

# **NEIGHBORHOOD DEVELOPMENT FUND** Not-for-Profit Transmittal and Approval Form

# **Executive Summary of Request:**

The FCTHS Youth Connection Services Center collaborates with many community organizations to provide necessary resources for students and their families. Provided assistance includes school supplies, tutoring/mentoring/counseling services, program training materials for college/career service learning academic skills. Last year over 6,000 interventions were provided.

🗌 Yes X No	
🗌 Yes X No	
Yes X No	
	🗌 Yes X No

I have reviewed the attached Neighborhood Development Fund Application and have found it complete and within Metro Council guidelines and request approval of funding in the following amount(s). I have read the organization's statement of public purpose to be furthered by the funds requested and I agree that the public purpose is legitimate. I have also completed the disclosure section below, if required.

District #

Councilman Robin Engel

<u>\$3,500</u> Amount

5-13-14 Date

# **Primary Sponsor Disclosure**

List below any personal or business relationship you, your family or your legislative assistant have with this organization, its volunteers, its employees or members of its board of directors.

None.

## **Applicant/Program:**

Jeff. Co. Public Education Foundation/Fern Creek Traditional High School—Youth Connection Training Services Program.

# Additional Disclosure and Signatures

# **Additional Council Office Disclosure**

List below any personal or business relationship you, your family or your legislative assistant have with this organization, its volunteers, its employees or members of its board of directors.

None.

District #	Council Member Signature	Amount	Date
District #	Council Member Signature	Amount	Date
District #	Council Member Signature	Amount	Date
District #	Council Member Signature	Amount	Date
District #	Council Member Signature	Amount	Date
District #	Council Member Signature	Amount	Date
District #	Council Member Signature	Amount	Date

NDF NON-PROFIT	ADDI ICATION	CHECKI IST
NDF NORTKOTTI	ALLICATION	CHECKLIST

Legal Name of Applicant Organization: Jeff. Co. Public Education Foundation/Fern Creek Traditional High	
Program Name:—Youth Connection Training Services Program. Request Amount: \$3,500	Yes/No/NA
Request form: Is the NDF request form signed by all Council Member(s) appropriating funding?	Yes
Request form: Is the funding proposed less than or equal to the request amount?	Yes
Request form: Have all known Council or Staff relationships to the Agency been adequately disclosed on the cover sheet?	Yes
Application Page 1: Has prior Metro funds committed/granted been disclosed?	Yes
Application Page 1: Is the application properly signed and dated by authorized signatory?	Yes
Application Page 3: Reimbursement funding – One or two boxes checked if any expenses are incurred before he grant award period. Is all required documentation included?	No
Application Pages 3 – 5: Is the proposed public purpose of the program well-documented?	Yes
Application 4: Is there adequate documentation of how the proceeds of the fundraiser will be spent?	Yes
Application Budget Page 6: Does the application budget reflect only the revenue and expenses of the project/program (page 6) if the request is not an operating budget request? Is all detail schedules included for 'Metro, Non Metro and Total' expense funds for client assistance, community events & festivals and other expenses? And does the Non-Metro Revenue equal the Non-Metro expenses?	Yes
Faith Based Organizations: Is the signed Faith Based Form signed and included?	NA
Jefferson County Only: Will all funding be spent in Louisville/Jefferson County?	Yes
Capital Project(s) request: Is the cost estimate(s) from proposed vendor(s) included?	Yes
<ul> <li>Good Standing: Is the entity in good standing with:</li> <li>Kentucky Secretary of State – include Secretary of State website information on organization</li> <li>Louisville Metro Government – check OMB monthly report filed in Council Financial Reports</li> <li>Internal Revenue Service – most recent Form 990 included</li> </ul>	Yes
Separate Taxing Districts: If Metro funding is for a separate taxing district, is the funding appropriated for a program outside the legal responsibility of that taxing district?	NA
Small Cities: Is the resolution included agreeing to partner with Louisville Metro on the capital project? (IRS Determination letter not required, Form 990 not required, but KY SOS acknowledgement is)	NA
Operating Requests: Is recommended operating funding less than or equal to 33% of total operating budget?	Yes
<b>IRS Exempt Proof:</b> Is proof of Tax Exempt status of 501(c) 3, 4, 6, 19, 1120-H included?	Yes
Operating Budget: Is the organization's current fiscal year operating budget included?	Yes
Ordinance Required: Is the amount committed by Council members greater than \$5,000 to any one project/program within an organization in this fiscal year.	No
Board Members: Is the entity's board member list (with term length/term limits) included?	Yes
Staff: Is a list of the highest paid staff included with their expected annual personnel costs?	Yes
Annual Audit: Is the most recent annual audit (if required by organization) included?	Yes
Rent Requests: Is a copy of signed lease included?	NA
Articles of Incorporation: Are the Articles of Incorporation of the organization included?	Yes
IRS Form W-9: Is the IRS Form W-9 included?	Yes
Evaluation Forms: Are the evaluation forms (if program participants are given evaluation forms) included?	Yes
Affirmative Action: Affirmative Action/Equal Employment Opportunity plan and/or policy statement included (if required by the organization)?	Yes
Prepared by: Monica Hodge, District 22 Date: 5/14/14	



# LOUISVILLE METRO COUNCIL



# **NEIGHBORHOOD DEVELOPMENT FUND APPLICATION**

SECTION 1 - APPLICANT INFO	DRMATION					
Legal Name of Applicant Organization: (as listed on: <u>http://www.sos.ky.gov/business/records/)</u> Jefferson C	ounty Public School Foundation					
Main Office Street & Mailing Address: 3332 Newburg Road						
Website: http://www.jefferson.kyschools.us/						
Application Contact: Dana Shumate	Title: Coordinator Business Involvement					
Phone: 485-3995	Email: dana.shumate@jefferson.kyschools.us					
Financial Contact: Jim Allen	Title: Chairman					
Phone: 588-8604	Email: JAllen@hillard.com					
GEOGRAPHICAL AREA(S) WHERE PROGRAM ACTI	VITIES ARE (WILL BE) PROVIDED					
Program Facility Location(s): Fern Creek High School						
Council District(s): Jefferson Zip Code	e(s): 40291					
SECTION 2 PROGRAM REQUEST & FINA	ANCIAL INFORMATION					
Program Name: Youth Services Center						
Total Request: \$10,000 Total Metro Award (this p	rogram) in previous year : \$3,500					
The following are required attachments:						
Image: State of Current Year Projected Budget       Image: State of Current Year Projected Budget         Image: State of Directors (include term & term limits)       Image: State of Current financial statement         Image: State of Directors (include term & term limits)       Image: State of Current financial statement         Image: State of Directors (include term & term limits)       Image: State of Current financial statement         Image: State of Directors (include term & term limits)       Image: State of Current financial statement         Image: State of Directors (include term & term limits)       Image: State of Current financial statement         Image: State of Directors (include term & term limits)       Image: State of Current financial statement         Image: State of Directors (include term & term limits)       Image: State of Current financial statement         Image: State of Directors of Directors (include term & term limits)       Image: State of Current financial statement         Image: State of Directors o	ned lease if rent costs are being requested Form W9 luation forms if used in the proposed program nual audit (if required by organization) h Based Organization Certification Form, if required if including the 3 highest paid staff					
Agency Fiscal Yr Start Date:						
For the current fiscal year ending June 30, list all funds received from Louisville expense, including funds received through Metro Federal Grants, from any dep Development Funds). Attach additional sheet if necessary.						
Source:	Amount: \$					
Source:	Amount: \$					
Source:	Amount: \$					
Has the applicant contacted the BBB Charity Review for participation?  Yes Has the applicant met the BBB Charity Review Standards?  Yes  No	i 🗎 No					
SECTION 3 - SIGNATU	JRE					
I certify under the penalty of law the information in this application (including, without limitation, the Certifications and Assurances is accurate to the best of my knowledge. I am aware my organization will not be eligible for funding if investigation at any time shows falsification. If falsification is shown after funding has been approved, any allocations already received and expended are subject to be repaid. I further certify that I am legally authorized to sign this application for the applying organization.						
Signature of Legal Signatory:	Date: /-2/-/4					
Legal Signatory (please print): Dana Shumate	Title: JCPS Business Partnerships Corodinator					
Phone: Extension: 485-3995	Email: dana.shumate@jefferson.kyschools.us					

### SECTION 4 - AGENCY DETAILS

# Describe Agency's Vision, Mission and Services:

The Jefferson County Public Education Foundation mission is to improve student outcomes and the learning of every student in every school, in collaboration with district leadership by engaging the support of business and the community.

### SECTION 5 - PROGRAM NARRATIVE

A: Purpose of Request (check all that apply):

Operating Funds (generally cannot exceed 33% of agency's total operating budget)

E Programming/services/events for direct benefit to community or qualified individuals

□ Capital Project of the organization (equipment, furnishing, building, etc)

B: Describe the program/project start and end dates, a description of the program/project and applicable data with regards to specific client population the program will address (attach related fivers, planning minutes, designs, event permits, proposals for services/goods, etc):

The Youth Connection Services Center at fern Creek Traditional High School provided over 6,000 interventions last year. the following services were provided to students and their families: tutoring, peer mediation, community projects, general counseling, health screenings, home visits, crisis interventions, parent workshops, uniform assistance, mentor program, holiday help, help with school supplies, academic recognition rallies, college/ career service learning fair, attendance interventions, and assistance with any other academic barrier a student may face.

C. Describe models to be at the second sec
c: Describe specifically how the funding will be spent including identification of funding to subgrantee(s): Funding will be used to provide programs to students and their families that address the issues stated above. See attached letter
D: For Expenditure Reimbursement Only - The grant award period begins with the Metro Council Appropriation Committee approval date
and ends on June 30 of the fiscal year in which the grant is approved. If any part of this funding request is for funds that will be spent before the grant award period, identify the applicable circumstances:
<ul> <li>The funding request is a reimbursement of the following expenditures that have occurred prior to the application date:         <ul> <li>Attach a copy of invokes and/or receipts to provide proof of purchase of activities associated with the work plan identified in this application.</li> </ul> </li> </ul>
Attach a copy of cancelled checks to provide proof of payment of the invoices or receipts associated with the work plan identified in this application.
The funding request is a reimbursement of the following expenditures that will be incurred after the application date, but prior to the Metro Council approval date. This option will allow expenditures occurring within this time frame to be considered compliant with the
grant agreement. <ul> <li>If selecting this option, the invoice, receipt and payment documentation should not be available as of the date of this application.</li> </ul>
The Grantee will be required to submit financial reporting in accordance with the reporting schedule provided in the grant agreement.
L

E: If this request is for a fundraiser, please detail how the proceeds will be spent: This is not a fundraiser

F: Briefly describe any existing collaborative relationships the organization has with other community organizations. Describe what those partners are bringing to the relationship in general and to this program specifically.

The Youth Connection Services at Fern Creek High School collaborates with many community organizations to provide necessary resource for students and their families. One collaboration is with Fern Creek /High View Untied Ministries. They provide assistance with food, school supplies, and holiday help. Another wonderful partnership is with Fern Creek Christian Church. they assist with food, and gift baskets during the Thanksgiving and Christmas Holiday season. Also they allow their youth minister to mentor a group of young men and he also helps with the football team. The Fern Creek Alumni association has also been very generous in the financial assistance in the past paying necessary items.

G: Describe the program's benefits to those being served (measurable outcomes). Include the program's process for collecting data and the indicators that will be tracked to measure the benefits to those being served:

For the 2012-2013 school year, students and families were served addressing the following barriers to academic success. Over 6000 interventions were documented for the 2012-2013 school year. They include: peer mediations, academic assistance, counseling, parent workshops, home visits, basic needs assistance (uniforms, school supplies, holiday assistance) tutoring services Center Accountability System.

### **SECTION 6 - PROGRAM BUDGET SUMMARY**

The Program Budget should realistically estimate what amount is needed from Metro Government and what is expected from other sources. Enter whole-dollar amounts.

Program Expenses	Column 1 Proposed Metro Funds	Column 2* Non- Metro Funds	Column 3 Total Program Cost
A: Personnel Costs Including Benefits	10,000	35,000	45,000
B: Rent/Utilities	0	0	0
C: Office Supplies	0	0	0
D: Telephone	0	0	0
E: In-town Travel	0	0	0
F: Client Assistance (Attach Detailed List)	0	0	0
G: Professional Service Contracts	0	0	0
H: Program Materials	0	0	0
I: Community Events & Festivals (Attach Detailed List)	0	0	0
J: Machinery & Equipment	0	0	0
K: Capital Project	0	0	0
L: Other Expenses (Attach Detail List)	0		0
SUBTOTAL	10,000	35,000	45,000
% of Program Budget -	%	%	100%
Value of volunteer services and how computed:	N/A		
Value of in-kind assets, such as donated space, supplies, use of equipment, etc. (Detail on Next Page)	N/A		
Total Program Funds			

\*List funding sources in Column 2 (do not include individual donor names):

Other State, Federal or Local Government	0
United Way	0
Private Contributions	0
Fees Collected from Program Participants	0
Other (please specify)	0
Total Revenue	s 0

#### **PROGRAM BUDGET SUMMARY (CONTINUED)**

Detail of In-Kind Contributions for this PROGRAM only: Includes Volunteers, Space, Utilities, etc. (Include anything not bought with cash revenues of the agency).

Donor*/Type of Contribution	Value of Contribution	Method of Valuation
Fern Creek Alumni Association	12,000	
City of J-town	3,000	
volunteer	3,000	
Total Value of In-Kind ( <i>to match Program Budget Line Item.</i> Volunteer Contribution &Other In Kind)	18,000	

\* Donor information refers to who made the in kind contribution. Volunteers need not be listed individually, but grouped together on one line as a total noting how many hours per person per week)

Does your Agency anticipate a significant increase or decrease in your budget from the current fiscal year to the budget projected for next fiscal year? NO 
YES

If YES, please explain:

For the 2014-15, it =has been proposed that there will not be any additional funds to use for support personnel or programming. Only the Coordinator salary will be covered by the state/ JCPS. Any additional services for students and their families will have to be donated or free.

## SECTION 7 - CERTIFICATIONS AND ASSURANCES

By signing the first page of the Grant Application, the authorized official signing for the applicant organization certifies and assures to the best of his or her knowledge and/or belief the following Assurances and Certifications. If there is any reason why one or more of the assurances or certifications listed cannot be certified or assured, please explain in writing and attach to this application.

#### **Standard Assurances**

- 1. Applicant understands this application and its attachments as well as any resulting grant agreement, reports and proof of expenditure is subject to Kentucky's open records law.
- Applicant will establish safeguards to prohibit employees or any person that receives compensation from awarded funds from using their position for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.
- 3. Applicant and any sub grantee will give Louisville Metro Government access to and the right to examine all paper or electronic records related to the awarded grant for up to five years of the grant agreement date.
- 4. Applicant assures compliance with the grant requirements and will monitor the performance of any third party (sub-grantee).
- 5. The Agency is in good standing with the Kentucky Secretary of State, Louisville Metro Government, the Jefferson County Revenue Commission, the Internal Revenue Service, and the Louisville Metro Human Relations Commission.
- 6. Failure to provide the services, programs, or projects included in the agreement will result in funds being withheid or requested to be returned if previously disbursed.
- 7. Return to Louisville Metro any unexpended funds by July 31 following the Metro Louisville's fiscal year end
- Provide proof of all expenditures (canceled checks, receipts, paid invoices). The Applicant understands the failure to provide proof of expenditures as required in the grant agreement could result in funding being withheld or request to be returned if previously disbursed.
- 9. Applicant understands if this application is approved, the grant agreement will identify an award period that begins with the Metro Council approval date, and will end with June 30 of the fiscal year in which the grant is approved. Expenditures associated with this award expected to occur prior to the award period (approval date) must be disclosed in this application in order to be considered compliant with the grant agreement.
- **10.** Applicant understands if we choose to incur expenditures prior to the approval of the application by the Metro Council, there is no guarantee that funding will be reimbursed, as the Council may choose not to award the application.

#### **Standard Certifications**

- 1. The Agency certifies it will not use Louisville Metro Government funds for any religious, political or fraternal Activities.
- 2. The Agency has a written Affirmative Action/Equal Opportunity Policy.
- 3. The Agency does not discriminate in employment or in provision of any service/program/activity/event based on age, color, disabled status, national origin, race, religion, sex, gender identity or sexual orientation, or Vietnam era veteran status.
- 4. The Agency certifies it will not require clients, recipients, or beneficiaries to participate in religious, political, fraternal or like activities in order to receive services/benefits provided with Louisville Metro Government funds.
- 5. The Agency understands the Americans with Disabilities Act (ADA) and makes reasonable accommodations.

**Relationship Disclosure:** List below any relationship you or any member of your Board of Directors or employees has with any Councilperson, Councilperson's family, Councilperson's staff or any Louisville Metro Government employee.

To: Councilman Robin Engel, Louisville Metro Council Members

From: Cheryl Gilbert, Youth Services Center Coordinator Fern Creek Traditional High School

Re: Funding for programs for 2013-14 school year

Date: December 1, 2013

Research consistently shows that being able to provide support services such as tutoring and counseling at a critical time in a young person's life could determine the level of success they have as students and, in the long run, as productive adults and members of our community.

Due to the generous \$3,500 donation from the Metro Council, \$3,000 from the City of Jeffersontown (to pay a portion of the Home School Coordinator's salary) and \$12,000 from the Fern Creek Alumni Association for school year 2013-14, over 7,000 interventions were done for the students and families through Fern Creek Traditional High School Youth Service Center. The following services were provided: tutoring, peer mediation, community projects, general counseling, health screenings, immunization clinics, home visits, crisis interventions, parent workshops, uniform assistance, and mentoring.

A request for funding from the City of Jeffersontown for this school year has already been submitted. Also, a request has also been submitted to the Fern Creek Alumni Association. However, funds are not as readily available.

Certain cuts have already been made in the past couple of years to cover the deficit. The clerk went from full-time to part-time. The Home School Coordinator is going from an eight hour day to a six hour day. We are already exploring other funding opportunities but would appreciate any contribution that the Metro Council (Councilman Engel) may be able to provide.

Please help us continue to provide the standard of services to our families that we have been able to provide for the past thirteen years. The positions of clerk and home school coordinator are imperative to the success of the center because of the large number of families (1,500 at FCTHS) that are served by the Youth Connection Services center. ANY contribution to the Youth Connection Services Center for the upcoming school year would help provide the services necessary to help our families in this community thrive.

I am requesting \$10,000 to offset the increase in salaries and services each year and the decrease in the per pupil allotment by the state. This would help cover a big portion of the deficit for the upcoming school year but ANY contribution to the Youth Connection Services Center for the upcoming school year would help provide essential services for the students and families of Fern Creek Traditional High School. Here are the facts about the money: Total needed for salaries and services for 2013-14: \$50,000 Total allotted for salaries and services for 2013-14: <u>\$33,000</u> Total shortfall for salaries and services for 2013-14: \$17,000

Donations already approved for 2013-14: Fern Creek Alumni Association----- 12,000 City of Jeffersontown------3,000

Thank you for your time and consideration.

Cheryl Gilbert Youth Services Center Coordinator

#### BYLAWS OF THE

#### JEFFERSON COUNTY PUBLIC EDUCATION FOUNDATION

#### December 10, 2008

#### ARTICLE I

#### PURPOSES

The particular purposes of the corporation are the solicitation and receipt of gifts, grants and contributions from individuals, groups, corporations and other sources, public and private, to assist and support financially and otherwise the public school system of Jefferson County, Kentucky; to engage in any and all activities which advance the education of the citizens of Louisville and Jefferson County, Kentucky through the support of the Jefferson County Public Schools.

The core purpose of the Jefferson County Public Education Foundation is to improve student outcomes and the learning of every student in every school, in collaboration with district leadership, by engaging the support of business and the community.

The vision of the Jefferson County Public Education Foundation will be a creative catalyst for change that improves school leadership, teaching and learning. As advocates for excellence and facilitators of collaboration, the Jefferson County Public Education Foundation will champion high quality education, increase community understanding of and support for great public schools, and gain involvement of diverse constituencies in helping Jefferson County Public School students be successful in learning and in life.

It is the policy of the 501(c)(3) corporation that no restricted donations be accepted not any expenditure made by the corporation except upon the recommendation of the Superintendent of the Board of Education of Jefferson County, Kentucky that is consistent with the policies and priorities of the Board of Education of Jefferson County, Kentucky.

#### ARTICLE II

#### OFFICES

The principal office of the corporation in the State of Kentucky and its registered office under the laws of Kentucky shall be located (in care of Joe Seiler, Secretary/Treasurer) at National City Bank, 31T09B, 101 S. 5<sup>th</sup> Street, 9<sup>th</sup> Floor, Louisville, Kentucky 40202. The corporation may have such other offices, either within or without the State of Kentucky, as the business of the corporation may require from time to time.

#### ARTICLE III

#### DIRECTORS

SECTION 1. GENERAL POWERS. The business and affairs of the corporation shall be managed by its Board of Directors.

### SECTION 2. QUALIFICATIONS, TENURE AND NUMBER.

A director shall be chosen to serve on the board based on his or her ability to bring financial resources to the corporation for the purpose of enhancing Jefferson County Public Schools. Financial resources may be in the form of personal gifts, grants, and contributions from individuals, groups, corporations and other sources, public or private to support financially and otherwise the public school system of Jefferson County, Kentucky. A director will engage a leadership role for special fund raising projects during his or her term(s). A director's term is three years.

The number of directors of the corporation shall be no less than nine (9) but up to twenty-four (24). The number of directors above nine (9) shall be determined by the Board when appropriate candidates are eligible to serve on the Board. The members of the Board of Directors shall be divided into three (3) classes as nearly equal in number as may be practicable with the term of office of one class expiring each year. At the annual meeting of the directors in 1983, three (3) classes of directors shall be elected. The directors of the first class shall be elected to hold office for a term expiring at the next succeeding annual meeting; directors of the second class shall be elected to hold office for a term expiring at the second succeeding annual meeting; and directors of the third class shall be elected to hold office for a term expiring at the third succeeding annual meeting. At each annual meeting of directors, the successors to the class of directors whose term shall then expire as set forth above shall be elected to hold office for a term expiring at the third succeeding annual meeting from the annual meeting of their election. When the number of directors is changed, any newly created directorships or any decrease in directorships shall be so apportioned among the classes as to make all classes as nearly equal in number as possible. Each director shall hold office for the term for which he is elected or until his successor shall have been elected and qualifies for the office, whichever period is longer. Directors need not be residents of Kentucky.

2

SECTION 3. NOMINATING COMMITTEE. There shall be a Nominating Committee made up of a minimum of three directors appointed by the chairperson. The Nominating Committee shall develop a list of candidates to fill vacant positions on the Board of Directors. The nominees shall be considered by the full Board and voted on as described in Section 8. The Nominating Committee shall also present a slate of officers for election at the annual June meeting.

SECTION 4. REGULAR MEETINGS. A regular meeting of the Board of Directors shall be held without other notice than this bylaw. The Board of Directors may provide, by resolution, the time and place, within or without the State of Kentucky, for the holding of additional regular meetings without other notice than such resolution. There shall be an annual meeting of the Board of Directors in June of each year.

SECTION 5. SPECIAL MEETINGS. Special meetings of the Board of Directors may be called by or at the request of the chairman or any two directors. The person or persons authorized to call special meetings of the Board of Directors may fix any place, either within or without the State of Kentucky, as the place for holding any special meeting of the Board of Directors called by them.

SECTION 6. NOTICE. Notice of any special meeting shall be given at least two days previously thereto by written notices delivered personally or mailed to each director at his business address, or by telegram. If mailed, such notice shall be deemed to be delivered when deposited in the United States mail in a sealed envelope so addressed, with postage thereon prepaid. If notice were given by telegram, such notice shall be deemed to be delivered when the telegram is delivered to the telegraph company. Any director may waive notice of any meeting. The attendance of a director at any meeting shall constitute a waiver of notice of such meeting, except where a director attends a meeting for the express purpose of objecting to the transaction of any business because the meeting is not lawfully called or convened. Neither the business to be transacted at, nor the purpose of, any regular or special meeting of the Board of Directors need be specified in the notice or waiver of notice of such meeting.

SECTION 7. QUORUM. A majority of the Board of Directors shall constitute a quorum for the transaction of business at any meeting of the Board of Directors, provided that if less than a majority of the directors are present at said meeting, a majority of the directors present may adjourn the meeting from time to time without further notice.

SECTION 8. MANNER OF ACTING. The act of the majority of the directors present at a meeting at which a quorum is present shall be the act of the Board of Directors; provided, however, that the Board of Directors, by resolution adopted by a majority of the full Board of Directors, may designate from among its members an executive committee and one or more other committees, each of which, to the extent provided in such resolution, shall have and may exercise all the authority of the Board of Directors, but no such committee shall have the authority of the Board of Directors in reference to amending the articles of incorporation, adopting a plan of merger or consolidation, recommending the sale, lease, exchange or other disposition of all or substantially all the property and assets of the corporation otherwise than in the usual and regular course of business, recommending a voluntary dissolution of the corporation or a revocation thereof, or amending these bylaws.

SECTION 9. VACANCIES. Any vacancy occurring in the Board of Directors may be filled by the affirmative vote of a majority of the remaining directors though less than a quorum of the Board of Directors. A director elected to fill a vacancy shall be elected for the unexpired term of his predecessor in office. Any directorship to be filled by reason of an increase in the number of directors may be filled by the Board of Directors for a term of office continuing only until the next election of directors.

SECTION 10. COMPENSATION. No director shall receive compensation for his or her services as director; however, any expenses incurred by any director by reason of his or her duties or responsibilities as such may be paid by the corporation.

SECTION 11. INFORMAL ACTION. Any action required by law to be taken at a meeting of the Board of Directors, or any action which may be taken at a meeting of the Board of Directors or of a committee, may be taken without a meeting if a consent, in writing, setting forth the action so taken shall be signed by all of the directors, or all of the members of the committee, as the case may be. Such consent shall have the same effect as a unanimous vote.

#### ARTICLE IV

#### OFFICERS

SECTION 1. CLASSES. The officers of the corporation shall be a chairman, a vice chairman, a treasurer, a secretary, and such other officers, whose duties may be fixed from time to time by the Board of Directors, as may be provided by the Board of Directors and elected in accordance with the provisions of this article. The Board of Directors may also create the offices of one or more assistant treasurers and assistant secretaries, all of whom shall be elected by the Board of Directors. The same person may hold any two or more offices, except that of chairman.

SECTION 2. ELECTION AND TERM OF OFFICE. The officers of the corporation shall be elected annually by the Board of Directors at the first meeting of the Board of Directors. If the election of officers shall not be held at such meeting, such election shall be held as soon thereafter as conveniently may be. Vacancies may be filled or new offices created and filled at any meeting of the Board of Directors. Each officer shall hold office until his successor shall have been duly elected and shall have qualified or until his death or until he shall resign or shall have been removed in the manner hereinafter provided.

SECTION 3. REMOVAL. Any officer or agent elected or appointed by the Board of Directors may be removed by the Board of Directors whenever in its judgment the best interest of the corporation would be served thereby, but such removal shall be without prejudice to the contract rights, if any, of the person so removed. Election or appointment of an officer or agent shall not of itself create contract rights. A director will be considered for removal from the Board if the director misses two meetings in one calendar year period.

SECTION 4. VACANCIES. A vacancy in any office because of death, resignation, removal, disqualification or otherwise may be filled by the Board of Directors for the unexpired portion of the term.

SECTION 5. CHAIRMAN. The chairman shall be the principal executive officer of the corporation and shall in general supervise and control all of the business and affairs of the corporation. The chairman shall preside at all meetings of the Board of Directors. The chairman may sign, with the secretary, or any other proper officer of the corporation thereunto authorized by the Board of Directors, any deeds, mortgages, bonds, contracts, or other instruments which the Board of Directors has authorized to be executed except in cases where the signing and execution thereof shall be expressly delegated by the Board of Directors or by these bylaws to some other officer or agent of the corporation, or shall be required by law to be otherwise signed or executed; and in general shall perform all duties incident to the office of chairman and such other duties as may be prescribed by the Board of Directors from time to time.

SECTION 6. VICE CHAIRMAN. In the absence of the chairman or in the event of his inability or refusal to act, the vice chairman shall perform the duties of the chairman and, when so acting, shall have all the powers of and be subject to all the restrictions upon the chairman. The vice chairman shall perform

5

such other duties as from time to time may be assigned by the chairman or by the Board of Directors.

SECTION 7. TREASURER. If required by the Board of Directors, the treasurer shall give a bond for the faithful discharge of his duties in such sum and with such surety or sureties as the Board of Directors shall determine. The treasurer shall: [a] have charge and custody of and be responsible for all funds and securities of the corporation; receive and give receipts for moneys due and payable to the corporation from any source whatsoever, and deposit all such moneys in the name of the corporation in such banks, trust companies or other depositories as shall be selected in accordance with the provisions of Article IV of these bylaws; [b] in general, perform all the duties incident to the office of treasurer and such other duties as from time to time may be assigned by the chairman or the Board of Directors.

SECTION 8. SECRETARY. The secretary shall: [a] keep the minutes of the Board of Directors' meetings in one or more books provided for that purpose; [b] see that all notices are duly given in accordance with the provisions of these bylaws or as required by law; [c] be custodian of the corporate records and of the seal of the corporation and see that the seal of the corporation *is* affixed to all documents, the execution of which on behalf of the corporation under its seal is duly authorized *in* accordance with the provisions of these bylaws; [d] *in* general, perform all duties incident to the office of secretary and such other duties as from time to time may be assigned by the chairman or by the Board of Directors.

SECTION 9. ASSISTANT TREASURERS AND ASSISTANT SECRETARIES. The assistant treasurers shall respectively, if required by the Board of Directors, give bonds for the faithful discharge of their duties in such sums and with. such sureties as the Board of Directors shall determine. The assistant treasurers and assistant secretaries in general shall perform such duties as shall be assigned to them by the treasurer or the secretary, respectively, or by the chairman or the Board of Directors.

#### ARTICLE V

#### CONTRACTS, LOANS, CHECKS, AND DEPOSITS

SECTION 1. CONTRACTS. The Board of Directors may authorize any officer or officers, agent or agents, to enter into any contract or execute and deliver any instruments in the name of and on behalf of the corporation, and such authority may be general or confined to specific instances. SECTION 2. LOANS. No loans shall be contracted on behalf of the corporation, and no evidences of indebtedness shall be issued in its name unless authorized by a resolution of the Board of Directors. Such authority may be general or confined to specific instances.

SECTION 3. CHECKS, DRAFTS, ORDERS, ETC. All checks, drafts, or other orders for the payment of money, notes or other evidences of indebtedness issued in the name of the corporation shall be signed by such officer or officers, agent or agents, of the corporation and in such manner as shall from time to time be determined by resolution of the Board of Directors.

SECTION 4. DEPOSITS. All funds of the corporation not otherwise employed shall be deposited from time to time to the credit of the corporation in such banks, trust companies, or other depositories as the Board of Directors may select.

#### ARTICLE VI

#### INVESTMENT REPORTS

The corporation shall furnish reports at least annually to the Superintendent of the Board of Education of Jefferson County for the purpose of assisting the Board of Education of Jefferson County to insure that the corporation has invested its assets at a reasonable rate of return.

#### ARTICLE VII

#### FISCAL YEAR

The fiscal year of the corporation shall begin on the lst day of July and end on the 30th day of June of each calendar year.

#### ARTICLE VIII

#### WAIVER OF NOTICE

Whenever any notice whatever is required to be given under the provisions of these bylaws, or under the provisions of the Articles of Incorporation, or under the provisions of the corporation laws of the State of Kentucky, waiver thereof in writing, signed by the person, or persons, entitled to such notice, whether before or after the time stated therein, shall be deemed equivalent to the giving of such notice.

#### INDEMNIFICATION OF OFFICERS AND DIRECTORS

The corporation may indemnify and may advance expenses to all directors, officers, employees or agents of the corporation who are, were or are threatened to be made a defendant or respondent to any threatened, pending or completed action, suit or proceeding (whether civil, criminal, administrative or investigative) by reason of the fact that he is or was a director officer, employee or agent of the corporation, to the fullest the Commonwealth of Kentucky and all other applicable law.

#### ARTICLE I

# AMENDMENT OF BYLAWS

bylaws.

The Board of Directors may alter, amend or rescind the

#### CERTIFICATE

It is hereby certified that on this date I am, the duly elected and qualified Chairman of the Board of Jefferson County Public Education Foundation, and that on this 10th day of December, 2008, the foregoing Bylaws were adopted by unanimous action of the Board of Directors.

Chairman

MIRS Department of the Treasury Internal Revenue Service P.O. Box 2508 Cincinnati OH 45201

In reply refer to: 02481645 June 14, 2011 LTR 41680 E: 61-1021128 000000 00 00015795

BODC: TE

JEFFERSON COUNTY PUBLIC EDUCATION FOUNDATION 502 WOOD RD RM 201 LOUISVILLE KY 40222

034020

Employer Identification Number: 61-1021128 Person to Contact: B. HALL Toll Free Telephone Number: 1-877-829-5500-

Dear TAXPAYER:

This is in response to your June 03, 2011, request for information regarding your tax-exempt status.

Our records indicate that you were recognized as exempt under section 501(c)(3) of the Internal Revenue Code in a determination letter issued in JULY 1983.

Dur records also indicate that you are not a private foundation within the meaning of section 509(a) of the Code because you are described in section(s) 509(a)(l) and 170(b)(l)(A)(vi).

Donors may deduct contributions to you as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to you or for your use are deductible for Federal estate and gift tax purposes if they meet the applicable provisions of sections 2055, 2106, and 2522 of the Code.

Please refer to our website www.irs.gov/eo for information regarding filing requirements. Specifically, section 6033(j) of the Code provides that failure to file an annual information return for three consecutive years results in revocation of tax-exempt status as of the filing due date of the third return for organizations required to file. We will publish a list of organizations whose tax-exempt status was revoked under section 6033(j) of the Code on our website beginning in early 2011.

#### Jefferson County Public School Foundation July 1, 2011 - June 30, 2012 Fund Transactions

n Seine sta

	Balance	Cash Receipts	Cash Disbursements			
FUNDS	30-Jun-11	YTD	YTD			Bala
Abramson Scholarship	\$4,575.00		\$8,000,00			Cun
Aburndale	\$3,831.00		\$3,825.00			\$11,675
Adult Education Fund	\$15,831.96		\$13,068.88			\$6
Basics for Kids	\$27,186.36		\$0.00			\$3,943
Cane Run Elementary	\$9,195.00	,	\$6,995.00			\$30,271
Cane Run Playground	\$19,927.54		\$19,000.00			\$9,078
D.O.L.L.E.G.E.	\$0.00		\$0.00			\$927
College Going Culture	\$0.00		\$0.00			\$(
Central High School	\$15,441.00	1	\$12,000.00			\$20,000
Chris Nelligan Scholership Fund	\$7,646.03		\$2,000.00			\$4,441
community School	-\$9,350.95		\$0.00			\$6,396
Cummings School Fund	\$10,261.78		\$500.00			\$40.000
David Jones L. Vocal Scholarship	\$25,499.29		\$500.00			\$10,022
Every 1 Reads	\$258,801.12		\$59,560.77			\$25,025
Every 1 Reads More	\$0.00		\$0.00			\$202,515
very 1 Reads More (Nursing)	\$0.00		\$0.00			\$0
xcel Program Fund	\$21,515.22		\$20,000.00			\$(
amily Resource & Youth Ser.Ctr.	\$15,020.22		\$2,091.69			\$15,51
azebo Project Can Run Elem,	\$0.00		\$0.00			\$12,928
enentech NSC	\$1,267.00		\$16,202.38			\$0
reater Louisville Education Project	\$15,024.00		\$0.00			\$21,454
odbey Scholarship	\$1,000.00		\$1,000.00			\$15,02
ordon Food Service	\$0.00		\$0.00 \$0.00			\$0
novations I3 Grants	\$436,895.26		\$341,307.38			\$2,787
oquois High	\$3,746.30					\$310,087
incoln Elementary	\$0.00		\$3,746.30 \$0.00			\$0
ou. Education & Employment Part	\$3,015.00	,				\$10,000
etro Govt. Grants	\$186,891.63		\$0.00			\$5,015
hort Term Designated	\$87,144.81	\$137,644.64	\$237,551.31			\$58,010
oore Alumni Scholarship			\$83,280.42			\$141,509
eighborhood Place Fund	\$1,500.00		\$2,000.00	94		\$1,080
ewcomer Summer Program	\$41,289.92		\$43,182.33			\$30,107
ne Community One Nation	\$59,193.78		\$59,193.78			\$0
assionate About Kids	\$159,673.33	\$0.00	\$134,844.23			\$24,829
atsy Caswell Scholarship	\$0.00		\$0.00			\$0
ortland Elementary	\$0.00	\$0.00	\$0.00			SC
angeland Elementary	\$13,705.00	\$6,875.00	\$6,670.00			\$13,910
angeland Elementary Playground	\$48,590.36		\$31,304.23			\$37,286
	\$6,988.61	\$0.00	\$2,666.75			\$4,321
oy Birmingham Memorial ussell Garth Leadership	\$0.00		\$0.00			\$1,809
	\$5,907.12		\$1,000.00			\$4,907
am Rechter Educational Fund	\$17,987.34	\$0.00	\$4,589.16			\$13,398
cholastic Aptitude	\$259.00	\$0.00	\$0.00			\$259
chool to Career	\$0.00	\$0.00	\$0.00			\$0
mart Education	\$5,000.00	\$0.00	\$5,000.00			\$0
TEM	\$0.00	\$41,000.00	\$13,374.49			\$27,625
tephanie Kremer Scholarship	\$1,828.00		\$500.00			\$1,328
leve W Majors Memorial Scholarship	\$2,000.00	\$400.00	\$500.00			\$1,900
ireet Academy	\$1,810.00	\$0.00	\$0.00		3	\$1,810
normton Scholarship	\$4,035.38	\$0.00	\$0.00			\$4,035
pols for Schools	\$0.00	\$0.00	\$0.60			\$0
ugs at Your Heart	\$1,025.00	\$1,000.00	\$1,000.00			\$1,025
alley High Alumni	\$0.00	\$1,206.44	\$0.00			\$1,206
ellington Elementary	\$52,759.30	\$20,000.00	\$35,164.86			\$37,594
estern High School Early College	\$19,441.55	\$103,013.50	\$104,996.26			\$17,458
estern High School	\$49,192.72	\$0.00	\$541.89			- \$48,650
yatt Debate Scholarship Fund	\$26,627.79	\$79,206.55	\$69,483.02			\$36,351
outh Achievement	\$86,767.97	\$1,000.00	\$8,000.00			\$79,767
PAS	\$6,429.78	\$4,214.76	\$7,046.47			\$3,598
ung Rembrandts	\$0.00	\$0.00	\$0.00			
ON	\$0.00	\$679,732.66	\$247,470.52			\$0 \$432,262
pard Meeting Fund	\$50.00	\$850.00	\$607.16			
otal Restricted	\$1,772,426.52		\$1,609,764.28			\$292 \$1,743,452
						4 iji 40,404
nrestricted	\$13,050.00	\$11,289.25	\$1,074.35			\$23,264
perating	\$249,924.61	\$2,198.42	\$23,532.53			\$228,590
otal Unrestricted	\$262,974.61	\$13,487.67	\$24,606.88			\$251,855.
tal Fund Balances	\$2,035,401.13	51 594 978 99	\$1,634,371.16			
		- 1100-1121 0160	41,004,011.10			\$1,995,308.

#### Jefferson County Public School Foundation

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# Balance Shoet 8/30/12

	ASSETS	30~Jun-04	30-Jun-08	30~Jun-05	30-Jun-07	30-Jun-08	30-Jun-09	30-Jun-10	Jun-11	Jul-11	Buo 44										2	
	Cash and Cash Equilivalents Ropublic Bonk-Checking PNC-Checking	\$5,855	\$6,010	\$9,010	\$6,910	\$9,010	\$5.010	\$8,010	\$6,010	\$8,010	Auq-11	Sop-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	Mar-12	Apr-12	May-12	ືJtm-12 	
	PNC-Money Market NCB-Checking	\$29,006 \$420,176	\$5,341	\$4,942	84,542	\$4,182	\$1,179,007	\$186,154	\$0	\$0	\$8,010 \$9	\$8,910 \$9		\$6,01D \$0	\$6,910 \$0	\$8,010 \$0	\$8,010 .\$0	\$6,010 \$0	\$6,019 \$0	\$0,019 \$0	\$6.01% 59	
	NCB-Investment Sweep Total	\$0 \$0 \$455,037	\$5,658 \$760,000 \$777,009	\$\$.700 \$1.380,920 \$1,397,572	\$912 \$1,140,111 \$1,751,576	\$5,685 \$1,876,874 \$1,892,451	\$113,463 \$161,636 \$1,480,116	\$0 \$1,506,589 \$1,798,753	\$0 \$2.029.391 \$2.035,401	\$0 \$2,029,542 \$2,035,552	\$0 \$2,110,192 \$2,115,202		\$0 \$1,685,094 \$1,973,004	\$0 \$2,464,588	\$77,915 \$2,517,808 \$2,601,733	50 \$2,717,341		<b>50</b> \$2,354,704	\$56.936 \$1,854,451	\$0 \$1.937,962	\$15,900 \$1,973,38**	
	Securitor at Cost U.S. Trecoury Noto-\$ 300,000 1.625% due 3/31/05	\$399,656	50	\$0									+ 1601 0,004	44941 U-080	94,001,133	\$2,723,361	\$2,347,128	\$2,360,714	\$1,917,405	\$1,943,961	\$1,995,30 <i>n</i>	
,	Fotni Assois	\$755,893	\$777,009		\$9	50	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$9	\$0	.50	\$0	\$0	\$0	50	
		<i>\\</i>	4141 <sub>4</sub> 448	\$1,397,572	\$1.151.575	\$1,892,451	\$1,480,116	\$1,798,753	\$2,036,401	\$2,035,852	\$2,116,202	\$1,576,502	\$1,573,004	\$2,470,598	\$2,601,733	\$2,723,351	\$2,347,128	\$2,360,714	\$1,917,408	\$1,943,981	\$1,995,303	
	FUND BALANCES Restricted	\$571,608	\$1,772,427						1												(*);	
0	Dombog / Unrostricled Fold Fond Balances	\$184.027 \$785,693	\$1,772,427 \$248,925 \$2,022,351	\$1,149,523 \$248,049 \$1,397,572	\$835,744 \$315,831 \$1,161,675	\$1,330,105 \$362,346 \$1,692,451	\$1,120.305 \$359,611 \$1,480,116	\$1,441,862 \$356,891 \$1,798,752	\$1,772,428 \$282,975 \$2,035,401	3283,123	\$1,871,009 \$245,193 \$1,119,292	\$1,431,190 \$245,342 \$1,676,502	\$245,478	\$2,224,480 \$240,138 \$2,470,598	\$2,355,096 \$246,637 \$2,601,733	\$2,475,784 \$247,587 \$2,723,351	\$2,101.458 \$245,670 \$2,347,128	\$245.628	\$1,865.453 \$251,953 \$1,917,408	\$252.971	\$1,743,43) \$251,855 \$1,995,365	
,	COTNOTE Impoint due from Heams Includes \$ 10,000 audit expense				\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	50	\$0	50	\$0	50	
	and \$ 183,000 Interest)	\$180,469	\$134,869	\$89,269	\$0.00	\$0	\$0	\$0	<b>S</b> 0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	59	
	hecking-Ropublic Bank and Trust			\$5,019,00														*-		40	441	
P	NC Checking Sweep . Checking Account									4.)						.0						
	Sweep-Repurchise Agroement Outstanding Checks		1	\$15,900,00 \$2,003,577,45																		
	Losiaville Metro Government	1045		\$42,00																		
	Looisville Metro Oovernment Looisville Metro Covernment	1047		\$1,100.09																		
	Louisville Metro Government	1049		\$3,000.00																		
	Louisville Metro Government	1050		\$2,500.00																		
	Louisville Matro Clevernment	1051		\$3,000.00																		
	Loomville Metro Government	1052		\$2,365.00																		1
	University of Louisville Office of President	1055		\$3,257.00																		
	University of Kentucky	1056		3250.00																		
	Indum University Southeast	1001		\$1,000.00																		
	University of Kentucky	1003		\$1,000.00																		
	University of Louisville	1007		\$1,700.00																		
	Com Run Elementary	1069		\$1,000,00																		
	Treesurer JCPS	1070		\$200,70																		
	Momingside Elementary	1073		\$1,000,00																		
	Abraham Lincoln Ehmeniary	1074		\$1,000.00																		
	James T Alten Middle Scheef	1075		\$1,000.00																		
	Firmant Ridge Elementary Contrar Elementary	1070		\$1,000.00																		
	Hoge-Jand Hills Middle	1077		\$1,000 00															20			
	Simpropolity Elementary School	1078		\$1,000.00																		
	Mitto Gov	1079		\$1,000.00																		
	Georgelown College	1007		\$1,325.58																		
	fotat	1001		\$1,000.00								12										
	Nat BDA Position			530,188.15 ,973,389.30																		
	Total PNC Swoop Account			1,989,269																		
Tat	ni Cech Accounts			1,995,308					ŝ													

#### Jefferson County Public School Foundation July 1, 2011 - June 30, 2012 Fund Transactions

Adult Education Fund 4/18/2012 Every Dne Reads 4/19/2012 Metro Govi Grants 4/18/2012 Western High School Early College 4/18/2012 STEM Project 4/19/2012 Rengeland Elementary 4/19/2012 Wellington Elementary 4/19/2012 4/18/2012 One Community One Nation Cane Run Elementary 4/18/2012 Portland Elementary 4/19/2012 YPAS 4/18/2012 Genentech NSC 4/19/2012 Short Term Designated 4/18/2012 Zeoh 4/18/2012 Neighborhood Place 4/19/2012 Sam Rechter Educational Fund 4/19/2012 Wyali Débate 4/19/2012 Newcomers 4/19/2012 13 innovations 4/10/2012 lroqueis High 4/19/2012 Board Meeting Fund 4/18/2012 Western Early College 4/18/2012 Short Term Designated 4/18/2012 Short Term Designated 4/30/2012 Neighborhood Place 4/30/2012 Innovations 13 Grent 4/30/2012 Every One Reads 4/30/2012 Steve Majors Schlorenshir 4/30/2012 Metro Govt Grants 4/30/2012 Western High School Early College 4/30/2012 LEEP 4/30/2012 Short Term Desiginati 4/30/2012 Valley High School 4/30/2012 Unrestricted 4/30/2012 Unrestricted 4/30/2012 Short Term Designated 4/30/2012 Short Term Designated 4/30/2012 David Jones Vocal Scholarsh 4/30/2012 Cummings 4/30/2012 Operating 4/30/2012 Operating 4/30/2012 Basics for Kids 4/30/2012 Neighborhood Place 5/15/2012 Unrestricted 5/29/2012 Metro Govt Grants 5/29/2012 Roy Bitmingham 5/20/2012 Roy Birmingham 5/29/2012 Roy Birminoham 6/29/2012 Roy Birmingham 5/28/2B12 Roy Blimingham 5/28/2012 Roy Birmingham 5/29/2012 Roy Siminoham 5/29/2012 Roy Birmingham 5/29/2012 Roy Birmingham \$/28/2012 Roy Birmingham 5/29/2012 Roy Birmingham 5/29/2012 Roy Baminoham 5/29/2012 Roy Birminpham Ś/29/2012 Roy Birmingham 5/28/2012 Roy Sinningham 5/29/2012 Roy Birminoham 5/29/2012 Roy Barningham 5/29/2012 Roy Birmingham 6/28/2012 Roy Birmingham 5/29/2012 Roy Birmingham 5/20/2012 Roy Birmingham 5/29/2012 Roy Birmingham 5/29/2012 Roy Birmingham 5/29/2012 Roy Birmingham 5/28/2012 Roy Birmingham 6/29/2012 Roy Binningham 5/28/2012 Roy Birmingham 5/29/2012 Roy Birmingikam 5/29/2012 Roy Birmingham 5/28/2012 Roy Birmingham 5/28/2012 Roy Birmingham 5/28/2012 Roy Birming harm 5/28/2012 Roy Birminghan 5/29/2012 Unrestricted 5/28/2012 College Going Culture 5/29/2012 College Going Culture 5/29/2012 Short Term Designated 6/29/2012 Roy Berningham 5/29/2012 Rev Birmhohem 5/28/2012 Roy Birmingham 5/28/2012 Steve Majors Scholarship 5/28/2012

\$570.00 \$1,253,32 \$67.560 54 56,844.13 \$13,258,77 \$14,015.60 \$10,200.84 \$21.618.61 \$2,600,00 \$3,520.00 \$6,000.00 \$16,202.35 39.581.74 \$247,470.52 \$3,140.89 \$225.02 \$10,218.42 \$0.50 \$41,551,57 \$2,744.87 \$478,787.92 \$191.92 \$39,582.29 \$1,229,16 \$54,09 \$15,000,00

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Treasurer JCPS Treasurer JCP8 Treasurer JCPS Treasurer JCPS Treasurer JCP8 Treasurer JCPS Treasurer JCPS Treasurer JCPS Treasurer JCPS Treasurer JCPS Treasure: JCPS Treasurer JCPS Treasurer JCPS Treasurar JCPS Trensurer JCP8 Treasurer JCPS Treasure: JCPS Treasurer JCPS Jasons Deli Treasurer JCPS Revere Hotel PNC Foundatio UofL Histard Lyons Comm Foundate Harance Maria Majors Metro Govt Middred Horn Foundation Charmot Carlton Jaggers Utigian Class Act Comm Foundation Heuser JCPS Via PNG Foundation Interest Interest Interest Sevo Charges Interest Reh ned Check U of L Huetha Metro Gov ARGI Rob! Carlton Pation Schwartz Briningham Gillespie Bowles Wright Herzeid Wallace Mcarthur Orekly Uppmaan Вгуал Sorensoo Jacobson Friedman Cumble Bernard

Jeff Trial judges

Alkins

Robertson

Zakem

Schlesta

Haisell

Barber

Birningham

Sprague

Mackeli

Heavilo

Paul

Trainor

Trainer

Heuther

Padgett

AES Advance Electrical

PNC Foundation

Greenier

Ryan

Gordon

Liajors

Treasurer JCPS

Treasurer JCPS

Treasurer JCPS

#### Jefferson County Fubic School Foundation July 1, 2011 - June 30, 2012 Fund Trensections

n in the second second

David Jones Vocal Schelarship	5/30/2012	\$2.27			
Cummings	5/30/2012	\$0.92		Interesi	
Operating	5/30/2012	\$171.52		Interest	
Operating	5/30/2012		353.61	Interest	
				Seve Charges	
Wyati Debste Scholarships	6/7/2012		\$4,400.00	indiana University	
Wyst! Debate Schotarships	6/7/2012		\$5,400,00		
Wyett Debate Scholarships	6/7/2012	593	\$550,00	Weslern Kentucky University	
Wyall Debats Scholatships	6/7/2012		\$1,300.00	Filmois State University	
Wynit Debata Scholarships	6/7/2012		\$2,600,00	Capitol Dabata Camp	
Wyati Debste Scholarships	6/7/2012		\$4,500.00	Upriversity of North Texas	
Wyat Debate Scholarships	6/7/2012		\$435.00	Harvard University	
Wyall Debate Scholarships	8/7/2012			Cameron Collega	
Wyati Debala Scholarships	6/7/2012		\$1,300.00	Harvard University	
Wyatt Debate Scholarships	6/7/2012		\$1,300,00	Gaorgelown University	
Metro Gout Grants			\$1,300.00	Upriversity of North Texas	
Metro Govi Grants	8/7/2012		\$42.80	Louisville Metro Government	
Mairo Gott Granis	6/7/2012		\$1,100.00	Louisville Metro Government	
Metro Gort Grants	6/7/2012		\$3,009.00	Louisville Metro Government	
Metro Govi Grants	6/7/2012		\$340.07	Louisvela Mairo Government	
Metro Govt Grants	8/7/2012		\$2,500.00	Louisville Metro Government	
Metro Govi Grants	6/7/2012		\$3,000.00	Louisville Metro Government	
	6/7/2012		\$2,365.00	Louisville Metro Government	
Short Term Designated	6/7/2012	\$2,904.64		Halland Lyons Block Sale	
YPAS	6/7/2012	\$1,464.76		Fillard Lyons Stock Sale	
Roy Birringham	6/7/2012	\$25,00		Koffman	
Roy Bismingham	6/7/2012	\$30.00			
Mebo Golf Grants	6/7/2012	\$2,000.00		Wagner	
Short Term Designated	6/7/2012	\$3,000.00		Louisville Metro Government	
Moore Alumni Scholarship	6/7/2012	\$25.00		QK4	
Moore Alumni Scholarship	6/7/2012	\$50.00		Howard	
Moore Alumni Scholarship	6/7/2012	\$100.00		Pitoock	
Moore Alumni Scholarship	6/7/2012	\$50,00		Hooker	
Moore Alumni Scholarship	6/7/2012	\$40.00		Strange	
Moore Alumni Scholarship	8/7/2012	\$115.00		Harris	
Moore Alumal Scholarship	6/7/2012	\$500.00		Strange	
Moore Alumni Scholamhio	6/7/2012			Petierson	
Moore Alumni Scholarship	6/7/2012	\$500.00		Webser	
Moore Alumni Scholarship		\$100,00		Litsey	
Unrestricted	6/7/2012	\$100.00		Chimann	
innovations 13 Grant	6/7/2012		\$300.00	Heuther Returned Check	
Steve Majors Scholarship	6/12/2012	\$25,000.00		tiumana	
Tugs at Your Heart	6/12/2012	\$100.00		Majors	
Short Term Designated	6/12/2012	\$1,000.00		Jeff Co Counselors	
Short Term Designated	6/12/2012		\$71.00	Vitay's Party Supply	
Short Term Designated	8/12/2012		\$515.00	Susans Florist	
	· B/12/2012		\$3,257,00	University of Louisville Office of President	
Cummings Scholarship	6/12/2012		\$250,00	University of Kentucky	
Abramson Scholarship	6/12/2012		\$2,000,00	Western Kentucky University	
Abreensors Scholarship	6/12/2012		\$2,000.00	Western Kentucky University	
Youth Achievement Scholarship	6/12/2012		\$1,000.00	University of Louisville	
Youth Achievement Scholarship	6/12/2012		\$1,000.00	Miligan College	
Youth Achievement Scholarship	8/12/2012		\$1,000.00	Indiana University Southeast	
Tugs at Your Heart	6/12/2012		\$1,000.00	University of Louisville	
Chris Nelligan Scholanship	6/12/2012		\$1,000.00	-	
Central High School	B/12/2012		\$2,000.00	University of Kentucky	
Central High School	6/12/2012		\$2,000.00	University of Louisville	
David Jones Vocal Scholarship	6/12/2012		\$250.00	University of Centinnati	
Moore Alumnt Scholanship	6/12/2012		\$1,700.00	University of Louisville	
Stephanie Kremer memorial Scholarship	6/12/2012		\$500.00	University of Louisville	
Russell Garth Leedership	6/14/2012		\$1,000,00	- Eastern Kentucky University	
Unrestricted	6/14/2012		\$296,70	Cane Run Elementary	
Operating	6/14/2012			Treasurer JCPS	
Metro Govt Grants	6/14/2012		\$496.50 \$2,000.00	Rotary Club of Louisville	
Ercei Awards	8/14/2012			Louisville Metro Government	
Excel Awards	6/14/2012		\$1,000,00	Morningside Elementary	
Excel Awards	6/14/2012		\$1,050.00	Abraham Lincoln Elementary	
Excel Awards	6/14/2012		\$1,000,00	James T Alton Middle School	
Excel Awards	6/14/2012		\$1,000.00	Pleasant Ridge Elementary	
Excel Awards			\$1,000.00	Goshen Elementary	
Excel Awards	8/14/2012		\$1,000.00	Flightand Hills Middle	
Short Term Designated	6/14/2012		\$1,000,00	Simpson/Ile Elementary Scheel	
Short Term Designated	6/14/2012	\$32,140,00		CE&S Foundation	
Short Term Designated	8/14/2012	\$22,500.00		CEAS Foundation	
Unrestricted	6/22/2012	\$2,500.00		Network for Good	
	6/22/2012	\$250.00		Safer	
Metro Govt Grants	6/22/2012	\$500.00		Metro Govi	
Metro Govi Grants	6/22/2012		\$1,326.55	Metro Gov	
Youth Achievement Scholarship	6/22/2012		\$1,000.00	Georgelown College	
Metro Govt Grants	6/28/2012	\$1,200.00		Metro Gov	
Short Term Designated	6/28/2012	\$2,500.00		Community Health Systems	
Basics for Kids	6/28/2012	\$2,807,92		Gordon Food Service	
STEM	6/28/2012	\$1,000.00			
Neighborhood Piace	6/29/2012	\$16,000.00		DOW .	
Wyatt Debale Scholarships	6/30/2012	\$1,200.00		U of L	
David Jones Vocal Scholarship	6/30/2012	\$1.99		Cancellad Check Georgelown University 12259	
Cummbigs	6/30/2012	50,80		Interest	
Operating	8/30/2012	\$155.20		interest.	
Operating	6/30/2012		\$128,85	interesi	
				Seve Charges	

# Jefferson County Public Education Foundation Nominations Committee

Chairman - Henry Heuser , Jr.

8-Aug-12

Slate of Officers		Term	
Jim Allen, Chairman	and side of a state of the state	2011-2012	
Franklin Jelsma, Vice Chair		2011-2012	Elect as Chairman
Joe Seiler, Sec/Treasurer		2011-2012	Re-Elect as Sec/Tres
Board		Term	
Jim Allen	A CONTRACTOR OF A CONTRACTOR OF A CONTRACTOR	2012	
Henry Heuser Jr.		2012	
Scott Casey		2012	
Franklin Jelsma		2013	
Audwin Helton		2013	
Claire Alagia		2014	
Paul Thompson	12	2014	
Kevin Shurn	11	2014	68
Jeff Uligian		2014	
Alice Houston	ଝ	2014	2 2
Mark Shirkness		2014	
Mike Brown		2014	
Sam Corbett		2014	
Joe Seiler	2	2014	
John Gant	2	2014	9. 22
Al Cornish		2015	
Bill Simpson	-	2015	
Lynn Heuther		2015	
Malcolm Chancey		Emeritus	

# JEFFERSON COUNTY PUBLIC EDUCATION FOUNDATION, INC.

	Organization Number	0175787
	Name	JEFFERSON COUNTY PUBLIC EDUCATION FOUNDATION, INC.
	Profit or Non-Profit	N - Non-profit
	Company Type	KCO - Kentucky Corporation
	Status	A - Active
	Standing	G - Good
	State	KY
	File Date	3/14/1983
	Organization Date	3/14/1983
	Last Annual Report	2/11/2014
	Principal Office	JEFFERSON COUNTY PUBLIC EDUCATION FOUNDATION JAEGER EDUCATION CENTER- ATTN: DANA SHUMATE 3332 NEWBURG RD LOUISVILLE, KY 40218
	Registered Agent	WT&C CORPORATE SERVICES, INC. 500 W. JEFFERSON STREET SUITE 2800 LOUISVILLE, KY 40202
urren	t Officers	
	Chairman	Jim Allen
	Vice President	Franklin Jelsma
	Secretary	JOE SEILER
	Director	Audwin Helton
	DIICOLOI	
	Director	JEFF ULIGIAN
	Director	JEFF ULIGIAN
Individ	Director Director Executive	JEFF ULIGIAN Henry Heuser
Individ	Director Director Executive	JEFF ULIGIAN Henry Heuser Dana Shumate

Director	JOAN RIEHM
Director	I. W. HUGHES
Director	ORSON OLIVER
Director	WOODFORD R. PORTOR
Incorporator	MALCOLM B. CHANCEY, JR.

# Images available online

Documents filed with the Office of the Secretary of State on September 15, 2004 or thereafter are available as scanned images or PDF documents. Documents filed prior to September 15, 2004 will become available as the images are created.

Principal Office Address Change	2/11/2014 10:18:20 AM	1 page	<u>PDF</u>
Annual Report	2/11/2014	1 page	<u>PDF</u>

Annual Report	6/18/2013	1 page	PDF	
<u>Registered Agent</u> name/address change	3/8/2013	1 page	tiff	PDF
Annual Report	6/28/2012	1 page	PDF	
Annual Report	7/19/2011	1 page	PDF	
Annual Report	5/28/2010	1 page	PDF	
Annual Report	1/13/2009	1 page	PDF	
Annual Report	3/4/2008	1 page	<u>tiff</u>	<u>PDF</u>
Annual Report	1/8/2007	1 page	<u>PDF</u>	
Annual Report	3/7/2006	1 page	<u>tiff</u>	<u>PDF</u>
Annual Report	3/11/2005	1 page	PDF	
Annual Report	6/5/2002	2 pages	<u>tiff</u>	<u>PDF</u>
Annual Report	5/21/2001	2 pages	<u>tiff</u>	<u>PDF</u>
Annual Report	10/3/2000	2 pages	<u>tiff</u>	<u>PDF</u>
Annual Report	7/16/1999	2 pages	<u>tiff</u>	PDF
Annual Report	4/24/1998	2 pages	<u>tiff</u>	<u>PDF</u>
Annual Report	7/1/1997	2 pages	<u>tiff</u>	PDF
Annual Report	7/1/1996	2 pages	<u>tiff</u>	PDF
Annual Report	7/1/1995	3 pages	<u>tiff</u>	<u>PDF</u>
Annual Report	7/1/1994	2 pages	<u>tiff</u>	PDF
Annual Report	7/1/1992	2 pages	<u>tiff</u>	PDF
Annual Report	7/1/1991	1 page	<u>tiff</u>	PDF
Annual Report	7/1/1990	2 pages	<u>tiff</u>	PDF
Annual Report	7/1/1989	2 pages	<u>tiff</u>	PDF

# Assumed Names

# Activity History

Filing	File Date	Effective Date	Org. Referenced
Annual report	2/11/2014 10:23:31 AM	2/11/2014 10:23:31 AM	
Principal office change	2/11/2014 10:18:20 AM	2/11/2014 10:18:20 AM	
Annual report	6/18/2013 10:48:04 PM	6/18/2013 10:48:04 PM	
Registered agent address change	3/8/2013 2:47:46 PM	3/8/2013	
Annual report	6/28/2012 4:10:51 PM	6/28/2012 4:10:51 PM	
Annual report	7/19/2011 9:24:22 AM	7/19/2011 9:24:22 AM	
Annual report	5/28/2010 9:56:56 AM	5/28/2010 9:56:56 AM	
Annual report	1/13/2009 10:11:05 AM	1/13/2009 10:11:05 AM	
Annual report	3/4/2008 8:28:00 AM	3/4/2008	
Annual report	1/8/2007 4:01:51 PM	1/8/2007 4:01:51 PM	2 

Annual report	3/7/2006 10:38:23 AM	3/7/2006
Annual report Annual report	3/11/2005 3/18/2004	3/11/2005 3/18/2004
, initiada : oport	_, ,	- / /

# **Microfilmed Images**

Microfilm images are not available online. They can be ordered by faxing a <u>Request For Corporate</u> <u>Documents</u> to the Corporate Records Branch at 502-564-5687.

Annual Report	12/31/2004 2:10:42 PM	2 pages
Annual Report	6/11/2003	2 pages
Annual Report	6/5/2002	2 pages
Annual Report	5/21/2001	2 pages
Annual Report	10/3/2000	2 pages
Annual Report	7/16/1999	2 pages
Annual Report	4/24/1998	2 pages
Annual Report	7/1/1997	2 pages
Annual Report	7/1/1996	2 pages
Annual Report	7/1/1995	3 pages
Annual Report	7/1/1994	2 pages
Annual Report	7/1/1993	2 pages
Annual Report	7/1/1992	2 pages
Annual Report	7/1/1991	1 page
Annual Report	7/1/1990	2 pages
Annual Report	7/1/1989	2 pages
Statement of Change	7/15/1986	1 page
Articles of Incorporation	3/14/1983	9 pages



1200 FOREST BRIDGE RD, SUITE 200, LOUISVILLE, KY 40223 . PO BOX 22039, LOUISVILLE, KY 40252 . PHONE 502-423-0311 . FAX 502-339-7103

Jefferson County Public Education Foundation, Inc. P.O. Box 35368 Louisville, KY 40202

Jefferson County Public Education Foundation, Inc.:

Enclosed is the organization's 2010 Exempt Organization return.

Specific filing instructions are as follows.

FORM 990 RETURN:

This return has been prepared for electronic filing. If you wish to have it transmitted electronically to the IRS, please sign, date, and return Form 8879-EO to our office. We will then submit the electronic return to the IRS. Do not mail a paper copy of the return to the IRS.

Please review the return for completeness and accuracy.

We have prepared the return from information you furnished us without verification. Upon examination of the return by tax authorities, requests may be made for underlying data. We therefore recommend that you preserve all records which you may be called upon to produce in connection with such possible examinations.

We have enclosed mailing envelopes for your convenience in filing the return.

We sincerely appreciate the opportunity to serve you. Please contact us if you have any questions concerning the tax return. A copy of the return is enclosed for your files. We suggest that you retain this copy indefinitely.

Very truly yours,

Monroe Shine & CO., Inc., CPA's

# TAX RETURN FILING INSTRUCTIONS

# FORM 990

# FOR THE YEAR ENDING

	June 30, 2011
Prepared for	Jefferson County Public Education Foundation, Inc. P.O. Box 35368 Louisville, KY 40202
Prepared by	
	Monroe Shine & CO., Inc. P.O. Box 22039 Louisville, KY 40252
Amount due or refund	Not applicable
Make check payable to	Not applicable
Mail tax return and check (if applicable) to	Not applicable
Return must be mailed on or before	Not applicable
Special Instructions	This return has been prepared for electronic filing. If you wish to have it transmitted electronically to the IRS, please sign, date, and return Form 8879-E0 to our office. We will then submit the electronic return to the IRS. Do not mail a paper copy of the return to the IRS.

-	ag fa	е. Так.,				
	0	ion	Return of Organization Exempt Fro	om le	acomo Toy	CHE NE TEAS-0047
Fon	TI 🛁	30	Under section 501(c), 527, or 4947(a)(1) of the Internal Reven	Ue Code	IOUNIC ICA	2010
		of the Treasury	Denent trust of Drivate Totoriation	a di seconda di s		2010
		mus Service	The organization may have to use a copy of this return to satisf	iy state re	aporting requirements.	Open to Public Inspection
AF	for th		r year, or tax year beginning JUL 1, 2010 and end		UN 30, 2011	
	naci. 1 priical		organization		D Employer identifie	cation number
	TAdda	UEFFI	ERSON COUNTY PUBLIC EDUCATION			
	_ichan ]Nam	6 I I	DATION, INC.			
-	_)Chim Timinia		siness As		61-1	021128
-	_neur ]Teen		and street (or P.O. box if mail is not delivered to street address) Roc	om/suite	E Telephone number	
	Ann		BOX 35368 wn. state or country, and ZIP + 4		502-	<u>585-5347</u>
	Again Again		SVILLE, KY 40202		G. Gross recepts \$	1,370,886.
<u>.                                    </u>	द्रखाह		d address of principal officer: JOSEPH SETLER		H(a) is this a group re	
		101 50		1000	for affiliates?	Yes X No
17	ax-ex	kempt status; 🗋	JUTH FIFTH STREET, LOUISVILLE, KY           ∑ 501(c)(3)	<u>4020</u> 527	H(b) Are all affiliates inc	
		ite: 🕨 N/A				list. (see instructions)
KF	orm c	I ornanization; 🖸	Corporation Trust Association Other		H(c) Group exemption	
Pa	irt I	Summary		1 L 150 0	i Iumanun, 1905 M	State of legal domicile; KY
Ð	1	Briefly describe	the organization's mission or most significant activities: SUPPOR	ন্ত দ	JEFFERSON (	OTIMUN
anc	=	KENTUCKY	PUBLIC SCHOOLS			
Governance	2	Check this box	If the organization discontinued its operations or disposed	oi more	than 25% of its net as	Seis
NOF	3	Number of voti	ng members of the governing body (Part VI, line 1a)			23
-	-4	Number of inde	pendent voting members of the governing body (Part VI, line 1h)			23
Activities	5	i otal number p	I norviduals employed in calendar year 2010 (Part V line 2a)			0
lvh	6	Total number o	volunteers (estimate if necessary)		2	0
Ac	7a	Total unrelated	business revenue from Part VIII, column (C), line 12		7.	0.
		Net unrelated c	usiness taxable income from Form 990-T, line 34			υ.
	8	Contributions	riel manufa (Base Still fac. =1.)	·	Prior Year	Current Year
Revenue	9	Program sendo	nd grants (Part VIII, line Th)		1,477,852.	1,368,251.
la A a	10	Investment inc	e revenue (Part VIII, line 2g) ome (Part VIII, column (A), lines 3, 4, and 7d)		0.1	
Ē	11	Other revenue	Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11 <del>n</del> )		2,117.	2,635.
	12	Total revenue -	add lines 8 through 11. (must equal Part VIII, column (A), fine 12)	···	0.	0.
	13	Grants and sim	ilar amounts paid (Part IX, column (A), lines 1-3)	1	1,153,390.	1,370,886.
	14	Benefits paid to	or for members (Part IX, column (A), line 4)		1,100,090.	1,127,637.
-UN	15	Salaries, other	compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	D.
sasuadxa	16a	Professional fui	ndraising fees (Part IX, column (A), line 11e)		0.	<u> </u>
XDE	b	Total lundraisin	g expenses (Part IX, column (D), line 25) 🕨 🚺			V.
Ш	17	Other expenses	(Part IX, column (A), lines 11a-11d, 11i-24i)		7,942.	6,601.
	<b>1</b> B	Total expenses	Add lines 13-17 (must equal Part IX, column (A), line 25)	1	1,161,332.	1,134,238.
_ 677	19	Revenue less e	xpenses. Subtract line 18 from line 12		318,637.	236,648.
Pund Balances				Beg	inning of Current Year	End of Year
Ball	20	Total assets (Pa			1,798,753.	2,035,401.
Pun	21	Total liabilities (			0.	· D
	22 rt 11	Signature	nd balances, Subtract line 21 from line 20		1,798,753.	2,035,401.
<u> </u>						
true	COITE	cl, and completer f	declare that I have examined this return, including accompanying schedules and Paclaration of preparer (other than officer) is based on all information of which p	d statemei	nts, and to the best of my	knowledge and beliel, it is
	494110	1 hours	section of an experience of the only is pased on all mormation of which p	preparer h	as any knowledge,	
Sign	1	Signature i	of officer		Date	
Here		JOSEP	H SEILER, SECRETARY/TREASURER		and the grad	
		Type or pri	nt name and title			
		Ртіп/Лура ргара		Da		PTIN
Paid		JEREMY	M FINN, CPA	<	5-101-17 Junio	—

Paid	JEREMY M FINN, CPA	- A S-14-12
Preparer	Firm's name MONROE SHINE & CO. INC.	Firm's Ellin
Use Only	Firm's address P.O. BOX 22039	
	LOUISVILLE, KY 40252	Phone no. (502)423-0311
May the li	IS discuss this return with the preparer shown above? (see instructions)	Yes No

appendence LHA For Paperwork Reduction Act Notice, see the separate instructions.

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Form **990** (2010)

_	JEFFERSON COUNTY PUBLIC EDUCATION P90 (2010) FOUNDATION, INC. 61-1021128 Part III Statement of Program Service Accomplishments
	Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission: SUPPORT OF JEFFERSON COUNTY, KENTUCKY PUBLIC SCHOOLS
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990 EZ?
3	If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O.
•	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and
	allocations to others, the total expenses, and revenue, if any, for each program service reported.
<b>4a</b>	(Code:) (Expenses \$ 1,127,637. including grants of \$) (Revenue \$
	KENTUCKY AND INDIVIDUALS TO PROMOTE EDUCATIONAL IMPROVEMENTS IN
	ELEMENTARY, MIDDLE, AND HIGH SCHOOLS AND EARLY CHILDHOOD EDUCATION.
4b	(Code:) (Expenses \$including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$including grants of \$) (Revenue \$
	(Code:) (Expenses \$ including grants of \$) (Revenue \$
4d	Other program services. (Describe in Schedule O.)
	(Expenses \$ including grants of \$ ) (Revenue \$

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Form 990 (2010)

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# JEFFERSON COUNTY PUBLIC EDUCATION Form 990 (2010) FOUNDATION, INC. Part IV Checklist of Required Schedules

1	ts the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		Yes	No
	lí "Yes," complete Schedule A	1	x	
2		2	X	
3	bid the organization engage in onect of monect poincal campation activities on papel of or is appartition to any it is the	<u>–</u>	<u>A</u> .	
	public onice / if "Yes," complete Schedule C, Part	3		X
4	Conduction in the organization and the organization and an intervention of home a contine for the line in the termine in termine in the termine in te			<u>A</u>
	during the tax year / // "yes," complete Schedule C. Part II	4		x
5	is the organization a section of the			<u>n</u>
	similar amounts as defined in Hevenue Procedure 98-19? If "Yes," complete Schedule C. Part II	5		
6	old the organization maintain any donor advised funds of any similar funds or accounts where donors have the right to			
_	provide advice on the distribution or investment of amounts in such funds or accounts? // "Yes," complete Schoot to D. Boot i	-6		X
7	Lig the organization receive or hold a conservation easement, including easements to preserve and a preserve			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D. Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? // "Ves " complete			
	Schedule D, Part III	8		X
9	The are organization report on amount of Part A, line 21, serve as a custogian for amounts not listed in Part Y or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D. Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in term permanent, or pussion down as the			41
	If "Yes," complete Schedule D, Part V	10		X
11	in the organization of another to any of the following questions is "res," then complete Schedule D, Parts VI, VII, IX, or X			- 44
	as applicable.		1	
8	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part Vi	11a		x
b	Did the organization report an amount for investments - other securities in Part X line 12 that is 5% or more of the test			
	assets reported in Part X, line 167 If "Yes," complete Schedule D, Part VI	11b		X
C	Du une organization report an amount for investments - program related in Part X line 13 that is 5% as more of the total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total access mended in		1	
	Part X, line 167 If "Yes," complete Schedule D, Part IX	11d		x
	bio the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D. Part X	11e		X
T	Did the organization's separate or consolidated financial statements for the tax year include a forthote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? // "Yes," complete Schedule D, Part X	111		X
128	Did the organization obtain separate, independent audited financial statements for the tax year? If "Vec." complete			
	Schedule D, Parts XI, XII, and XIII	12a	X	
D	was the organization included in consolidated, independent audited financial statements for the tax year?		T	
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	126		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
148	bid the organization maintain an once, employees, or agents outside of the United States?	14a		X
p	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundralising inversion			
15	and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b		X
19	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
16	or entity located outside the United States? // "Yes," complete Schedule F, Parts II and IV	15		X
10	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
17	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		X
10	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
18	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
	bis the organization report indire than \$15,000 total of fundraising event gross income and contributions on Part VIII lines			
19	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,"	18		X
	complete Schedule G. Part III			
20a	complete Schedule G, Part III	19		X
Ь	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note, Some Form 990 filers that	20a		X
	operate one or more hospitals must attach audited financial statements (see instructions)			
		205		

Form 990 (2010)

# JEFFERSON COUNTY PUBLIC EDUCATION Form 990 (2010) FOUNDATION, INC. Part IV Checklist of Required Schedules (continued)

61-1021128 Page 4	(	51-	<u>-10</u>	21	12	8	Page 4
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21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the		Yes	No
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II			[
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,	21	X	
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III			
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current	22		X
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J			
24a	Schedule J Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	23		X
	tast 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 25			
Ь	Schedule K. If "No", go to line 25	24a		X
5	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	24b		
-	any tax-exempt bonds?			
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	24d		
	disqualified person during the year? If "Yes," complete Schedule L, Part I			
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	25a		X
-	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete		· ·	·
	Schering I Part I			
26	Schedule L, Part I	25b		X
	and the state of t			
27	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
-	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			
28	Schedule L, Part III	27		X
20	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 of former officer director breton as the amplement if the formation of the second s			
b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
-	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		<u>    X    </u>
	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 dire			
29	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	29		X
	contributions? // "Ves " complete Schedule M			
31	contributions? If "Yes," complete Schedule M	30		<u>X</u>
91	If "Yes " complete Schedule N. Det I			
32	If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?// "Yes," complete	31		<u>X</u>
	Cabadula M. Davi II		- 1	
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		<u>X</u>
	sections 301 7701.2 and 301 7701.22 K Vos t an analy disregarded as separate from the organization under Regulations			
34	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part i Was the organization related to any tax-exempt or taxable entity?	33		<u>X</u>
	If 'Yes' complete Schedule & Parte II III il/ and V Ges 1			
35	If "Yes," complete Schedule R, Parts II, III, IV, and V, fine 1	34		X
a	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of	35	-+	X
-	section 512(b)(13)2 If "Ver " complete Schedulo P. Port V. Sec 2			
36	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Yes X No 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			
37	If "Yes," complete Schedule R, Part V, line 2	36		<u>X</u>
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI			
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	37		X
	Note. All Form 990 filers are required to complete Schedule 0		_	
		38		
		Form §	かい (2	:010)

Form 990 (2010)

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### JEFFERSON COUNTY PUBLIC EDUCATION FOUNDATION, INC.

	JEFFERSON COUNTY PUBLIC EDUCATION 990 (2010) FOUNDATION, INC. 61-1021	1.00		
Pa	Statements Regarding Other IKS Flings and Tax Compliance	.120		age 5
	Check If Schedule O contains a response to any question in this Part V			
			Las	
<b>1a</b>	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		Yes	No
ъ	Enter the number of Forms W-2G included in line 1z. Enter -0- if not applicable	-		·
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable coming	1		
	(gambling) winnings to prize winners?			
<b>2</b> a	chier the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements	10		
	filed for the calendar year ending with or within the year covered by this return			1.
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note, if the sum of thes 1a and 2a is greater than 250, you may be required to e-file. (see instructions)	20		├
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	38		v
	If thes, has a filled a Form 990-1 for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other suther by and	30		
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4.		x
Ь	If the s, enter the name of the foreign country:	48		
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	=		
	Did any taxable party notiny the organization that it was or is a party to a prohibited tax shelter transaction?	<u>5a</u> 5b		X
C	II TYPS," to line 5a or 5b, did the organization file Form 8886-T?	50		<b></b>
6a	toes the organization have annual gross receipts that are normally greater than \$100,000, and did the organization policit	30		<u> </u>
	any contributions that were not tax deductible?	0		
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gitts	<u>6a</u>		<u>x</u>
	were not tax deductible?			
7	Organizations that may receive deductible contributions under section 170(c).	<u>6b</u>		<u> </u>
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for mode and services provided to the annual	-		-
Ď	if "Yes," did the organization notify the donor of the value of the goods or services provided?		<u> </u>	X
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	7ь		<u> </u>
	to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	10		X_
•	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		ĺ
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	71		<u> </u>
8	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	79		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-02	7 <u>8</u> 7h		<u> </u>
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Dirt the supporting	- <i>*</i> R		
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Spensoring organizations maintaining donor advised funds.	-		
a	Did the organization make any taxable distributions under section 49667	9a		
ь	Dio the organization make a distribution to a donor, donor advisor, or related person?	98 Sb		
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders			
Ь	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in liev of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
a	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.			
Ð	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			
G dA-	Enter the amount of reserves on hand			
148	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
P	If "Yes." has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O	14b		_

Form 990 (2010)

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Form	990	(201	0)

FOUNDATION, INC. 61-1021128 Part VI | Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response Page 6 to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI X Section A. Governing Body and Management Yes No ia Enter the number of voting members of the governing body at the end of the tax year 18 23 b Enter the number of voting members included in line 1a, above, who are independent 1b 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 X Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 of officers, directors or trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 X Did the organization become aware during the year of a significant diversion of the organization's assets? 5 5 Does the organization have members or stockholders? 6 6 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? 7a b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? X 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year 8 by the following: a The governing body? X Ba b Each committee with authority to act on behalf of the governing body? X 8b 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 Đ. Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No 10a Does the organization have local chapters, branches, or affiliates? 10a X b if "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? 105 11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? Х 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 128 Х b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done Does the organization have a written whistleblower policy? 120 13 13 X Does the organization have a written document retention and destruction policy? 14 14 X Did the process for determining compensation of the following parsons include a review and approval by independent 15 persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15a Other officers or key employees of the organization b X 15b If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a X b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? 185 Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed 17 NONE Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for 18 public inspection. Indicate how you make these available. Check all that apply. Own website Another's website Upon request Describe in Schedule O whether (and If so, how), the organization makes its governing documents, conflict of interest policy, and financial 10 statements available to the public. Distant of the 

24	State the name, physical address, and telephone number of the person who possesses the books and records of the organization:	
	JOE SEILER, TREASURER - 502-581-4331	•
	101 SOUTH FIFTH STREET, LOUISVILLE, KY 40202	-

Form 990 (2010)

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Form 990 (2010)	FOUNDATION, INC.	

Part VIII Componention of Officer	Directory					_	<u> </u>		61-1021	128 Page 7
Fait Vil Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated										
Employees, and Independent Contractors Check if Schedule O contains a response to any question in this Part VII										
Check If Schedule O contains a resp	conse to any qu	Jest	on ì	n thi	s Pi	art V	1			
Section A. Officers, Directors, Trustees, Key	<u>/ Employees, a</u>	nd l	ligi	<u>iest</u>	Col	<u>n)9</u> e	INSI	ted Employees		
1a Complete this table for all persons required to be li	isted. Report con	npen	satio	n for	the	cale	ndar	year ending with or within	the organization's tax yea	nr.
List all of the organization's current office Enter -0- in columns (D), (E), and (E) if no compared	rs, directors, tra	uste	es (v	whet	her	indì	vidu	ais or organizations), re	gardless of amount of	compensation,
List all of the organization's current key an	mployees, if an	y. Se	ni ee	stru	ctio	ns f	or d	efinition of "key employe	36."	
<ul> <li>List the organization's five surrent highest componentsation (Box 5 of Form W-2 and/or Box 7 of Form W-2 and</li></ul>	im 1099-MISC) o	885 () If mo	Dine re th	r thai Ian S	n an 100	Offic	er, d	lirector, trustee, or key emp	loyee) who received repo	rtable
List all of the organization's former officer.	s, kev emplove	82 S	and i	hinh	net.	000		Fine organization and any i	related organizations.	
<ul> <li>List all of the organization's former direct more than \$10,000 of reportable compensation</li> </ul>	ors or trustees	s tha	t rec	ceive	ed, i	n th	e ca	pacity as a former direc	tor or trustee of the or	ganization.
List persons in the following order: individual true and former such persons.	sides of <b>Orecto</b>	)/S; (	nsti	lutic	יזפת	tus	tees	; officers; key employee	s; highest compensation	ed employees;
Check this box if neither the organization a	nor any related	0.001	miza	ation	0	mne	Inca	tod any much officer.		
(A)	(B)				C)		i tad			
Name and Title	Average		•	Pos	-			(D)	(E)	(F)
	hours per	6	heci	k all			hh	Reportable	Reportable compensation	Estimated
	week				1		1	from	from related	amount of other
	(describe	stee or director	Í					the	organizations	compensation
	hours for	SE OF	ste	<b>[</b>		nsalter		organization	(W-2/1099-MISC)	from the
	related organizations	8			yes	ampe		(W-2/1099-MISC)		organization
	in Schedule	bdivideal	nstilutional trustee		Key employee	fighest compensated		18		and related
8	O)	Ē	E	Officer	F.	te E	Former			organizations
JAMES R ALLEN					<u> </u>	+	+			
CHAIRMAN	1.00	x		x				0.	0.	
FRANKLIN JELSMA	1	-			1-	$\square$	+	<u>v</u> .		0.
VICE CHAIRMAN	1.00	x		x				0.	0.	
JOE SIELER						$\uparrow$	+		V.	0.
SECRETARY/TREASURER	3.00	X		x			1	0.	0.	
SAN CORBETT	1		-				1-	U .	U.	0.
NEMBER	1.00	X						0.	0.	•
CLAIRE ALAGIA							1-			0.
MEMBER	1.00	X						0.	0.	0
MARTY BONICK				1			1-			0.
MENBER	1.00	X						0.	0.	0.
NIKE BROWN										U.
NEMBER	1.00	X	1		1			0.	0.	D.
SCOTT CASEY										
NEMBER	1.00	X						0.	0.	0.
JOHN GANT										
MEMBER	1.00	X						0.	0.	0.
AUDWIN HELTON										
NEMBER	1.00	X						0.	0.	0.
HENRY HEUSER JR										
NEMBER	1.00	X				<u> </u>		0.	0.	0.
ALICE HOUSTON										
MEMBER	1.00	X	<u> </u>		L	1		0.	0.	0.
ken selvaggi										
MENDER	1.00	X				<u> </u>		0.	0.	0.
MARY PAT REGAN										
MEMBER	1.00	X						0.	0.	0.
MARX SHIRKNESS	1 00			ŀ						
	1.00	X					<u> </u>	0.	0.	0.
KEVIN SHURN	1 00									
NEMBER	1.00	A		$\vdash$			$\square$	0.	0.	<u> </u>
PAUL THOMPSON	1 00									
NEMBER	1.00							0.	0.1	0.

032007 12-21-10

NEMBER

Form 990 (2010)

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61-1021128 Page 7

FOUNDATION, INC.

61-1021128 Page 8

Part VII Section A. Officers, Directors, Tr	ustees, Key E	mple	OVec	95. B	nd	Hiaf	lest	Compensated Employ		<u>e 1</u> .	140	) *	age c
(A)	(B)	(C)						(D)					
Name and title	Average	Position						Reportable	(E) Reportable			(F)	
	hours per	(C	hec	k all	that	app	viy)	compensation	compensation		-	stimat mount	
	week	5						from	from related			other	
	(describe hours for	Individual trastes or director					1.	the	organizations		con	npens	
	related	10 43	Ste			Isle	1	organization	(W-2/1099-MISC	)	f	irom th	18
	organizations	150 L	al tru		a l	mpe		(W-2/1099-MISC)				ganiza	
	in Schedule	- idea	Institutional trustee			<b>Dig</b>						nd rela	
	0)		Ē	Othicer	Key	Highest compensated Pripiores	former				arg	anizat	ions
JEFF ULIGIAN		1-				1	t			-+			
NEMBER	1.00	X						0.	· · · · ·				•
MARY GWEN WHEELER		1						V.					0.
MENBER	1.00	X						0.		.			•
MALCOLM B CHANCEY JR				<u> </u>		$\vdash$	<u> </u>	V.					0.
MEMBER	1.00	X			1			0.	, I I I I I I I I I I I I I I I I I I I	».			•
DR DONNA M HARGENS	1	1			1-				1	'+			0.
NENBER	1.00	x						0.	,				
DEVONE HOLT		1			†					).			0.
NEMBER	1.00	x						0.		.			
LINDA JOHNSON			$\square$			-				).		· · · ·	0.
NENBER	1.00	x						0.		, I			•
			1				-	U.		).			0.
	1	ļ											
18 C							-			+			_
										•			
		-							· · · · · · · · · · · · · · · · · · ·	+			
3													
1b Sub-total		<u> </u>			<u> </u>			0.		+			
c Total from continuation sheets to Part V	II. Section A		** ****	*****	•••••			0.					0.
d Total (add lines 1b and 1c)						5		0.					0.
2 Total number of individuals (including but i	not limited to th	nse	licte	ref al		a) sart			U				0.
compensation from the organization			1002104			.,	10 11	scewen more man \$100	COD in reportable				
8							-					N.	0
3 Did the organization list any former officer	director or tru	stee	. ke	/ em	nin	000	or h	intert componented as		Г		Yes	No
line 1a? If "Yes," complete Schedule J for a	uch individual				10101	1001		nànear comhauzarao au	nproyee on		_		
	um of reportab	ie cc	mo	anes	ition	00.0	اللهم ا		A	٠F	3		X
and related organizations greater than \$15	0.000? // "Yes.	* co	mok	ate S	Sche	vinie	.16	or such individual	ne organization				
5 Did any person listed on line 1a receive or	BCCILIE COMDE	nsati	ion f		ROV	linn	- u n	ed conscitation or behin		· ⊦	4		<u>X</u>
rendered to the organization? If "Yes," con	plete Schedul	e J f	or st	ich i	Ders	200		PRI CLOBERT CE LE CELOTATI	DURI IDF SEIVICES				
Section B. Independent Contractors										<u> </u>	5		<u>X</u>
1 Complete this table for your five highest co	mpensated in	jepe	nde	nt c	ontr	acto	rs ti	hat received more then t					
the organization. NONE	-								a roo,ooo or compe	nsa	uon t	rom	
(A)							T	(B)		-			
Name and business	address							Description of s	ervices	Ca	C) Hormo	) nsatio	n
G							$\uparrow$						<u> </u>
							1						
			_										
							T						
							Τ						
							T						
a Talatanaka di k										_	_		
2 Total number of independent contractors (	neludioa but n	-11	- Maria		AL								

Total number of independent contractors (including but not limited to those listed above) who received more than
 \$100.000 in compensation from the organization
 0

Form 990 (2010) FOUNDATION, INC. Part VIII Statement of Revenue

	2 2	571 		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded fror tax under sections 512 513, or 514
ta b d d e f f							
	Membership dues	<u>1b</u>					
C	Balan at a start						
d	Related organizations						
6	Government grants (contributio						
5	All other contributions, gifts, grants			_			
	similar amounts not included above	· [11 [1,	<u>368,251.</u>				=
9	Noncash contributions included in lines to	e-1t\$		2			
<u>• h</u>	Noncash contributions included in lines to Total. Add lines 1a-1f			1,368,251.			
			<b>Business Code</b>				
2 a	· · · ·						
2 a b c d							
c							· · · · ·
d							· · · · ·
e							
1 1	All other program service reven	ue					
9	Total. Add ines 2a-2f						
3	Investment income (including d	ividends, inter	ist, and				
	other similar amounts)			2,635.	2,635.		
4	Income from investment of tax-	exempt bond a	roceads		4,033.		
5	Royalties						
	ſ	(i) Real	(ii) Personal				ļ
6 a	Gross Rents	IV COOL					
ь							~
_	Rental income or (ioss)						
	Not control income or (local)						
	Gross amount from sales of	(i) Securities					
1 1	assets other than inventory	(I) decuntes	(ii) Other				
L .	Less: cost or other basis			2			
				· · ·			
	and sales expenses						
6	Gain or (loss)		L		~		
	Net gain or (loss)						
	Gross income from fundraising including \$						
	contributions reported on line 1						
та b	Part IV, line 18	a					
b	Less: direct expenses						l.
	Net income or (loss) from funda	•				·	
9 a	Gross income from gaming acti						
<b>I</b> .	Part IV, line 19						
l p	Less: direct expenses	b					[
	Nat income or (ioss) from gamin		<b>&gt;</b>	·			
10 a	Gross sales of inventory, less re						
	and allowances	8					1
	Less: cost of goods sold						
- c	Net income or (loss) from sales						
	Miscellaneous Revenue		<b>Business Code</b>				
11 a							[
b							
C							
d	All other revenue						
•	Total. Add lines 11a-11d						
12	Total revenue. See instructions		► 5	L,370,886.	2,635.	0.	0

Form 990 (2010)

# Form 990 (2010)

JEFFERSON COUNTY PUBLIC EDUCATION

Form 990 (2010) FOUNDATION, INC. Part IX Statement of Functional Expenses

61-1021128 Page 10

	Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).							
Do   7b,	not include amounts reported on lines 6b, Bb, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising			
1	Grants and other assistance to governments and			Sourced exherences	expenses			
	organizations in the U.S. See Part IV, line 21	1,127,637.	1,127,637.					
2	Grants and other assistance to individuals in							
	the U.S. See Part IV, line 22							
3	Grants and other assistance to governments,							
	organizations, and individuals outside the U.S.							
	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)							
7	Other salaries and wages							
8	Pension plan contributions (include section 401(k)							
	and section 403(b) employer contributions)							
9	Other employee benefits							
10	Payroli taxes							
11	Fees for services (non-employees):							
8	Management			·	· .			
b	Legal							
c	Accounting	5,658.		5,658.	· · · · · · · · · · · · · · · · · · ·			
d	Lobbying				·····			
e	Professional fundraising services. See Part IV, line 17							
1	Investment management fees							
g	Other	731.		731.				
12	Advertising and promotion							
13	Office expenses	212.		212.				
14 .	Information technology							
15	Royalties							
16	Occupancy							
17	Travel							
18	Payments of travel or entertainment expenses							
	for any federal, state, or local public officials							
19	Conferences, conventions, and meetings							
20	Interest							
21	Payments to affiliates							
22	Depreciation, depletion, and amortization				_			
23	Insurance							
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 241. If line 241 amount exceeds 10% of line 25, column (A) amount, list line 241 expenses on Schedule 0.)							
8								
b								
C								
d								
8								
1	All other expenses				· · · · · · · · · · · · · · · · · · ·			
25	Total functional expenses. Add lines 1 through 24	1,134,238.	1,127,637.	6,601.	0.			
26	Joint costs. Chack here L if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising				8			
	solicitation		1	1				

Form 990 (2010)

#### 032011 12-21-10

JEFFERSON	COUNTY	PUBLIC	EDUCATION

61-1021128 Page 11

			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	100 164	1	6,010.
	2	Savings and temporary cash investments	1 606 590	2	2,029,391.
	3	Pleages and grants receivable, net		3	2,047,391.
	4	Accounts receivable, net		4	
	5	neceivables from current and former officers, directors, trustees, key		4	·
	1	employees, and highest compensated employees. Complete Part I			
	6	of Schedule L Receivables from other disqualified persons (as defined under section		5	
	ľ	4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary			17
	1	employees' beneficient organizations (ass instructions)			
ets.	7	employees' beneficiary organizations (see instructions)		6	
Assets	8	Notes and loans receivable, net		7	
<	9	Inventories for sale or use		8	
	-	Prepaid expenses and deferred charges Land, buildings, and equipment: cost or other		9	
	IVa	basis. Complete Part VI of Schedule D			
	ь	Less: accumulated depreciation			
	11	investmente - nublick terderi accusitica		10c	·
	12	Investments - publicly traded securities		11	
	13	Investments - other securities. See Part IV, line 11 Investments - program-related. See Part IV, line 11		12	
	14	Internible seate		13	
	15	Intangible assets		14	
	16	Other assets. See Part IV, line 11 Total assets. Add lines 1 through 15 (must equal line 34)		15	
	17	Accounts payable and accrued expenses	1,798,753.	16	2,035,401.
	18	Grants payable		17	
	19	Deferred revenue		18	0
	20	Tax-exempt bond liabilities		19	
Į)	21	Escrow or custodial account liability. Complete Part IV of Schedule D		20	
litie	22	Payables to current and former officers, directors, trustees, key employees,		21	
Liabilities		highest compansated employees, and disqualified persons. Complete Part II			
	- 8	of Schedule L		_	
	23	Secured mortgages and notes payable to unrelated third parties		22	
	24	Unsecured notes and loans payable to unrelated third parties		23 24	
	25	Other liabilities. Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	0.	26	0.
		Organizations that follow SFAS 117, check here  X and complete		20	V.
80	ļ	lines 27 through 29, and lines 33 and 34.		1	. 1
anc	27	Unrestricted net assets	356,892.	27	262,975.
Bal	28	Temporarily restricted net assets	1,441,861.	28	1,772,426.
P	29	Permanently restricted net assets		29	=1:10,2001
Net Assets or Fund Balances		Organizations that do not follow SFAS 117, check here			
0		complete lines 30 through 34.			
ilas	30	Capital stock or trust principal, or current funds		30	
Asi	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net	32	Retained earnings, endowment, accumulated income, or other funds		32	
-	33	Total net assets or fund balances	1,798,753.	33	2,035,401.
	34	Total liabilities and net assets/fund balances	1,798,753.	34	2,035,401.

Form 990 (2010)

# FOUNDATION, INC.

Form 990 (2010) Part X | Balance Sheet

	JEFFERSON COUNTY PUBLIC EDUCATION					
-	1990 (2010) FOUNDATION, INC.	61-	1021	1 20	B.	
Pa	rt XI Reconciliation of Net Assets				Pa	ge 12
	Check if Schedule O contains a response to any question in this Part XI			<u>(*)</u>		
			******			
1	Total revenue (must equal Part VIII, column (A), line 12)	11	1	סכ	^ 0	86.
2	rotal expenses (must equal Part IX, column (A), line 25)	2				_
3	nevenue less expenses. Subtract line 2 from line 1	3	<u>+</u>			<u>38.</u> 48.
4	Net assets of fund balances at beginning of year (must equal Part X line 33, optimin (A)	4	1		_	53.
5	Outer changes in her assets or fund balances (explain in Schedule O)	5	<b>4</b>	[]	0,1	-
6	Net assets of fund balances at end of year. Combine lines 3.4 and 5 (must equal part Y line 22 actions (p)	6	2	02	5 4	$\frac{0}{01}$
Pa	Financial Statements and Reporting			_		VI.
	Check if Schedule O contains a response to any question in this Part XII					x
	×				Yes	No
1	Accounting method used to prepare the Form 990: 🔀 Cash 🦳 Accrual 🗌 Other		Г		100	
	If the organization changed its method of accounting from a prior year or checked "Other" grade is Debadula	0	-			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			28		
b	were the organization's linancial statements audited by an independent accountant?		[	28 2b	X	X
C	If res to live 28 of 20, does the organization have a committee that assumes responsibility for quemient of the	a ma sulla		20	<u>A</u>	
	review, or compilation of its financial statements and selection of an independent accountant?			20	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche		F	20	<u> </u>	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued	ian a				
	separate basis, consolidated basis, or both:					Ĺ
	X Separate basis Consolidated basis Both consolidated and separate basis					
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sm	ale Aur	i#			
	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 requi	neri suri		38		<u>A</u>
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	auu		зы		
					990 /	2010)
				- ALTER A		EVIV)

6			10 C								
SCHÌÈDULE A (Form 990 or 990-EZ)	1	olic Charity S								1545-00	147
Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ. See separate instructions.						Open t	o Publection				
Name of the organizat	ion JEFFERS	SON COUNTY PU	BLIC	EDUC	TION			imployer i	dentificat	ion nu	mber
Part I   Reason	for Public Cha	ity Status (Ali organiz	rations m		to the part	110-1-1-		61	<u>-1021</u>	<u>.128</u>	
the second se	Drivete foundation	because it is: (For lines			ne mis pai	rt.) See ins	tructions.				
1 A church, co	nvention of churche	Decause it is. (FOI IIIIIS		11, Check	only one l	box.)					
2 A school des	cribed in eaching d	s, or association of chur 70(b)(1)(A)(ii). (Attach Sc	cnes desc	nded in S	ection 17(	D(b)(1)(A)(i	).				
3 A hospital or	o cooperative been	volog i Nayini. (Attach Sc	nequie E.)								
	a cooperative nosp	ital service organization	described	in section	170(b)(1)	(A](iii).					
	e	operated in conjunction								's nam	iê,
5 An organizat	ion operated for the (b)(1)(A)(iv). (Compl	benefit of a college or un	niversity o	whed or o	perated by	y a govern	mental un	it describe	din		
		ient or governmental uni	t describe	d in contid	an 4706-11	dian.a					
7 X An organizat	on that normally rec	eives a substantial part	of its supr	on secur		There is a second s					
section 170	b)(1)(A)(vi). (Comple	ite Part II.)	or im oupp		i Goverunti			egenerai p	ublic desc	ribed i	n
		section 170(b)(1)(A)(vi).	Complete	Doub H1							
9 An organizat	on that normally rec	eives: (1) more than 22 :	1/30/ of the	e al ling		4					
activities rela	led to its exempt for	eives: (1) more than 33 *		support	irom comir	ioutions, r	hembersh	ip fees, and	d gross re	ceipts	from
income and u	metated business t	nctions - subject to certa	un excepti	uns, and (	2) no more	e than 33 1	1/3% of its	s support f	rom gross	invest	ment
See paction	509(a)(2). (Complete	axable income (less sect		IX) ITOITI DL	Isinesses i	acquired b	y the orga	inization af	iter June 3	0, 197	5.
11 An organizati	on organized and o	perated exclusively to te	st for publ	ic safety.	See sectio	<b>m 509(</b> a)(4	4).				
	on organized and o	perated exclusively for th	ne benefil	of, to perfe	orm the fu	nctions of	, or to can	y out the p	urposes c	if one (	or
more publicly	supported organizi	ations described in secti	on 509(a)(	1) or section	on 509(a)(2	2). See se	ction 509(	a)(3). Chec	k the box	that	
	type of supporting	organization and compl		-						Æ	
a 🗖 Type I			≈∟ Тур	e III - Fund	ctionally in	tegrated		d 🗌 🕯	Type III - (	Other	
e By checking	his box, I certify the	at the organization is not	controllec	i directly c	r indirectly	/ by one o	r more dis	qualified p	ersons oth	er tha	n
foundation m	anagers and other t	han one or more publicly	y supporte	id orgianizi	ations des	cribed in s	ection 50	9(a)(1) or si	ection 509	(a)(2).	
f It the organiz	ation received a writ	ten determination from t	the IRS th	at It is a Ty	pe I, Type	II, or Type	e III				
	ganization, check th										
g Since August	17, 2006, has the c	rganization accepted ar	ny gift or c	ontribution	from any	of the foll	owing per	sons?			
(i) A perso	n who directly or ind	irectly controls, either al	one or tog	ether with	persons o	iescribed i	in 🔟 and i	iii) below		Yes	No
the gove	eming body of the s								11g(i)	165	140
(ii) A family	member of a persor	n described in (i) above?							44-03		
(iii) A 35% c	controlled entity of a	person described in () (	or (ii) abov	e?		* * * * * * * * * * * * * * * * * * *	************		4 4 -71213		
h Provide the fe	lowing information	about the supported on	ganization	(S).					11g(iii)	<u> </u>	8
(i) Name of supported organization	{11} EIN	(III) Type of organization (described on lines 1-9 above or IRC section	in coL (i) fi	organization sted in your document?		u notify the ion in col. support?	(vi) is organizati (i) organiz U.S	ed in the	(vil) An sup	nount of port	I
		(see instructions))	Yes	No	Yes	No	Yes	No			
			· ·	L			1	r I			

					_	
		 		-	 	
Part at			1		1	
Total						

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

Schedule A (Form 990 or 990-EZ) 2010

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61-1021128 Page 2

Schedule A (Form 990 or 990 EZ) 2010 FOUNDATION, INC. 61-10211 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(v) (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.)

Se	ction A. Public Support						
CEIG	ndar year (or fiscal year beginning in) 🕨	(a) 2006	(b) 2007	(c) 2008	(d) 2009		
1	Gifts, grants, contributions, and			10/2000		(e) 2010	(f) Total
	membership fees received. (Do not				·		
	include any "unusual grants.")	1279660.	2836129.	1001515	1/77052	1250051	Baca in-
2	Tax revenues levied for the organ-			20010100	1411032.	T200721.	7963407.
	ization'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	1279660.	2836129.	1001515.	1477852.	1200004	
	The portion of total contributions		20001227.	1001515.	14//002.	1368251.	7963407.
	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.				-		
	nalume fA						
8	Public support. Subtract line 5 from line 4.						1763714.
Se	ction B. Total Support	L					6199693.
	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(-) 0000			
	Amounts from line 4	1279660.	2836129.	(c) 2008 1001515.	(d) 2009	(e) 2010	(f) Total
8	-	1215000.	2030123.	TOATOTO'	1477852.	1368251.	7963407.
-	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	74,781.	60.551.	9 007	0.448		
9	Net income from unrelated business	12,1011	00,551.	<u>    8,097.</u>	2,117.	2,635.	148,181.
-	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain		<u></u>				
	or loss from the sale of capital						
	assets (Explain in Part IV.)	16,848.					
11	Total support. Add lines 7 through 10	10,040					16,848.
	Gross receipts from related activities,	atc. (see instruction					8128436.
13	First five years. If the Form 990 is for	the organization's	first second this	d farmath an fille in		12	
	organization, check this box and stor	o here			x year as a section	507(0)(3)	
Sec	ction C. Computation of Publ	ic Support Per	rcentage				
14	Public support percentage for 2010 (	ine 6, column (1) di	ivided by line 11, c	alumn (0)		14	76 27
15	Public support percentage from 2009	Schedule A, Part	II, line 14			15	76.27 %
16a	33 1/3% support test - 2010. If the o	rganization did not	t check the box on	line 13 and line 1.	1 is 32 1/204 as my	an abaals this have	
	stop here. The organization qualifies	as a publicly supp	orted organization			ne, check uns Dox	
b	as nam anhhair raer - 5000'u rue o	rganization old not	i cneck a dox on M	1813 or 16a and i	ing 15 in 22 1/20/	an manage also also de la	a de la co
	and stop here. The organization qual	ifies as a publicly s	Supported organiza	ition		or more, check unit	
178	iv * racts-ante-circumstances les	t - 2010.It the orga	inization did not ci	19Ck a box on line '	13.16a or 16h ar	d line 1/ is 10% a	
	and if the organization meets the "fac	ts-and-circumstand	ces" test, check th	is box and stop be	are Evoluin in Ded	When the	
	meets the "facts-and-circumstances"	test. The organizat	tion qualifies as a j	publicly supported	organization		
b	10% -tacts-and-circumstances test	t - 2009.If the orga	inization did not ch	18Ck a box on line '	13. 16a 16b pr 17	a and line 15 is 14	
	more, and if the organization meets th	he "facts-and-circu	mstances" test, ch	leck this box and s	too here. Exclain	in Part IV how the	070 UT
	organization meets the "facts-and-circ	rumstances" test, "	The organization of	ualifies as a public	ly supported organ	nization	
18	Private foundation. If the organizatio	n did not check a l	box on line 13, 16a	1. 16b. 17a. or 17b.	Check this box ar	d see instructions	
							the second se

Schedule A (Form 990 or 990-EZ) 2010

# Schedule A (Form 990 or 990-EZ) 2010 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 oualify under the tests listed below, please complete Part II.) Section A. Public Support

_	Contra t diana ocipion (							
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2006	(b) 2007	(c) 2008	1-1-0000			
1			10, 2007	10/2008	(d) 2009	(e) 2010	(f) Total	
	membership fees received. (Do not					·		
	include any "unusual grants.")						1	
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose							
3	Gross receipts from activities that			+				
	are not an unrelated trade or bus-							
	iness under section 513							
4	Tax revenues levied for the organ-			+				
-	ization's benefit and either paid to							
	or expended on its behalf						1	
5	The value of services or facilities							
5	furnished by a governmental unit to							
	the organization without charge							
	Total. Add lines 1 through 5			L				
78	Amounts included on lines 1, 2, and							
	3 received from disqualified persons							
D	Amounts included on lines 2 and 3 received from other than discuslified 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				· · · · ·			
8	Public support (Subtract line 7c from line 6.)			1				
Sec	tion B. Total Support							
	ndar year (or fiscal year beginning in) 🕨	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(-) (040		
9	Amounts from line 6				10/2009	(e) 2010	(f) Total	
<b>1</b> 0a	Gross income from interest, dividends, payments received on securities loans, rents, royatties and income from similar sources							
	Unrelated business taxable income							
	(less section 511 taxes) from businesses							
	acquired after June 30, 1975					4		
c	Add lines 10a and 10b							
- 11 -	Net income from unrelated business activities not included in line 10b, whether or not the business is regulative carried on							
12	Other income. Do not include gain							
	or loss from the sale of capital assets (Explain in Part IV.)							
13	Total support (Add lines 9, 10c, 11, and 12.)							
14	First five years. If the Form 990 is for	the organization's	first second this	ti founth as the				
	check this box and stop here			, IVERUI, UT HILLI LE	w year as a section	n əvi (c)(3) organiz	ation,	
Sec	tion C. Computation of Publ	ic Support Per	rcentage					
15	Public support percentage for 2010 (I	ine 8, column (1) di	vided by line 13					
16	Public support percentage from 2009	Schedule A. Part	III. line 15			15	%	
Sec	tion D. Computation of Inves	stment incom	e Percentage	*****		16	%	
17	Investment income percentage for 20	10 (line 10c. colum	on (6 divided by in	(0) anulas (12	1			
18	Investment income percentage from 2	2009 Schedule A				17	%	
<b>19a</b>	33 1/3% support tests - 2010. If the	organization did o	Ot check the boy	n line 1/ and line	15 in manual 1	18	%	
	more than 33 1/3%, check this box a	nd stop here. The	organization qual		13 IS MORE than 3	3 1/3%, and line 1	7 is not	
b	33 1/3% support tests - 2009. If the	proanization did n	or check a box	ines us a publicly s	upported organiza	tion	▶∟]	
_	line 18 is not more than 33 1/3%, che	ck this box and et	an here. The area	we in or une 198,	, and line 16 is mo	re than 33 1/3%, a	nd	
20	Private foundation. If the organization	n did not check a i	box on line $1/10$		is a publicly suppo	rted organization	▶∟	
03202	20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions							

Schedule A (Form 990 or 990-EZ) 2010

Page 3

# JEFFERSON COUNTY PUBLIC EDUCATION FOUNDATION, INC.

61-1021128

## Schedule A

## Identification of Excess Contributions Included on Part II, Line 5

2010

\*\* Do Not File \*\* \*\*\* Not Open to Public Inspection \*\*\*

Contributor's Name	Total Contributions	Excess Contributions
ES FOUNDATION	421,250.	258,681
HEENS FOUNDATION	552,787.	390,218
IUMANA	285,000.	122,431
P MORGAN CHASE BANK	200,000.	37,431
	1,117,522.	954,953
9 E		·
÷.		
5. 	 	
	 	· · · · · · · · · · · · · · · · · · ·
		<u> </u>

023171 05-01-10

Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	Attach to Form 990, 990-EZ, or 990-PF.		OMB No. 1545-0047
	ON JEFFERSON COUNTY PUBLIC EDUCATION FOUNDATION, INC.	•	yer identification m
Organization type (chec		61.	-1021128
Fliers of:	Section:		
Form 990 or 990-EZ	X 501(c)( 3) (enter number) organization		
	4947(a)(1) nonexempt charitable trust not treated as a private foundation		
	527 political organization		
Form 990-PF	501(c)(3) exempt private foundation		
	4947(a)(1) nonexempt charitable trust treated as a private foundation		

ion number

501(c)(3) taxable private foundation

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

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

#### General Rule

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

# Special Rules

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

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

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

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

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

# Schidule & (Fam 980, 880-EZ, or \$90-PF) (2010)

Name of organization

JEFFERSON COUNTY PUBLIC EDUCATION FOUNDATION, INC.

	Page	1 01	2	of Part I
Employer	identifica	ation	numbe	F

61-1021128

Part I Contributors (see instructions)

(a)			
<u>No.</u>	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	JP MORGAN CHASE		
	416B W JEFFERSON STREET 4416 LOUISVILLE, KY 40202	\$200,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
		0	
(a) <u>No.</u>	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	HUMANA		
	500 W MAIN STREET, SUITE 208	\$125,000.	Person X Payroll Noncash
	LOUISVILLE, KY 40202		(Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
3	EON		
	220 W MAIN STREET STE 1400	s142,250.	Person X Payroll Noncash
	LOUISVILLE, KY 40202		(Complete Part II if there is a noncash contribution.)
(8) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d)
• •	Name, address, and ZIP + 4		(d) Type of contribution
No.		Aggregate contributions	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	(d) Type of contribution Person X Payroll
No.	Name, address, and ZIP + 4 LOUISVILLE METRO GOVERNMENT 601 W JEFFERSON ST	Aggregate contributions	(d) Type of contribution Person X Payroll Noncash (Complate Part II if there is a noncash contribution.) (d)
<u>No.</u>	Name, address, and ZIP + 4 LOUISVILLE METRO GOVERNMENT 601 W JEFFERSON ST LOUISVILLE, KY 40202 (b)	Aggregate contributions \$	(d) Type of contribution Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
No. 4 (a) No.	Name, address, and ZIP + 4         LOUISVILLE METRO GOVERNMENT         601 W JEFFERSON ST         LOUISVILLE, KY 40202         (b)         Name, address, and ZIP + 4	Aggregate contributions \$	(d) Type of contribution Person X Payroll Noncash (Complete Part II if there is a noncash contribution.) (d) Type of contribution
No. 4 (a) No.	Name, address, and ZIP + 4         LOUISVILLE METRO GOVERNMENT         601 W JEFFERSON ST         LOUISVILLE, KY 40202         (b)         Name, address, and ZIP + 4         JEFFERSON COUNTY PUBLIC SCHOOLS	Aggregate contributions \$	(d) Type of contribution Person X Payroll Noncash (Complete Part II if there is a noncash contribution.) (d) Type of contribution Person X Payroll
No. 4 (a) No.	Name, address, and ZIP + 4         LOUISVILLE METRO GOVERNMENT         601 W JEFFERSON ST         LOUISVILLE, KY 40202         (b)         Name, address, and ZIP + 4         JEFFERSON COUNTY PUBLIC SCHOOLS         P.O. BOX 34020	Aggregate contributions \$	(d) Type of contribution Person X Payroll Noncash (Complete Part II if there is a noncash contribution.) (d) Type of contribution Person X Payroll Noncash (Complete Part II if there is a noncash contribution.) (d)
No. 4 (8) No. 5 (a)	Name, address, and ZIP + 4          LOUISVILLE METRO GOVERNMENT         601 W JEFFERSON ST         LOUISVILLE, KY 40202         (b)         Name, address, and ZIP + 4         JEFFERSON COUNTY PUBLIC SCHOOLS         P.O. BOX 34020         (b)	Aggregate contributions          \$	(d) Type of contribution Person X Payroll Noncash (Complete Part II if there is a noncash contribution.) (d) Type of contribution Person X Payroll Noncash (Complete Part II if there is a noncash contribution.) (d) Type of contribution.) (d) Type of contribution.)
No. (8) No. 5 (a) No.	Name, address, and ZIP + 4          LOUISVILLE METRO GOVERNMENT         601 W JEFFERSON ST         LOUISVILLE, KY 40202         (b)         Name, address, and ZIP + 4         JEFFERSON COUNTY PUBLIC SCHOOLS         P.O. BOX 34020         LOUISVILLE, KY 40232         (b)         Name, address, and ZIP + 4	Aggregate contributions          \$	(d) Type of contribution Person X Payroll Noncash (Complete Part II if there is a noncash contribution.) (d) Type of contribution Person X Payroll Noncash (Complete Part II if there is a noncash contribution.) (d)

Schedule B (Form 990, 980-EZ, or 990-PF) (2010)

#### Schedi (Form 990, 990-EZ, or 980-PF) (2010)

Name of organization JEFFERSON COUNTY PUBLIC EDUCATION FOUNDATION, INC.

			- <b></b>	
Page	2	of	2 of Part I	

Employer identification number

61-1021128

Part I Contributors (see instructions)

(a)	(b)		
No.	Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7	BROWN FORMAN		Person X
	626 W MAIN STREET STE 200	\$50,000.	Payrol!
	LOUISVILLE, KY 40202		(Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZiP + 4	(c) Aggregate contributions	(d) Type of contribution
8	KINDRED HEALTHCARE		
	680 SOUTH FOURTH STREET	s50,000.	Person X Payroli Noncash (Complete Part II if there
	LOUISVILLE, KY 40202		is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
9	CE&S FOUNDATION		- ( <del>1</del> 7)
	101 S FIFTH STREET STE 1650	\$ <u>45,534.</u>	Person X Payroll Noncash
э.	LOUISVILLE, KY 40202		(Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
_ 10	JG BROWN FOUNDATION		Person X
	4350 BROWNSBORO RD STE 200	\$35,900.	Payroll Noncash
	LOUISVILLE, KY 40207		(Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) <u>No.</u>	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2010)		
Name of organization		Pape of of Part II
JEFFERSON COUNTY PUBLIC EDUCATION	8	Employer identification number
FOUNDATION, INC.	ē.	61-1021128

Part II Noncash Property (see instructions)

.

(a) No. from Part I	{b} Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	2	\$	
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		s	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. irom Part I	(b) Description of noncesh property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. From Part 1	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

	rm 990, 990-EZ, pr 990-PF) (2010)		Page of of Part III
Name of org	SON COUNTY PUBLIC EDUC	ATTON	Employer identification number
FOUNDA	TION, INC.		61 1001100
Part III	Exclusively religious, charitable, etc. in	ndividual contributions to section 50	61-1021128 1(c)(7), (8), or (10) organizations aggregating
	more than \$1,000 for the year. Complete Part III, enter the total of <i>exclusively</i> religion		i(c)(7), (8), or (10) organizations aggregating wing line entry. For organizations completing
	\$1,000 or less for the year. (Enter this inf	ormation once. See instructions.)	
(a) No. from	(b) Purpose of gift	(c) Use of gift	
Part I	(-) · · · · · · · · · · · · · · · · · · ·	Ici and of Attr	(d) Description of how glift is held
	······································		
	· · ·	13	
Γ		(e) Transfer of gift	9
		-	
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
	<u> </u>		
(a) No. from			
Part 1	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	· · · · · · · · · · · · · · · · · · ·		
	70		42
	•	(e) Transfer of gift	
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
(a) No. from		I	
from Part 1	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			
		(e) Transfer of gift	. ,
	Transferee's name, address, a	nd 710 + 4	
			Relationship of transferor to transferee
			18
(a) No.			
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Part I			
-			
		(e) Transfer of gift	
F	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
	· · · · · · · · · · · · · · · · · · ·		

 $\frac{\psi}{p-k} = \frac{1-\psi}{1-\psi}$ 

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Schedule B (Form 990, 990-EZ, or 890-PF) (2010)

10 1.7	2 5									
SC	HEDULE D	Sur	plement	al Financial	Statement	-		OMB ND.	1545-0047	
(For	m 990)	20	10							
•				anization answered line 6, 7, 8, 9, 10, 11,		62		20	IU	
	iment of the Treasury I Revenue Service		- Attach to Form	1 990. Þ See separa	te instructions.			Open t inspec	to Public	
Nam	TRUBDOON CONTRACT BORNES									
	FOUNDATION, INC.									
Pa	rt I Organiza	tions Maintaining	Donor Advise	ed Funds or Oth	er Similar Fund	S OF A	20011	OI-IUZI	128	
	organizatior	answered "Yes" to For	n 990. Part IV. lin	e 6.				inta. Complete r	the	
				(a) Donor ad	vised junds		N Eurod	is and other acco		
1	Total number at en	d of year							Aurits	
2	Aggregate contribu	itions to (during year)	**********			·				
3	Aggregate grants f	rom (during year)	*******************							
4		end of year				· · · · ·				
5	Did the organizatio	n inform all donors and c	lonor edvisors in	writing that the agent	s held in donor advi	and from	4			
-	are the organizatio	n's property, subject to t	he organization's	exclusive legal contr			35 .			
6	Did the organizatio	n inform all grantees, do	nors, and donor a	advisors in writing the	t grant funde can be			Yes	L No	
	for charitable purp	oses and not for the ben	efit of the donar (	n danar advisor or fe	r grow ather purpose	onation	ine			
	impermissible priva	te benefit?				comen	ng		<u> </u>	
Pa	rt il Conserva	ation Easements.	omplate if the on	Denization answered	"Ves" to Some 000	Dort IV	ine 7	Yes	<u>No</u>	
1	Purpose(s) of cons	ervation easements held	by the organizat	ion (check all that an	ha	arciv,	ane 7.			
-		of land for public use (e.			Preservation of an hi	ctoricali		the stand such		
		natural habitat	g-1		Preservation of a car					
	Preservation	of open space		· ·	TCSCHALLOIT OI A LOI		autic s			
2		through 2d if the organiz	ation held a quali	ified conservation cor	defluction in the form			·····		
-	day of the tax year.					I OT A CO	nserva	lion easement on	the last	
		•		2		.				
а	Total number of co	nservation easements						Held at the End of (	the Tax Year	
h	Total acreace restr	icted by conservation ea	comonto		*********		2a			
	Number of consen	vation easements on a ce	utified historic st	nuclture included in (a)			2b			
d	Number of conserv	ation easements include	nineo natoric au	after 8/17/06 and ac	4 f		20			
		al Register								
3	Number of conserv	ation easements modifie	d transferred re	hansed avtinguished	or torminated by th		2d			
-	year >			nodacu, extinguiarieu,	or terminated by tr	e organ	220000	during the tax		
4	· · ·	where property subject to	conservation ea	sement is located						
5		ion have a written policy								
-		proement of the conserve		-				Yes		
6		hours devoted to monit			nistion apparente	durina H			l No	
7	Amount of expense	as incurred in monitoring	inspecting, and	enforcing conservativ	n esements durin	adiaig d a the ve				
8	Does each conserv	ration easement reported	i on line 2(d) abo	ve satisfy the requirer	nents of section 17		al per go Ma	· · · · · · · · · · · · · · · · · · ·	_	
-		(4)(B)(ii)?						Yes		
9	In Part XIV. describ	e how the organization r	eports conservat	ion easements in its r	avanue and evoore					
-	include, if applicab	le, the text of the footnot	e to the organiza	tion's financial staten	ents that describes	the or	nonic, au	no balance sneet	, and	
	conservation easer					ale old	aucau	ans accounting i		
Pa	rt III   Organiza	tions Maintaining	Collections o	of Art, Historical	Treasures, or (	)ther §	Simila	r Assets		
		the organization answer								
18	If the organization	elected, as permitted un	der SFAS 116 (AS	SC 958), not to report	io its revenue state	ment an	d halar	nce sheet warks	of ort	
	historical treasures	, or other similar assets I	held for public ex	hibition, education, or	research in further	ance of	ublic d	anice provide i	in Cloret VIV	
	the text of the foot	note to its financial state	ments that descr	ibes these items.				101 106, provide, i	ILL BUNNA	
b		elected, as permitted un			s ravenue statemer	t and b	lance	sheet works of a	d historical	
	treasures, or other	similar assets held for pl	Iblic exhibition, e	ducation, or research	in furtherance of p	ublic ser	vice pr	nvide the following		
	relating to these ite								-9 windonts	
	(I) Revenues inclu	ded in Form 990, Part V	III, line 1				► \$			
	(II) Assets included	in Form 990, Part X					► s		·····	
2	If the organization i	eceived or held works of	art, historical tre	asures, or other simil	ar assets for financi	al gain. I	- + novide			
		nts required to be report								
8		in Form 990, Part VIII, In					2			
b	Assets included in i	Form 990, Part X					<b>b</b> s			
							- •			
1116	F		A1 1							

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 02051 12-20-10

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Schedule D (Form 990) 2010

14

2	JEFFERS	ON COUNTY	PUBLIC EDU	CATTON .			
Sch	equie D (rom 990) 2010 FOUNDAT	TON THC			61 14	001100	
Pa	art III   Organizations Maintaining C	ollections of A	vt. Historical T	reasures or Oti	har Cimilar Ana	021128	
3	Using the organization's acquisition, accessi	on, and other reco	ds. check any of the	following that are a	Displinent up of the	als icontinu	ied)
	(check all-that apply);			HONORALING CITEL SIG S	Significant Use of its	collection i	terns
а	Public exhibition		d Loan or av	change programs	,		
b	Scholarly research						
C	Preservation for future generations				2		
4	Provide a description of the organization's co	ections and exole	in how they further	the proprieties to an			
5	During the year, did the organization solicit o	receive donations	of art historical tra		empt purpose in Pa	rt XIV.	
-	<u>to be sold to raise funds rather than to be ma</u>	aintained as part of	the omenization's o	olioation 2		٦.,	<b>—</b>
Pa	reported an amount on Form 980. Per	gements. Com	lete if the omanization	The shared EVers		Yes	No
	reported an amount on Form 990, Par	t X, line 21.		nianowardu tes t	o Form 990, Part IV,	line 9, or	
1a	Is the organization an agent, trustee, custodi		diany for contribution	an other encode an	the shade of		
	on Form 990, Part X?			IS OF OTHER ASSAUSING		י הר	
b	If "Yes," explain the arrangement in Part XIV	and complete the f	nilowing table:		······ L	_ Yes	No
		utb t	energy represe				
C	Beginning balance					Amount	
d	Additions during the year		***************************************	***********************************	<u>1c</u>		
0	Distributions during the year	*******************************		***********	<u>1d</u>		
f	Enoing balance						
28	Did the organization include an amount on Fo	orm 990, Part X lin	s 919	********************************			<u> </u>
b	If "Yes," explain the arrangement in Part XIV.					Yes [	No
	rt V Endowment Funds. Complete i	the organization a	nswered "Yes" to Ec	mp 000 Dest IV line	10		
		(a) Current year	(b) Prior year				
1a	Beginning of year balance			ICI IWU YEBIS DECK	(d) Three years back	(e) Four ye	ars back
b	Contributions					<u> </u>	
c	Net investment earnings, gains, and losses					<u> </u>	
d	Grants or scholarships						
8	Other expenditures for facilities						×
	and programs						
f	Administrative expenses						
9	End of year balance						
2	Provide the estimated percentage of the year	and balance held	85.	1			
8	Board designated or quasi-endowment		*				
ь	Permanent endowment	%	_^				2
c	Term endowment	6					
<b>3</b> a	Are there endowment funds not in the posses	ssion of the organiz	zation that are held a	nd administered for	the omeniation		
	by:					Ye	ALC
	(i) unrelated organizations					20/11	ns No
	(II) related organizations					0-05	
b	in the reading, are the related organizations	usted as required	an Schedule H7	******	************************************	. <u>3a(II)</u>	
<u> </u>	Describe in Part XIV the intended uses of the	organization's end	owment funds.	***************************************	***************************************	. <b>3</b> b	
Pa	rt VI Land, Buildings, and Equipm	ent. See Form 99	0, Part X, line 10.				
	Description of investment	(a) Cost or i basis (invest			Counulated	(d) Book vi	atue
<b>1a</b>	Land					· · · · ·	
b	Buildings						
C	Leasehold improvements						
d							·
	Other						
Tota	L Add lines 1a through 1e. (Column (d) must eq	rual Form 990, Part	X, column (B). line 1	0(c).)			0.
							U.

Schedule D (Form 990) 2010

Schedule D (Form 990) 2010 FOTINT A TT ON	COUNTY PUBLIC			1001100
Part VII investments - Other Securities. S	ee Form 990, Part X, Jine 1	2	<u>6</u>	-1021128 Page 3
(a) Description of security or category			(c) Method of value	£:
(including name of security)	(b) Book value	Co	st or end-of-year mar	icion; iket value
(1) Financial derivatives				
(2) Closely-held equity interests				
(3) Other				
(A)				
(8)		1		
(C)				
(D)				
(E)			·····	
(F)				
(G)				6
(H)				
(1)				
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.)			22	
Part VIII Investments - Program Related. s	See Form 990, Part X, line	13.		
(a) Description of investment type			(c) Method of valua	tion
	(b) Book value	Co	st or end-of-year mar	
(1)				
(2)				
(3)	1			
(4)				
(5)				
(6)				
[7]	1	· · · · · · · · · · · · · · · · · · ·		
(8)				
(9)	1			
(10)				
Total, (Col (b) must equal Form 990, Part X, col (B) line 13.)				
Part IX Other Assets. See Form 990, Part X, line	9 15.			
	Description	·····		(b) Book value
(1)		17		
(2)				
(3)	2			
(4)				
(5)				
(6)				
(8)				
(9)				
(10)				
Tetal. (Column (b) must equal Form 990, Part X, col (B) lin	e 15.)			
Part X Other Liabilities. See Form 990, Part X.	, line 25.		2	
1. (a) Description of liability		(b) Amount		
(1) Federal income taxes				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(6)				
(9)				
(10)				
(11)				
Total. (Column (b) must equal Form 990, Part X, col (B) inn FIN 48 (ASC 740) rootinule. In Part XIV, provide the text of the lootinule t 2. Fix 48 (ASC 740)	e 25.)			
2. Fin 48 (ASC 740)	o no organization S Imancial stater	nents that reports the organi	zation's hability for uncertain	Lax positions unger

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00 a V	JEFFERSON COUNTY PUBLIC EDUCATION			
	dule D (Form 990) 2010 FOUNDATION, INC.		61-1	1021128 Page 4
Par	t XI   Reconciliation of Change in Net Assets from Form 990 to Audited Finance	ial Sta	tement	5
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1		1,370,886.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2		1,134,238.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3		236,648.
4	Net unrealized gains (losses) on investments	4		
5	Donated services and use of facilities	5		
6	Investment expenses	6		
7	Prior period adjustments	7		
6	Other (Describe in Part XIV.)	8	_	
9	Total adjustments (net). Add lines 4 through 8	9		0.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10		236 648.
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Reven			1
1	Total revenue, gains, and other support per audited financial statements		. 1	1,370,886.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
8	Net unrealized gains on investments			
b	Donated services and use of facilities			
C	Recoveries of prior year grants			
d	Other (Describe in Part XIV.) 2d			
е	Add lines 2a through 2d		20	0.
3	Subtract line 2e from line 1		3	1,370,886.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
8	Investment expenses not included on Form 990, Part VIII, line 7b			
Ь	Other (Describe in Part XIV.)			
C	Add lines 4a and 4b		4c	0.
5	Total revenue. Add lines 3 and 4c, (This must equal Form 990, Part I, line 12.)		5	1,370,886.
Pa	t XIII Reconciliation of Expenses per Audited Financial Statements With Expe	nses p	er Retu	Im
1	Total expenses and losses per audited financial statements		1	1,134,238.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
8	Donated services and use of facilities			
b	Prior year adjustments2b			
C	Other losses 2c			
d	Other (Describe in Part XIV.)2d			
e	Add lines 2a through 2d			0.
3	Subtract line 2e from line 1			1,134,238.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
	investment expenses not included on Form 990, Part VIII, line 7b			
	Other (Describe in Part XIV.)			
C	Add lines 4a and 4b		4c	0.
5	Total expenses. Add lines 3 and 4c, (This must equal Form 990, Part I, line 18.)			1,134,238.
Pa	rt XIV Supplemental Information			

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

SCHEDULE   (Form 990)		Government	d Other Assistanc s, and Individuals	in the United St	ates		OMB No. 1545-0047
Ucpartment of the Treasury Internal Revenue Service	· · · ·	lete if the organizatio	Attach to For	•	art IV, line 21 or 22.		Open to Public Inspection
FOUNDA	SON COUNTY P TION, INC.	UBLIC EDUCA	TION				Employer identification number 61-1021128
Part I General Information on Gr							
1 Does the organization maintain re- criteria used to award the grants of							
2 Describe in Part IV the organizatio	n's procedures for moni	toring the use of grant	funds in the Unite	d States.			
Part II Grants and Other Assistan							
recipient that received more					can be duplicated if (f) Method of		
1 (a) Name and address of organiza or government	ition (b) EIN	(c) IRC section If applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EFFERSON COUNTY PUBLIC SCHOOL	s					· · ·	
332 NEWBURG ROAD							TO FUND VARIOUS
DUIUSVILLE KY 40232	61-6001316	- 44	894,217,	0.	BOOK		BDUCATIONAL PROGRAMS
NIVERSITY OF KENTUCKY							
01 MAIN BUILDING						ļ	
EXINGTON, RY 405D6	61-6001218		16,500,	<u> </u>	BOOK		SCHOLARSHIPS
		· ·				· · ·	
							10 10
		· · · · ·					
				-		· · · · · · · · · · · · · · · · · · ·	·
							÷
2 Enter total number of section 501(	.)(3) and government or	anizations		(57.)			
Enter total number of other organiz	ations		•••••	*********		•••••••••••••••••••••••••••••••••••••••	

032101 01-13-11

61-1021128 FOUNDATION. INC. Schedule | (Form 990) (2010) Page 2 Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. Part III (e) Method of valuation (book, FMV, appraisal, other) (a) Type of grant or assistance (b) Number of (c) Amount of (d) Amount of non-(f) Description of non-cash assistance recipients cash assistance cash grant Part IV | Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

SCHEDULE I, PART I, LINE 2: THE BOARD APPROVES THE DISBURSEMENT OF FUNDS TO

VARIOUS PROGRAMS THE ORGANIZATION SUPPORTS.

032102 01-13-11

Schedule I (Form 990) (2010)

SCHEDULE O (Form 990 or 990-EZ) Department of the Treasury Internal Revenus Service	Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or 990-EZ.	OMB No. 1545-0047 2010 Open to Public Inspection
Name of the organization		ver identification number
	T VI, SECTION B, LINE 11: THE SECRETARY/TREASURER	
FORM 990, PAR UPON REQUEST.	T VI, SECTION C, LINE 19: THESE DOCUMENTS ARE MAI	DE AVAILABLE
PART XII, LIN	HAS NOT CHANGED FROM THE PRIOR YEAR.	
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31

Give Form to the requester. Do not send to the IRS.

	Name (as shown on your income tax return)			_						
	Jefferson County Public Education Foundation									
	Business name/disregarded entity name, if different from above									
D S										
page										
Ы	Check appropriate box for federal tax classification:									
	Individual/sole proprietor 🗹 C Corporation 🗌 S Corporation 🔲 Partnership 🗌 T	'r⊔st/estat	8							
Print or type Specific Instructions	Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partner	ship) 🕨							Ехетр	t payee
his l								-		
6 8	Other (see instructions) ►         Address (number, street, and apt. or suite no.)	53								14
eci.		Requeste	er's i	name	and ac	dress	(opti	onal)		
spi	3332 Newburg Road									
See	City, state, and ZIP code									
ŝ	Louisville, KY 40232									
	List account number(s) here (optional)									
Par	t I Taxpayer Identification Number (TIN)						_			
Enter	your TIN in the appropriate box. The TIN provided must match the name given on the the	16	Soc	ini ne	a hard a	numb	_			
LU AVU	no backup withholding, for individuals, this is your social security number (SEN). However, to	. 🔁	300	ABI SEC		nump	er			
reside	an allen, sole proprietor, or disregarded entity, see the Part Linstructions on page 2. For ether	ł			1_			_		
enune	es, it is your employer identification number (EIN). If you do not have a number, see How to get n page 3.	ta L								
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note. numb	If the account is in more than one name, see the chart on page 4 for guidelines on whose er to enter.	Ĺ	Emj	ployer	ident	ificatio	n nu	mber		
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	r penalties of perjury, I certify that:					2				
1. Th	e number shown on this form is my correct taxpayer identification number (or I am waiting for	a numbe	r to	he in	sued	to mo		~		
2. ia	m not subject to backup withholding because: (a) I am exempt from because withholding			10 13	2000	io me	), an	u		

- 2. Tam not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
- 3. I am a U.S. citizen or other U.S. person (defined below).

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have falled to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividences, you are not required to sign the certification, but you must provide your correct TIN. See the

instructio	ns on page 4.	1		- 1	V	1 6		1		
Sign Here	Signature of U.S. person ►	K	man		11	Unge-	Date	K12	Ŕ	12112
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#### **General Instructions**

Section references are to the Internal Revenue Code unless otherwise noted.

#### Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions; mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

 Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),

2. Certify that you are not subject to backup withholding, or

3. Claim exemption from backup withholding If you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income. Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or
- organized in the United States or under the laws of the United States, • An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

Cat. No. 10231X

#### Form W-9 (Rev. 12-2011)

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

. The U.S. owner of a disregarded entity and not the entity,

 The U.S. grantor or other owner of a grantor trust and not the trust, and

 The U.S. trust (other than a grantor trust) and not the beneficiaries of the trust.

Foreign person. If you are a foreign person, do not use Form W-9. Instead, use the appropriate Form W-8 (see Publication 515, Withholding of Tax on Nonresident Aliens and Foreign Entities).

Nonresident alien who becomes a resident alien. Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a "saving clause." Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the payee has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items:

1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.

2. The treaty article addressing the income.

3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.

4. The type and amount of income that qualifies for the exemption from tax.

5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

**Example.** Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if his or her stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student who qualifies for this exception (under paragraph 2 of the first protocol) and is relying on this exception to claim an exemption from tax on his or her scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity not subject to backup withholding, give the requester the appropriate completed Form W-8.

What is backup withholding? Persons making certain payments to you must under certain conditions withhold and pay to the IRS a percentage of such payments. This is called "backup withholding." Payments that may be subject to backup withholding include interest, tax-exempt interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive If you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

# Payments you receive will be subject to backup withholding if:

1. You do not furnish your TIN to the requester,

 You do not certify your TIN when required (see the Part II instructions on page 3 for details),

3. The IRS tells the requester that you furnished an incorrect TIN,

4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or

5. You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See the instructions below and the separate Instructions for the Requester of Form W-9.

Also see Special rules for partnerships on page 1.

#### Updating Your Information

You must provide updated information to any person to whom you claimed to be an exempt payee if you are no longer an exempt payee and anticipate receiving reportable payments in the future from this person. For example, you may need to provide updated information if you are a C corporation that elects to be an S corporation, or if you no longer are tax exempt. In addition, you must furnish a new Form W-9 if the name or TIN changes for the account, for example, if the grantor of a grantor trust dies.

#### Penalties

Failure to furnish TIN. If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

Civil penalty for false information with respect to withholding. If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

Criminal penalty for falsifying information. Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

Misuse of TINs. If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties.

#### Specific Instructions

#### Name .

If you are an individual, you must generally enter the name shown on your income tax return. However, if you have changed your last name, for instance, due to marriage without informing the Social Security Administration of the name change, enter your first name, the last name shown on your social security card, and your new last name.

If the account is in joint names, list first, and then circle, the name of the person or entity whose number you entered in Part I of the form.

Sole proprietor. Enter your individual name as shown on your income tax return on the "Name" line. You may enter your business, trade, or "doing business as (DBA)" name on the "Business name/disregarded rentity name" line.

Partnership, C Corporation, or S Corporation. Enter the entity's name on the "Name" line and any business, trade, or "doing business as (DBA) name" on the "Business name/disregarded entity name" line.

Disregarded entity. Enter the owner's name on the "Name" line. The name of the entity entered on the "Name" line should never be a disregarded entity. The name on the "Name" line must be the name shown on the income tax return on which the income will be reported. For example, if a foreign LLC that is treated as a disregarded entity for U.S. federal tax purposes has a domestic owner, the domestic owner's name is required to be provided on the "Name" line. If the direct owner of the entity is also a disregarded entity, enter the first owner that is not disregarded for federal tax purposes. Enter the disregarded entity's name on the "Business.name/disregarded entity name" line. If the owner of the disregarded entity is a foreign person, you must complete an appropriate Form W-8.

Note. Check the appropriate box for the federal tax classification of the person whose name is entered on the "Name" line (Individual/sole proprietor, Partnership, C Corporation, S Corporation, Trust/estate).

Limited Liability Company (LLC). If the person identified on the "Name" line is an LLC, check the "Limited liability company" box only and enter the appropriate code for the tax classification in the space provided. If you are an LLC that is treated as a partnership for federal tax purposes, enter "P" for partnership. If you are an LLC that has filed a Form 8832 or a Form 2553 to be taxed as a corporation, enter "C" for C corporation or "S" for S corporation. If you are an LLC that is disregarded as an entity separate from its owner under Regulation section 301.7701-3 (except for employment and excise tax), do not check the LLC box unless the owner of the LLC (required to be identified on the "Name" line) is another LLC that is not disregarded for federal tax purposes. If the LLC is disregarded as an entity separate from its owner, enter the appropriate tax classification of the owner identified on the "Name" line. Other entities. Enter your business name as shown on required federal tax documents on the "Name" line. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on the "Business name/ disregarded entity name" line.

#### Exempt Payee

If you are exempt from backup withholding, enter your name as described above and check the appropriate box for your status, then check the "Exempt payee" box in the line following the "Business name/ disregarded entity name," sign and date the form.

Generally, individuals (including sole proprietors) are not exempt from backup withholding. Corporations are exempt from backup withholding for certain payments, such as interest and dividends.

Note. If you are exempt from backup withholding, you should still complete this form to avoid possible erroneous backup withholding.

The following payees are exempt from backup withholding:

1. An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2),

2. The United States or any of its agencies or instrumentalities,

3. A state, the District of Columbia, a possession of the United States, or any of their political subdivisions or instrumentalities,

 A foreign government or any of its political subdivisions, agencies, or instrumentalities, or

5. An international organization or any of its agencies or instrumentalities.

Other payees that may be exempt from backup withholding include:

6. A corporation,

7. A foreign central bank of issue,

 A dealer in securities or commodilies required to register in the United States, the District of Columbia, or a possession of the United States,

9. A futures commission merchant registered with the Commodity Futures Trading Commission,

A real estate investment trust,

11. An entity registered at all times during the tax year under the investment Company Act of 1940,

12. A common trust fund operated by a bank under section 584(a),

13. A financial institution,

14. A middleman known in the investment community as a nominee or custodian, or

15. A trust exempt from tax under section 664 or described in section 4947.

The following chart shows types of payments that may be exempt from backup withholding. The chart applies to the exempt payees listed above, 1 through 15.

IF the payment is for	THEN the payment is exempt for
Interest and dividend payments	All exempt payees except for 9
Broker transactions	Exempt payees 1 through 5 and 7 through 13. Also, C corporations.
Barter exchange transactions and patronage dividends	Exempt payees 1 through 5
Payments over \$600 required to be reported and direct sales over \$5,000 <sup>1</sup>	Generally, exempt payees 1 through 7 <sup>2</sup>

See Form 1099-MISC, Miscellaneous Income, and its instructions.

<sup>2</sup> However, the following payments made to a corporation and reportable on Form 1099-MISC are not exempt from backup withholding: medical and health care payments, attorneys' fees, gross proceeds paid to an attorney, and payments for services paid by a federal executive agency. Part I. Taxpayer identification Number (TIN)

Enter your TIN in the appropriate box. If you are a resident alien and you do not have and are not eligible to get an SSN, your TIN is your IPS individual taxpayer identification number (ITIN). Enter it in the social security number box. If you do not have an ITIN, see *How to get a TIN* below.

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN. However, the IRS prefers that you use your SSN.

If you are a single-member LLC that is disregarded as an entity separate from its owner (see *Limited Liability Company (LLC)* on page 2), enter the owner's SSN (or EIN, if the owner has one). Do not enter the disregarded entity's EIN. If the LLC is classified as a corporation or partnership, enter the entity's EIN.

Note. See the chart on page 4 for further clarification of name and TIN combinations.

How to get a TIN. If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local Social Security Administration office or get this form online at *www.ssa.gov*. You may also get this form by calling 1-800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at *www.irs.gov/businesses* and clicking on Employer Identification Number (EIN) under Starting a Business. You can get Forms W-7 and SS-4 from the IRS by visiting IRS.gov or by calling 1-800-TAX-FORM (1-800-829-3676).

If you are asked to complete Form W-9 but do not have a TIN, write "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, generally you will have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

Note. Entering "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon.

**Caution:** A disregarded domestic entity that has a foreign owner must use the appropriate Form W-8.

#### Part II. Certification

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if item 1, below, and items 4 and 5 on page 4 indicate otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). In the case of a disregarded entity, the person identified on the "Name" line must sign. Exempt payees, see *Exempt Payee* on page 3.

Signature requirements. Complete the certification as indicated in items 1 through 3, below, and items 4 and 5 on page 4.

1. Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983. You must give your correct TIN, but you do not have to sign the certification.

2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983. You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.

3. Real estate transactions. You must sign the certification. You may cross out item 2 of the certification.

4. Other payments. You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).

5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions. You must give your correct TIN, but you do not have to sign the certification.

### What Name and Number To Give the Requester

For this type of account:	Give name and SSN of:
1. Individual 2. Two or more individuals (joint account)	The individual The actual owner of the account or, if combined funds, the first individual on the account '
<ol> <li>Custodian account of a minor (Uniform Gift to Minors Act)</li> </ol>	The minor <sup>2</sup>
<ol> <li>a. The usual revocable savings trust (grantor is also trustee)</li> <li>b. So-called trust account that is</li> </ol>	The grantor-trustee ' The actual owner '
not a legal or valid trust under state law	
<ol> <li>Sole proprietorship or disregarded entity owned by an individual</li> </ol>	The owner *
<ol> <li>Grantor trust filing under Optional Form 1099 Filing Method 1 (see Regulation section 1.671-4(b)(2)(l)(A))</li> </ol>	The grantor*
For this type of account:	Give name and EIN of:
<ol> <li>Disregarded entity not owned by an individual</li> </ol>	The owner.
8. A valid trust, estate, or pension trust	Legal entity *
<ol> <li>Corporation or LLC electing corporate status on Form 8832 or Form 2553</li> </ol>	The corporation
<ol> <li>Association, club, religious, charitable, educational, or other tax-exempt organization</li> </ol>	The organization
11. Partnership or multi-member LLC	The partnership
12. A broker or registered nominee	The broker or nominee
13. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity
<ol> <li>Grantor trust filing under the Form 1041 Filing Method or the Optional Form 1099 Filing Method 2 (see Regulation section 1.671-4(b)(2)(i)(E))</li> </ol>	The trust

List find and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

<sup>2</sup> Circle the minor's name and furnish the minor's SSN.

<sup>3</sup> You must show your individual name and you may also enter your business or "DBA" name on the "Business name/disregarded entity" name line. You may use either your SSN or EIN (if you have one), but the IRS encourages you to use your SSN.

<sup>4</sup> List first and circle the name of the trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.) Also see Special rules for partnerships on page 1.

\*Note. Grantor also must provide a Form W-9 to trustee of trust.

#### Privacy Act Notice

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons (including federal agencies) who are required to file information returns with the IRS to report interest, dividends, or certain other income paid to you; mortgage interest you paid; the acquisition or abandonment of secured property; the cancellation or electing the above information. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation and to cities, states, the District to enforce civil and criminal litigation and to cities, states, the District to enforce civil and criminal laws, or to federal and enterement and intelligence agencies to combat terrorism. You must provide your TIN whether or not you are required to the payer. Certain penalties may also apply for providing false or fraudulent information.

Par

Nots. If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

### Secure Your Tax Records from Identity Theft

identity theft occurs when someone uses your personal information such as your name, social security number (SSN), or other identifying information, without your permission, to commit fraud or other crimes. An identity thief may use your SSN to get a job or may file a tax return using your SSN to receive a refund.

To reduce your risk:

- Protect your SSN,
- Ensure your employer is protecting your SSN, and
- Be careful when choosing a tax preparer.

If your tax records are affected by identity theft and you receive a notice from the IRS, respond right away to the name and phone number printed on the IRS notice or letter.

If your tax records are not currently affected by identity theft but you think you are at risk due to a lost or stolen purse or wallet, questionable credit card activity or credit report, contact the IRS Identity Theft Hotine at 1-800-908-4490 or submit Form 14039.

For more information, see Publication 4535, Identity Theft Prevention and Victim Assistance.

Victims of identity theft who are experiencing economic harm or a system problem, or are seeking help in resolving tax problems that have not been resolved through normal channels, may be eligible for Taxpayer Advocate Service (TAS) assistance. You can reach TAS by calling the TAS toll-free case intake line at 1-877-777-4778 or TTY/TDD 1-800-829-4059.

Protect yourself from suspicious emails or phishing schemes. Phishing is the creation and use of email and websites designed to mimic legitimate business emails and websites. The most common act is sending an email to a user falsely claiming to be an established legitimate enterprise in an attempt to scarn the user into surrendering private information that will be used for identity theft.

The IRS does not initiate contacts with taxpayers via emails. Also, the IRS does not request personal detailed information through email or ask taxpayers for the PIN numbers, passwords, or similar secret access information for their credit card, bank, or other financial accounts.

If you receive an unsolicited email claiming to be from the IRS, forward this message to *phishing@irs.gov*. You may also report misuse of the IRS name, logo, or other IRS property to the Treasury Inspector General for Tax Administration at 1-800-366-4484. You can forward suspicious emails to the Federal Trade Commission at: *spam@uce.gov* or contact them at *www.ftc.gov/idtheft* or 1-877-IDTHEFT (1-877-438-4338).

Visit IRS.gov to learn more about identity theft and how to reduce your risk.