

0-351-19

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

Applicant/Program: Jefferson County Public Education Foundation-Southern High School
Applicant Requested Amount: \$6,000
Appropriation Request Amount: \$6,000

Executive Summary of Request
Beginning August, 2019 through June, 2020, contracted Counselors will be paid up to \$50 per hour for group and individual counseling. As students identify as needing mental health services through staff referrals, self-referrals and/or Youth Service Center interventions, they will be placed in the appropriate program or for individual counseling

Is this program/project a fundraiser? Yes No
Is this applicant a faith based organization? Yes No
Does this application include funding for sub-grantee(s)? Yes 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.

24 District # [Signature] Primary Sponsor Signature 6,000 Amount 10-7-19 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.

Approved by:

Appropriations Committee Chairman Date
Final Appropriations Amount: _____

Applicant/Program:

Jefferson County Public Education Foundation-Southern High School

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.

Council Member Signature and Amount

District 1	_____	\$ _____
District 2	_____	\$ _____
District 3	_____	\$ _____
District 4	_____	\$ _____
District 5	_____	\$ _____
District 6	_____	\$ _____
District 7	_____	\$ _____
District 8	_____	\$ _____
District 9	_____	\$ _____
District 10	_____	\$ _____
District 11	_____	\$ _____
District 12	_____	\$ _____
District 13	_____	\$ _____
District 14	_____	\$ _____
District 15	_____	\$ _____

Applicant/Program:

Jefferson County Public Education Foundation-Southern High School

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.

District 16 _____ \$ _____

District 17 _____ \$ _____

District 18 _____ \$ _____

District 19 _____ \$ _____

District 20 _____ \$ _____

District 21 _____ \$ _____

District 22 _____ \$ _____

District 23 _____ \$ _____

District 24 _____ \$ _____

District 25 _____ \$ _____

District 26 _____ \$ _____

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

Legal Name of Applicant Organization Jefferson County Public Education Foundation

Program Name and Request Amount Counseling Southern High School-\$6,000

	Yes/No/NA
Is the NDF Transmittal Sheet Signed by all Council Member(s) Appropriating Funding?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Is the funding proposed by Council Member(s) less than or equal to the request amount?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Is the proposed public purpose of the program viable and well-documented?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Will all of the funding go to programs specific to Louisville/Jefferson County?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Has Council or Staff relationship to the Agency been adequately disclosed on the cover sheet?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Has prior Metro Funds committed/granted been disclosed?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Is the application properly signed and dated by authorized signatory?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Is proof of Tax Exempt status of 501(c) 3, 4, 6, 19, 1120-H included?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
If Metro funding is for a separate taxing district is the funding appropriated for a program outside the legal responsibility of that taxing district?	N/A
Is the entity in good standing with: <ul style="list-style-type: none"> ▶ Kentucky Secretary of State? ▶ Louisville Metro Revenue Commission? ▶ Louisville Metro Government? ▶ Internal Revenue Service? ▶ Louisville Metro Human Relations Commission? 	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Is the current Fiscal Year Budget included?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Is the entity's board member list (with term length/term limits) included?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Is recommended funding less than 33% of total agency operating budget?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Does the application budget reflect only the revenue and expenses of the project/program?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Is the cost estimate(s) from proposed vendor (if request is for capital expense) included?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Is the most recent annual audit (if required by organization) included?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Is a copy of Signed Lease (if rent costs are requested) included?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Is the Supplemental Questionnaire for churches/religious organizations (if requesting organization is faith-based) included?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are the Articles of Incorporation of the Agency included?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Is the IRS Form W-9 included?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Is the IRS Form 990 included?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Are the evaluation forms (if program participants are given evaluation forms) included?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Affirmative Action/Equal Employment Opportunity plan and/or policy statement included (if required to do so)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA
Has the Agency agreed to participate in the BBB Charity review program? If so, has the applicant met the BBB Charity Review Standards?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA

Prepared by: Andrea Derouen

Date: September 30,

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 1 – APPLICANT INFORMATION

Legal Name of Applicant Organization: **Jefferson County Public Education Foundation**
(as listed on: <http://www.sos.ky.gov/business/records>)

Main Office Street & Mailing Address: **Vanhoose Education Center, 3332 Newburg Road, Louisville, KY 40218**

Website: <https://www.jefferson.kyschools.us/about/support/foundation/about>

Applicant Contact:	Abby Piper	Title:	Executive Administrator
Phone:	502.485.6501	Email:	abby.piper@jefferson.kyschools.us
Financial Contact:	Linda Miller	Title:	Coordinator Grants & Awards
Phone:	502.485.3734	Email:	linda.miller@jefferson.kyschools.us ⁴⁵

Organization's Representative who attended NDF Training: **Abby Piper**

GEOGRAPHICAL AREA(S) WHERE PROGRAM ACTIVITIES ARE (WILL BE) PROVIDED

Program Facility Location(s): **Southern High School, 8620 Preston Highway**

Council District(s): **24** Zip Code(s): **40219**

SECTION 2 – PROGRAM REQUEST & FINANCIAL INFORMATION

PROGRAM/PROJECT NAME: **Behavioral/Mental Health Services for students, grades 9-12**

Total Request: (\$) **6,000** Total Metro Award (this program) in previous year: (\$) **6,000**

- Purpose of Request (check all that apply):**
- Operating Funds (generally cannot exceed 33% of agency's total operating budget)
 - Programming/services/events for direct benefit to community or qualified individuals
 - Capital Project of the organization (equipment, furnishing, building, etc)

The Following are Required Attachments:

- | | |
|---|---|
| <ul style="list-style-type: none"> ■ IRS Exempt Status Determination Letter ■ Current year projected budget ■ Current financial statement ■ Most recent IRS Form 990 or 1120-H ■ Articles of Incorporation (current & signed) ■ Cost estimates from proposed vendor if request is for capital expense | <ul style="list-style-type: none"> Signed lease if rent costs are being requested ■ IRS Form W9 Evaluation forms if used in the proposed program Annual audit (if required by organization) Faith Based Organization Certification Form, if applicable |
|---|---|

For the current fiscal year ending June 30, list all funds appropriated and/or received from Louisville Metro Government for this or any other program or expense, including funds received through Metro Federal Grants, from any department or Metro Council Appropriation (Neighborhood Development Funds). Attach additional sheet if necessary.

Source:	Conway Middle School (NDF)	Amount: (\$)	5,000
Source:	Academic Services - Metro Gov.	Amount: (\$)	10,000
Source:		Amount: (\$)	

Has the applicant contacted the BBB Charity Review for participation? Yes No
 Has the applicant met the BBB Charity Review Standards? Yes No

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 3 – AGENCY DETAILS

Describe Agency's Vision, Mission and Services:

The Jefferson County Public Education Foundation (JCPEF) works to advance the education of the county's citizens by providing financial support for JCPS and its initiatives. The foundation was incorporated in 1983 as a nonprofit organization under IRS 502(c)(3). JCPEF is making this request on behalf of Jefferson County public Schools (JCPS) specifically for Southern High School.

Southern High School is applying for NDF funds to provide equitable access to mental health support and resources to to eliminate achievement, learning, and opportunity gaps for students. This directly aligns with the district's strategic plan, Vision 2020, and the primary purpose of the Youth Service Center, which is to address non-academic barriers students may have.

Southern High School Youth Services Center will be the bridge among families, school, and the community. Students and families will feel comfortable entering the center at any time and sharing personal information knowing that what they say will be kept strictly confidential. The center will address the physical, social, and educational needs of the community, providing opportunities for academic enrichment, social, and recreational activities, and access to other human service providers. Center personnel will maintain active and cooperative relationships with students and their families, community representative, and school personnel.

The Youth Services Center provides a variety of services to assist students and their families. Since July 2018, the Center has provided a service/contact/intervention for over 480 students. Among these services, we provided over 980 mental health interventions (plus group programs), but also over 300 interventions for basic needs, over 80 for health issues, over 160 for academic support, and over 120 for attendance issues. In addition to the individual contacts, the YSC has attempted to reach more students by providing groups, workshops, and programs for self-esteem/better choices, truancy diversion, drug/alcohol education, grief, health, community projects, and leadership.

The YSC coordinator facilitated anti-drug/cyber bullying programs which included guest programs and the interactive play "Choices" by Looking for Lilith, which included accompanying workshops to reinforce the importance of taking a stance of being anti-bullying and anti-drug seriously, and assemblies Your Life Speaks presentations which addressed making choices, drug/alcohol abuse, bullying, and suicide.

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 4 - BOARD OF DIRECTORS AND PAID STAFF

Board Member	Term End Date
Franklin Jelsma, Chair	December 31, 2021
James Allen, Immediate Past Chair	December 31, 2021
Lynn Huether, Secretary/Treasurer	December 31, 2021
Robert Arnold	December 31, 2019
Vik Chadha	December 31, 2019
Al Cornish	December 31, 2021
Dr. Alex Gerassimides	December 31, 2019
Audwin Helton	December 31, 2019
Henry Heuser, Jr.	December 31, 2021
Kevin Joynt	December 31, 2019
Elizabeth Mays	December 31, 2020
Mitch Rue	December 31, 2021
Ken Selvaggi	December 31, 2019
Mark Shirkness	December 31, 2020
Kevin Shurn, Meredith Erickson, Jeff Uligian	December 31, 2020
Carl Thomas, Carol Timmons	December 31, 2019
Malcolm B. Chancey, Jr. (Emeritus)	

Describe the Board term limit policy:
 No term limits.

Three Highest Paid Staff Names	Annual Salary
No paid staff	

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 5 – PROGRAM/PROJECT NARRATIVE

A: 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 flyers, planning minutes, designs, event permits, proposals for services/goods, etc.):

Beginning in August 2019 through June 2020, contracted counselors will be paid up to \$50.00 per hour for group and individual counseling. As students are identified as needing mental health services through staff referrals, self-referrals, and/or YSC interventions, they will be placed in the appropriate program or for individual counseling.

As of April 2019, the Youth Services Center (YSC) provided over 980 mental health interventions/contacts for the students and families of Southern High for school year 2018-2019. The YSC facilitated crisis evaluations for over 40 students needing an immediate response to their situation. The need for counseling for our students has increased over the years, and for many students, the YSC is their only resource for help. The number of students on free or reduced lunch is 75% of our student population.

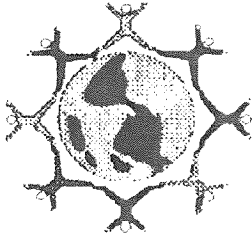
Southern High School sends out a mailing of school information at the beginning of the school year to all incoming students, and the YSC includes a letter of services and programs offered. In addition, the YSC coordinator speaks at school orientations to give parents information about programs and services. The coordinator is available during open house to meet with parents and students to assist with referrals. The coordinator meets with students as referred, or by student walk-ins to assess needs for mental health interventions.



B: Describe specifically how the funding will be spent including identification of funding to sub grantee(s):

Counselors/therapists will be paid up to \$50.00 per hour for individual or group counseling services. The YSC will contract with Jacqueline Spaulding, LCSW, to provide individual counseling.

NDF funding will cover about 120 hours of individual or group counseling.



Jacqueline Spaulding, LCSW

*Consider that we each have a common need for love,
respect, home, and community*

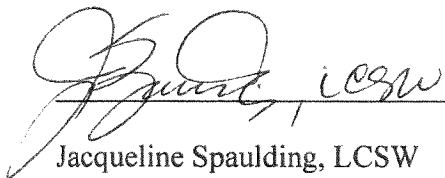
P.O. Box 9152
Louisville, Kentucky 40209
(502) 741-3980
E-mail jspauld865@aol.com

Southern High School
Youth Services Center
8620 Preston Highway
Louisville, KY 40219

Oct 9, 2019

Cost estimate for counseling services for Southern High School students for the 2019-2020 school year.

120 hours of counseling services at \$50.00 per hour for a total of \$6000.00



Jacqueline Spaulding, LCSW

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

C: If this request is a fundraiser, please detail how the proceeds will be spent:

The request is not a fundraiser.

D: For Expenditure Reimbursement Only – The grant award period begins with the Metro Council approval date and ends on June 30 of Metro fiscal year in which the grant is approved. If any part of this funding request is for funds to be spent before the grant award period, identify the applicable circumstances:

- The funding request is a reimbursement of the following expenditures that will probably be incurred after the application date, but prior to the execution of the grant agreement:

- If selecting this option, the invoice, receipt and payment documentation should not be available as of the date of this application.

The Grantee will be required to submit financial reporting in accordance with the reporting schedule provided in the grant agreement.

Since the Metro Council approval date is usually finalized after we need to begin our counseling services, the Youth Services Center would like to begin the programs immediately and pay for the services, and then be reimbursed from the grant funds once approved. Invoices and documentation will be provided.

Reimbursements should not be made before application date unless an emergency can be demonstrated by the primary council sponsor. The funding request is a reimbursement of the following expenditures (attach invoices or proof of payment):

- Attach a copy of invoices and/or receipts to provide proof of purchase of activities associated with the work plan identified in this application.
- 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.

Since the Metro Council approval date is usually finalized after we need to begin our counseling services, the Youth Services Center would like to begin immediately and pay for the services and then be reimbursed from the grant funds once approved. Invoices and documentation will be provided.

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

E: 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:

The YSC will use the funds to contract counselors who will come to Southern High School to provide student mental health services. By providing counseling - Self-Esteem and better choices, Substance Abuse, Health Groups, Grief workshops, and Individual Counseling - for our students and their families, we will be able to give them a more stable environment, promote positive choices, and healthy choices. With the tools and skills to make better choices, their self-esteem will improve, helping them to improve academically, have better attendance, and obtain better jobs in the future.

This will help in keeping them off the streets acting with negative behaviors and keep them together as a family to have more pride in themselves and the community, keeping them off drugs and alcohol, decreasing negative consequences, crime, and even death. We will provide an in-depth self-esteem program that will address goals, leadership, wise choices, and community service to provide students the opportunity to develop and practice what they learn to enable them to be productive citizens.

Students will be given post program evaluations to determine the effectiveness of the counselor and programs. Sign-in logs and attendance sheets track student participation. Teachers and staff provide feedback about positive changes in students behavior. Results would be determined from follow-up through the school-age years and graduations rates as measured by Integrated Student Data.

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/project specifically.

The YSC Coordinator collaborates with Hope Collaborative to provide an in-school mentoring program for SHS students which supports Vision 2020 goals. This program will provide students with additional help and the opportunity to develop meaningful relationships with caring adults.

The coordinator is also collaborating with the Kentucky Derby Museum Visitor Services, Director Teaira McQuarter to provide adult mentors for students who need support and encouragement. This program will help struggling students and also to equip them with skills pertaining to their interest in hospitality related careers. Collaboration with LMFJ for students interested in careers as a firefighter.

The YSC coordinator is collaborating the the National Center for Families and Learning to provide an Arts and Music Festival for District 5 in Louisville to build community relationships and equip parents/students with information and resources in the field of Arts and Music.

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 6 – PROGRAM/PROJECT BUDGET SUMMARY

THE PROGRAM/PROJECT BUDGET SHOULD REALISTICALLY ESTIMATE WHAT AMOUNT IS NEEDED FROM METRO GOVERNMENT AND WHAT IS EXPECTED FROM OTHER SOURCES.

Program/Project Expenses	Column 1	Column 2	Column (1+2)=3
	Proposed Metro Funds	Non-Metro Funds	Total Funds
A: Personnel Costs Including Benefits			
B: Rent/Utilities			
C: Office Supplies			
D: Telephone			
E: In-town Travel			
F: Client Assistance (See Detailed List on Page 8)			
G: Professional Service Contracts	6000	4000	10000
H: Program Materials			
I: Community Events & Festivals (See Detailed List on Page 8)			
J: Machinery & Equipment			
K: Capital Project			
L: Other Expenses (See Detailed List on Page 8)			
*TOTAL PROGRAM/PROJECT FUNDS	6000	4000	10000
% of Program Budget	60 %	40 %	100%

List funding sources for total program/project costs in Column 2, Non-Metro Funds:

Other State, Federal or Local Government	4000
United Way	
Private Contributions (do not include individual donor names)	
Fees Collected from Program Participants	
Other (please specify)	
Total Revenue for Column 2 Expenses: **	4,000

*Total of Column 1 MUST match "Total Request on Page 1, Section 2"

**Must equal or exceed total in column 2.

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

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
N/A		
<p align="center"><i>Total Value of In-Kind</i> (to match Program Budget Line Item. Volunteer Contribution & Other In Kind)</p>		

*** 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**

Agency Fiscal Year Start Date: July 1, 2019

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:

LOUISVILLE METRO COUNCIL NEIGHBORHOOD DEVELOPMENT FUND APPLICATION

SECTION 7 – CERTIFICATIONS & ASSURANCES

By signing Section 7 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.
2. 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. Applicant understands failure to provide the services, programs, or projects included in the agreement will result in funds being withheld or requested to be returned if previously disbursed.
7. Applicant understands they must return to Louisville Metro any unexpended funds by July 31 following the Metro Louisville's fiscal year end
8. Applicant understands they must 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.
11. **Applicant understands if the grant agreement is not returned to Louisville Metro within 90 days of its mailing to the applicant, the approval is automatically revoked and the funds will not be disbursed to our organization.**

Standard Certifications

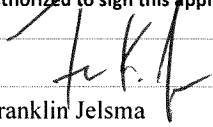
1. The Agency certifies it will not use Louisville Metro Government funds for any religious, political or fraternal Activities.
2. The Agency has a written Affirmative Action/Equal Opportunity Policy.
3. The Agency does not discriminate in employment or in provision of any service/program/activity/event 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.

Dr. Alex Gerassimides is the spouse of Louisville Mayor Greg Fisher.

SECTION 8 – CERTIFICATIONS & ASSURANCES

I certify under the penalty of law the information in this application (including, without limitation, "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 and have initialed each page of the application.

Signature of Legal Signatory:		Date:	9/24/19
Legal Signatory: (please print):	Franklin Jelsma	Title:	JCEPF Chair
Phone:	502.485.6501	Extension:	
Email:	abby.piper@jefferson.kyschools.us		

IRS Determination Letter

Internal Revenue Service
District Director

Department of the Treasury

Date:

JUL 19 1983

Employer Identification Number:
61-1021128

Accounting Period Ending:
June 30

Form 990 Required: Yes No

Jefferson County Public Education
Foundation, Inc.
416 West Jefferson
Louisville, KY 40202

Person to Contact:
Marilyn Miller
Contact Telephone Number:
(513) 684-3578

Dear Applicant:

Based on information supplied, and assuming your operations will be as stated in your application for recognition of exemption, we have determined you are exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code.

We have further determined that you are not a private foundation within the meaning of section 509(a) of the Code, because you are an organization described in section 509(a)(3).

If your sources of support, or your purposes, character, or method of operation change, please let us know so we can consider the effect of the change on your exempt status and foundation status. Also, you should inform us of all changes in your name or address.

Generally, you are not liable for social security (FICA) taxes unless you file a waiver of exemption certificate as provided in the Federal Insurance Contributions Act. If you have paid FICA taxes without filing the waiver, you should contact us. You are not liable for the tax imposed under the Federal Unemployment Tax Act (FUTA).

Since you are not a private foundation, you are not subject to the excise taxes under Chapter 42 of the Code. However, you are not automatically exempt from other Federal excise taxes. If you have any questions about excise, employment, or other Federal taxes, please let us know.

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.

The box checked in the heading of this letter shows whether you must file Form 990, Return of Organization Exempt from Income tax. If Yes is checked, you are required to file Form 990 only if your gross receipts each year are normally more than \$10,000. If a return is required, it must be filed by the 15th day of the fifth month after the end of your annual accounting period. The law imposes a penalty of \$10 a day, up to a maximum of \$5,000, when a return is filed late, unless there is reasonable cause for the delay.

You are not required to file Federal income tax returns unless you are subject to the tax on unrelated business income under section 511 of the Code. If you are subject to this tax, you must file an income tax return on Form 990-T. In this letter, we are not determining whether any of your present or proposed activities are unrelated trade or business as defined in section 513 of the Code.

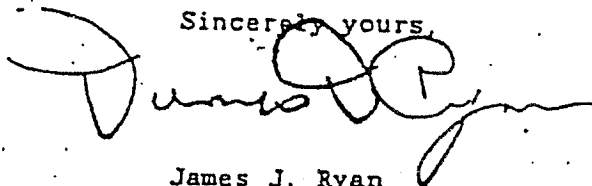
You need an employer identification number even if you have no employees.

If an employer identification number was not entered on your application, a number will be assigned to you and you will be advised of it. Please use that number on all returns you file and in all correspondence with the Internal Revenue Service.

Because this letter could help resolve any questions about your exempt status and foundation status, you should keep it in your permanent records.

If you have any questions, please contact the person whose name and telephone number are shown in the heading of this letter.

Sincerely yours,




James J. Ryan
District Director

This supersedes our letter of July 1, 1983 in which we classified your non-private foundation status under section 509(a)(1) and 170(b)(1)(A)(vi).


For tax years ending on or after December 31, 1982, you are required to file Form 990 only if your gross receipts each year are normally more than \$25,000, instead of \$10,000 as indicated above.

Beginning January 1, 1984, unless specifically excepted, you must pay taxes under the Federal Insurance Contributions Act (social security taxes) for each employee who is paid \$100 or more in a calendar year.

cc: G. Alexander Hamilton
Wyatt, Tarrant & Combs
Citizens Plaza
Louisville, KY 40202

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

In reply refer to: 0248164841
June 14, 2011 LTR 4168C E0
61-1021128 000000 00
00015796
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: 1-877-829-5530

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.

Our 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)(1) and 170(b)(1)(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.

0248164841
June 14, 2011 LTR 4168C E0
61-1021128 000000 00
00015797

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

If you have any questions, please call us at the telephone number shown in the heading of this letter.

Sincerely yours,



S. A. Martin, Operations Manager
Accounts Management Operations

Current Year Projected Budget

Jefferson County Public Education Foundation
FY 2020 Tentative Operating Budget

Revenue

Corporate Total	\$50,000
Foundation Total	\$500,000
Government Total	\$85,000
Individual Total	\$25,000
Investment Income	\$19,000
	\$679,000

Expenses

Early Literacy Efforts	\$40,000
Educational Programs/School-Based Support	\$474,000
New Initiatives	\$25,000
Operating Expenses	\$25,000
Student Scholarships	\$85,000
Teacher Recognition Programs	\$30,000
	\$679,000

Current Financial Statement*

*Please see Annual Audit attachment. This is the most recent financial statement available.

Most Recent IRS Form 990

Form **8879-EO**

IRS e-file Signature Authorization for an Exempt Organization

OMB No. 1545-1878

For calendar year 2017, or fiscal year beginning JUL 1, 2017, and ending JUN 30, 2018

2017

Department of the Treasury
Internal Revenue Service

▶ Do not send to the IRS. Keep for your records.
▶ Go to www.irs.gov/Form8879EO for the latest information.

Name of exempt organization

**JEFFERSON COUNTY PUBLIC EDUCATION
FOUNDATION, INC.**

Employer identification number

-***

Name and title of officer

**LYNN HUETHER
SECRETARY/TREASURER**

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than 1 line in Part I.

1a	Form 990 check here	▶ <input checked="" type="checkbox"/>	b	Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b	<u>990,433.</u>
2a	Form 990-EZ check here	▶ <input type="checkbox"/>	b	Total revenue, if any (Form 990-EZ, line 9)	2b	
3a	Form 1120-POL check here	▶ <input type="checkbox"/>	b	Total tax (Form 1120-POL, line 22)	3b	
4a	Form 990-PF check here	▶ <input type="checkbox"/>	b	Tax based on investment income (Form 990-PF, Part VI, line 5)	4b	
5a	Form 8868 check here	▶ <input type="checkbox"/>	b	Balance Due (Form 8868, line 3c)	5b	

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2017 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

I authorize MONROE SHINE & CO., INC. CPA'S to enter my PIN 21128
ERO firm name Enter five numbers, but do not enter all zeros

as my signature on the organization's tax year 2017 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2017 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature ▶ _____ Date ▶ _____

Part III Certification and Authentication

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

35590152311
Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2017 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature ▶ MONROE SHINE & CO., INC. CPA'S Date ▶ _____

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

EXTENDED TO MAY 15, 2019

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Form **990**

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

2017
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Do not enter social security numbers on this form as it may be made public.

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

A For the 2017 calendar year, or tax year beginning **JUL 1, 2017** and ending **JUN 30, 2018**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization JEFFERSON COUNTY PUBLIC EDUCATION FOUNDATION, INC.		D Employer identification number ** - *****
	Doing business as		E Telephone number 502-212-3112
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite P.O. BOX 35368	G Gross receipts \$ 1,047,744.	
	City or town, state or province, country, and ZIP or foreign postal code LOUISVILLE, KY 40202		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) H(c) Group exemption number ▶
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
J Website: ▶ N/A			
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 1983 M State of legal domicile: KY	

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: SUPPORT OF JEFFERSON COUNTY, KENTUCKY PUBLIC SCHOOLS	
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.	
	3 Number of voting members of the governing body (Part VI, line 1a)	3 25
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4 25
	5 Total number of individuals employed in calendar year 2017 (Part V, line 2a)	5 0
	6 Total number of volunteers (estimate if necessary)	6 0
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a 0.
b Net unrelated business taxable income from Form 990-T, line 34	7b 0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year: 3,461,275. Current Year: 969,691.
	9 Program service revenue (Part VIII, line 2g)	0. 0.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	275. 20,742.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0. 0.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,461,550. 990,433.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	1,317,235. 1,771,688.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0. 0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0. 0.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0. 0.
	b Total fundraising expenses (Part IX, column (D), line 25)	45,396.
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	190,033. 135,895.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,507,268. 1,907,583.
19 Revenue less expenses. Subtract line 18 from line 12	1,954,282. -917,150.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year: 3,168,836. End of Year: 2,284,936.
	21 Total liabilities (Part X, line 26)	0. 0.
	22 Net assets or fund balances. Subtract line 21 from line 20	3,168,836. 2,284,936.

Part II Signature Block

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

Sign Here	Signature of officer		Date
	LYNN HUETHER, SECRETARY/TREASURER Type or print name and title		
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date
	JEREMY M FINN, CPA Firm's name ▶ MONROE SHINE & CO., INC. CPA'S Firm's address ▶ PO BOX 22039 LOUISVILLE, KY 40252-9804	Check if self-employed <input type="checkbox"/> PTIN P00814819 Firm's EIN ▶ ** - ***** Phone no. 502-423-0311	

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

JEFFERSON COUNTY PUBLIC EDUCATION
FOUNDATION, INC.

Form 990 (2017)

_*** Page 2

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line 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? Yes No

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

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

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

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: _____) (Expenses \$ 1,817,084. including grants of \$ 1,771,688.) (Revenue \$ _____)
GRANTS AND ALLOCATIONS TO THE JEFFERSON COUNTY PUBLIC SCHOOL SYSTEM IN 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 \$ _____)

4d Other program services (Describe in Schedule O.)

(Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

4e Total program service expenses **▶ 1,817,084.**

**JEFFERSON COUNTY PUBLIC EDUCATION
FOUNDATION, INC.**

Form 990 (2017)

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Page **3**

Part IV Checklist of Required Schedules

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

Form **990** (2017)

**JEFFERSON COUNTY PUBLIC EDUCATION
FOUNDATION, INC.**

Form 990 (2017)

* * - * * * * * * *

Part IV Checklist of Required Schedules (continued)

		Yes	No
20a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b	<i>If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?</i>		
20b			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
24b			
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
24c			
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
24d			
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
25b			X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
28a			X
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
28b			X
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		X
28c			X
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
30			X
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
31			X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
32			X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
33			X
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		X
34			X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
35a			X
b	<i>If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2</i>		
35b			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
36			X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
37			X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		
38		X	

Note. All Form 990 filers are required to complete Schedule O

**JEFFERSON COUNTY PUBLIC EDUCATION
FOUNDATION, INC.**

Form 990 (2017)

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Part V **Statements Regarding Other IRS Filings and Tax Compliance**

Check if Schedule O contains a response or note to any line in this Part V

			Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	0		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?				
			1c	
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	0		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			2b	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?				X
b If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, 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 authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?				X
b If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?				X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?				X
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c	
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?				X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			6b	
7 Organizations that may receive deductible contributions under section 170(c).				
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?				X
b If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?				X
d If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e	
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f	
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			7g	
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			7h	
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?			8	
9 Sponsoring organizations maintaining donor advised funds.				
a Did the sponsoring organization make any taxable distributions under section 4966?			9a	
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b	
10 Section 501(c)(7) organizations. Enter:				
a Initiation fees and capital contributions included on Part VIII, line 12	10a			
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11 Section 501(c)(12) organizations. Enter:				
a Gross income from members or shareholders	11a			
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b			
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?			12a	
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13 Section 501(c)(29) qualified nonprofit health insurance issuers.				
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.			13a	
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c Enter the amount of reserves on hand	13c			
14a Did the organization receive any payments for indoor tanning services during the tax year?				X
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O			14b	

**JEFFERSON COUNTY PUBLIC EDUCATION
FOUNDATION, INC.**

Form 990 (2017)

** - * * * * * Page **6**

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

Check if Schedule O contains a response or note to any line in this Part VI

Section A. Governing Body and Management

			Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year	1a	25		
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.				
b Enter the number of voting members included in line 1a, above, who are independent	1b	25		
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
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3			X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4			X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5			X
6 Did the organization have members or stockholders?	6			X
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a			X
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b			X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a The governing body?	8a		X	
b Each committee with authority to act on behalf of the governing body?	8b		X	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9			X

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

			Yes	No
10a Did the organization have local chapters, branches, or affiliates?	10a			X
b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b			
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a			X
b Describe in Schedule O the process, if any, used by the organization to review this Form 990.				
12a Did the organization have a written conflict of interest policy? If "No," go to line 13	12a			X
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b			
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c			
13 Did the organization have a written whistleblower policy?	13			X
14 Did the organization have a written document retention and destruction policy?	14			X
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				
a The organization's CEO, Executive Director, or top management official	15a			X
b Other officers or key employees of the organization	15b			X
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," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b			

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed ▶ **NONE**
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain in Schedule O)
- 19** Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records: ▶
LYNN HUETHER, TREASURER - 502-212-3112
3620 FERN VALLEY ROAD, LOUISVILLE, KY 40219

**JEFFERSON COUNTY PUBLIC EDUCATION
FOUNDATION, INC.**

Form 990 (2017)

-***

Page 7

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

Check if Schedule O contains a response or note to any line in this Part VII

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) JAMES R ALLEN CHAIRMAN	1.00	X		X				0.	0.	0.
(2) FRANKLIN JELSMAN VICE CHAIRMAN	1.00	X		X				0.	0.	0.
(3) JOSEPH SEILER MEMBER	1.00	X						0.	0.	0.
(4) AUDWIN HELTON MEMBER	1.00	X						0.	0.	0.
(5) HENRY HEUSER JR MEMBER	1.00	X						0.	0.	0.
(6) MARK SHIRKNESS MEMBER	1.00	X						0.	0.	0.
(7) KEVIN SHURN MEMBER	1.00	X						0.	0.	0.
(8) JEFF ULIGIAN MEMBER	1.00	X						0.	0.	0.
(9) AL CORNISH MEMBER	1.00	X						0.	0.	0.
(10) LYNN HUETHER TREASURER	3.00	X		X				0.	0.	0.
(11) KEN SELVAGGI MEMBER	1.00	X						0.	0.	0.
(12) MALCOLM B. CHANCEY JR. MEMBER	1.00	X						0.	0.	0.
(13) ROBERT J. ARNOLD MEMBER	1.00	X						0.	0.	0.
(14) VIK CHADHA MEMBER	1.00	X						0.	0.	0.
(15) DR. ALEX GERASSIMIDES, MD MEMBER	1.00	X						0.	0.	0.
(16) KEVIN JOYNT MEMBER	1.00	X						0.	0.	0.
(17) MITCH RUE MEMBER	1.00	X						0.	0.	0.

**JEFFERSON COUNTY PUBLIC EDUCATION
FOUNDATION, INC.**

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) CAROL TIMMONS MEMBER	1.00	X						0.	0.	0.
(19) JANNIE BROUSSARD MEMBER	1.00	X						0.	0.	0.
(20) MEREDITH ERICKSON MEMBER	1.00	X						0.	0.	0.
(21) CARL THOMAS MEMBER	1.00	X						0.	0.	0.
(22) ELIZABETH MAYS MEMBER	1.00	X						0.	0.	0.
(23) SAM CORBETT EXECUTIVE DIRECTOR	40.00		X					0.	0.	0.
1b Sub-total								0.	0.	0.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								0.	0.	0.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **0**

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

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
NONE		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **0**

**JEFFERSON COUNTY PUBLIC EDUCATION
FOUNDATION, INC.**

Form 990 (2017)

_*** Page 9

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	969,691.				
	g Noncash contributions included in lines 1a-1f: \$						
	h Total. Add lines 1a-1f			969,691.			
Program Service Revenue	2 a _____ Business Code						
	b _____						
	c _____						
	d _____						
	e _____						
	f All other program service revenue						
	g Total. Add lines 2a-2f						
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			19,227.			19,227.
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	(i) Real	(ii) Personal				
		b Less: rental expenses					
		c Rental income or (loss)					
		d Net rental income or (loss)					
	7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		b Less: cost or other basis and sales expenses					
		c Gain or (loss)					
		d Net gain or (loss)			1,515.		1,515.
	8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a					
	b Less: direct expenses	b					
	c Net income or (loss) from fundraising events						
	9 a Gross income from gaming activities. See Part IV, line 19	a					
b Less: direct expenses	b						
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances	a						
b Less: cost of goods sold	b						
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue			Business Code				
11 a _____							
b _____							
c _____							
d All other revenue							
e Total. Add lines 11a-11d							
12 Total revenue. See instructions.				990,433.	0.	0.	20,742.

**JEFFERSON COUNTY PUBLIC EDUCATION
FOUNDATION, INC.**

Form 990 (2017)

-*** Page 10

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	1,771,688.	1,771,688.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above, to disqualified persons (as defined under section 4958(1)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages				
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees):				
a Management	113,490.	45,396.	22,698.	45,396.
b Legal				
c Accounting	6,685.		6,685.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	9,548.		9,548.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)				
12 Advertising and promotion				
13 Office expenses	4,250.		4,250.	
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	1,922.		1,922.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a _____				
b _____				
c _____				
d _____				
e All other expenses _____				
25 Total functional expenses. Add lines 1 through 24e	1,907,583.	1,817,084.	45,103.	45,396.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here if following SOP 98-2 (ASC 958-720)

**JEFFERSON COUNTY PUBLIC EDUCATION
FOUNDATION, INC.**

Form 990 (2017)

-*** Page 11

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing		1	
	2 Savings and temporary cash investments	3,168,836.	2	972,861.
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net		4	
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a		
	b Less: accumulated depreciation	10b	10c	
	11 Investments - publicly traded securities		11	1,312,075.
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 34)		3,168,836.	16	2,284,936.
Liabilities	17 Accounts payable and accrued expenses		17	
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25		0.	26
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	111,984.	27	53,380.
	28 Temporarily restricted net assets	1,988,347.	28	1,119,020.
	29 Permanently restricted net assets	1,068,505.	29	1,112,536.
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	3,168,836.	33	2,284,936.	
34 Total liabilities and net assets/fund balances	3,168,836.	34	2,284,936.	

Form 990 (2017)

**JEFFERSON COUNTY PUBLIC EDUCATION
FOUNDATION, INC.**

Form 990 (2017)

-*** Page 12

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	990,433.
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,907,583.
3	Revenue less expenses. Subtract line 2 from line 1	3	-917,150.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3,168,836.
5	Net unrealized gains (losses) on investments	5	33,250.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	2,284,936.

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII

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

Form 990 (2017)

JEFFERSON COUNTY PUBLIC EDUCATION

Schedule A (Form 990 or 990-EZ) 2017 **FOUNDATION, INC.**

-*** Page 2

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	870,698.	1073124.	847,608.	3461275.	969,691.	7222396.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	870,698.	1073124.	847,608.	3461275.	969,691.	7222396.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						3664400.
6 Public support. Subtract line 5 from line 4.						3557996.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
7 Amounts from line 4	870,698.	1073124.	847,608.	3461275.	969,691.	7222396.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	163.	142.	136.	275.	20,742.	21,458.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						7243854.
12 Gross receipts from related activities, etc. (see instructions)				12		
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f))	14	49.12	%
15 Public support percentage from 2016 Schedule A, Part II, line 14	15	51.47	%
16a 33 1/3% support test - 2017. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			<input checked="" type="checkbox"/>
b 33 1/3% support test - 2016. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2017. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2016. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions			<input type="checkbox"/>

Schedule A (Form 990 or 990-EZ) 2017

JEFFERSON COUNTY PUBLIC EDUCATION

Schedule A (Form 990 or 990-EZ) 2017 **FOUNDATION, INC.**

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
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, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2016 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2016 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2017. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2016. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

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

JEFFERSON COUNTY PUBLIC EDUCATION

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

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

JEFFERSON COUNTY PUBLIC EDUCATION

Part IV Supporting Organizations *(continued)*

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

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.</i>		

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
a <input type="checkbox"/> The organization satisfied the Activities Test. <i>Complete line 2 below.</i>		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>		
c <input type="checkbox"/> The organization supported a governmental entity. <i>Describe in Part VI how you supported a government entity (see instructions).</i>		
2 Activities Test. Answer (a) and (b) below.		
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>		
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
3 Parent of Supported Organizations. Answer (a) and (b) below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

JEFFERSON COUNTY PUBLIC EDUCATION

Schedule A (Form 990 or 990-EZ) 2017 **FOUNDATION, INC.**

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations *(continued)*

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2017 from Section C, line 6	
10 Line 8 amount divided by line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1 Distributable amount for 2017 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required- explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2017			
a			
b From 2013			
c From 2014			
d From 2015			
e From 2016			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2017 distributable amount			
i Carryover from 2012 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2017 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2017 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2017, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2017. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2018. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2013			
b Excess from 2014			
c Excess from 2015			
d Excess from 2016			
e Excess from 2017			

Schedule A (Form 990 or 990-EZ) 2017

JEFFERSON COUNTY PUBLIC EDUCATION

Schedule A (Form 990 or 990-EZ) 2017 **FOUNDATION, INC.**

** - * * * * * Page 6

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI.) See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	

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

Schedule A (Form 990 or 990-EZ) 2017

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2017

Name of the organization

JEFFERSON COUNTY PUBLIC EDUCATION
FOUNDATION, INC.

Employer identification number

-***

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

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

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

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

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

501(c)(3) taxable private foundation

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

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

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

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

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 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 its Form 990-PF, Part I, line 2, to certify that it doesn't 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) (2017)

Name of organization
**JEFFERSON COUNTY PUBLIC EDUCATION
 FOUNDATION, INC.**

Employer identification number

-***

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	<u>CE&S FOUNDATION</u> <u>101 S FIFTH STREET STE 1650</u> <u>LOUISVILLE, KY 40202</u>	\$ <u>132,281.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	<u>JG BROWN FOUNDATION</u> <u>4350 BROWNSBORO RD STE 200</u> <u>LOUISVILLE, KY 40207</u>	\$ <u>150,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	<u>LOUISVILLE COMMUNITY FOUNDATION</u> <u>325 W MAIN STREET STE 1110</u> <u>LOUISVILLE, KY 40202</u>	\$ <u>128,330.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	<u>LOUISVILLE METRO GOVERNMENT</u> <u>601 W JEFFERSON ST</u> <u>LOUISVILLE, KY 40202</u>	\$ <u>84,904.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	<u>PNC BANK</u> <u>101 S. FIFTH STREET</u> <u>LOUISVILLE, KY 40202</u>	\$ <u>45,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	<u>NATIONAL CENTER FOR FAMILIES LEARNING</u> <u>325 W MAIN STREET STE 300</u> <u>LOUISVILLE, KY 40202</u>	\$ <u>180,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

JEFFERSON COUNTY PUBLIC EDUCATION
FOUNDATION, INC.

Employer identification number

-***

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____

Name of organization JEFFERSON COUNTY PUBLIC EDUCATION FOUNDATION, INC.	Employer identification number ** - ** * * * * *
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.

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

OMB No. 1545-0047

2017
Open to Public
Inspection

Name of the organization **JEFFERSON COUNTY PUBLIC EDUCATION FOUNDATION, INC.**

Employer identification number
-***

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? <input type="checkbox"/> Yes <input type="checkbox"/> No		
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? <input type="checkbox"/> Yes <input type="checkbox"/> No		

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of a historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1	▶ \$ _____
(ii) Assets included in Form 990, Part X	▶ \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenue included on Form 990, Part VIII, line 1	▶ \$ _____
b Assets included in Form 990, Part X	▶ \$ _____

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

Schedule D (Form 990) 2017

**JEFFERSON COUNTY PUBLIC EDUCATION
FOUNDATION, INC.**

Schedule D (Form 990) 2017

-*** Page 2

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

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

(check all that apply):

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

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

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

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

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	1,068,519.				
b Contributions	163.	1,068,505.			
c Net investment earnings, gains, and losses	43,854.	14.			
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	1,112,536.	1,068,519.			

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment %
- b Permanent endowment 100.00 %
- c Temporarily restricted endowment %

The percentages on lines 2a, 2b, and 2c should equal 100%.

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

	Yes	No
(i) unrelated organizations		X
(ii) related organizations		X
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?		X
3b		

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

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				0.

Schedule D (Form 990) 2017

**JEFFERSON COUNTY PUBLIC EDUCATION
FOUNDATION, INC.**

Schedule D (Form 990) 2017

-*** Page **3**

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

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

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

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

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

**JEFFERSON COUNTY PUBLIC EDUCATION
FOUNDATION, INC.**

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	1,023,683.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	33,250.		
b	Donated services and use of facilities			
c	Recoveries of prior year grants			
d	Other (Describe in Part XIII.)			
e	Add lines 2a through 2d		2e	33,250.
3	Subtract line 2e from line 1		3	990,433.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b			
b	Other (Describe in Part XIII.)			
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	990,433.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	1,907,583.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities			
b	Prior year adjustments			
c	Other losses			
d	Other (Describe in Part XIII.)			
e	Add lines 2a through 2d		2e	0.
3	Subtract line 2e from line 1		3	1,907,583.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b			
b	Other (Describe in Part XIII.)			
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.)		5	1,907,583.

Part XIII Supplemental Information.

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

PART V, LINE 4:

TO FUND SCHOLARSHIP PROGRAMS

PART X, LINE 2:

THE FOUNDATION HAS IMPLEMENTED THE ACCOUNTING GUIDANCE FOR UNCERTAINTY IN INCOME TAXES. UNDER THAT GUIDANCE, TAX POSITIONS NEED TO BE RECOGNIZED IN THE FINANCIAL STATEMENTS WHEN IT IS MORE-LIKELY-THAN-NOT THE POSITION WILL BE SUSTAINED UPON EXAMINATION BY THE TAX AUTHORITIES. AS OF JUNE 30, 2017, THE FOUNDATION HAS NO UNCERTAIN TAX POSITIONS THAT QUALIFY FOR EITHER RECOGNITION OR DISCLOSURE IN THE FINANCIAL STATEMENTS. THE FOUNDATION FILES FEDERAL INCOME TAX RETURNS. RETURNS FILED FOR THE TAX YEARS ENDED ON OR AFTER JUNE 30, 2016 ARE SUBJECT TO EXAMINATION. THE

JEFFERSON COUNTY PUBLIC EDUCATION
FOUNDATION, INC.

Part XIII Supplemental Information *(continued)*

FOUNDATION IS NOT CURRENTLY BEING EXAMINED AND MANAGEMENT BELIEVES ITS
TAX-EXEMPT STATUS WOULD BE UPHELD UNDER EXAMINATION.

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

OMB No. 1545-0047

2017
Open to Public
Inspection

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

Name of the organization **JEFFERSON COUNTY PUBLIC EDUCATION FOUNDATION, INC.** Employer identification number ****-*******

Part I General Information on Grants and Assistance

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

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEFFERSON COUNTY PUBLIC SCHOOLS 3332 NEWBURG ROAD LOUISVILLE, KY 40232	00*: *--**_*****		1,438,186.	0.	BOOK		TO FUND VARIOUS EDUCATIONAL PROGRAMS
SPALDING UNIVERSITY 845 S 3RD ST LOUISVILLE, KY 40203	00*: *--**_*****		53,330.	0.	BOOK		SCHOLARSHIPS
COMMUNITY FOUNDATION 325 W MAIN ST STE 1110 LOUISVILLE, KY 40202	00*: *--**_*****		48,901.	0.	BOOK		READING AND SCHOLARSHIP PROGRAMS
JUTC 109 EAST BROADWAY NO 302A LOUISVILLE, KY 40202	00*: *--**_*****		14,835.	0.	BOOK		SCHOLARSHIPS
WILT ELEMENTARY 6700 PRICE LANE RD LOUISVILLE, KY 40229	00*: *--**_*****		12,279.	0.	BOOK		METRO GOVT GRANTS
DOLLYWOOD FOUNDATION 111 DOLLYWOOD LANE PIGEON FORGE, TN 37863	00*: *--**_*****		11,672.	0.	BOOK		IMAGINATION LIBRARY

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3 Enter total number of other organizations listed in the line 1 table

**JEFFERSON COUNTY PUBLIC EDUCATION
FOUNDATION, INC.**

Schedule I (Form 990)

Page 1

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NEW ALBANY - FLOYD COUNTY EDU. FOUNDATION - 4108 CHARLESTOWN RD - NEW ALBANY, IN 47150	000: *--**_*-----		9,000.	0.	BOOK		IMAGINATION LIBRARY
COCHRAN ELEMENTARY 500 W GAULBERT AVE LOUISVILLE, KY 40208	000: *--**_*-----		5,000.	0.	BOOK		TEACHER EXCELLENCE AWARDS
ST MATTHEWS ELEMENTARY 601 BROWNS LN LOUISVILLE, KY 40207	000: *--**_*-----		5,000.	0.	BOOK		METRO GOVT GRANTS
MOREHEAD STATE UNIVERSITY 150 UNIVERSITY BLVD MOREHEAD, KY 40351	000: *--**_*-----		5,000.	0.	BOOK		SCHOLARSHIPS

Schedule I (Form 990)

**JEFFERSON COUNTY PUBLIC EDUCATION
FOUNDATION, INC.**

Schedule I (Form 990) (2017)

Page 2

-***

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:

THE BOARD APPROVES THE DISBURSEMENT OF FUNDS TO VARIOUS PROGRAMS THE

ORGANIZATION SUPPORTS.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue 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.

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

OMB No. 1545-0047

2017

Open to Public
Inspection

Name of the organization
**JEFFERSON COUNTY PUBLIC EDUCATION
FOUNDATION, INC.**

Employer identification number
-***

FORM 990, PART VI, SECTION B, LINE 11B:

THE SECRETARY/TREASURER REVIEWS THE 990 BEFORE FILING AND THE BOARD REVIEWS
A COPY OF THE 990 AFTER IT IS FILED.

FORM 990, PART VI, SECTION C, LINE 19:

THESE DOCUMENTS ARE MADE AVAILABLE UPON REQUEST.

PART XII, LINE C

THIS PURPOSE HAS NOT CHANGED FROM THE PRIOR YEAR.

Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury
Internal Revenue Service

▶ **File a separate application for each return.**
▶ **Information about Form 8868 and its instructions is at www.irs.gov/form8868 .**

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile, click on Charities & Non-Profits, and click on *e-file for Charities and Non-Profits*.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

		Enter filer's identifying number
Type or print	Name of exempt organization or other filer, see instructions. JEFFERSON COUNTY PUBLIC EDUCATION FOUNDATION, INC.	Employer identification number (EIN) or **-*****
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. P.O. BOX 35368	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. LOUISVILLE, KY 40202	

Enter the Return Code for the return that this application is for (file a separate application for each return)			0	1
Application Is For	Return Code	Application Is For	Return Code	
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07	
Form 990-BL	02	Form 1041-A	08	
Form 4720 (individual)	03	Form 4720 (other than individual)	09	
Form 990-PF	04	Form 5227	10	
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11	
Form 990-T (trust other than above)	06	Form 8870	12	

LYNN HUETHER, TREASURER

- The books are in the care of ▶ **3620 FERN VALLEY ROAD - LOUISVILLE, KY 40219**
Telephone No. ▶ **502-212-3112** Fax No. ▶ _____
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 6-month extension of time until **MAY 15, 2019**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

- ▶ calendar year _____ or
- ▶ tax year beginning **JUL 1, 2017**, and ending **JUN 30, 2018**

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return
 Change in accounting period

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

Articles of Incorporation

301 957
ORIGINAL COPY FILED
SECRETARY OF STATE OF KENTUCKY
FRANKFORT, KENTUCKY

MAR 1 4 1983

ARTICLES OF INCORPORATION
OF
JEFFERSON COUNTY PUBLIC EDUCATION FOUNDATION

Malcolm B. Chancey, Jr.
SECRETARY OF STATE

The undersigned Incorporator, Malcolm B. Chancey, Jr., executes these Articles of Incorporation for the purpose of forming and does hereby form a nonprofit corporation under the laws of the Commonwealth of Kentucky (KRS 273.160 et seq.), with all the rights, privileges and immunities of a corporation organized for civic, charitable, cultural and educational purposes within the meaning of Section 501(c)(3) of the Internal Revenue Code in accordance with the following provisions:

ARTICLE I

Name

The name of the corporation is Jefferson County Public Education Foundation, Inc.

ARTICLE II

Duration

The corporation shall have perpetual existence.

ARTICLE III

Purposes and Powers

A. The corporation is organized and operated exclusively for public, charitable and educational purposes within the meaning of Section 501(c)(3) of the Internal Revenue Code, as amended. The corporation shall receive

301 957

contributions and fees, and shall distribute its funds for public, charitable, educational and/or scientific purposes, as hereinafter set forth. In carrying out its corporate purposes, the corporation shall have all the powers allowed corporations by Chapter 273 of the Kentucky Revised Statutes; provided, however, the corporation shall not have or exercise any power prohibited by the provisions of Paragraphs B and C.

B. It is expressly not the purpose of the corporation to carry on propaganda or otherwise attempt to influence legislation, nor to participate or intervene in (including the publication or distributing of statements) any political campaign on behalf of any candidate for public office.

C. Any other provision of these articles to the contrary notwithstanding, the corporation shall have no capital stock and no power to issue certificates of stock nor to declare dividends; no part of the net earnings of the corporation shall inure to the benefit of any private individual or member; and the corporation shall not carry on any activities denied to: [i] a corporation described in Section 501(c)(3) of the Internal Revenue Code of 1954, as amended, including prohibited transactions defined in Section 503 of the Code; or [ii] a corporation, contributions to which are deductible under Section 170(c)(2) of the Internal Revenue Code of 1954, as amended.

D. Any other provisions of these articles to the contrary notwithstanding, this corporation shall, if the following provisions of law are ever applicable to it: [i] distribute its income for each fiscal year at such time and in such manner as not to be subject to the tax under Section 4942 of the Internal Revenue Code of 1954, as amended; [ii] not engage in any act of self dealing as defined in Section 4941(d) of the Internal Revenue Code, as amended; [iii] not retain any excess business holdings as defined in Section 4943(c) of the Internal Revenue Code of 1954, as amended; [iv] not make any investments in such manner as to subject the corporation to tax under Section 4944 of the Internal Revenue Code of 1954, as amended; and [v] not make any taxable expenditures as defined in Section 4945(d) of the Internal Revenue Code of 1954, as amended.

E. In furtherance of the general purposes in Paragraph A, 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 education of the citizens of Louisville and Jefferson County, Kentucky through the support of the Jefferson County Public Schools.

ARTICLE IV

Members

The corporation shall have no members.

ARTICLE V

Directors

The corporation shall be governed by a Board of Directors consisting of not less than five (5) members and not more than fifteen (15), the exact number and the terms of each to be set in the manner provided for in the Bylaws. The initial Board of Directors of the corporation shall consist of nine (9) persons who shall serve until the first annual election of Directors or until their successors are elected and qualify. The names and addresses of said directors are: Mary Helen Byck, Byck's, Louisville Galleria, Louisville, Kentucky 40202; Joan Riehm, Humana, Inc. Riverfront Plaza, Louisville, Kentucky 40202; I.W. Hughes, Brown & Williamson Tobacco Corporation, 1600 W. Hill Street, Louisville, Kentucky 40210; Orson Oliver, Bank of Louisville, 500 W. Broadway, Louisville, Kentucky 40202; Woodford R. Porter, Porter's Funeral Home, 1300 W. Chestnut, Louisville, Kentucky 40203; John Gray, Citizens Fidelity Bank and Trust Company, Citizens Plaza, Louisville, Kentucky 40202; William E. Summers, III, W.L.O.U. Radio Station, 2549 S. 3rd Street, Louisville, Kentucky 40208; Paul Best, First National Bank of Louisville, First National Tower, Louisville,

Kentucky 40202; Malcolm B. Chancey, Jr., Liberty National Bank & Trust Co. of Louisville, 416 W. Jefferson Street, Louisville, Kentucky 40202.

ARTICLE VI

Officers

The officers of the corporation will be composed of a chairman, vice-chairman, secretary and treasurer; provided, however, except for the office of chairman, any or all of the other offices may be combined in one person. The directors may create such other offices and committees as they deem necessary for the proper administration of the corporation's business. The officers of the corporation shall be elected for such term and in such manner as is provided in the Bylaws.

ARTICLE VII

Bylaws

The Bylaws for the corporation shall be adopted, and may be amended or repealed, by the Board of Directors.

ARTICLE VIII

Registered Office and Registered Agent

The street address of the initial registered office of the corporation is 416 West Jefferson, Louisville, Kentucky 40202.

301 962

The name of the initial registered agent at that address is Malcolm B. Chancey, Jr.

ARTICLE IX

Exemption From Liability and Indemnification

The private property of the directors of the corporation shall be exempt from liability for any and all debts of the corporation.

The corporation shall have the power to indemnify any person who was or is a party, or is threatened to be made a party, to any threatened, pending or completed action, suit or proceedings, whether civil, criminal, administrative or investigative (other than an action by or on behalf of the corporation) by reason of the fact that he is or was a director, officer, employee, or agent of the corporation, against expenses (including attorney's fees) judgments, fines and amounts paid in settlement, actually and reasonably incurred by him in connection with such action, suit or proceeding. Further provisions for indemnification of officers and directors shall be specified in the Bylaws.

ARTICLE X

Dissolution

Dissolution shall be accomplished in accordance with Chapter 273 of the Kentucky Revised Statutes or its successor.

301 962

Upon dissolution of the corporation, the Board of Directors shall, after paying or making provisions for the payment of, all liabilities of the corporation, dispose of all corporate assets to such organizations organized and operated exclusively for charitable, educational, or scientific purposes as shall at the time qualify as an exempt organization or organizations under Section 501(c)(3) of the Internal Revenue Code of 1954, or its successor, or to such organizations described under Section 170(c)(1) of the Internal Revenue Code of 1954, or its successor, as the Board of Directors shall determine. Any such assets not disposed of by the Board of Directors shall be disposed of by the Circuit Court of the County in which the principal office of the corporation is then located, to such organization or organizations organized and operated exclusively for charitable, educational, religious or scientific purposes as shall, at that time, qualify as an exempt organization or organizations under Section 501(c)(3) of the Internal Revenue Code of 1954, or its successor.

ARTICLE XI

Incorporator

The name and address of the Incorporator is:

Malcolm B. Chancey Jr.
Liberty National Bank & Trust Company
416 West Jefferson Street
Louisville, Kentucky 40202

Signed and acknowledged by the Incorporator at London, Kentucky, this 4th day of March, 1984.

[Handwritten Signature]

COMMONWEALTH OF KENTUCKY)

----- SS -----
COUNTY OF Jefferson)

I, the undersigned Notary Public in and for the Commonwealth and County aforesaid, do hereby certify that personally appeared before me and, after having been duly sworn, declared, acknowledged and verified the foregoing to be the Articles of Incorporation of Jefferson County Public Education Foundation, Inc. this 4th day of March, 1983.

My commission expires: Sept 30, 1984.

[Handwritten Signature: Patricia A. Webb]
Notary Public

THIS INSTRUMENT WAS PREPARED BY

[Handwritten Signature: G. Alexander Hamilton]

G. Alexander Hamilton
WYATT, TARRANT & COMBS
Citizens Plaza
Louisville, Kentucky 40202

[Handwritten Signature]
1983 MAR 21 AM 10:33
A 14108

Commonwealth of Kentucky

OFFICE OF SECRETARY OF STATE

FRANCES JONES MILLS Secretary



FRANKFORT, KENTUCKY

CERTIFICATE OF INCORPORATION OF NON-STOCK, NON-PROFIT CORPORATION

I, FRANCES JONES MILLS, Secretary of State of the Commonwealth of Kentucky certify that there has been delivered to my office articles of incorporation of JEFFERSON COUNTY PUBLIC EDUCATION FOUNDATION, INC.

The name and address of the registered agent of this corporation is

MALCOLM B. CHANCEY, JR.

NAME

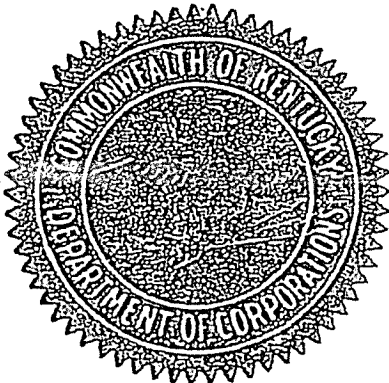
416 WEST JEFFERSON

STREET ADDRESS

LOUISVILLE, KENTUCKY

CITY, STATE

NOW, THEREFORE, finding that these articles of incorporation conform to law and that all fees therefore having been paid as prescribed by law, I, FRANCES JONES MILLS, Secretary of State, issue this Certificate of Incorporation.



Issued this 14TH day of MARCH, 1983,

at Frankfort, Kentucky.

Francis Jones Mills

SECRETARY OF STATE

SECRETARY OF STATE

ASSISTANT SECRETARY OF STATE

IRS Form W9

Request for Taxpayer Identification Number and Certification

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

▶ Go to www.irs.gov/FormW9 for instructions and the latest information.

Print or type. See Specific Instructions on page 3.	<p>1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. <u>Jefferson County Public Education Foundation</u></p> <p>2 Business name/disregarded entity name, if different from above</p>	
	<p>3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.</p> <p><input type="checkbox"/> Individual/sole proprietor or single-member LLC</p> <p><input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____</p> <p><input checked="" type="checkbox"/> Other (see instructions) ▶ <u>Non-Profit Corporation</u></p> <p><input type="checkbox"/> C Corporation</p> <p><input type="checkbox"/> S Corporation</p> <p><input type="checkbox"/> Partnership</p> <p><input type="checkbox"/> Trust/estate</p> <p><small>Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.</small></p>	<p>4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):</p> <p>Exempt payee code (if any) _____</p> <p>Exemption from FATCA reporting code (if any) _____</p> <p><small>(Applies to accounts maintained outside the U.S.)</small></p>
	<p>5 Address (number, street, and apt. or suite no.) See instructions. <u>3332 Newburg Road</u></p> <p>6 City, state, and ZIP code <u>Louisville, KY 40218</u></p> <p>7 List account number(s) here (optional)</p>	<p>Requester's name and address (optional)</p>

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number																					
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Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am 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); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

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 failed 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 dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here Signature of U.S. person ▶

Date ▶ 6/4/19

General Instructions

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

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.

Annual Audit

**JEFFERSON COUNTY PUBLIC EDUCATION
FOUNDATION, INC.**

FINANCIAL STATEMENTS

**YEARS ENDED
JUNE 30, 2017 AND 2016**

JEFFERSON COUNTY PUBLIC EDUCATION FOUNDATION, INC.

CONTENTS

	Page
Independent Auditor's Report	3
STATEMENTS OF ASSETS AND NET ASSETS – CASH BASIS	4
STATEMENTS OF REVENUES AND SUPPORT, EXPENSES, AND CHANGES IN NET ASSETS – CASH BASIS	5-6
NOTES TO FINANCIAL STATEMENTS	7-11



MONROE SHINE

KNOWLEDGE FOR TODAY . . . VISION FOR TOMORROW

500 NORTH HURSTBOURNE PARKWAY, SUITE 150, LOUISVILLE, KENTUCKY 40222 • PHONE: 502.423.0311 • FAX: 502.339.7103

Independent Auditor's Report

Board of Directors
Jefferson County Public Education Foundation, Inc.
Louisville, Kentucky

We have audited the accompanying financial statements of **Jefferson County Public Education Foundation, Inc.**, which comprise the statements of assets and net assets – cash basis as of June 30, 2017 and 2016, and the related statements of revenues and support, expenses, and changes in net assets - cash basis for the years then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with the cash basis of accounting as described in Note 1; this includes determining that the cash basis of accounting is an acceptable basis for the preparation of the financial statements in the circumstances. Management is also responsible for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of **Jefferson County Public Education Foundation, Inc.** as of June 30, 2017 and 2016, and the changes in its net assets for the years then ended in accordance with the cash basis of accounting as described in Note 1.

Basis of Accounting

We draw attention to Note 1 of the financial statements, which describes the basis of accounting. The financial statements are prepared on the cash basis of accounting, which is a basis of accounting other than accounting principles generally accepted in the United States of America. Our opinion is not modified with respect to that matter.

Monroe Shine

Louisville, Kentucky
October 19, 2018

**JEFFERSON COUNTY PUBLIC EDUCATION FOUNDATION, INC.
 STATEMENTS OF ASSETS AND NET ASSETS - CASH BASIS
 YEARS ENDED JUNE 30, 2017 AND 2016**

ASSETS

	<u>2017</u>	<u>2016</u>
Cash and cash equivalents	<u>\$ 3,168,836</u>	<u>\$ 1,214,554</u>
 NET ASSETS		
Unrestricted	104,494	157,467
Unrestricted - board designated	7,490	7,490
Temporarily restricted	1,988,347	1,049,597
Permanently restricted	<u>1,068,505</u>	<u>-</u>
 TOTAL NET ASSETS	 <u><u>\$ 3,168,836</u></u>	 <u><u>\$ 1,214,554</u></u>

See notes to financial statements.

JEFFERSON COUNTY PUBLIC EDUCATION FOUNDATION, INC.
STATEMENTS OF ASSETS AND NET ASSETS - CASH BASIS
YEAR ENDED JUNE 30, 2017

	<u>Every One Reads</u>	<u>Kindergarten Camp</u>	<u>Vogt Scholars</u>	<u>Reach Program</u>
Revenue and support:				
Contributions	\$ -	\$ 1,016,767	\$ 100,000	\$ 100,000
Net investment income	-	-	-	-
Transfers between programs	(8,891)	-	-	-
	<u>(8,891)</u>	<u>1,016,767</u>	<u>100,000</u>	<u>100,000</u>
Expenses:				
Educational grants and expenses	113,664	265,654	-	-
Payroll expenses	-	-	-	-
Other general expenses	-	-	-	-
	<u>113,664</u>	<u>265,654</u>	<u>-</u>	<u>-</u>
Changes In Net Assets	<u>(122,555)</u>	<u>751,113</u>	<u>100,000</u>	<u>100,000</u>
Total Net Assets, Beginning of Year	<u>192,394</u>	<u>24,463</u>	<u>9,778</u>	<u>-</u>
Total Net Assets, End of Year	<u>\$ 69,839</u>	<u>\$ 775,576</u>	<u>\$ 109,778</u>	<u>\$ 100,000</u>

See notes to financial statements.

Other Temporarily Restricted	Temporarily Restricted Total	Permanently Restricted	Board Designated Programs	Other Unrestricted	Total
\$ 1,130,248	\$ 2,347,015	\$ 1,068,505	\$ -	\$ 45,755	\$ 3,461,275
19	19	-	-	256	275
18,891	10,000	-	-	(10,000)	-
<u>1,149,158</u>	<u>2,357,034</u>	<u>1,068,505</u>	<u>-</u>	<u>36,011</u>	<u>3,461,550</u>
911,018	1,290,336	-	-	26,899	1,317,235
127,948	127,948	-	-	56,565	184,513
-	-	-	-	5,520	5,520
<u>1,038,966</u>	<u>1,418,284</u>	<u>-</u>	<u>-</u>	<u>88,984</u>	<u>1,507,268</u>
110,192	938,750	1,068,505	-	(52,973)	1,954,282
822,962	1,049,597	-	7,490	157,467	1,214,554
<u>\$ 933,154</u>	<u>\$ 1,988,347</u>	<u>\$ 1,068,505</u>	<u>\$ 7,490</u>	<u>\$ 104,494</u>	<u>\$ 3,168,836</u>

JEFFERSON COUNTY PUBLIC EDUCATION FOUNDATION, INC.
STATEMENTS OF REVENUES AND SUPPORT, EXPENSES, AND
CHANGES IN NET ASSETS – CASH BASIS
YEAR ENDED JUNE 30, 2016

	Every One Reads	Youth Achievement	David Jones L. Vocal Scholarship	Community Data Liaison Position
TEMPORARILY RESTRICTED NET ASSETS				
Revenue and support:				
Contributions	\$ -	\$ -	\$ 26,000	\$ 125,000
Net investment income	-	-	3	-
Transfers between programs	-	-	-	-
	<u>-</u>	<u>-</u>	<u>26,003</u>	<u>125,000</u>
Expenses:				
Educational grants and expenses	16,471	3,000	5,000	21,504
Payroll expenses	-	-	-	-
Other general expenses	-	-	-	-
	<u>16,471</u>	<u>3,000</u>	<u>5,000</u>	<u>21,504</u>
Changes In Net Assets	(16,471)	(3,000)	21,003	103,496
Total Net Assets, Beginning of Year	208,865	72,768	22,368	-
Total Net Assets, End of Year	\$ 192,394	\$ 69,768	\$ 43,371	\$ 103,496

See notes to financial statements.

Other Temporarily Restricted	Temporarily Restricted Total	Board Designated Programs	Other Unrestricted	Total
\$ 553,183	\$ 704,183	\$ -	\$ 143,425	\$ 847,608
1	4	-	132	136
-	-	(37,727)	37,727	-
<u>553,184</u>	<u>704,187</u>	<u>(37,727)</u>	<u>181,284</u>	<u>847,744</u>
754,941	800,916	23,818	27,544	852,278
130,013	130,013	-	-	130,013
-	-	-	9,871	9,871
<u>884,954</u>	<u>930,929</u>	<u>23,818</u>	<u>37,415</u>	<u>992,162</u>
(331,770)	(226,742)	(61,545)	143,869	(144,418)
<u>972,338</u>	<u>1,276,339</u>	<u>69,035</u>	<u>13,598</u>	<u>1,358,972</u>
<u>\$ 640,568</u>	<u>\$ 1,049,597</u>	<u>\$ 7,490</u>	<u>\$ 157,467</u>	<u>\$ 1,214,554</u>

JEFFERSON COUNTY PUBLIC EDUCATION FOUNDATION, INC.
NOTES TO FINANCIAL STATEMENTS
JUNE 30, 2017 AND 2016

(1) **SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES**

Nature of Operations

The Jefferson County Public Education Foundation, Inc. (the "Foundation") is engaged in the solicitation and receipt of gifts, grants, and contributions from individuals, groups, corporations, and other sources, public and private, to assist and support the public school system of Jefferson County, Kentucky. The Foundation also engages in other activities to advance the education of citizens of Louisville and Jefferson County, Kentucky. The Foundation qualifies as a non-profit organization under Section 501(c)(3) of the Internal Revenue Code and is, therefore, exempt from federal and state income taxes.

Basis of Presentation

The accompanying financial statements are presented on the cash basis of accounting which is a comprehensive basis of accounting other than accounting principles generally accepted in the United States of America. Consequently, revenues are recognized when received rather than when earned and expenses and purchases of assets are recognized when cash is disbursed rather than when the obligation is incurred. This basis differs from accounting principles generally accepted in the United States of America primarily because the Foundation has not recognized donor pledges or in-kind donations.

The Foundation reports net assets and revenues, expenses, gains, and losses based on the existence or absence of donor-imposed restrictions. Accordingly, net assets of the Foundation and changes therein are classified and reported as follows:

Unrestricted net assets – Represent the portion of expendable funds available for support in the operation of the Foundation.

Temporarily restricted net assets – Net assets subject to donor-imposed stipulations that may or will be met either by actions of the Foundation and/or the passage of time.

Permanently restricted net assets – Net assets subject to donor-imposed stipulations that they be maintained permanently by the Foundation.

Certain prior year accounts have been reclassified to conform to current year presentations.

Cash and Cash Equivalents

The Foundation considers all highly liquid investments with an initial maturity of three months or less to be cash equivalents.

Contributions

All contributions are considered to be available for unrestricted use unless specifically restricted by the donor. Amounts received that are designated for future periods or restricted by the donor for specific purposes are reported as temporarily restricted or permanently restricted support that increases those net asset classes. However, if a restriction is fulfilled in the same time period in which the contribution is received, the entity reports the support as unrestricted.

JEFFERSON COUNTY PUBLIC EDUCATION FOUNDATION, INC.
NOTES TO FINANCIAL STATEMENTS - CONTINUED
JUNE 30, 2017 AND 2016

(1 - continued)

Income Taxes

The Foundation is exempt from federal and state income taxes under Section 501(c)(3) of the Internal Revenue Code. Accordingly, the financial statements do not provide for income taxes.

The Foundation has implemented the accounting guidance for uncertainty in income taxes. Under that guidance, tax positions need to be recognized in the financial statements when it is more-likely-than-not the position will be sustained upon examination by the tax authorities. As of June 30, 2017, The Foundation has no uncertain tax positions that qualify for either recognition or disclosure in the financial statements. The Foundation files federal income tax returns. Returns filed for the tax years ended on or after June 30, 2014 are subject to examination. The Foundation is not currently being examined and management believes its tax-exempt status would be upheld under examination.

(2) **CASH AND CASH EQUIVALENTS**

Cash and cash equivalents included in the accompanying statements of assets and net assets consist of the following as of June 30:

	<u>2017</u>	<u>2016</u>
Money market account	\$ 3,168,836	\$ 1,201,754
Checking Accounts	-	12,800
Total	\$ 3,168,836	\$ 1,214,554

The Foundation maintains its cash in bank deposit accounts which, at times, may exceed FDIC limits. However, the amounts in excess of the FDIC limits exposed to credit risk are secured by United States Treasury repurchase agreements pledged by the Foundation's bank and held in the Foundation's name.

(3) **CONTRIBUTIONS**

The Foundation's revenue consists primarily of donor contributions. The Foundation records multi-year pledges in the period in which the contribution is received under the cash basis of accounting.

(4) **BOARD DESIGNATED NET ASSETS**

Unrestricted net assets include an amount designated by the board of directors of \$7,490 as of June 30, 2017 and 2016. This designation is to fund advanced teacher training and an outreach program called ACT Now to improve students' qualifications for higher education enrollment opportunities.

JEFFERSON COUNTY PUBLIC EDUCATION FOUNDATION, INC.
NOTES TO FINANCIAL STATEMENTS - CONTINUED
JUNE 30, 2017 AND 2016

(5) **OTHER TEMPORARILY RESTRICTED NET ASSETS**

Other programs consisted of the following as of June 30:

	<u>2017</u>	<u>2016</u>
Youth Achievement	\$ 65,768	\$ 69,768
Imagination Library	63,263	-
Data Specialist Position Grant	53,955	103,496
ESL Reading Program	50,000	-
David Jones L. Vocal Scholarship	38,374	43,370
Teacher Excellence Awards	36,157	14,157
Lou. Education & Employment Part.	32,977	34,227
Metro Govt. Grants	32,020	17,500
National Board Certified Teacher Training	28,250	38,000
ZEON	27,572	31,820
All others	504,818	470,624
	<u>\$ 933,154</u>	<u>\$ 822,962</u>

Temporarily restricted net assets amounting to \$1,988,347 and \$1,049,597 for 2017 and 2016, respectively, are available for various programs conducted by the Jefferson County Public Schools and include amounts for early childhood development, student scholarships, teacher recognition and awards, and various other special projects.

(6) **CONCENTRATION**

During the year ended June 30, 2017, the Foundation received a total of \$2,495,034 from three donors, which represents 72% of contributions. During the year ended June 30, 2016, the Foundation received a total of \$284,700 from one donor, which represents approximately 27% of contributions.

(7) **PERMANENTLY RESTRICTED ENDOWMENT**

During 2017, the Foundation received a \$1,068,505 contribution to be used as a permanent endowment to fund scholarship programs.

As required by generally accepted accounting principles, net assets associated with endowment funds are classified and reported based on the existence or absence of donor-imposed restrictions.

JEFFERSON COUNTY PUBLIC EDUCATION FOUNDATION, INC.
NOTES TO FINANCIAL STATEMENTS - CONTINUED
JUNE 30, 2017 AND 2016

(7 - continued)

Absent explicit donor stipulations to the contrary, the Board of Directors of the Foundation has interpreted the Uniform Prudent Management of Institutional Funds Act (UPMIFA) as requiring the preservation of the fair value of the original gift as of the gift date of the donor-restricted endowment funds. As a result of this interpretation, the Foundation classifies as permanently restricted net assets (a) the original value of gifts donated to the permanent endowment, (b) the original value of subsequent gifts to the permanent endowment, and (c) accumulations to the permanent endowment made in accordance with the direction of the applicable donor gift instrument at the time the accumulation is added to the fund. The remaining portion of the donor-restricted endowment fund that is not classified in permanently restricted net assets is classified as temporarily restricted net assets until those amounts are appropriated for expenditure by the Foundation in a manner consistent with the standard of prudence prescribed by UPMIFA. In accordance with UPMIFA, the Foundation considers the following factors in making a determination to appropriate or accumulate donor-restricted endowment funds: (1) the duration and preservation of the various funds, (2) the purposes of the donor-restricted endowment funds, (3) general economic conditions, (4) the possible effect of inflation and deflation, (5) the expected total return from income and the appreciation of investments, (6) other resources of the Foundation, and (7) the Foundation's investment policies.

Investment Return Objectives, Risk Parameters and Strategies. The Foundation has adopted investment and spending policies, approved by the Board of Directors, for endowment assets. Those policies attempt to provide a predictable stream of funding to programs supported by its endowment funds while also maintaining the purchasing power of those endowment assets over the long-term. Accordingly, the investment process seeks to achieve an after-cost total real rate of return, including investment income as well as capital appreciation, which exceeds the annual distribution with acceptable levels of risk. The Foundation plans to invest endowment assets in a well-diversified asset mix, which includes equity and fixed income securities. The Foundation expects its endowment assets, over time, to achieve a positive rate of return at a rate in excess of inflation. Actual returns in any given year may vary from this amount. Investment risk is measured in terms of the total endowment fund; investment assets and allocation between asset classes and strategies are managed to prevent exposing the fund to unacceptable levels of risk.

Spending Policy. The Foundation has a policy of appropriating for distribution each year of an amount equal to or less than net income on investments. The Foundation expects the current spending policy to allow its endowment funds to grow, which is consistent with the Foundation's objective to maintain the purchasing power of the endowment assets as well as to provide additional real growth through new gifts and investment return.

JEFFERSON COUNTY PUBLIC EDUCATION FOUNDATION, INC.**General Information**

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	4/19/2019
Principal Office	JEFFERSON COUNTY PUBLIC EDUCATION FOUNDATION JAEGER EDUCATION CENTER- ATTN: SAM CORBETT EXEC 3332 NEWBURG RD LOUISVILLE, KY 40218
Registered Agent	WT&C CORPORATE SERVICES, INC. 500 W. JEFFERSON STREET SUITE 2800 LOUISVILLE, KY 40202

Current Officers

Chairman	James Allen
Vice President	Franklin Jelsma
Treasurer	Lynn Heuther
Director	Audwin Helton
Director	JEFF ULIGIAN
Director	Henry Heuser
Assistant Treasurer	Joseph Seiler

Individuals / Entities listed at time of formation

Director	MARY HELEN BYCK
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.

Annual Report	4/19/2019	1 page	PDF
Annual Report	4/20/2018	1 page	PDF

Certificate of Assumed Name	2/26/2018	1 page	tiff	PDF
Annual Report	4/20/2017	1 page	PDF	
Principal Office Address Change	5/12/2016 2:58:46 PM	1 page	PDF	
Annual Report	5/12/2016	1 page	PDF	
Annual Report	5/15/2015	1 page	PDF	
Principal Office Address Change	2/11/2014 10:18:20 AM	1 page	PDF	
Annual Report	2/11/2014	1 page	PDF	
Annual Report	6/18/2013	1 page	PDF	
Registered Agent 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	tiff	PDF
Annual Report	1/8/2007	1 page	PDF	
Annual Report	3/7/2006	1 page	tiff	PDF
Annual Report	3/11/2005	1 page	PDF	
Annual Report	6/5/2002	2 pages	tiff	PDF
Annual Report	5/21/2001	2 pages	tiff	PDF
Annual Report	10/3/2000	2 pages	tiff	PDF
Annual Report	7/16/1999	2 pages	tiff	PDF
Annual Report	4/24/1998	2 pages	tiff	PDF
Annual Report	7/1/1997	2 pages	tiff	PDF
Annual Report	7/1/1996	2 pages	tiff	PDF
Annual Report	7/1/1995	3 pages	tiff	PDF
Annual Report	7/1/1994	2 pages	tiff	PDF
Annual Report	7/1/1992	2 pages	tiff	PDF
Annual Report	7/1/1991	1 page	tiff	PDF
Annual Report	7/1/1990	2 pages	tiff	PDF
Annual Report	7/1/1989	2 pages	tiff	PDF

Assumed Names

[FUTUREUP](#)

Active

Activity History

Filing	File Date	Effective Date	Org. Referenced
Annual report	4/19/2019 9:26:43 AM	4/19/2019 9:26:43 AM	
Annual report	4/20/2018 10:58:11 AM	4/20/2018 10:58:11 AM	
Added assumed name	2/26/2018 12:15:42 PM	2/26/2018	FUTUREUP
Annual report	4/20/2017 2:09:23 PM	4/20/2017 2:09:23 PM	
Annual report	5/12/2016 3:06:17 PM	5/12/2016 3:06:17 PM	