720)				
	101101111111	<del></del>		·	<u> </u>

#### Form 990 (2014) Institute For Global Education, Equality Of Opportunity And Prosperity, Inc. 55-0610012 Page 11 Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 1 Cash—non-interest-bearing 6,310 16,189 2 Savings and temporary cash investments 115,013 2 152,216 3 3 Pledges and grants receivable, net 0 4 Accounts receivable, net 0 4 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 5 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 0 7 Notes and loans receivable, net 8 Inventories for sale or use 8 9 9 Prepaid expenses and deferred charges Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a Less accumulated depreciation 10b 0 10c 100.000 11 Investments---publicly traded securities 11 12 12 Investments-other securities See Part IV, line 11 0 13 Investments—program-related See Part IV, line 11 0 13 0 14 Intangible assets 0 14 15 Other assets See Part IV, line 11 9,048 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 230,371 16 292,948 Accounts payable and accrued expenses 17 17 18 18 Grants payable 19 Deferred revenue. 19 20 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, Liabilities trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 23 0 23 Secured mortgages and notes payable to unrelated third parties 0 24 Unsecured notes and loans payable to unrelated third parties ol 24 0 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 0 25 0 Total liabilities. Add lines 17 through 25 0 26 26

ĕ		complete lines 27 through 29, and lines 33 and 34.			
<u>a</u> n	27	Unrestricted net assets		27	
æ	28	Temporarily restricted net assets		28	
덛	29	Permanently restricted net assets .		29	
or Fu		Organizations that do not follow SFAS 117 (ASC958), check here complete lines 30 through 34.	► X and		
ets	30	Capital stock or trust principal, or current funds		 30	

Organizations that follow SFAS 117 (ASC 958), check here ▶

Paid-in or capital surplus, or land, building, or equipment fund

Total net assets or fund balances

Total liabilities and net assets/fund balances

Retained earnings, endowment, accumulated income, or other funds

31

32

33

Form **990** (2014)

292,948

292,948

292,948

31

32

33

34

230,371

230,371

230,371

Form 9	990 (2014) Institute For Global Education, Equality Of Opportunity And Prosperity, Inc	<u>55</u>	-0610012	Pag	ge <b>12</b>
Par	Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		154	4,304
2	Total expenses (must equal Part IX, column (A), line 25)	2		104	4,914
3	Revenue less expenses Subtract line 2 from line 1 .	3		49	9,390
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		230	0,371
5	Net unrealized gains (losses) on investments .	5		14	<u> 4,120</u>
6	Donated services and use of facilities .	6			
7	Investment expenses	7			
8	Prior period adjustments	8			<u>-933</u>
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,	1 1			
	column (B))	10	<del></del>	292	2,948
Part					<del></del>
	Check if Schedule O contains a response or note to any line in this Part XII		· · ·		<u> </u>
1	Accounting method used to prepare the Form 990 X Cash Accrual Other  If the organization changed its method of accounting from a prior year or checked "Other," explain in  Schedule O	···	-	Yes	No
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both				1
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		X
	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				
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?	of	2c		X
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O				
3a	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?		3a		x
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		<u>x</u>
			Form	990	(2014)

### 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

2014

Open to Public Inspection

Name o	e of the organization Employer identification number								
	stitute For Global Education, Equality Of Opportunity And Prosperity, Inc 55-0610012								
	Part I Reason for Public Charity Status (All organizations must complete this part ) See instructions								
1 he o	e organization is not a private foundation because it is. (For lines 1 through 11, check only one box.)  A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).								
2									
3	· 苪								
4 [	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state								
5	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II)								
6 [	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).								
7	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II)								
8	A community trust described in section 170(b)(1)(A)(vi). (Complete Part II )								
9 [	An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III)								
10									
11 [	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g								
а	The same of the sa								
b									
c	Type III functionally integr	ated. A supporting o	organization operated	n connect	ion with, a	nd functionally integ	rated with,		
d	its supported organization(s						anization(s)		
u	that is not functionally integr	ated The organizat	ion generally must sat	isfy a distr	ibution red	quirement and an att			
е	requirement (see instructions) You must complete Part IV, Sections A and D, and Part V.  e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization								
f	Enter the number of supported	•	, , , , , , , , , , , , , , , , , , , ,						
<u>g</u>	Provide the following information			T					
	(i) Name of supported organization	(described on lines 1-9 listed in your governing support (see othe		(vi) Amount of other support (see instructions)					
			,	Yes	No				
(A)	-		<del></del>						
(B)			/						
(C)									
(D)					,				
(E)									
Total				<del> </del>	2	0	(		

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 II 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.)

Sac	tion A. Public Support	is to quality un	dei the tests is	sted below, piec	ase complete r	art III.	<del></del>
	ndar year (or fiscal year beginning in)	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	Gifts, grants, contributions, and	<u> </u>	(5) 20 11	10/20:2	(4) 2010		(7.53
•	membership fees received (Do not						
	include any "unusual grants ")						l 0
2	Tax revenues levied for the organization's						
_	benefit and either paid to or expended on						
	its behalf						0
3	The value of services or facilities						·
	furnished by a governmental unit to the						
	organization without charge .						0
4	Total. Add lines 1 through 3	0	0	0	0	0	0
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)						
	Public support. Subtract line 5 from line 4					L	0
	tion B. Total Support	(-) 0040	(b) 0044	(-) 0040	(4) 2042	(-) 2014	(f) Total
	ndar year (or fiscal year beginning in)	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7	Amounts from line 4	0	0	0	0	0	0
8	Gross income from interest, dividends,			·			
	payments received on securities loans,						
	rents, royalties and income from similar						0
0	Net income from unrelated business						<u> </u>
9	activities, whether or not the business is						
	regularly carried on .						0
10	Other income Do not include gain or				·		
	loss from the sale of capital assets						
	(Explain in Part VI )						0
11	Total support. Add lines 7 through 10				•		0
12	Gross receipts from related activities, etc. (see	e instructions)				12	
13	First five years. If the Form 990 is for the or	ganızatıon's first, s	econd, third, fourth	n, or fifth tax year a	s a section 501(c)	(3)	
	organization, check this box and stop here						▶ 🛄
Sec	tion C. Computation of Public Sup	port Percenta	ige				
	Public support percentage for 2014 (line 6, co			f))	-	14	0 00%
15	Public support percentage from 2013 Schedu	ıle A, Part II, line 1	4			15	0 00%
16a	33 1/3% support test—2014. If the organiza	ation did not check	the box on line 13	, and line 14 is 33	1/3% or more, che	ck this box	
	and stop here. The organization qualifies as	a publicly support	ed organization			•	▶
b	33 1/3% support test—2013. If the organization	ation did not check	a box on line 13 o	r 16a, and line 15 i	s 33 1/3% or more	, check this	
	box and stop here. The organization qualifie	s as a publicly sup	ported organizatio	n			▶
17a	10%-facts-and-circumstances test—2014.	. If the organization	n did not check a b	ox on line 13, 16a,	or 16b, and line 14	4	
	is 10% or more, and if the organization meets	s the "facts-and-cir	cumstances" test,	check this box and	stop here. Explai	in in	
	Part VI how the organization meets the "facts	s-and-circumstance	es" test. The organ	ization qualifies as	a publicly support	ed	
_	organization				405 47 - 11		▶ [
b	10%-facts-and-circumstances test—2013. 15 is 10% or more, and if the organization me	. If the organization	n did not check a b	oox on line 13, 16a,	166, or 1/a, and I	ine Kalain in	
	Part VI how the organization meets the "facts"					cpiani in	
	supported organization .				, <b>,</b>		▶ □
18	Private foundation. If the organization did n	ot check a box on	line 13. 16a. 16b	17a, or 17b. check	this box and see		
. •	instructions .		2 12, 122, 132,	.,,,			▶

Part ill 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						
Cale	endar year (or fiscal year beginning in)	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees						
_	received (Do not include any "unusual grants")	43,700	52,805	53,400	87,871	151,867	389,643
2	Gross receipts from admissions, merchandise sold or services performed, or facilities	1					
	furnished in any activity that is related to the	1					
	organization's tax-exempt purpose						0
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						0
4	Tax revenues levied for the organization's						
	benefit and either paid to or expended on						
	its behalf						0
5	The value of services or facilities	1		ļ			
	furnished by a governmental unit to the						
	organization without charge						0
6	Total. Add lines 1 through 5	43,700	52,805	53,400	87,871	151,867	389,643
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons						0
b	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						0
С	Add lines 7a and 7b	0	0	0	0	0	0
8	Public support (Subtract line 7c from			1			
	line 6 ) .			<u>l</u>			389,643
Sec	ction B. Total Support						
Cale	endar year (or fiscal year beginning in) 🛚 🖊	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9	Amounts from line 6	43,700	52,805	53,400	87,871	151,867	389,643
10a	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties and income from similar sources	430	303	368	1,593	2,437	5,131
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						0
С	Add lines 10a and 10b	430	303	368	1,593	2,437	5,131
11	Net income from unrelated business	]	l	ľ	ŀ		
	activities not included in line 10b, whether			}	İ		
	or not the business is regularly carried on						0
12	Other income Do not include gain or						
	loss from the sale of capital assets	1		ŀ			
	(Explain in Part VI ) .						0
13	Total support. (Add lines 9, 10c, 11,						
	and 12 ) .	44,130	53,108	53,768	89,464	154,304	394,774
14	First five years. If the Form 990 is for the org	anızatıon's first, se	econd, third, fourth	, or fifth tax year as	s a section 501(c)(	3)	
	organization, check this box and stop here						
Sec	ction C. Computation of Public Sup	port Percenta	ge				·
15	Public support percentage for 2014 (line 8, col	umn (f) divided by	line 13, column (f	))		15	98 70%
16	Public support percentage from 2013 Schedul	e A, Part III, line 1	5			16	98 43%
Sec	ction D. Computation of Investment	Income Perce	entage	_			
17	Investment income percentage for 2014 (line 1			lumn (f)) .		17	1 30%
18	Investment income percentage from 2013 Sch	edule A, Part III, I	ine 17		٠	18	1 57%
	33 1/3% support tests—2014. If the organiza			4, and line 15 is mo	ore than 33 1/3%,	and line 17 is	
	not more than 33 1/3%, check this box and ste						<b>▶</b> X
b	33 1/3% support tests—2013. If the organiza					33 1/3%, and	
	line 18 is not more than 33 1/3%, check this be						<b>&gt;</b>
20	Private foundation. If the organization did no	t check a box on I	ine 14, 19a, or 19b	o, check this box ar	nd see instructions	<b>S</b>	▶ [

### Schedule F (Form 990)

### **Statement of Activities Outside the United States**

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

2014
Open to Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service ► Attach to Form 990.
- Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the or	ganization		,			Employer identification number
	Global Educatio	• • • • • • • • • • • • • • • • • • • •				55-0610012
Part I		<b>ormation on A</b> n 990, Part IV, line		ide the United States. C	omplete if the organizat	ion answered
assis the g	tance, the grante rants or assistant	es' eligibility for to	he grants or assi	rds to substantiate the amoustance, and the selection cri	teria used to award	X Yes No
	ance outside the				. 4. 40	
	ies per Region (1	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) a program service, describe specific type of service(s) in region	expenditures for
(1)						
(2)						
_(3)						
_(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
(10)						
(11)						
(12)						
(13)				T		
(14)						
(15)						
(16)						
(17)						
	tal rom continuation	0	0	.,		

ol

c Totals (add lines 3a and 3b)

55-0610012

Institute For Global Education, Equality Of Opportunity And Prosperity, Inc.

Schedule F (Form 990) 2014

Part II

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed

(i) Method of valuation (book, FMV, appraisal, other)	Book																
(h) Description of non-cash assistance	Salpplies																
(g) Amount of non-cash assistance	640										:						
(f) Manner of cash disbursement	Check																
(e) Amount of cash grant	100,000																
(d) Purpose of grant	Educational																
(c) Region	South Asia																
(b) IRS code section and EIN (if applicable)															·-		
1 (a) Name of organization	(1)	(2)	(3)	(4)	(5)	(9)	(2)	(8)	(6)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	

Schedule F (Form 990) 2014

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

# SCHEDULEI (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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

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

▶ Attach to Form 990.

OMB No 1545-0047	2014	Open to Public	Inspection	ication number
				Employer identification number

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

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Yes	•
E	
1	

55-0610012

		X Yes No
7	Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	
Pal	Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990	Form 990
	Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed.	

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and

nstitute For Global Education, Equality Of Opportunity And Prosperity, Inc.

**General Information on Grants and Assistance** 

Part I

<del>-</del>	1 (a) Name and address of organization (b) EIN (c) IRC section or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ε								
8								
9								
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(9)								
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6								
( <u>8</u> )								
6								
(19)								
£								
(12)								
8	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	501(c)(3) and g	lovernment organiza	ations listed in the line	1 table		<b>A</b> 4	
က	Enter total number of other organizations listed in the line 1 table	ganizations list	ed in the line 1 table					

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

Schedule I (Form 990) (2014)

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

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

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

▶ Attach to Form 990 or 990-EZ.

2014

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization	Employer identification number
Institute For Global Education, Equality Of Opportunity And Prosperity, Inc	55-0610012
Form 990, Part VI, Section B, Line 11a and 11b. The officers review the tax return with the	
tax preparer before it is filed	
Form 990, Part VI, Section C, Line 19 This information is available upon request	

# Exhibit 5

## CORPORATE CHARTER APPROVAL SHEET

EXI EDITED SERVICE***	** KEEP WITH DOCUMENT **
DOCUMENT CODE 22 BUSINESS CODE 04	
#	
Close Stock Nonstock	
P.A Religious	•
•	
Merging (Transferor)	. 1
	ID # D11542156 ACK # 1000361993762206 LIBER: B01019 FOLIO: 0805 PAGES: 0005 INSTITUTE FOR GLOBAL EDUCATION, EQUALIT Y OF OPPORTUNITY AND PROSPERITY, INC.
	MAIL Back
Surviving (Transferee)	10/02/2006 AT 04:41 P WO # 0001300427
	1
	New Name
FEES REMITTE	ED
Base Fee: 100	
Org. & Cap. Fee:	Change of Name Change of Principal Office
Expedite Fee:	Change of Principal Office Change of Resident Agent
State Recordation Tax:	Change of Resident Agent Address.
State Transfer Tax:	Resignation of Resident Agent
Certified Copies	Designation of Resident Agent and Resident Agent's Address
Copy Fee:	Change of Business Code
Certificates	
Certificate of Status Fee: Personal Property Filings	Adoption of Assumed Name
Personal Property Filings:  Mail Processing Fee:	
Other:	Other Change(s)
TOTAL FEES: 2/ 9	
Credit Card Check Cash	Code
Documents on Checks	Attention:
Approved By: OWW3	N MARK WEINBERG
	SUITE 1200 - 11300 ROCKVILLE PIKE
Keyed By:	ROCKVILLE MD 20852-3003
COMMENT(S):	-
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	CUST ID:0001857389
	WORK ORDER: 0001300427
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### INSTITUTE FOR GLOBAL EDUCATION, EQUALITY OF OPPORTUNITY AND PROSPERITY, INC.

#### <u>ARTICLES OF INCORPORATION</u>

FIRST: I, the undersigned, Mark B. Weinberg, whose Post Office address is Suite 1200, 11300 Rockville Pike, Rockville, MD 20852, being at least eighteen years of age, do under and by virtue of the General Laws of the State of Maryland authorizing the formation of a corporation, form a corporation.

SECOND: The name of the corporation is Institute for Global Education, Equality of Opportunity and Prosperity, Inc.

THIRD: The period of its duration is perpetual.

FOURTH: The purpose or purposes for which the Corporation is organized and the objectives to be carried on and promoted by it, are as follows:

- (a) To receive donations from individuals, corporations and any other legal persons including religious organizations or governmental agencies, to form and maintain a fund or funds of money, real or personal property or any combination thereof and, subject to the restrictions and limitations hereinafter set forth, to use and apply the whole or any part of the income therefrom and the principal thereof exclusively for charitable, scientific or educational purposes either directly or by contributions to organizations that qualify as exempt organizations under Section 501(c)(3) of the Internal Revenue Code of 1986, or corresponding provisions of any subsequent federal tax laws. These goals may be attained, without limiting the Corporation's freedom to pursue these goals through other avenues, by:
- 1. Assist the poor and disadvantaged through education, alleviation of their poverty, improvement of their health and sanitation, relief from natural disasters;
- 2. Study and educate the public about the sources of poverty, including the impact of environmental change, the relationship between poverty and inequalities among people and the Gandhian philosophy of truth, nonviolence and selfless service to society;
- 3. Support Gandhi College in the Ballia district of India to provide education and training to poor rural students, especially women, by providing financial support to build classrooms and laboratories, and for operating expenses of the college; and

4. Establish a center in Washington, D.C. for education and training of poor and disadvantaged persons. This center will, *inter alia*, promote the Gandhian philosophy of truth, nonviolence and selfless service to society. The Center will also conduct research and organize discussions on poverty and inequality of opportunity with the ultimate goal to help create a fair, just and sustainable human civilization on the planet earth.

Subject to the restrictions and limitations herein set forth, the Corporation shall use and apply the whole and any part of its assets and the income therefrom in the exclusive pursuit of these goals.

(b) Notwithstanding any other provision hereof, the Corporation shall not conduct or carry on any activities not permitted to be conducted or carried on by an organization exempt under Section 501(c)(3) of the Internal Revenue Code of 1954, or corresponding provisions of any subsequent federal tax laws, and by an organization, contributions to which are deductible under Section 170(c)(2) of such Code, or corresponding provisions of any subsequent federal tax laws.

FIFTH: Provisions for the regulation of the internal affairs of the Corporation, including provisions for the distribution of assets on dissolution or final liquidation, are:

- (a) No Private Benefit: No part of the net earnings of the Corporation shall inure to the benefit of any Director or Officer of the Corporation, or any private individual (except that reasonable compensation may be paid for services rendered to or for the Corporation and grants may be made to persons in furtherance of one or more of its purposes), and no Director or Officer of the Corporation, or any private individual shall be entitled to share in the distribution of any of the corporate assets on dissolution of the Corporation.
- (b) <u>Legislative and Political Activity</u>. No substantial part of the activities of the Corporation shall be the carrying on of propaganda, or otherwise attempting, to influence legislation, and the Corporation shall not participate in or intervene in (including the publication or distribution of statements) any political campaign on behalf of (or in opposition to) any candidate for public office.
- (c) <u>Distribution of Assets upon Dissolution</u>. Upon the dissolution of the Corporation or the winding up of its affairs, the assets of the Corporation shall be distributed exclusively to charitable, scientific or educational organizations which then qualify under the provisions of Section 501(c)(3) of the Internal Revenue Code of 1954, or corresponding provisions of any subsequent federal tax laws, as are selected by the Directors of the Corporation.

SIXTH: The Corporation shall have members. The qualifications for, and rights and responsibilities of membership shall be as set forth in the Corporation's bylaws.

SEVENTH: The Corporation shall not issue capital stock.

EIGHTH: The Post Office address of the principal office in this state is 11125 Snowshoe Lane, Rockville, MD 20852. The name of the resident agent of the Corporation in this state is Anastasia S. Shukla and the post office address of the resident agent is 11125 Snowshoe Lane, Rockville, MD 20852.

NINTH: The manner of election of Directors of the Corporation shall be as provided in the Bylaws.

TENTH: The number of Directors constituting the initial Board of Directors of the Corporation shall be three (3), which number may be increased pursuant to the Bylaws of the Corporation but shall never be less than three (3). The names and addresses of the Directors who shall act until their successors are duly elected and qualified are:

Santosh Jiwrajka 104 Orion Way Neshanic Station, NJ 08853

Anastasia S. Shukla 11125 Snowshoe Lane Rockville, MD 20852

Jagadish Shukla 11125 Snowshoe Lane Rockville, MD 20852

The undersigned incorporator of Institute for Global Education, Equality of Opportunity and Prosperity, Inc., in executing the foregoing Articles of Incorporation, hereby acknowledges the same to be his act and further acknowledges that, to the best of his knowledge, the matters and facts set forth therein are true in all material respects under the penalties of perjury.

IN WITNESS WHEREOF, the undersigned has signed these Articles of Incorporation on this \_\_\_\_\_\_ day of \_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_. 2006.

ařk B. Weinberg, Incorporato

County of Montgomery: State of Maryland : ss

I hereby certify, that on this 2 \_, in the year 2006, before the subscriber, a notary public in and for the State of Maryland, personally appeared Mark B. Weinberg, being well known to me, who acknowledged the foregoing Articles of Incorporation to be his act.

Notary Public



My Commission expires:

RONALD JACOBS NOTARY PUBLIC **Montgomery County** Maryland My Commission Expires Aug. 21, 2010

I hereby consent to my designation in this document as resident agent for this corporation.

CUST ID:0001857389 WORK ORDER:0001300427 DATE:10-10-2006 10:39 AM

AMT. PAID:\$219.00