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

Applicant/Program: Jefferson County Public Education Foundation					
Applicant Requested Amount: \$10,000.00 Appropriation Request Amount:					
Appropriation Request Amount.					
Executive Summary of Request					
The requested amount will be used to provide playground equipment for the students and families of Maupin					
Elementary as well as children in the surrounding neighborhood .					
Is this program/project a fundraiser?					
Is this applicant a faith based organization? Does this application include funding for sub-grantee(s)? Yes No 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.					
\$10.00\(\text{9}\) 4/12/2017					
District # Primary Sponsor Signature \$10,00\(\hat{\Omega}\) Amount Date					
District # I Finding Sponsor Signature					
Primary Sponsor Disclosure List below any personal or business relationship you, your family or your legislative assistant have with this					
organization, its volunteers, its employees or members of its board of directors.					
None					
Approved by:					
Appropriations Committee Chairman Date					
Final Appropriations Amount:					

Legal Name of Applicant Organization Jefferson County Public Education Foundation

Program Name and Request Amount Playground Equipment for Maupin Elementary

	Voc/No /NA
s the NDF Transmittal Sheet Signed by all Council Member(s) Appropriating Funding?	Yes/No/NA Yes
s the funding proposed by Council Member(s) less than or equal to the request amount?	Design Company of the
s the proposed public purpose of the program viable and well-documented?	Yes
Vill all of the funding go to programs specific to Louisville/Jefferson County?	Yes
las Council or Staff relationship to the Agency been adequately disclosed on the cover sheet?	Yes
las prior Metro Funds committed/granted been disclosed?	Yes
	Yes
the application properly signed and dated by authorized signatory?	Yes
proof of Tax Exempt status of 501(c) 3, 4, 6, 19, 1120-H included?	Yes
Metro funding is for a separate taxing district is the funding appropriated for a program outside the gal responsibility of that taxing district?	No
the entity in good standing with: • Kentucky Secretary of State?	
 Louisville Metro Revenue Commission? Louisville Metro Government? Internal Revenue Service? 	Yes
▶ Louisville Metro Human Relations Commission?	
the current Fiscal Year Budget included?	Yes
the entity's board member list (with term length/term limits) included?	Yes
recommended funding less than 33% of total agency operating budget?	Yes
pes the application budget reflect only the revenue and expenses of the project/program?	Yes
the cost estimate(s) from proposed vendor (if request is for capital expense) included?	Yes
the most recent annual audit (if required by organization) included?	Yes
a copy of Signed Lease (if rent costs are requested) included?	N/A
the Supplemental Questionnaire for churches/religious organizations (if requesting organization is ith-based) included?	N/A
e the Articles of Incorporation of the Agency included?	Yes
the IRS Form W-9 included?	Yes
the IRS Form 990 included?	Yes
e the evaluation forms (if program participants are given evaluation forms) included?	N/A
firmative Action/Equal Employment Opportunity plan and/or policy statement included (if juired to do so)?	Yes
s the Agency agreed to participate in the BBB Charity review program? If so, has the applicant at the BBB Charity Review Standards?	Yes

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						
Website: https://ww	Website: https://www.jefferson.kyschools.us/about/support/foundation/about					
Applicant Contact:Kristin WingfeldTitle:Coord Bus School Partnerships						
Phone:	508.485	5.2791	Email:	kristin.wingfeld@jefferson.kysch		
Financial Contact:	Denise	Dewitt	Title:	Coordinator Grants & Awards		
Phone:	502.485	5.3734	Email:	denise.dewitt@jefferson.kyschool		
Organization's Repre	esentative	who attended NDF Train	ning:			
GEO	GRAPHICA	L AREA(S) WHERE PROG	RAM ACTIVITIES A	RE (WILL BE) PROVIDED		
Program Facility Loc	ation(s):	Maupin Elementary Sch	ool			
Council District(s):		1	Zip Code(s):	40211		
	SECTI	ON 2 – PROGRAM REQU	EST & FINANCIAL	NFORMATION		
PROGRAM/PROJECT	NAME: M	aupin Elementary School	Playground			
Total Request: (\$)	10,000	Total Metro A	ward (this progran	n) in previous year: (\$) 0		
Purpose of Request	check all t	that apply):				
Operating I	Funds (gen	erally cannot exceed 33%	6 of agency's total	operating budget)		
Programmi	ng/service	es/events for direct benef	it to community or	qualified individuals		
Capital Pro	ject of the	organization (equipment	, furnishing, buildi	ng, etc)		
The Following are Re	quired At	tachments:				
■ IRS Exempt Status D	eterminatio	n Letter	Signed lease if	rent costs are being requested		
■ Current year project	ed budget		■ IRS Form W9			
■ Current financial sta	tement		Evaluation forn	ns if used in the proposed program		
■ Most recent IRS Form	n 990 or 11	20-H	Annual audit (if	required by organization)		
■ Articles of Incorpora	tion (curre	nt & signed)	Faith Based Org	ganization Certification Form, if applicable		
Cost estimates from capital expense	proposed v	rendor if request is for				
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:	NDF		Amount: (\$)	3,500		
Source:	NDF Amount: (\$) 23,000					
Source:	Source: NDF Amount: (\$) 5,000					
Has the applicant contacted the BBB Charity Review for participation? ☐ Yes ☐ No						
Has the applicant met the BBB Charity Review Standards? ☐ Yes ■ No						

Page 1

Effective May 2016

SECTION 3 - AGENCY DETAILS

Describe Agency's Vision, Mission and Services:

The Jefferson Count 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 501(c)(3).

JCPEF Purpose/Vision:

Serve as a catalyst for enhancements to public education

Advocate for excellence

Increase awareness of great public schools

Activities:

Identify opportunities to invest in the future of our schools and our community

Set priorities

Secure critical corporate funding

Objectives:

Launch start-up programs

Build skills and provide opportunities

Boost student achievement

JCPEF is making this request for Maupin Elementary School, one of 90 elementary schools in Jefferson County Public Schools (JCPS). Maupin Elementary School has 341 students enrolled in Kindergarten through 5th grade with a 86% free/reduced lunch rate. Maupin is located in west Jefferson County in the Parkland neighborhood. Maupin Elementary School students are predominately African-American with a population of 82%. Our population also includes 2% Hispanic and 5% other races. Our white population is 11%. The Maupin culture is centered around the Catapla School Model, which incorporates Waldorf Tradition and the Kentucky Core Academic Standards. The model focuses on art integration, play with social intent, relationships as foundation, and nutrition and sustainability for an alternative way of learning. Students and their families are offered access to health services through a partnership with the Shawnee Christian Healthcare Clinic.

SECTION 4 - BOARD OF DIRECTORS AND PAID STAFF

Board Member	Term End Date
fim Allen (Chair), Frank Jelsma (Vice Chair), Joe Seiler (Treasurer)	Dec 31, 2019
Henry Heuser, Jr. (Chair, Nominating committee)	Dec 31, 2018
Robert Arnold, Vik Chadha, Kevin Joynt, Carl Thomas	Dec 31, 2019
Mike Brown, Joe Hardesty, Tanja Oquendo, Mark Shirkness	Dec 31, 2017
Carol Timmons, Jeff Uligan	Dec 31, 2017
Al Cornish, Alex Gerassimides, Audwin Helton, Lynn Heather	Dec 31, 2018
Mitch Rue, Ken Selvaggi	Dec 31, 2018

Describe the Board	term	limit	policy:
--------------------	------	-------	---------

The board does not limit the terms of its members.

Three Highest Paid Staff Names	Annual Salary
Sam Corbett, Executive Director - salary & fringes	152,400

Page 3 Effective May 2016

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.):

This project will provide playground equipment for the students and families of Maupin Elementary as well as children in the surrounding neighborhood.

The funds requested would allow us to purchase new, replacement playground equipment.

Our plan would be to purchase all new playground equipment and have it installed before December 31, 2017.

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

The School has received the following estimates for new playground equipment:

Ten Spin	\$2,480
Kids Choice Fitness Cluster	\$5,000
3 1/2" OD Arch Swg Frame W/6 S/P Seats	\$2,550
90 Timbers 4'12" Timbers WHSE	\$3,150
Installation	\$1,800
All-Star Internal Acrylic, HD Breakaway	\$1,400
Fun Tunnel	\$1,096
Mogul Slide w/PVC	\$3,807
26 Timbers 4'12" Timbers WHSE	\$910
KEDC DISCOUNT	-\$735
Freight	\$600
Installation	\$1,800
TOTAL	\$23,858

C:	If this request is a fundraiser, please detail how the proceeds will be spent:
Γhe	request is not a fundraiser.
	For Expenditure Reimbursement Only – The grant award period begins with the Metro Council approval date
fun	l ends on June 30 of Metro fiscal year in which the grant is approved. If any part of this funding request is for ds to be spent before the grant award period, identify the applicable circumstances:
	as to be specificative the grant award period, identity 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.
	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.
	•

Page 5 Effective May 2016

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:
Having a functional playground for the students will increase physical activity. At this time, we do not plan to track outcomes for use of the playground.
We anticipate that having a playground with new equipment will increase the physical activity among students as well as the time spent dong physical activity on a weekly basis.
The playground will not be fenced in or locked in any way.
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.
Maupin has existing partnerships with Spalding University, Baptist Fellowship Center, Abacus Baptist Church, River City Drum Corps, and the Shawnee Christian Health Care Center. Our partners' contributions range from school
supplies to programming to on-site health services.

Page 6 Effective May 2016

Maupin Elementary School

1312 Catalpa Street Louisville, KY 40211 (502) 485-8310 Fax: (502) 485-8752



April 20, 2017

Councilwoman Jessica Green Louisville Metro Council District 1 City Hall 601 West Jefferson Street Louisville, KY 40202

Dear Councilwoman Green:

This letter is reference to the request for playground equipment at Maupin Elementary School. The play equipment will be available to the general public in an open, unlocked area. We are pleased that the surrounding day cares, churches, and neighbors will also enjoy the benefits of the play equipment.

Installation is expected to begin soon and completion of the playground to occur by the first week of July, 2017 (probably sooner). The play area will be available to the public after school hours beginning at 4:00 PM and all day when school is not in session.

We appreciate the Council's consideration for our request.

Sincerely,

Maria Holmes, Principal

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.

	Column 1	Column 2	Column (1+2)=3
Program/Project Expenses	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			
H: Program Materials			
I: Community Events & Festivals (See Detailed List on Page 8)			
J: Machinery & Equipment	\$10,000	\$13,858	\$23,858
K: Capital Project			
L: Other Expenses (See Detailed List on Page 8)			
*TOTAL PROGRAM/PROJECT FUNDS			
% of Program Budget	42 %	58 %	100%

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

Other State, Federal or Local Government	\$13,858
United Way	
Private Contributions (do not include individual donor names)	
Fees Collected from Program Participants	
Other (please specify)	
Total Revenue for Columns 2 Expenses **	

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

Page 7 Effective May 2016

^{**}Must equal or exceed total in column 2.

Detail for Client Assistance, Community Events & Festivals or Other Expenses shown on Page 7	Column 1	Column 2	Column (1 + 2)=3
(circle one and use multiple sheets if necessary)	Proposed Metro Funds	Non- Metro Funds	Total Funds
		t.	
Total			

Page 8 Effective May 2016

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		
,		
Total Value of In-Kind		
(to match Program Budget Line Item. Volunteer Contribution & Other In Kind)		
Agency Fiscal Year Start Date: July 1, 2017 Does your Agency anticipate a significant increase budget projected for next fiscal year? NO	e or decrease in your budget fr	om the current fiscal year to the
f YES, please explain:		
or 2017-18 the district has over \$60M in requests and instruction. The district is only able to fund about	from schools and programs outs out 20% of these requests.	ide of normal allocations for staff
here is no funding source at the district for playgro	ounds.	

Page 9 Effective May 2016

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.
- 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.
- 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.

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: Legal Signatory: (please print): Sam Corbett Title: Executive Director Phone: |502-599-8650 Extension: Email: samc@cflouisville.org



Miracle of KY & TN Tara Carpenter 931 Commerce Drive Leitchfield, Ky. 42754 Phone: 1-800-251-5578 tara@miraclekytn.com

Quotation

Quote # 17-0227-52

То

Maupin Elementary	Date	2/27/2017
1312 Catalpa St.	Contact	Stephanie Thomas
Louisville, KY 40211	Project	Playground
502-485-8310	Email	Stephanie.Thomas@jefferson.kyschools.us

We propose to furnish the following described materials.

Qty	Model #	Description	Price Total
1	304J	Ten Spin	\$2,480
1	714S489J	Kids Choice Fitness Cluster	\$5,000
1	7188526SJ	3 ½" OD Arch Swg Frame W/6 S/P Seats	\$2,550
90	Timbers	4' 12" Timbers WHSE	\$3,150
		Installation	\$1,800
		Total	\$14,980

Quote good for 30 days, due to freight cost. Installation prices will assume normal soil conditions and does not include rock excavation \$75 per foot for rock break minimum. Unless otherwise noted quote does not include prevailing wages, taxes, freight, permits, state or local approvals, performance bond, engineering seals, testing, site preparation, borders, safety surfacing, unloading, storage, security, fencing, landscaping. trash removal or soils(We are not responsible for the seed and straw of disturbed areas.) _______ Initial

This quotation, after acceptance by the buyer and when thereafter approved by an authorized official of the seller, in writing, will become a contract. Until so approved, is not a contract and is not binding on the seller in any way. If buyer does not give acceptance within 30 days, this quotation is subject to possible price revision. Accepted	Miracle Recreation of KY & TN
Name of Buyer	
Ву	Approved by
Authorized Signature	Authorized Signature
Date	Title Manufactures Rep. 1, D



Miracle of KY & TN Tara Carpenter 931 Commerce Drive Leitchfield, Ky. 42754 Phone: 1-800-251-5578 tara@miraclekytn.com

Quotation

Quote # 17-0227-51

To

Maupin Elementary	Date	2/27/2017
1312 Catalpa St.	Contact	Stephanie Thomas
Louisville, KY 40211	Project	Playground
502-485-8310	Email	Stephanie.Thomas@jefferson.kyschools.us

We propose to furnish the following described materials.

Qty	Model #	Description	Price Total	
1	SS45554A3	All-Star Internal Acrylic, HD Breakaway	\$1,400	
1	282-200	Fun Tunnel	\$1,096	
1	65-726	Mogul Slide W/ PVC	\$3,807	
26	Timbers	4' 12" Timbers WHSE	\$910	
		KEDC DISCOUNT	-\$735.45	
		Freight	\$600.21	
		Installation	\$1,800	
	·	Total	\$8,877.76	

Quote good for 30 days, due to freight cost. Installation prices will assume normal soil conditions and does not include rock excavation \$75 per foot for rock break minimum. Unless otherwise noted quote does not include prevailing wages, taxes, freight, permits, state or local approvals, performance bond, engineering seals, testing, site preparation, borders, safety surfacing, unloading, storage, security, fencing, landscaping. trash removal or soils(We are not responsible for the seed and straw of disturbed areas.) ______ Initial

This quotation, after acceptance by the buyer and when thereafter approved by an authorized official of the seller, in writing, will become a contract. Until so approved, is not a contract and is not binding on the seller in any way. If buyer does not give acceptance within 30 days, this quotation is subject to possible price revision.	Miracle Recreation of KY & TN
Accepted	
Name of Buyer	
Ву	Approved by
Authorized Signature	Authorized Signature
Date	Title Manufactures Rep. 1. D

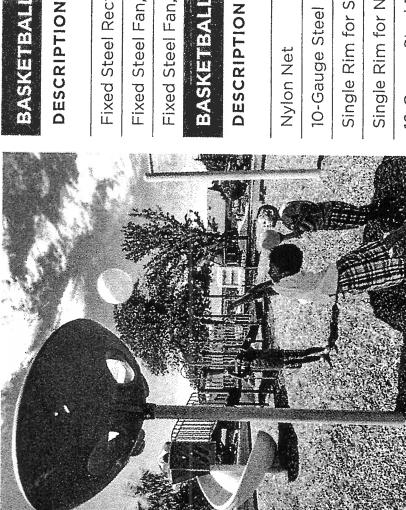
Fan-Shaped Backboard

360-757

Fan-Shaped Backboard

IDDIO MID AND HINGS

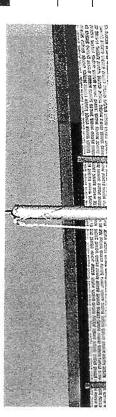
360-756



Fun Tunnel®

282-200

No protective area required Product & pricing may vary



BASKETBALL CO DESCRIPTION

Fixed Steel Rect., Sing

Fixed Steel Fan, Douk

Fixed Steel Fan, Douk

BASKETBALL RIM

Nylon Net

10-Gauge Steel Fan

Single Rim for Steel N

Single Rim for Nylon I

12-Gauge Steel Rectal

Double Rim for Nylon

Double Rim for Steel

Fixed Height, 41/2" O.E

Basketball Fastener K

OTHER GAME EQ

DESCRIPTION

Baseball Backstop wit

Tothor Dall (Dall incline

1) こ - ココしつ

LIST PRICE: \$7,364

MODEL#; 477-210J

FOR KIDS AGES: 5 TO 12

2- BAY ARCH SWING SALE PRICE \$1

LIST PRICE: \$2,078 MODEL#: 718-852-4SJ

FOR KIDS AGES: 2 TO 12

PROTECTIVE AREA: 32' X 36'

PLAY AREA CAPACITY: 4

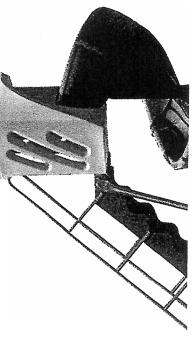
3-BAY ARCH SWING W/6 BELT :

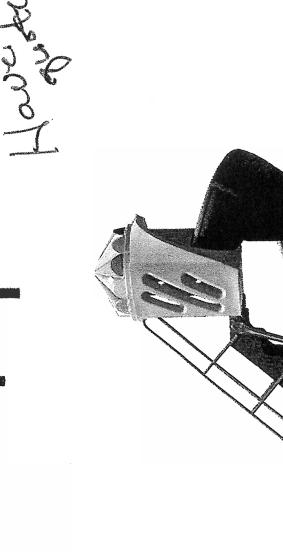
SALE PRICE \$2,550

FREESTANDING TYPH SALE PRICE \$7

LIST PRICE: \$8,890

FOR KIDS AGES: 5 TO 12 MODEL#: 65-769J



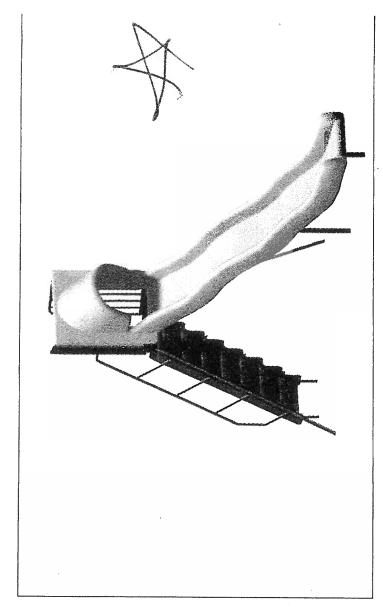


(19,

Available in 5' or 6' (Shown) **65-670-16** Price: \$4,128 Available in multiple configurations 65-670-15

466-670-1 Price: \$4,210

Available in multiple Available NX and KC configurations Available in 5'



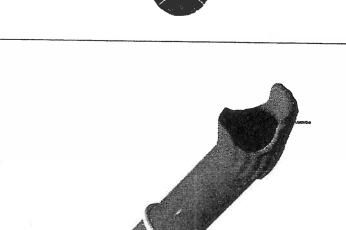
Mogul™ Slide with PVC Steps

65-726 Price: \$2,810 (for 5' shown)

Protective Area: 22' x 40'

5', 6'6" and 8' height



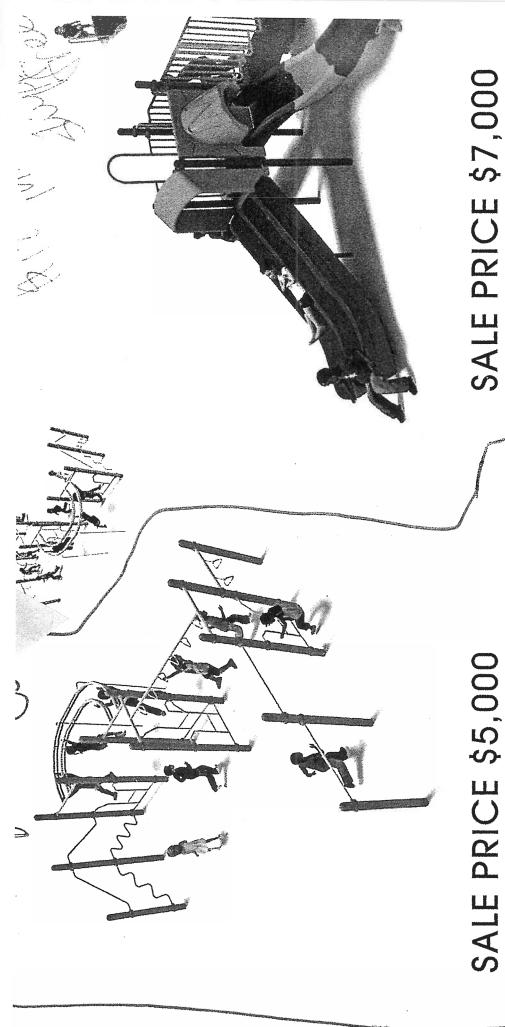








out windows



FOR KIDS AGES: 2 TO 5 MODEL#; 718-S160J LIST PRICE: \$11,139

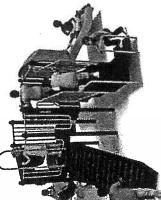
PLAY AREA CAPACITY: 25-35 PROTECTIVE AREA: 34' X 32'

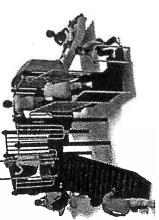
BIBA INCLUDED: YES

FOR KIDS AGES: 5 TO 12

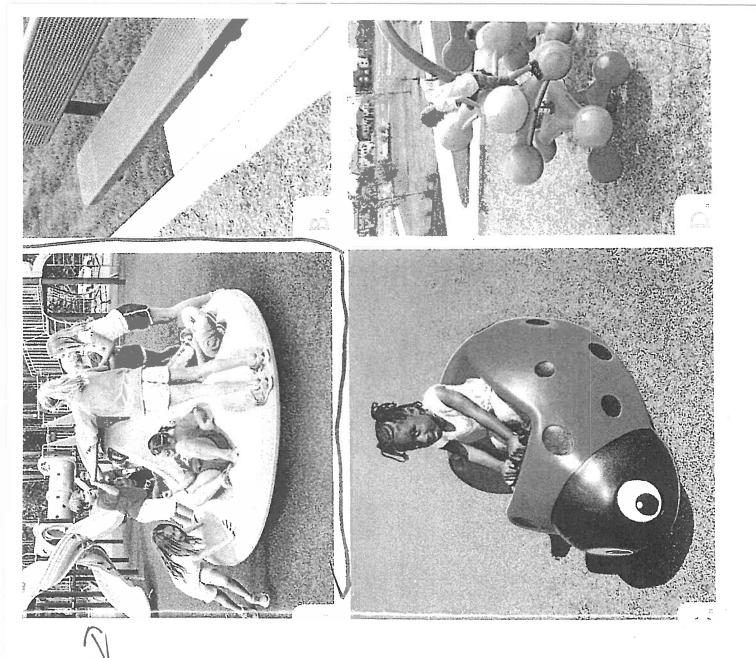
MODEL#: 714-S489J LIST PRICE: \$8,701

PLAY ARE, BIBA INCL **PROTECTI**









Ten Spin 2482 Ages 2 to 12



Louisville Metro Government Office of Management and Budget

Neighborhood Development Fund Training Attestation

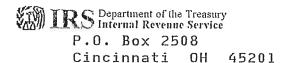
Organization Name: <u>///</u>	laupin Eleme	entary School	1
Participant Name:	Maria Holme	<u>°</u> 5.	Management of the Control of the Con
l agree that I am an autl organization named above ar Development Fund training. I Neighborhood Development Fu	nd attest to havi In addition, I und	ng participated in derstand the requir	Neighborhood
Please check:			
I viewed the NDF t	raining material o	on the website	
Marun Volue Participant Signature	<u> </u>	3-/-/7 Date	And the second of the second o

NOTE: Please return to Roxanne Steele

E-mail address: Roxanne.Steele@louisvilleky.gov or Fax: 502-574-3219

Mailing Address: Louisville Metro Government ATTN: NDF Coordinator 611 West Jefferson St.

Louisville, Kentucky 40202



In reply refer to: 0248164841
LTR 4168C E0
000000 00
00015796

BODC: TE

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



034020

Employer Identification Number:
Person to Contact:
B. HALL
Toll Free Telephone Number: 1-877-829-5538-

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.



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

Dargartin

	FY17 Budget
Revenue	, _
Corporate Total	\$250,000
Foundation Total	\$1,000,000
Government Total	\$10,000
Individual Total	\$200,000
	\$1,460,000

Expenses

Student Scholarships	\$25,000
School-Based Support	\$586,000
Teacher Recognition Programs	\$49,000
Ford Next Generation Learning	\$100,000
Kindergarten Readiness Efforts	\$500,000
Operating Expenses	\$200,000

\$1,460,000

Jefferson County Public Education Foundation Nominations Committee

Slate of Officers	Term
Jim Allen, Chairman	2018
Franklin Jelsma, Vice Chair	2018
Joe Seiler, Sec/Treasurer	2018
Board	Term
Jim Allen	2018
Robert Arnold	2019
Mike Brown	2017
Vik Chadha	2019
Malcom Chancey	Emeritus
Al Cornish	2018
Joe Seiler	2017
Dr. Alex Gerassimides	2019
Joe Hardesty	2019
Audwin Helton	2019
Henry Heuser, Jr.	2018
Lynn Huether	2018
Franklin Jelsma	2018
Kevin Joynt	2019
Tanja Oquendo	2019
Mitch Rue	2018
Ken Selvaggi	2019
Mark Shirkness	2017
Kevin Shurn	2017
Carol Timmons	2019
leff Uligian	2017

There are no term Junits for board members

Jefferson County Public Education Foundation

Balance Sheet 1/31/17

ASSETS	Jun-15	Jun-16	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Jan-17
Cash and Cash Equilivalents Republic Bank-Checking Stockyards Cantrell Fund	\$0 \$12,800	\$0 \$12,800	\$0 \$12,800	\$0 \$12,800	\$0 \$12,800	\$0 \$12,800	\$0 \$12,600	\$0 \$0	\$0 · \$0
PNC-Checking PNC-Investment Sweep Total	\$0 \$1,346,172 \$1,358,972	\$0 \$1,202,254 \$1,215, 054	\$0 \$3,408,320 \$3,421,120	\$365,503 \$3,403,147 \$3,781,450	\$0 \$3,732,840 \$3,745,640	\$14,900 \$3,745,048 \$3,772,748	\$0 \$2,473,121 \$2,485,921	\$0 \$2,086,014 \$2,086,014	\$0 \$2,126,093 \$2,126,093
Investments	\$0	\$0	\$0	\$0	\$0	\$0	\$0	. \$0	\$0
Total Assets	\$1,358,972	\$1,215,054	\$3,421,120	\$3,781,450	\$3,745,640	\$3,772,748	\$2,485,921	\$2,086,014	\$2,126,093
FUND BALANCES Restricted Operating / Unrestricted Total Fund Balances	\$1,308,493 \$50,479 \$1,358,972	\$1,054,640 \$160,414 \$1,215,054	\$3,190,646 \$230,474 \$3,421,120	\$3,525,213 \$256,237 \$3,781,450	\$3,511,803 \$233,837 \$3,745,640	\$3,539,144 \$233,604 \$3,772,748	\$2,272,494 \$213,427 \$2,485,921	\$1,935,666 \$150,348 \$2,086,014	\$1,971,236 \$154,857 \$2,126,093
Check total	, \$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Checking-Republic Bank and Trust Stockyards		1	\$0.00 \$0.00						
PNC Checking Sweep Checking Account Sweep-Repurchase Agreeement Outstanding Checks			\$0.00 \$2,213,177.00	,					
Treasurer JCPS	16		\$1,000.00					*	
ESL Newcomer Academy	10		\$1,000.00						
Assumption High	66		\$84,00						
Olmstead Academy	118		\$1,000.00						
Treasurer JCPS	162		\$1,000.00						
Waggener High	163		\$1,000.00						
Carter Traditional	192		\$1,000.00						
Learning Stewards	199		\$75,000.00						
University of Louisville	200		\$6,000,00						

\$87,084.00 2,126,093.00 2,126,093.00

Total Checks Outstanding

Net DDA Position Total CASH

Jefferson County Public School Foundation July 1, 2016 - Jan 31, 2017 Fund Transactions

		Cash	Cash	
FUNDS	Balance		Disbursements	Balanc
Abramson Scholarship	30-Jun-16	YTD	YTD	Curre
AP Teacher Training	\$6,675.00		\$4,000.00	\$3,175.0
Arts Education	\$7,490.00		\$0.00	\$7,490.0
Basics for Kids	\$0.00		\$0.00	\$5,000.0
Cane Run Elementary	\$0,96		\$0.96	\$0.0
Cane Run Playground	\$81.59		\$0.00	\$81.5
Kindergarten Camp	\$221.39		\$0.00	\$221.3
College Going Culture		\$1,016,766.77	\$259,926.55	\$781,303.3
Central High School	\$13,335.00		\$0.00	\$13,335.0
Chris Nelligan Scholarship Fund	\$441.00 \$6,396.03		\$0.00	\$441.0
Cummings School Fund			\$1,000.00	\$5,896.0
David Jones L. Vocal Scholarship	\$9,281.41	\$0.49	\$250.00	\$9,031.9
Diversity Equity Poverty	\$43,370.53		\$5,000.00	\$38,372.6
Dominque Kemp Scholarship	\$385.00		\$0.00	\$385.0
Elaine Whalen Litercy	\$2,000.00	\$0.00	\$2,000.00	\$0.0
ESL Reading Program	\$2,000.00	\$1,995.00	\$507.66	\$3,487.3
Every 1 Reads	\$0.00	\$50,000.00	\$0.00	\$50,000.00
Excel Program Fund	\$192,394.22	\$0.00	\$75,000.00	\$117,394.2
Family Resource & Youth Ser.Ctr.	\$17,515.22	\$13,000.00	\$4,000.00	\$26,515.23
	\$2,035.64	\$0.00	\$0.00	\$2,035.64
Ford First Robotics Ford NGL	\$15.25	\$0.00	\$15.25	\$0.00
	\$20,048.36	\$0.00	\$18,046.24	\$2,002.12
Ford Implementation	\$14,002.55	\$0.00	\$825.00	\$13,177.5
Ford Academies	\$22,921.72	\$0.00	\$8,724.30	\$14,197.4
Genentech NSC	\$1,485.30	\$0.00	\$0.00	\$1,485.3
Greater Louisville Education Project	\$15,024.00	\$0.00	\$0.00	\$15,024.00
Gordon Food Service	\$18,794.93	\$0.00	\$5,200.00	\$13,594.93
IDEA Festival	\$143,40	\$1,500.00	\$0.00	\$1,643.40
Imagination Library	\$0.00	\$24,000.00	\$0.00	\$24,000.00
Joe Cantrell Schorlarship	\$4,050.00	\$2,000.00	\$6,000.00	\$50,00
incoln Elementary	\$2,438.69	\$0.00	\$1,101.33	\$1,337.36
Lou. Education & Employment Part.	\$34,226.85	\$0.00	\$2,000.00	\$32,226.85
ou Goes to College	\$20,000.00	\$0.00	\$0.00	\$20,000.00
Metro Govt. Grants	\$17,500.23	\$29,000.00	\$33,539.95	\$12,960.28
Short Term Designated	\$319,802.91	\$1,437,111.74	\$1,335,225.76	\$421,688.89
Moore Alumni Scholarship	\$3,123.56	\$290.00	\$1,112.50	\$2,301.06
National Board Certified Teacher Training	\$38,000.00	\$0.00	\$9,750.00	\$28,250.00
Newcomer Summer Program	\$0.00	\$0.00	\$0.00	\$0.00
Oliver Daniel Winn HOSA	\$24,000.00	\$0.00	\$0.00	\$24,000.00
Portland Elementary	\$20.00	\$0.00	\$20.00	\$0.00
Reach Program	\$0.00	\$100,000.00	\$0.00	\$100,000.00
Rangeland Elementary Playground	\$21.86	\$0.00	\$21.86	\$0.00
Roy Birmingham Memorial	\$3,606.00	\$0.00	\$0.00	\$3,606.00
Russell Garth Leadership	\$2,907.12	\$0.00	\$0.00	\$2,907.12
Sam Rechler Educational Fund	\$8,556.46	\$0.00	\$0.00	\$8,556.46
Shawnee High School Class of 1954	\$198.02	\$1,047.15	\$1,000.00	\$245.17
STEM	\$0.00	\$0.00	\$0.00	\$0.00
Stephanle Kremer Scholarship	\$828.00	\$500.00	\$0.00	\$1,328.00
Steve W Majors Memorial Scholarship	\$1,900.00	\$0.00	\$0.00	\$1,900.00
Street Academy	\$1,810.00	\$0.00	\$0.00	
eacher Excellence Awards	\$14,157.48	\$23,000.00	\$37,000.00	\$1,810.00
hornton Scholarship	\$4,035.38	\$0.00		\$157.48
ugs at Your Heart	\$1,525.00	\$0.00	\$0.00	\$4,035.38
alley High Alumni	\$1,206,44		\$0.00	\$1,525.00
ogt Scholars	\$9,777.86	\$0.00	\$0.00	\$1,206.44
/estern High School Early College		\$0.00	\$0.00	\$9,777.86
VHAS Crusade for Children Fund	\$56.82	\$0.00	\$56.82	\$0.00
/yatt Debate Scholarship Fund	\$0.00	\$0.00	\$0.00	\$0.00
outh Achievement	\$17,534.69	\$45,859.05	\$16,418.74	\$46,975.00
PAS	\$69,767.97	\$0,00	\$4,000.00	\$65,767.97
EON	\$321.98	\$0.00	\$0.00	\$321.98
	\$31,819.60	\$0.00	\$3,718.15	\$28,101.45
pard Meeting Fund	<u>\$425.61</u>	\$1,400.00	\$915.25	\$910.36
otal Restricted	\$1,054,140.20	52,753,472.35	\$1,836,376.32	\$1,971,236.23
xec Director Innovation Fund	\$32,956.44	\$8,192.61	\$16,673.22	\$24,475.83
xec Director Operating Salary	\$36,609.81	\$100,000.00	\$104,143.16	\$32,466.65
nrestricted	\$15,486.17	\$100,00	\$0.00	\$15,586.17
perating	\$75,361.72	\$25,166.96	\$18,200.51	\$82,328.17
otal Unrestricted	\$160,414.14	\$133,459.57	\$139,016.89	\$154,856.82
otal Fund Balances		2,886,931.92	\$1,975,393.21	

Jefferson County Public School Foundation July 1, 2016 - Jan 31, 2017 Fund Transactions

199 200

Wilson Wyalt Debate 1/12/2017 \$6,000.00 University of Louisville Metro Govt Grants 1/30/2017 \$5,000.00 Louisville Metro Govt Metro Govt Grants 1/30/2017 \$5,000.00 Louisville Metro Govt Executive Director Innovation Fund 1/30/2017 \$1,000.00 Thomas Executive Director Innovation Fund 1/30/2017 \$2,000.00 Shirkness Executive Director Innovation Fund 1/30/2017 \$1,000.00 Alten Executive Director Innovation Fund 1/30/2017 \$500.00 Selvaggl Idea Festival 1/30/2017 \$500.00 Reily Bingham Short Term Designated 1/30/2017 \$65,000.00 GE Haier Short Term Designated 1/30/2017 \$10,000.00 Community foundation Short Term Designated 1/30/2017 \$2,500.00 Community foundation of utah	Everyone Reads	1/12/2017		\$75,000.00	Learning Stewards
Metro Govt Grants 1/30/2017 \$5,000.00 Louisville Metro Govt Executive Director Innovation Fund 1/30/2017 \$1,000.00 Thomas Executive Director Innovation Fund 1/30/2017 \$2,000.00 Shirkness Executive Director Innovation Fund 1/30/2017 \$250.00 Rue Executive Director Innovation Fund 1/30/2017 \$1,000.00 Alten Executive Director Innovation Fund 1/30/2017 \$500.00 Selvaggi Idea Festival 1/30/2017 \$500.00 Reily Bingham Short Term Dasignated 1/30/2017 \$65,000.00 GE Haier Short Term Designated 1/30/2017 \$10,000.00 Community foundation	Wilson Wyatt Debate	1/12/2017		\$6,000.00	University of Louisville
Executive Director Innovation Fund 1/30/2017 \$1,000.00 Thomas Executive Director Innovation Fund 1/30/2017 \$2,000.00 Shirkness Executive Director Innovation Fund 1/30/2017 \$250.00 Rue Executive Director Innovation Fund 1/30/2017 \$1,000.00 Alten Executive Director Innovation Fund 1/30/2017 \$500.00 Selvaggl Idea Festival 1/30/2017 \$500.00 Reily Bingham Short Term Designated 1/30/2017 \$65,000.00 GE Haier Short Term Designated 1/30/2017 \$10,000.00 Community foundation	Metro Govt Grants	1/30/2017	\$5,000.00		Louisville Metro Govt
Executive Director Innovation Fund 1/30/2017 \$2,000.00 Shirkness Executive Director Innovation Fund 1/30/2017 \$250.00 Rue Executive Director Innovation Fund 1/30/2017 \$1,000.00 Alten Executive Director Innovation Fund 1/30/2017 \$500.00 Selvaggl Idea Festival 1/30/2017 \$500.00 Reily Bingham Short Term Designated 1/30/2017 \$25,335.00 Norton Foundation Short Term Designated 1/30/2017 \$65,000.00 GE Haier Short Term Designated 1/30/2017 \$10,000.00 Community foundation	Metro Govt Grants	1/30/2017	\$5,000.00		Louisville Metro Govt
Executive Director Innovation Fund 1/30/2017 \$250.00 Rue Executive Director Innovation Fund 1/30/2017 \$1,000.00 Alten Executive Director Innovation Fund 1/30/2017 \$500.00 Selvaggl Idea Festival 1/30/2017 \$500.00 Reily Bingham Short Term Designated 1/30/2017 \$2,535.00 Norton Foundation Short Term Designated 1/30/2017 \$65,000.00 GE Haier Short Term Designated 1/30/2017 \$10,000.00 Community foundation	Executive Director Innovation Fund	1/30/2017	\$1,000.00		Thomas
Executive Director Innovation Fund 1/30/2017 \$1,000.00 Allen Executive Director Innovation Fund 1/30/2017 \$500.00 Selvaggl Idea Festival 1/30/2017 \$500.00 Reily Bingham Short Term Designated 1/30/2017 \$2,535.00 Norton Foundation Short Term Designated 1/30/2017 \$65,000.00 GE Haier Short Term Designated 1/30/2017 \$10,000.00 Community foundation	Executive Director Innovation Fund	1/30/2017	\$2,000.00		Shirkness
Executive Director Innovation Fund 1/30/2017 \$500.00 Selvaggl Idea Festival 1/30/2017 \$500.00 Reily Bingham Short Term Designated 1/30/2017 \$2,535.00 Norton Foundation Short Term Designated 1/30/2017 \$65,000.00 GE Haier Short Term Designated 1/30/2017 \$10,000.00 Community foundation	Executive Director Innovation Fund	1/30/2017	\$250.00		Rue
Idea Festival 1/30/2017 \$500.00 Reily Bingham Short Term Designated 1/30/2017 \$2,535.00 Norton Foundation Short Term Designated 1/30/2017 \$65,000.00 GE Haier Short Term Designated 1/30/2017 \$10,000.00 Community foundation	Executive Director Innovation Fund	1/30/2017	\$1,000.00		Allen
Short Term Designated 1/30/2017 \$2,535.00 Norton Foundation Short Term Designated 1/30/2017 \$65,000.00 GE Haier Short Term Designated 1/30/2017 \$10,000.00 Community foundation	Executive Director Innovation Fund	1/30/2017	\$500.00		Selvaggi
Short Term Designated 1/30/2017 \$65,000.00 GE Haier Short Term Designated 1/30/2017 \$10,000.00 Community foundation	Idea Festival	1/30/2017	\$500.00		Reily Bingham
Short Term Designated 1/30/2017 \$10,000.00 Community foundation	Short Term Designated	1/30/2017	\$2,535.00		Norton Foundation
	Short Term Designated	1/30/2017	\$65,000.00		GE Haler
Short Term Designated 1/30/2017 \$2,500.00 Community foundation of utah	Short Term Designated	1/30/2017	\$10,000.00		Community foundation
	Short Term Designated	1/30/2017	\$2,500.00	•	Community foundation of utah
Short Term Dosignated 1/30/2017 \$2,000.00 Louisvillo Orticestra	Short Term Designated	1/30/2017	\$2,000.00		Louisvillo Orhcestra
Idoa Festival 1/30/2017 \$1,000.00 Glowtouch	Idea Festival	1/30/2017	\$1,000.00		Glowtouch
Elaine Whelan Literacy 1/30/2017 \$25.00 Whelan Kim	Elaine Whelan Literacy	1/30/2017	\$25.00		Whelen Kim
Efeine Whelen Literacy 1/30/2017 \$40,00 Whelen	Elsins Whelan Literacy	1/30/2017	\$40.00		Whelen
Elaine Whelan Literacy 1/30/2017 \$20.00 Pemberton	Elaine Whelan Literacy	1/30/2017	\$20,00		Pemberton
Imagination Library 1/30/2017 \$22,850.00 Kosair	•	1/30/2017	\$22,850.00		Kosair
Chris Nelligan Scholarship 1/30/2017 \$100.00 Stosberg	Chris Nelligan Scholarship	1/30/2017	\$100.00		Stosberg
Operating 1/30/2017 \$259.95 DDA SVC Charge	Operating	1/30/2017		\$259.95	DDA SVC Charge
Operating 1/30/2017 \$18.25 Interest income	Operating	1/30/2017	\$18.25		Interest Income
David Jones 1/30/2017 \$0.34 Interest income	David Jones	1/30/2017	\$0.34		Interest income
Cummings School Fund 1/30/2017 \$0.08 Interest income	Cummings School Fund	1/30/2017	\$0.08		Interest income

Corporate Business Account Statement



For the period 12/31/2016 to 01/31/2017

004213

JEFFERSON COUNTY PUBLIC EDUCATION FOUNDATION INC JOE SEILER 2500 EASTPOINT PKWY LOUISVILLE KY 40223-4156

Account number:

Page 1 of 4

Number of enclosures: 0 Tax ID Number: 61-1021128

For Client Services: Call 1-800-669-1518

Visit us at PNC.com/treasury

Write to: Treas Mgmt Client Care
One Financial Parkway
Locator Z1-Yb42-03-1
Kalamazoo , MI 49009

ccount Summary	Informatio	n					
alance Summary							,
	Beginning balance		osits and er credits	Checks and other debits		Ending balance	
	0.00	169,	303.70	169,303.70		0.00	
eposits and Other Cr	edīts		1	Checks and Other D	ahits		
scription	ltems		Amount	Description		Items	Amoun
eposits	1	121,3	320.00	Checks		7	48,970.33
ational Lockbox	0		0.00	Returned Items		0	0.00
CH Credits	0		0.00	ACH Debits		0	0.00
ınds Transfers İn	20		18.67	Funds Transfers Out		0	0.00
ade Services	0		0.00	Trade Services		0	0.00
vestments	4	47,9	65.03	Investments		16	120,073.42
ro Balance Transfers	0		0.00	Zero Balance Transfers		0	0.00
ljustments	0	•	0.00	Adjustments		0	0.00
her Credits	0			Other Debits		ī	259.95
otal .	25	169,3	03.70	Total		24	169,303.70
dger Balance							
e Ledgerb	alance	Date		Ledger balance	Date		Ledger balance
	0.00	01/11		0.00	01/23		0.00
	0.00 0.00	01/12		0.00	01/23 $01/24$ $01/25$		0.00
/05	0.00	01/13 01/17		0.00 0.00	$01/25 \\ 01/26$		0.00
	0.00	01/18		0.00	01/20 - 01/27	•	$0.00 \\ 0.00$
1 m . n	0.00 0.00	01/19 01/20		0.00	01/30		86,370.00
		01/40		0.00	01/31		0.00

⇒posits and	Other Credits
posits	I transaction for a total of \$ 424 220 00

ded Amount description description 121,320.00 Deposit

Reference number

036892081

Corporate Business Account Statement

JEFFERSON COUNTY PUBLIC EDUCATION FOUNDATION INC

For t	he	period	12/31	/2016	to	01/31	/2017
-------	----	--------	-------	-------	----	-------	-------

Account number:

Page 2 of 4

Deposits and C					
Funds Transfers I	11	20 transactions for a total of \$ 18.67			
Date posted	· · · · · · · · · · · · · · · · · · ·	Transaction	Referenc		
01/03	Amoun 2.30		numbe		
01/04	0.59	1	0000000000012		
01/05	0.58		0000000000012		
01/06	0.58		0000000000012		
01/09	1.75	I - I - I - I - I - I - I - I - I - I -	0000000000012		
01/10			0000000000012		
01/11	0.58	r	0000000000012		
01/12	0.58	and the street.	00000000000012		
01/13	0.58		00000000000012		
01/17	0.58	1 1	0000000000012		
01/18	2.33		0000000000012		
01/10	0.58	f	0000000000118		
)1/20	0.58	Interest For Repo Sweep	00000000000119		
)1/23	0.58		00000000000119		
•	1.75	Interest For Repo Sweep	00000000000120		
)1/24	0.58		00000000000121		
11/25	0.58	Interest For Repo Sweep	00000000000122		
01/26	0.58	Interest For Repo Sweep	00000000000120		
1/27	0.58	Interest For Repo Sweep	00000000000121		
1/30	1.74	Interest For Repo Sweep	000000000000121		
1/31	0.58	Interest For Repo Sweep	00000000000120		
nvestments		4 transactions for a total of \$ 47,965.03			
ate osted	Amount	Transaction description			
1/03		Repo Sweep/Investment Position 2,096,946.20			
1/06	60.40	Repo Sweep/Investment Position 2,096,886.97			
1/09	2,782.15				
1/26	999.42	Repo Sweep/Investment Position 2,094,104.82			
.,	959.42	Repo Sweep/Investment Position 2,093,114.70			
hecks and Oth	er Debits				
hecks and Substi	tute Checks	7 transactions for a total of \$ 48,970.33			
ite Check	Reference	Date Check Reference Date Check	Reference		
sted number ./03 180	Amount number 375.45 095655714	posted number Amount number posted number	Amount number		
	13,750.00 095656461	01/09 195 2,500.00 090349420 01/30 194 01/09 196 283.90 031451645	1,000.00 096000096		
√06 198	60.98 090201109	01/26 191 1,000.00 090022116			
vestments		16 transactions for a total of \$ 120,073.42			
ite sted	0	Transaction			
1/04	Amount	description			
1/05	0.59	Repo Sweep/Investment Position 2,096,946.79			
·	0.58	Repo Sweep/Investment Position 2,096,947.37			
:/10 :/11	0.58	Repo Sweep/Investment Position 2,094,105.40			
		Repo Sweep/Investment Position 2,094,105.98			
./12	0.58	Repo Sweep/Investment Position 2,094,106.56			
/13	0.58	Repo Sweep/Investment Position 2,094,107.14			
/17	2.33	Repo Sweep/Investment Position 2,094,109.47			



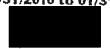
Corporate Business Account Statement

IEFFERSON COUNTY PUBLIC EDUCATION OUNDATION INC

© PNCBANK For the period 12/31/2016 to 01/31/2017

Account number:

Page 3 of 4



nvestments- continued		16 transactions for a total of \$ 120,073.42		
ate osted	Amount	Transaction		
1/18	0.58	Repo Sweep/Investment Position 2,094,110.05		
1/19	0.58	Repo Sweep/Investment Position 2,094,110.63	,	
1/20	0.58			
1/23	1.75			
1/24	0.58	Repo Sweep/Investment Position 2,094,113.54		
1/25	0.58			
1/27	0.58	Repo Sweep/Investment Position 2,093,115.28		
1/30	33,951.74	Repo Sweep/Investment Position 2,127,067.02		
1/31	86,110.63	Repo Sweep/Investment Position 2,213,177.65		
ther Debits		1 transaction for a total of \$ 259.95	· · · · · · · · · · · · · · · · · · ·	
ite sted	Amount	Transaction description		Reference
1/31	259.95	Corporate Account Analysis Charge		numbe 0000000000000000005096;

Gap	in	check	sea	uence
-----	----	-------	-----	-------

		-												
eck mber		Amount	Date paid	Reference number	Check		Amount	Date paid	Reference number	Check number		Amount	Date paid	Reference
(1)	-	11000 400	44 (44)		i					110111111111111111111111111111111111111		Amount	haid	number
U	-	375.45	01/03	095855714	194	*	1,000.00	01/30	096000096	198	-	60.00		
19	-	40 550 00					1,000.00	01,00	050000050	120	-	60.98	01/06	090201109
1.8	4	43.750.00	01/03	095656461	195		2,500,00	01/09	00004040					00000.100
•							2,500,00	01/09	090349420	,				
ž.	*	1,000,00	01/26	กรถกวว116	1 106		984 99	01 /00	004454046					

Reviewing Your Statement

Hease review this statement carefully and reconcile it with your records. Call the telephone number on the upper right side of the first page of this statement if:

you have any questions regarding your accounts(s);

your name or address is incorrect;

you have a business account and your tax identification number is missing or incorrect;

you have any questions regarding interest paid to an interest-bearing account.

3alancing Your Account

Jpdate Your Account Register

compare:

The activity detail section of your statement to your account register.

heck Off:

All items in your account register that also appear on your statement. Remember to begin with the ending date of your last statement. (An asterisk {*} will appear in the Checks

section if there is a gap in the listing of consecutive check numbers.)

idd to Your Account Register lalance:

Any deposits or additions including interest payments and ATM or electronic deposits listed on the statement that are not already entered in your register.

subtract From Your Account

Any account deductions including fees and ATM or electronic deductions listed on the

statement that are not already entered in your register.

Ipdate Your Statement Information

tep 1: .dd together eposits and ther additions sted in your count register it not on your atement.

legister Balance:

Date of Deposit	Amount
Total A	

Step 2: Add together checks and other deductions listed in your account register but not on your statement.

Deduction Description	Amount

Total B	

Check Number or

iter the ending balance recorded on your statement dd deposits and other additions not recorded

\$ Total A + \$____

Subtotal= \$

ibtract checks and other deductions not recorded Total B - \$

ie result should equal your account register balance

⇒rification of Direct Deposits

verify whether a direct deposit or other transfer to your account has occurred, call us Monday - Friday: 7 AM - 10 PM ET and Saturday Sunday: 8 AM - 5 PM ET at the customer service number listed on the upper right side of the first page of this statement.

Case of Errors or Questions about Your Electronic Transfers

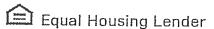
lephone us at the customer service number listed on the upper right side of the first page of this statement or write us at PNC Bank Check rd Services, 500 First Avenue, 4th Floor, Mailstop P7-PFSC-04-M, Pittsburgh, PA 15219 as soon as you can, if you think your statement receipt is wrong or if you need more information about a transfer on the statement or receipt. We must hear from you no later than 60 ys after we sent you the FIRST statement on which the error or problem appeared.

(1) Tell us your name and account number (if any).

(2) Describe the error or the transfer you are unsure about, and explain as clearly as you can why you believe it is an error or why you need more information.

(3) Tell us the dollar amount of the suspected error.

will investigate your complaint and will correct any error promptly. If we take more than 10 business days to do this, we will wisionally credit your account for the amount you think is in error, so that you will have use of the money during the time it es us to complete our investigation.





ommonwealth of Aentucky Office of Secretary of State

FRANCES JONES MILLS
Secretary



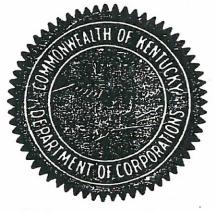
FRANKFORT, KENTUCKY

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	d 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.

Frances Jones Mills
SECRETARY OF STATE

SECRETARY OF STATE

ASSISTANT SECRETARY OF STATE

ARTICLES OF INCORPORATION MAR 1 4 1983

OF

JEFFERSON COUNTY PUBLIC EDUCATION FOUNDATION

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

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.

- Any other provisions of these articles to the D. 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

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 41 752

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.

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) 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	
Lousville, Kentucky, this Hay of Morel	
19 <u>84</u> .	
Malestallemans	
COMMONWEALTH OF KENTUCKY)	
COUNTY OF JEfferson ; SS	-
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 the Incorporation of Incorporation	
My commission expires: Sept 30, 1984.	C
Saturia S. Webl Notary Public	•

THIS INSTRUMENT WAS PREPARED BY

G. Alexander Hamilton WYATT, TARRANT & COMBS

Citizens Plaza

Louisville, Kentucky 40202

A1408
183 MR 21 M10 33
183 MR 21 M10 33

8

501x 301 FAME 964

JEFFERSON COUNTY PUBLIC EDUCATION FOUNDATION, INC.

FINANCIAL STATEMENTS

YEARS ENDED JUNE 30, 2015 AND 2014

JEFFERSON COUNTY PUBLIC EDUCATION FOUNDATION, INC.

CONTENTS

	Page
Independent Auditor's Report	3
STATEMENTS OF ASSETS AND NET ASSETS – CASH BASIS	4
AND CHANGES IN NET ASSETS – CASH BASIS	5-6 7-9



KNOWLEDGE FOR TODAY VISION FOR TOMORROW
1200 FOREST BRIDGE ROAD, SUITE 200 LOUISVILLE, KY 40223 • PO BOX 22039 LOUISVILLE, KY 40252 • 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, 2015 and 2014, 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, 2015 and 2014, 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.

Louisville, Kentucky May 11, 2016

Monroe Shine

JEFFERSON COUNTY PUBLIC EDUCATION FOUNDATION, INC. STATEMENTS OF ASSETS AND NET ASSETS - CASH BASIS JUNE 30, 2015 AND 2014

ASSETS

	<u>2015</u>	<u>2014</u>
Cash and cash equivalents	\$ 1,358,972	\$ 1,625,514
NET ASSETS		
Unrestricted	13,598	17,279
Unrestricted - board designated	69,035	103,765
Temporarily restricted	1,276,339	 1,504,470
TOTAL NET ASSETS	\$ 1,358,972	\$ 1,625,514

JEFFERSON COUNTY PUBLIC EDUCATION FOUNDATION, INC. STATEMENTS OF REVENUES AND SUPPORT, EXPENSES, AND CHANGES IN NET ASSETS - CASH BASIS YEAR ENDED JUNE 30, 2015

		CE&S						
		Every One Kindergarten			Vogt		Youth	
	R	eads	P	rogram	Sc	holars	Acl	hievement
TEMPORARILY RESTRICTED NET ASSETS								
Revenue and support:								
Contributions	\$	4,000	\$	250,000	\$	_	\$	
Transfers to unrestricted	· · · · · ·	(17,580)	-	-		-		(3,000)
Changes In Temporarily Restricted Net Assets		(13,580)		250,000		-		(3,000)
UNRESTRICTED NET ASSETS	•							
Revenue and support:								
Contributions		-		-		*		_
Net investment income		-		_		_		-
Transfers from temporarily restricted		17,580		-		-		3,000
		17,580		-		-		3,000
Expenses:								
Educational grants and expenses		17,580		-		-		3,000
General expenses		-		-		-		-
	· · · · · · · · · · · · · · · · · · ·	17,580				-		3,000
Changes In Unrestricted Net Assets		-		-		-		
Changes In Total Net Assets	((13,580)		250,000		_		(3,000)
Total Net Assets, Beginning of Year	2	222,445				69,778		75,768
Total Net Assets, End of Year	\$ 2	208,865	\$	250,000	\$	69,778	\$	72,768

[.] See notes to financial statements.

	Other Temporarily Restricted	Temporarily Restricted Total	Board Designated Programs	Other Unrestricted	Total
- \$	812,876 (1,274,431)	\$ 1,066,876 (1,295,011)	\$ -	\$ -	\$ 1,066,876 (1,295,011)
	(461,555)	(228,135)	**	-	(228,135)
	- 4 1,274,431	- 4 1,295,011	- - -	6,248 138 -	6,248 142 1,295,011
	1,274,435	1,295,015	-	6,386	1,301,401
_	1,274,431 - 1,274,431	1,295,011	34,730 - 34,730	- 10,067 10,067	1,329,741 10,067 1,339,808
	4	4	(34,730)	(3,681)	(38,407)
	(461,551) 1,136,479	(228,131)	(34,730)	(3,681)	(266,542)
	674,928	1,504,470 \$ 1,276,339	\$ 69,035	\$ 13,598	1,625,514 \$ 1,358,972

JEFFERSON COUNTY PUBLIC EDUCATION FOUNDATION, INC. STATEMENTS OF REVENUES AND SUPPORT, EXPENSES, AND CHANGES IN NET ASSETS - CASH BASIS YEAR ENDED JUNE 30, 2014

	ery One Reads		novation Grants	Gov	Metro vernment Grants	Sch	tern High ool Early College
TEMPORARILY RESTRICTED NET ASSETS							
Revenue and support:							
Contributions	\$ 3,000	\$	212,500	\$	87,731	\$	97,261
Net investment income	-				-		_
Transfers to unrestricted	 (5,987)		(219,554)		(15,988)		(43,536)
Changes In Temporarily Restricted Net Assets	(2,987)		(7,054)		71,743		53,725
UNRESTRICTED NET ASSETS							
Revenue and support:							
Contributions	-		-		-		-
Net investment income	-		-		-		-
Board designated transfers	-		-		-		-
Transfers between programs	-		-		-		_
Transfers from temporarily restricted	 5,987		219,554		15,988		43,536
	 5,987		219,554		15,988		43,536
Expenses:							
Educational grants and expenses General expenses	5,987		219,554		15,988		43,536
	 5,987		219,554		15,988		43,536
Changes In Unrestricted Net Assets	 -						n.
Changes In Total Net Assets	(2,987)		(7,054)		71,743		53,725
Total Net Assets, Beginning of Year	 225,432	.,	294,591		11,100		24,306
Total Net Assets, End of Year	\$ 222,445	\$	287,537	\$	82,843	\$	78,031

7	Other Temporarily Restricted	Temporarily Restricted Total		Board ignated ograms	Other Unrestricted		Total
\$	468,211 4	\$ 868,703 4	\$	-	\$	- \$	868,703
•	(461,814)	(746,879)		-		-	4 (746,879)
	6,401	121,828		•	(1	.	121,828
						•	
	-	-		-		1,999	1,999
	- '	-		-		155	155
	100	100		-		(100)	-
	-			-		-	_
	461,814	746,879		-		. -	746,879
	461,914	 746,979		_		2,054	749,033
							,
	461,814	746,879		71,235		_	818,114
	-	-		-		9,584	9,584
	461,814	 746,879		71,235		9,584	827,698
	100	100		(71,235)		(7,530)	(78,665)
	6,501	121,928		(71,235)		(7,530)	43,163
	827,113	 1,382,542		175,000		24,809	1,582,351
\$	833,614	\$ 1,504,470	\$	103,765	\$	17,279 \$	1,625,514

JEFFERSON COUNTY PUBLIC EDUCATION FOUNDATION, INC. NOTES TO FINANCIAL STATEMENTS JUNE 30, 2015 AND 2014

(1) SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES AND NATURE OF ACTIVITIES

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:

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

<u>Temporarily restricted net assets</u> – 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.

<u>Permanently restricted net assets</u> – Net assets subject to donor-imposed stipulations that they be maintained permanently by the Foundation. At June 30, 2015 and 2014, the Foundation had no permanently restricted net assets.

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, 2015 AND 2014

(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, 2015, 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, 2012 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>2015</u>	<u>2014</u>
Money market account Checking accounts	\$ 1,346,172 12.800	\$ 1,606,737 18,777
Total	\$ <u>1,358,972</u>	

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 \$69,035 and \$103,765 as of June 30, 2015 and 2014, respectively. 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, 2015 AND 2014

(5) OTHER TEMPORARILY RESTRICTED NET ASSETS

Other programs consisted of the following as of June 30:

	<u>2015</u>	<u>2014</u>
ZEON Chemicals	\$ 43,448	\$ 63,783
America's Promise	42,418	_
National Board Certified Teacher Training	40,500	-
Gheens Foundation Executive Director	36,882	-
Western High School	33,199	33,199
Western High School Early College	29,161	78,031
Oliver Daniel Winn HOSA	25,000	-
Excel Program Fund	24,515	11,515
David Jones Vocal Scholarship	22,368	22,316
Gordon Food Service	21,788	19,336
All others	355,649	605,434
	\$ 674,928	\$ 833,614

Temporarily restricted net assets amounting to \$1,276,339 and \$1,504,470 for 2015 and 2014, 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, 2015, the Foundation received a total of \$277,079 from the CE&S Foundation and \$181,043 from WHAS Crusade from Children, which represents approximately 26% and 17% of contributions, respectively. During the year ended June 30, 2014, the Foundation received \$100,000 from the Lift a Life Foundation and \$87,731 from the Louisville Metro Government, which represents approximately 11% and 10% of contributions, respectively.

(7) SUBSEQUENT EVENTS

The Foundation has evaluated whether any subsequent events that require recognition or disclosure in the accompanying financial statements and related notes thereto have taken place through May 11, 2016, the date these financial statements were available to be issued. The Foundation has determined that there are no such subsequent events.

EXTENDED TO MAY 16, 2016 Return of Organization Exempt From Income Tax

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

Department of the Treasury Internal Revenue Service

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

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

OMB No. 1545-0047

<u>A</u> [or the	e 2014 calendar year, or tax year beginning $$ JUL $1,$ 2014 and end	ling J	<u>UN 30, 2015</u>				
В	Check if applicable	C Name of organization JEFFERSON COUNTY PUBLIC EDUCATION D Employer identification number						
	Addre chang	FOUNDATION, INC.		,				
	Name chang							
	Initial return		m/suite	E Telephone numb	er er			
\vdash	Final	D O BOY 35368			-585-5347			
	return. termin	_			1,073,266.			
	ated ∏Amen	City or town, state or province, country, and ZIP or foreign postal code LOUISVILLE, KY 40202		G Gross receipts \$				
	return ☐Applic tion			H(a) Is this a group				
L	tion pendir	on I	022		s? Yes X No			
			022	H(b) Are all subordinates				
		empt status: X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or	527	•	a list. (see instructions)			
		te: N/A		H(c) Group exemption				
			L Year c	of formation: 1983	M State of legal domicile: KY			
Pa	art I	Summary	7 07		~ ~ TTT TTTT T			
Activities & Governance		Briefly describe the organization's mission or most significant activities: SUPPORT KENTUCKY PUBLIC SCHOOLS	I, OF.	JEFFERSON	COUNTY,			
rna	2	Check this box 🕨 🔲 if the organization discontinued its operations or disposed of	of more t	than 25% of its net as	ssets.			
ove	3	Number of voting members of the governing body (Part VI, line 1a)		3				
Ğ	4	Number of independent voting members of the governing body (Part VI, line 1b)			25			
80	5	Total number of individuals employed in calendar year 2014 (Part V, line 2a)		5	0			
/itie		Total number of volunteers (estimate if necessary)			0			
cţį		Total unrelated business revenue from Part VIII, column (C), line 12			0.			
_<		Net unrelated business taxable income from Form 990-T, line 34			0.			
				Prior Year	Current Year			
ø	8	Contributions and grants (Part VIII, line 1h)		870,702.	1,073,124.			
nu	9	Program service revenue (Part VIII, line 2g)		0.				
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		159.	142.			
ď	1	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	0.			
	ı	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		870,861.	1,073,266.			
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		818,114.	1,291,623.			
	ı	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.			
S	4.5	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	36,860.			
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	. 0.			
per	b	Total fundraising expenses (Part IX, column (D), line 25)						
Ж	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		9,584.	11,325.			
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		827,698.	1,339,808.			
	ı	Revenue less expenses, Subtract line 18 from line 12		43,163.				
or l			Bed	inning of Current Year	End of Year			
Net Assets or Find Balances	20	Total assets (Part X, line 16)		1,625,514.	1,358,972.			
Ass	21	Total liabilities (Part X, line 26)		0.	0.			
Net	22	Net assets or fund balances. Subtract line 21 from line 20		1,625,514.	1,358,972.			
Pa	rt II	Signature Block						
Und	er pena	Ities of perjury, I declare that I have examined this return, including accompanying schedules and	statemer	nts, and to the best of m	v knowledge and belief, it is			
		t, and complete. Declaration of preparer (other than officer) is based on all information of which p			,,			
		The state of the s						
Sign	1	Signature of officer		Date				
Her		JOSEPH SEILER, SECRETARY/TREASURER						
1101	_	Type or print name and title						
		Print/Type preparer's name Preparer's signature	D	ate Check	PTIN			
Paid		JEREMY M FINN, CPA		if	DV6			
Prep		Firm's name MONROE SHINE & CO., INC. CPA'S		self-emplo				
Use		Firm's address PO BOX 22039		I II III S LIIV				
200	,	LOUISVILLE, KY 40252-9804		Phone no 5 f	02-423-0311			
May	the IF	RS discuss this return with the preparer shown above? (see instructions)		1 Hone no. 5 c	X Yes No			
					[] 103 [] 140			

JEFFERSON COUNTY PUBLIC EDUCATION FOUNDATION INC.

	n 990 (2014) FOUNDATION, INC.	Page 2
Pa	rt 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?	X No
_	If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes	☞
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?Yes If "Yes," describe these changes on Schedule O.	L∆_ No
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.	d
4a	(Code:) (Expenses \$ 1,291,623. including grants of \$ 1,291,623.) (Revenue \$)
	GRANTS AND ALLOCATIONS TO THE JEFFERSON COUNTY PUBLIC SCHOOL SYSTEM I	N
	KENTUCKY AND INDIVIDUALS TO PROMOTE EDUCATIONAL IMPROVEMENTS IN	
	ELEMENTARY, MIDDLE, AND HIGH SCHOOLS AND EARLY CHILDHOOD EDUCATION.	
4b	(Code:) (Expenses \$)
4 -		
4c	(Code:) (Expenses \$)
		·
		· · · · · · · ·
	· ·	
4d	Other program services (Describe in Schedule O.)	
_	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses ► 1,291,623.	

Page 3

Form 990 (2014) FOUNDATION, INC.
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)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		<u>X</u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		<u>X</u>
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? If "Yes," complete Schedule C, Part III	5		_X_
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		<u>X</u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u>X</u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		<u>X</u>
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?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	.		**
	Part VI	11a		<u>X</u>
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			77
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		<u>X</u>
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			77
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<u>X</u>
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			77
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		$\frac{x}{x}$
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		_X_
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		7.7	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		X	
	Schedule D, Parts XI and XII	12a	Δ	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			v
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		
b	· · · · · · · · · · · · · · · · · · ·			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000	4.41-		X
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		-22
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	15		x
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		-21
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	46		X
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		- 17
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	4-,		X
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	-	- 41
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	40		X
40	1c and 8a? If "Yes," complete Schedule G, Part II	18		- 21
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	19		x
00-	complete Schedule G, Part III	20a		X
20a	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a		
Q	ii 165 to iiile 20a, uiu trie organization attaon a copy orits addited iirianolal statements to trie return:		990	(2014)

Part IV | Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II X 21 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on 22 Part IX, column (A), line 2? If "Yes." complete Schedule I, Parts I and III 22 X 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J X 23 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25a X 24a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b 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? If "Yes," complete Schedule L, Part I X 25a b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete 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? If "Yes." X complete Schedule L, Part II 26 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III X 27 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? If "Yes," complete Schedule L, Part IV b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 28c Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M X 29 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation 30 X contributions? If "Yes," complete Schedule M 30 Did the organization liquidate, terminate, or dissolve and cease operations? 31 If "Yes," complete Schedule N, Part I 31 X Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete 32 X Schedule N, Part II 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I X 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Χ Part V, line 1 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? X 35a b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 X 36 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI X 37 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O. X

Form 990 (2014) FOUNDATION, INC.

Part VI	Statemente Dogarding Other IDC Eil	ingo and Tax Camplianas
ICILA	Statements Regarding Other IRS Fil	ings and rax Combilance

	Office it is chedule of contains a response of note to any line in this Part v			
		Former ex	Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0	Carlotte Contract		
b	To the dependence of the depen	{		
С	t y the transfer to top of the to			
22	(gambling) winnings to prize winners? Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	1c		100000
Za				
h	filed for the calendar year ending with or within the year covered by this return			
ט	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	S. November	
За	Did the example tion have unrelated by single and the control of t			▽
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3a		X
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	3b		
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	10		X
b	If "Yes," enter the name of the foreign country:	4a		21
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	1.1	X
b		5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			-
	any contributions that were not tax deductible as charitable contributions?	6a		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).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7с		X
	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		_X_
. f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		_X_
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		_X_
	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			
0	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
a b	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
10	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter:	9b		
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand	100		
4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		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 (2014)

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			X
Sec	tion 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 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			
~		2		Х
3	officer, director, trustee, or key employee?  Did the organization delegate control over management duties customarily performed by or under the direct supervision			
3	of officers, directors, or trustees, or key employees to a management company or other person?			Х
		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		Δ.
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	l _		37
	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			7.7
	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:			
а	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
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			1
			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		
С	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?			
а	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		
Sec	tion 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) at	/ailabl	3	
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X 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	finano	ial	
13	statements available to the public during the tax year.	miano	iai	
20	State the name, address, and telephone number of the person who possesses the organization's books and records:			
20	JOE SEILER, TREASURER - 502-499-4794		····	
	2500 EASTPOTNT PARKWAY: LOUITSVILLE, KY 40223			

Form 990 (2014)

FOUNDATION, INC.

#### 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 n	or any related	orga	niza	tion	con	npen	sate	ed any current officer, d	rector, or trustee.	
(A)	(B)			_ (0	2)			(D)	(E)	(F)
Name and Title	Average	(do	not c	Posi heck i	itior _{more}	l than c	one	Reportable	Reportable	Estimated
	hours per	box	, unle	ss per	son i	s both	n an	compensation	compensation	amount of
	week	├──	1			1		from	from related	other
	(list any hours for	director				_		the organization	organizations (W-2/1099-MISC)	compensation from the
	related	5	stee			nsate		(W-2/1099-MISC)	(** 27 1000 Mileo)	organization
	organizations	trusti	al tru		oyee	эшис				and related
	below	Individual trustee	nstitutional trustee	:ec	Key employee	Highest compensated employee	uer			organizations
	line)	in i	Inst	Officer	Key	High	Former			-
(1) JAMES R ALLEN	1.00									
CHAIRMAN	1 00	X		X				0.	0.	0.
(2) FRANKLIN JELSMA	1.00									
VICE CHAIRMAN		X		X				0.	0.	0.
(3) JOSEPH SEILER	3.00									
TREASURER	4 00	X		X				0.	0.	0.
(4) MIKE BROWN	1.00									0
MEMBER	1 00	X					<u> </u>	0.	0.	0.
(5) AUDWIN HELTON	1.00								0	0
MEMBER	1 00	X					_	0.	0.	0.
(6) HENRY HEUSER JR	1.00	,,							0	0
MEMBER	1 00	X					_	0.	0.	0.
(7) MARK SHIRKNESS	1.00	7,7							0	0
MEMBER	1 00	X						0.	0.	0.
(8) KEVIN SHURN	1.00	77							0	. 0
MEMBER	1 00	X					-	0.	0.	0.
(9) JEFF ULIGIAN	1.00	7,7						0.	^	0
MEMBER CORNEGY	1.00	X						U .	0.	0.
(10) AL CORNISH MEMBER	1.00	X						0.	0.	0.
(11) LYNN HUETHER	1.00	^					-	0.	0.	
MEMBER	1.00	Х						0.	0.	0.
(12) KEN SELVAGGI	1.00						-	0.	0.	<u>.</u>
MEMBER	1.00	Х						0.	0.	0.
(13) BILL SIMPSON	1.00	- 22					-	-		
MEMBER	1.00	Х						0.	0.	0.
(14) MALCOLM B. CHANCEY JR.	1.00							-		
MEMBER		х						0.	0.	0.
(15) DR. DONNA M. HARGENS	1.00									
MEMBER		х						0.	0.	0.
(16) ROBERT J. ARNOLD	1.00	_								
MEMBER		x						0.	0.	0.
(17) VIK CHADHA	1.00									
MEMBER		X						0.	0.	0.

Page 7

## JEFFERSON COUNTY PUBLIC EDUCATION FOUNDATION, INC.

Part VII   Section A. Officers, Directors, Trus	tees, Key Emp	oloy	ees,	and	Hi _e	ghes	st C	ompensated Employee	s (continued)				
(A)	(B)				C)			(D)	(E)		l	(F)	
Name and title	Average	/40	not c	Pos				Reportable	Reportable		Es	timate	d
	hours per	box	, unie	ss per	rson i	is boti	h an	compensation	compensatio	n	·an	nount (	of
	week	-	cer an	d a d	irecto	or/trus	tee)	from	from related	1		other	
	(list any	director						the	organization		com	pensa	tion
	hours for	or dir	a			ted		organization	(W-2/1099-MIS	3C)	1	om the	
	related organizations	stee	truste		43	bens		(W-2/1099-MISC)				anizati	
	below	Jal tru	onal		ploye	E 8					)	d relate	
	line)	Individual trustee or	Institutional trustee	Officer	(ey em	Highest compensated employee	Former				orga	anizatio	JI IS
(18) DR. ALEX GERASSIMIDES, MD	1.00		-		-		T						
MEMBER		X						0.		0.			0.
(19) JOE HARDESTY	1.00												
MEMBER		X						0.		0.			0.
(20) TOM HUDSON	1.00								-				
MEMBER		X						0.		0.	1		0.
(21) KEVIN JOYNT	1.00												
MEMBER		X						0.		0.	<u> </u>		0.
(22) TANJA OQUENDO	1.00												
MEMBER		X						0.		0.			0.
(23) MITCH RUE	1.00												
MEMBER		X						0.		0.			0.
(24) GWEN TILTON	1.00										ĺ		
MEMBER		X					_	0.		0.			0.
(25) CAROL TIMMONS	1.00										ĺ		_
MEMBER		X				ļ	_	0.		0.			0.
(26) SAM CORBETT	40.00	-						24 010					0
EXECUTIVE DIRECTOR	1			X	<u> </u>	<u></u>	Ļ	34,219. 34,219.		0.			$\frac{0.0}{0.0}$
1b Sub-total								34,219.		0.	-		0.
c Total from continuation sheets to Part VI								34,219.		0.	<b></b>		0.
d Total (add lines 1b and 1c) 2 Total number of individuals (including but n							<u> </u>		000 of reportable		Ĺ		<u> </u>
	ot minited to th	056	แอเซ	u al	JOVE	ej vvi	10 16	scerved more triair \$100,	ood of reportable	•			0
compensation from the organization												Yes	No
3 Did the organization list any former officer,	director or tr	ictor	, ko	van	nnlo	WAA	orl	highest compensated ar	mnlovee on	ſ			
line 1a? If "Yes," complete Schedule J for s											3		X
4 For any individual listed on line 1a, is the su											Ť	100	
and related organizations greater than \$150											4		X
5 Did any person listed on line 1a receive or a													
rendered to the organization? If "Yes," com											5		X
Section B. Independent Contractors	piete corredan		VI_UU	, VIII	2010	<u>VII</u>			· · · · · · · · · · · · · · · · · · ·		-		
Complete this table for your five highest co	mpensated inc	lepe	nder	nt co	ontra	acto	rs th	nat received more than \$	3100,000 of comp	oensa	tion fro	om	
the organization. Report compensation for													
(A)								(B)		_	(0	<b>)</b>	
Name and business	address	M	INC	5				Description of s	services	C	ompe	nsatio	1
								· · · · · · · · · · · · · · · · · · ·					
	*												
							_						
								,					
2 Total number of independent contractors (ii	ncluding but no	ot lin	nitec	d to	thos	se lis	sted	above) who received me	ore than				
\$100,000 of compensation from the organization	zation 🕨				.(	)					<u> </u>	<u> </u>	

Form 990 (2014)

Form 990 (2014)	FOUNDATION,	INC.		Page !
Part VIII Stat	tement of Revenue			

		Check if Schedule O conta	ins a response	or note to any lin	e 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 b c d e f	Related organizations Government grants (contribution All other contributions, gifts, grant similar amounts not included above	1b 1c 1d 1d ons) 1e s, and e 1f 1,					
Cor	h	Total. Add lines 1a-1f			1,073,124.			
Program Service Revenue				Business Code				
Pr	f	All other program service rever					<del></del>	**************************************
	g 3	Investment income (including of other similar amounts)	dividends, intere	est, and	142.	142.		
	4	Income from investment of tax						
	5	Royalties	(i) Real	(ii) Personal				
	6 a b c d	Less: rental expenses						
		Gross amount from sales of assets other than inventory Less: cost or other basis and sales expenses	(i) Securities	(ii) Other				
	c	, , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
venue		Net gain or (loss)	events (not of					
Other Revenue		contributions reported on line of Part IV, line 18  Less: direct expenses  Net income or (loss) from fundational parts of the parts of	a					
	b	Gross income from gaming act Part IV, line 19 Less: direct expenses Net income or (loss) from gami	a					
	10 a	Gross sales of inventory, less r and allowances	eturns a b					
	С	Net income or (loss) from sales Miscellaneous Revenue		Business Code				
	b c							
	е	Total. Add lines 11a-11d Total revenue. See instructions.			1,073,266.	142.	0.	0.

Form 990 (2014) FOUNDATION, INC.

Part IX | Statement of Functional Expenses

Page 10

Secti	on 501(c)(3) and 501(c)(4) organizations must compl				
	Check if Schedule O contains a respons	se or note to any line in t	this Part IX(B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	1,291,623.	1,291,623.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				•
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	34,219.		34,219.	
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	2,641.		2,641.	
11	Fees for services (non-employees):				
а	Management				
b	Legal				
c	Accounting	5,775.		5,775.	
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
a a	Other. (If line 11g amount exceeds 10% of line 25,				
9	column (A) amount, list line 11g expenses on Sch O.)				
12	Advertising and promotion				
13	Office expenses	1,337.		1,337.	
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings		*		
20					
	Interest Payments to affiliates				
21 22	Depreciation, depletion, and amortization				
23		1,746.		1,746.	
23 24	Other expenses, Itemize expenses not covered	277200			,
24	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 0.)				
а	MISCELLANEOUS	2,467.		2,467.	
		2/10/1		2/2071	
b					
C C					
d	All other expenses				
	Total functional expenses. Add lines 1 through 24e	1,339,808.	1,291,623.	48,185.	0.
25	Joint costs. Complete this line only if the organization	±,332,000•	1,271,020 ·	=0,100.	
26	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

Total liabilities and net assets/fund balances

Page 11

Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (A) End of year Beginning of year 18,777. 12,800. Cash - non-interest-bearing 1 1,606,737. 2 Savings and temporary cash investments 2 1,346,172. Pledges and grants receivable, net 3 Accounts receivable, net 4 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L ..... 6 Notes and loans receivable, net 7 Inventories for sale or use 8 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 Investments - publicly traded securities 11 11 Investments - other securities. See Part IV, line 11 12 12 Investments - program-related. See Part IV, line 11 13 13 Intangible assets 14 14 Other assets. See Part IV, line 11 15 15 1,625,514. 1,358,972. Total assets. Add lines 1 through 15 (must equal line 34) 16 16 17 Accounts payable and accrued expenses 17 18 18 Grants payable ______ 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, trustees, 22 key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 23 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 0. 0. 26 Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117 (ASC 958), check here 🕨 🗓 and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 121,044. 82,633. 27 Unrestricted net assets 504,470. 1,276,339. 28 28 Temporarily restricted net assets Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 32 32 1,625,514. 1,358,972. Total net assets or fund balances 33 1,625,514. 1,358,972. 34

Form 990 (2014)

JEFFERSON COUNTY PUBLIC EDUCATION FOUNDATION, INC.

Form 990 (2014)

Page 12

	TO STATE OF THE ST			Pa	ige 12
Pa	rt 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	1,07	3,2	66.
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,33	9,8	08.
3	Revenue less expenses. Subtract line 2 from line 1	3	<266		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,62	5,5	14.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments				
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	1,35	8,9	72.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Э.			
2a			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the		1 2 4 4 4		
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audit			
	Act and OMB Circular A-133?		За		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3h		

#### **SCHEDULE A**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

#### **Public Charity Status and Public Support**

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

➤ Attach to Form 990 or Form 990-EZ.

2014
Open to Public

OMB No. 1545-0047

form990. Inspection
Employer identification number

	FOUN	DATION, INC	3.								
Part I	Reason for Public C	Charity Status (A	All organizations must co	mplete th	is part.) Se	e instructions	S.				
The organ	ization is not a private found	ation because it is: (F	For lines 1 through 11, cl	heck only	one box.)			•			
1 📋	A church, convention of chu					)(A)(i).					
2	A school described in secti	· ·									
3	A hospital or a cooperative			ection 170	(b)(1)(A)(ii	i).					
4	A medical research organiza						(iii). Enter	the hospital's name,			
	city, and state:		,			( ) ( )					
5	An organization operated for	or the benefit of a coll	lege or university owned	or operati	ed by a go	vernmental u	nit describe	ed in			
<b>5</b>	section 170(b)(1)(A)(iv). (C		logo of annionally office	4. 4.4.4.	, 3-						
6	A federal, state, or local gov	•	ental unit described in	section 17	70/h\/1\/Δ\/	(v)					
7 X		_					ne neneral r	oublic described in			
, [22]	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)										
. $\Box$	A community trust describe		1)(A)(vi) (Complete Part	F II V				9			
8	An organization that normal	, ,,	** ** **		ontribution	ac mambarel	nin foot on	d gross receipts from			
9 🔛											
	activities related to its exem										
	income and unrelated busin		(less section 5 FF tax) fro	m busines	sses acquir	ed by the org	anization a	inter June 30, 1975.			
—	See section 509(a)(2). (Cor	•									
10	An organization organized a	•	•	-				numana of one or			
11	An organization organized a										
	more publicly supported org							neck the box in			
	lines 11a through 11d that										
a	Type I. A supporting orga										
	the supported organization			majority o	of the direc	tors or truste	es of the su	ірропіпд			
	organization. You must o	•						d., .			
b	Type II. A supporting org										
	control or management of			ame perso	ns that cor	ntrol or mana	ge the supp	oortea			
r	organization(s). You mus	•									
С	Type III functionally inte						ly integrate	ed with,			
_	its supported organization		•								
d	Type III non-functionally										
	that is not functionally int						an attentiv	/eness			
	requirement (see instructi										
e	Check this box if the orga					Type I, Type	II, Type III				
	functionally integrated, or	Type III non-function	nally integrated supporting	ng organiz	ation.						
f Ente	er the number of supported o	organizations									
	vide the following information		d organization(s).	/: I - Al	ination		· · · · · · · · · · · · · · · · · · ·	1 (-2) (			
į	(i) Name of supported	(ii) EIN	(iii) Type of organization (described on lines 1-9	listed i		(v) Amount o support	•	(vi) Amount of other support (see			
	organization		above or IRC section		document?	Instruct	•	Instructions)			
		`	(see instructions))	Yes	No	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,			
						*					
							-				
						-		1			

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.)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and				,		
	membership fees received. (Do not						
	include any "unusual grants.")	1368251.	1572683.	586,986.	870,698.	1073124.	5471742.
2	Tax revenues levied for the organ-				0.0,000		01/1/12:
	ization's benefit and either paid to						
	or expended on its behalf						
2	The value of services or facilities						
J	furnished by a governmental unit to					,	
	the organization without charge						
4		1368251.	1572683.	586,986.	070 600	1073124.	E 471740
4		T20072T.	13/2003.	300,300.	870,698.	10/3124.	5471742.
5	The portion of total contributions	19 (1)					
	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)						1687877.
6	Public support. Subtract line 5 from line 4.						3783865.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) [⊤] otal
7	Amounts from line 4	1368251.	1572683.	586,986.	870,698.	1073124.	5471742.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	2,635.	2,244.	1,029.	163.	142.	6,213.
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				2		5477955.
	Gross receipts from related activities,	etc (see instructio	ne)			12	
	First five years. If the Form 990 is for	•		l fourth or fifth ta	v voar as a soction		
10	organization, check this box and stop	_			•		
Sec	ction C. Computation of Publi	c Support Per	centage		•••••		
	Public support percentage for 2014 (li			ylumn (f))		14	69.07 %
	Public support percentage from 2013					15	64.75 %
	33 1/3% support test - 2014. If the c						
104	stop here. The organization qualifies						⊾ दिशी
h	33 1/3% support test - 2013. If the c		-		lina 15 ie 33 1/3%		
~	and stop here. The organization quali						, $\square$
175	10% -facts-and-circumstances test				12 162 or 16b a		
174	and if the organization meets the "faci						
	meets the "facts-and-circumstances" t						
h						70 and line 15 is 1	
ม	10% -facts-and-circumstances test						
	more, and if the organization meets the				-		<b>.</b>
12	organization meets the "facts-and-circ Private foundation. If the organization						
10	. Treate foundation, if the organization	i did not check a L	on on line to, 10a	, 100, 17a, 01 170,		dule A (Form 000	

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

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

Sa	qualify under the tests listed b	elow, please comp	olete Part II.)				
	endar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(a) 2012	(4) 2012	(-) 2014	(f) Total
	Gifts, grants, contributions, and	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
'	membership fees received. (Do not		}				
	include any "unusual grants.")						
9	Gross receipts from admissions,						
~	merchandise sold or services per-						
	formed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt purpose						
				· · · · · · · · · · · · · · · · · · ·			
3	Gross receipts from activities that are not an unrelated trade or bus-						
	iness under section 513						
4	***************************************			<u> </u>			
4	Tax revenues levied for the organ- ization's benefit and either paid to		,				
	or expended on its behalf						
E	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
5	The value of services or facilities						
	furnished by a governmental unit to the organization without charge						
c	· · · · · · · · · · · · · · · · · · ·						
	Total. Add lines 1 through 5						
16	Amounts included on lines 1, 2, and 3 received from disqualified persons						
ŀ	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  Add lines 7a and 7b				1.		
	Public support (Subtract line 7c from line 6.)						
Sed	ction B. Total Support			<u></u>			
Cale	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	Amounts from line 6		, ,				
	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						
	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						
13	assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.)						
	First five years. If the Form 990 is for	the organization's	s first, second, thir	d, fourth, or fifth ta	x year as a section	n 501(c)(3) organiza	tion,
		_					<b>.</b> .
Sec	ction C. Computation of Publi						
15	Public support percentage for 2014 (li	ne 8, column (f) di	vided by line 13, c	olumn (f))		15	%
16	Public support percentage from 2013	Schedule A, Part	III, line 15			16	%
Sec	ction D. Computation of Inves	tment Income	Percentage				
	Investment income percentage for 20	•				17	%
	Investment income percentage from					18	%
19a	33 1/3% support tests - 2014. If the	organization did n	ot check the box	on line 14, and line	15 is more than 3	3 1/3%, and line 17	is not
	more than 33 1/3%, check this box ar	id stop here. The	organization qua	lifies as a publicly s	supported organiza	ation	▶□
b	33 1/3% support tests - 2013. If the	organization did n	ot check a box or	line 14 or line 19a	, and line 16 is mo	re than 33 1/3%, ar	nd
	line 18 is not more than 33 1/3%, che						▶□
20	Private foundation If the organization	n did not check a	hay on line 14 10	a or 10h chack th	ie hav and ean inc	tructions	

#### Part IV | Supporting Organizations

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

#### Section A. All Supporting Organizations

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing	٠.		
	documents? If "No" describe in Part VI how the supported organizations are designated. If designated by			
	class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status			
	under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported			
	organization was described in section 509(a)(1) or (2).	_2		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer			
	(b) and (c) below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and			
	satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the			
	organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)	T. T.		
	(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If			
	"Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign			
	supported organization? If "Yes," describe in Part VI how the organization had such control and discretion			
	despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination			
	under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used			
	to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)			
	purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"			
	answer (b) and (c) below (if applicable). Also, provide detail in 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).	5a		
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?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5с		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to			
	anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class			
	benefited by one or more of its supported organizations; or (c) other supporting organizations that also			
	support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in			
	Part VI.	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial			
	contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent			
	controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?			
	If "Yes," complete Part I of Schedule L (Form 990).	8		
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

b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which

c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting

in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.

organizations)? If "Yes," answer (b) below.

the supporting organization had an interest? If "Yes," provide detail in Part VI.

432024 09-17-14

9a

9b

9c

10a

10b

Schedule A (Form 990 or 990-EZ) 2014 FOUNDATION, INC. Page 5 Part IV Supporting Organizations (continued) Yes No 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? 11a b A family member of a person described in (a) above? 11b c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI. 11c 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? 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. Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization. Section C. Type II Supporting Organizations Yes No Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s) Section D. Type III Supporting Organizations Yes No Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? 1 2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). 2 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard. Section E. Type III Functionally-Integrated Supporting Organizations Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions): The organization satisfied the Activities Test. Complete line 2 below. а The organization is the parent of each of its supported organizations. Complete line 3 below. b The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions) С Activities Test. Answer (a) and (b) below. Yes No a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities. 2a 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? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement. 2b 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? Provide details in Part VI. За b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard

Schedule A (Form 990 or 990-EZ) 2014 FOUNDATION, INC. Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E. (B) Current Year Section A - Adjusted Net Income (A) Prior Year (optional) Net short-term capital gain 1 Recoveries of prior-year distributions 2 Other gross income (see instructions) 3 3 4 Add lines 1 through 3 5 Depreciation and depletion 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) 7 Other expenses (see instructions) 8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) (B) Current Year (A) Prior Year Section B - Minimum Asset Amount (optional) Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): 1a a Average monthly value of securities b Average monthly cash balances 1b c Fair market value of other non-exempt-use assets 1c 1d d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI): 2 Acquisition indebtedness applicable to non-exempt-use assets 3 3 Subtract line 2 from line 1d Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions). 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 Minimum Asset Amount (add line 7 to line 6) 8 Current Year Section C - Distributable Amount Adjusted net income for prior year (from Section A, line 8, Column A) 1 2 2 Enter 85% of line 1 3 Minimum asset amount for prior year (from Section B, line 8, Column A) 3 4 Enter greater of line 2 or line 3 5 5 Income tax imposed in prior year Distributable Amount. Subtract line 5 from line 4, unless subject to

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

Schedule A (Form 990 or 990-EZ) 2014

emergency temporary reduction (see instructions)

instructions).

	dule A (Form 990 or 990-EZ) 2014 FOUNDATION, 1.			Page 7
Par	t V   Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	nizations _(continued)	
Secti	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe			
2	Amounts paid to perform activity that directly furthers exemp			
	organizations, in excess of income from activity			
3_	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	S	
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	ne organization is responsive		
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2014 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount		<b>F</b>	
		(i)	(ii)	(iii)
0	Con E. Distribution Allegations (see instructions)	Excess Distributions	Underdistributions	Distributable
Secti	ion E - Distribution Allocations (see instructions)	,	Pre-2014	Amount for 2014
_1_	Distributable amount for 2014 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2014			
	(reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2014:			
а				
b				
С				
d				
е	From 2013			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2014 distributable amount			
i	Carryover from 2009 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2014 from Section D,			
	line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2014 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2014, if			
	any. Subtract lines 3g and 4a from line 2 (if amount			
	greater than zero, see instructions).			
6	Remaining underdistributions for 2014. Subtract lines 3h			
	and 4b from line 1 (if amount greater than zero, see			
	instructions).			
7	Excess distributions carryover to 2015. Add lines 3j			
•	and 4c.			
8				
a				
b				
c				
	Excess from 2013			
	Excess from 2014			

Schedule A (Form 990 or 990-EZ) 2014

Schedule A	(Form 990 or 990-EZ) 2014 FOUNDATION, INC.  Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or	Page 8
Part VI		<b>?</b> .
	Also complete this part for any additional information. (See instructions).	
	·	
	4	
,		
		· · · · · · · · · · · · · · · · · · ·

### Schedule A

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

2014

** Do Not File **

*** Not Open to Public Inspection ***

Contributor's Name	Total Contributions	Excess Contributions
CES FOUNDATION	507,742.	398,183
GHEENS FOUNDATION	160,000.	50,441.
HUMANA	271,000.	161,441.
JP MORGAN CHASE BANK	200,000.	90,441.
ZEON CHEMICALS	689,733.	580,174.
LOUISVILLE METRO GOVERNMENT	238,682.	129,123.
LOU COMMUNITY FOUNDATION	288,477.	178,918.
J GRAHAM BROWN FOUNDATION	137,231.	27,672.
WHAS CRUSADE FOR CHILDREN	181,043.	71,484.
	·	
·		
	·	
•		
otal Excess Contributions to Schedule A, Part II, Line 5		1,687,877.

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

OMB No. 1545-0047

N	ame	of	the	organization
N	antic	U,	rite	UI WAI IIZALIUII

JEFFERSON COUNTY PUBLIC EDUCATION FOUNDATION, INC.

Employer identification number

Organiz	ation type (check o	ne):
Filers o	f:	Section:
Form 99	90 or 990-EZ	X 501(c)( 3 ) (enter number) organization
		4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation
		527 political organization
Form 99	00-PF	501(c)(3) exempt private foundation
		4947(a)(1) nonexempt charitable trust treated as a private foundation
		501(c)(3) taxable private foundation
		covered by the General Rule or a Special Rule.
Note. O	nly 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	
		filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.
Special	Rules	
X	sections 509(a)(1) a any one contributor	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under 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 r, 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, line 1. Complete Parts I and II.
	year, total contribut	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the tions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for ruelty to children or animals. Complete Parts I, II, and III.
	year, contributions is checked, enter he purpose. Do not co	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box ere the total contributions that were received during the year for an exclusively religious, charitable, etc., mplete any of the parts unless the General Rule applies to this organization because it received nonexclusively etc., contributions totaling \$5,000 or more during the year
		at is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), 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 does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Name of organization
JEFFERSON COUNTY PUBLIC EDUCATION
FOUNDATION, INC.

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	CE&S FOUNDATION  101 S FIFTH STREET STE 1650  LOUISVILLE, KY 40202	\$ 277,079.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	LOUISVILLE COMMUNITY FOUNDATION  325 W MAIN STREET STE 1110  LOUISVILLE, KY 40202	\$95,669.	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
. 3	LG&E 701 E KENTUCKY ST LOUISVILLE, KY 40203	\$34,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	GHEENS FOUNDATION  401 W MAIN ST SUITE 705  LOUISVILLE, KY 40202	\$85,000.	Person X Payroll  Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5_	YUM BRANDS  1900 COLONEL SANDERS LANE LOUISVILLE, KY 40213	\$32,500.	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	UPS FOUNDATION  55 GLENLAKE PARKWAY  ATLANTA GA 30328	\$\$	Person X Payroll Noncash (Complete Part II for

Name of organization
JEFFERSON COUNTY PUBLIC EDUCATION
FOUNDATION, INC.

_	
	_

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	WHAS CRUSADE FOR CHILDREN  520 W CHESTNUT ST  LOUISVILLE, KY 40202	\$181,043.	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8	AMERICA'S PROMISE  1110 VERMONT AVENUE NW STE 900  WASHINGTON, DC 20005	\$83,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
(a) No.	TIMIR & ELAINE BANERJEE  PO BOX 22067  LOUISVILLE, KY 40252  (b)  Name, address, and ZIP + 4	\$\$(c) Total contributions	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)  (d) Type of contribution  Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Occash If for noncash contributions.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

JEFFERSON COUNTY PUBLIC EDUCATION
FOUNDATION, INC.

		_

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if	additional space is needed.	
(a) No. (b) (c) FMV (or estimate) (see instructions)  (a) No. (c) FMV (or estimate) (see instructions)  (a) No. (b) (c) FMV (or estimate) (see instructions)  (a) No. (c) FMV (or estimate) (see instructions)  (b) FMV (or estimate) (see instructions)  (c) FMV (or estimate) (see instructions)  (d) No. (from Description of noncash property given  (e) No. (from Description of noncash property given  (e) No. (from Description of noncash property given  (for FMV (or estimate) (see instructions)  (g) FMV (or estimate) (see instructions)  (h) Co FMV (or estimate) (see instructions)  (h) Co FMV (or estimate) (see instructions)  (g) FMV (or estimate) (see instructions)	(d) Date received		
		· · · ·   \$	
No. from		FMV (or estimate)	(d) Date received
		\$	
No. from		FMV (or estimate)	(d) Date received
		\$	
No. from		FMV (or estimate)	(d) Date received
		\$	
No. from		FMV (or estimate)	(d) Date received
		\$	
	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

Name of orga			Employer identification number
	SON COUNTY PUBLIC EDUCA	ATION	
FOUNDA	TION, INC.		
Part III	the year from any one contributor. Complete of	ibutions to organizations described columns (a) through (e) and the foll	in section 501(c)(7), (8), or (10) that total more than \$\psi_1,000\$ for owing line entry. For organizations
	completing Part III, enter the total of exclusively religious	<ul> <li>charitable, etc., contributions of \$1,000 o</li> </ul>	r less for the year. (Enter this info. once.)  \$
(a) No.	Use duplicate copies of Part III if additiona	al space is needed.	
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Parti			
		(e) Transfer of gi	ft
		( )	
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee
			·
(a) No.	T		
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Faiti			
		(e) Transfer of gi	ft
-	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee
.	,		
.			
'			
(a) No. from	#15 C 16		
Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
.			
-			
-		(e) Transfer of git	Tt.
		(e) Transfer of gli	
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee
	,		Total Control of the
-			
(a) No			
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Part I			
-			
_			
		(e) Transfer of gif	't
		·	
	Transferee's name, address, and	d ZIP + 4	Relationship of transferor to transferee
-			
-			
-			

### SCHEDULE D

(Form 990)

### **Supplemental Financial Statements**

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

Attach to Form 990.

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Information about Schedule D (Form 990) and its instructions is at <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>.

JEFFERSON COUNTY PUBLIC EDUCATION Empl FOUNDATION, INC.

Pa	Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Account.			
	organization answered "Yes" to Form 990, Part IV, line	e 6.	Complete it the	
		(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 v	vriting that the assets held in donor advised	d funds	
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No	
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can be us	sed only	
	for charitable purposes and not for the benefit of the donor or	donor advisor, or for any other purpose co	onferring	
D-	impermissible private benefit?		Yes No	
	Tt II   Conservation Easements. Complete if the org	anization answered "Yes" to Form 990, Pa	rt IV, line 7.	
1	Purpose(s) of conservation easements held by the organization			
	Preservation of land for public use (e.g., recreation or ed	ducation) Preservation of a histor	rically important land area	
	Protection of natural habitat	Preservation of a certification	ied historic structure	
_	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualifi	ed conservation contribution in the form of	a conservation easement on the last	
	day of the tax year.			
_	Total must an effect of the second of		Held at the End of the Tax Year	
a	T			
a a	Total acreage restricted by conservation easements			
d	Number of conservation easements on a certified historic stru		2c	
u	Number of conservation easements included in (c) acquired at listed in the National Position	fter 8/1 //06, and not on a historic structure		
3	listed in the National Register  Number of conservation easements modified, transferred, rele		2d	
Ū	year	ased, extinguished, or terminated by the o	rganization during the tax	
4	Number of states where property subject to conservation ease	ement is located		
5	Does the organization have a written policy regarding the period			
	violations, and enforcement of the conservation easements it		Yes No	
6	Staff and volunteer hours devoted to monitoring, inspecting, a		ng the year	
7	Amount of expenses incurred in monitoring, inspecting, and ex	nforcing conservation easements during th	e vear \$	
8	Does each conservation easement reported on line 2(d) above	satisfy the requirements of section 170(h)(	4)(B)(i)	
9	In Part XIII, describe how the organization reports conservation	n easements in its revenue and expense st	atement, and balance sheet, and	
	include, if applicable, the text of the footnote to the organization	on's financial statements that describes the	e organization's accounting for	
	conservation easements.		_	
Par	t III Organizations Maintaining Collections of		er Similar Assets.	
	Complete if the organization answered "Yes" to Form 9			
1a	If the organization elected, as permitted under SFAS 116 (ASC	958), not to report in its revenue statemer	nt and balance sheet works of art,	
	historical treasures, or other similar assets held for public exhil	bition, education, or research in furtherance	e of public service, provide, in Part XIII,	
	the text of the footnote to its financial statements that describe			
b	If the organization elected, as permitted under SFAS 116 (ASC	958), to report in its revenue statement ar	nd balance sheet works of art, historical	
	treasures, or other similar assets held for public exhibition, edu	cation, or research in furtherance of public	service, provide the following amounts	
	relating to these items:			
	(i) Revenue included in 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 treas		ain, provide	
	the following amounts required to be reported under SFAS 116			
b	Assets included in Form 990, Part X		> \$	

JEFFERSON COUNTY PUBLIC EDUCATION FOUNDATION, INC. Schedule D (Form 990) 2014 Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued) 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): Public exhibition Loan or exchange programs Scholarly research Preservation for future generations С Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 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? No Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to 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 Distributions during the year 1e 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 in Part XIII Endowment Funds. Complete if the organization answered "Yes" to 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 Contributions ..... Net investment earnings, gains, and losses Grants or scholarships ..... Other expenditures for facilities and programs Administrative expenses g End of year balance 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 c Temporarily restricted endowment The percentages in lines 2a, 2b, and 2c should equal 100%. 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 3a(i) (ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 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" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

(a) Cost or other

basis (investment)

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)

(b) Cost or other

basis (other)

(c) Accumulated

depreciation

Schedule D (Form 990) 2014

(d) Book value

Description of property

1a Land
b Buildings
c Leasehold improvements
d Equipment

JEFFERSON CO	OUNTY PUBLIC E	び <b>ハ</b> エア なつげばら	
Schedule D (Form 990) 2014 FOUNDATION,		DOCATION	D 2
Part VII Investments - Other Securities.	TIAC +		Page 3
Complete if the organization answered "Yes" t	o Form 990 Part IV line 1:	1h Soo Form 900 Port V line 10	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or en	id-of-veer market value
(4) E	(b) Dook value	(b) Mothod of Valuation, Cost of en	id-or-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" to	o Form 990, Part IV, line 11	Ic. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or en	d-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.			
	- F 000 Dt IV II 11	d 0 F 000 B-d V F 45	
Complete if the organization answered "Yes" to	Description	d. See Form 990, Part X, line 15.	(b) Book value
(1)	7C3OTIPTIOTI		(b) Book value
(2)			
(3)		·	

(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" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1.	(a) Description of liability	(b) Book value	1
(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. Schedule D (Form 990) 2014 Page 4 Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Complete if the organization answered "Yes" to Form 990, Part IV, line 12a. 1,073,266. Total revenue, gains, and other support per audited financial statements Amounts included on line 1 but not on Form 990, Part VIII, line 12: a Net unrealized gains (losses) on investments b Donated services and use of facilities _____ Recoveries of prior year grants 2c d Other (Describe in Part XIII.) ..... e Add lines 2a through 2d 2e Subtract line 2e from line 1 1,073,266. 3 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 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I. line 12.) 1,073,266. 5 Part XII | Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered "Yes" to Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements 1,339,808. 1 Amounts included on line 1 but not on Form 990, Part IX, line 25: 2 a Donated services and use of facilities 2a b Prior year adjustments 2b c Other losses 2c d Other (Describe in Part XIII.) e Add lines 2a through 2d 2e 1,339,808. Subtract line 2e from line 1 3 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 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) 5 Part XIII Supplemental Information. Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part XI, 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 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, 2015, THE FOUNDATION HAS NO UNCERTAIN TAX POSITIONS THAT QUALIFY FOR EITHER RECOGNITION OR DISCLOSURE IN THE FINANCIAL STATEMENTS. FOUNDATION FILES FEDERAL INCOME TAX RETURNS. RETURNS FILED FOR THE TAX YEARS ENDED ON OR AFTER JUNE 30, 2012 ARE SUBJECT TO EXAMINATION. FOUNDATION IS NOT CURRENTLY BEING EXAMINED AND MANAGEMENT BELIEVES ITS

TAX-EXEMPT STATUS WOULD BE UPHELD UNDER EXAMINATION.

Schedule D	) (Form 990) 2014	JEFFERSON COUNTY PUBLIC EDUCATION FOUNDATION, INC.	
Part XIII	Supplemental Info	ormation	Page 5
		offiation (continued)	
		3	
			-11-1

### SCHEDULE I (Form 990)

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

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

Department of the Treasury Internal Revenue Service

Attach to Form 990.

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

Name of the organization

JEFFERSON COUNTY PUBLIC EDUCATION

FOUNDATION, INC.
Part I General Information on Grants and Assistance

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and t criteria used to award the grants or assistance?

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form recipient that received more than \$5,000. Part II can be duplicated if additional space is needed 1 (a) Name and address of organization (f) Method of (b) EIN (c) IRC section (d) Amount of (e) Amount of (g) Descr valuation (book, or government if applicable cash grant non-cash non-cash a FMV, appraisal, assistance other) JEFFERSON COUNTY PUBLIC SCHOOLS 3332 NEWBURG ROAD LOUISVILLE, KY 40232 1,049,184 0. воок JCTC FOUNDATION 109 EAST BROADWAY LOUISVILLE, KY 40202 37,704. 0 BOOK MIDDLE COLLEGE HIGH SCHOOL NATIONAL CONSORTIUM - 27-28 THOMSON AVE - LONG ISLAND, NY 11101 22,331. 0. BOOK UNIVERSITY OF LOUISVILLE CONTROLLERS OFFICE- UNIVERSITY OF I LOUISVILLE, KY 40292 18,666. 0. BOOK KENTUCKY YMCA YOUTH ASSOCIATION #91 C. MICHAEL DAVENPORT BLVD FRANKFORT, KY 40601 12,087. 0. BOOK RALPH B KNOLLENBERG III FOUNDATION 601 BRECKENRIDGE LANE LOUISVILLE, KY 40207 7,323 0. BOOK

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

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

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

432101 10-15-14

### JEFFERSON COUNTY PUBLIC EDUCATION

Schedule I (Form 990) (2014) FOUNDATION, INC	• •			
Part III Grants and Other Assistance to Domestic Individuals Part III can be duplicated if additional space is needed.	. Complete if the	organization answ	ered "Yes" to Form 9	90, Part IV, line 22.
(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)
Part IV Supplemental Information. Provide the information req	uired in Part I, line	e 2, Part III, column	(b), and any other ad	ditional information.
PART I, LINE 2:			and the second s	
THE BOARD APPROVES THE DISBURSEMENT	r of fund	S TO VARIO	OUS PROGRAM	S THE
ORGANIZATION SUPPORTS.				
PART II, LINE 1, COLUMN (H):				
NAME OF ORGANIZATION OR GOVERNMENT:	: JEFFERS	ON COUNTY	PUBLIC SCH	OOLS
(H) PURPOSE OF GRANT OR ASSISTANCE	TO FUND	VARIOUS E	DUCATIONAL	PROGRAMS
AND TO FUND TRANSPORTATION EXPENSES	S FOR STU	DENTS TO A	TTEND THE	YMCA'S
SWIM PROJECT				
432102 10-15-14				

### **SCHEDULE 0**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization

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.

Open to Public Inspection

OMB No. 1545-0047

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

JEFFERSON COUNTY PUBLIC EDUCATION FOUNDATION, INC.

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

Form 8868 (Rev. 1-2014)					Page 2
• If you are filing for an Additional (Not Automatic) 3-Month I	Extension, c	complete only Part II and check this	box		
Note. Only complete Part II if you have already been granted ar					
• If you are filing for an Automatic 3-Month Extension, comp					
Part II Additional (Not Automatic) 3-Month	Extension	of Time. Only file the origin	al (no c	onies need	ed)
					ee instructions
Type or Name of exempt organization or other filer, see inst	tructione	Litter filer 5			
print JEFFERSON COUNTY PUBLIC EDU		<del>,</del>	Employe	i identification	n number (EIN) or
TOTATO A REPORT TATO	) C211 1 O11	`			
File by the due date for file a very file		liana.	0	-	(001)
""" b O DOX 3E3C0	, see mstruci	uons.	Social se	ecurity numbe	er (SSN)
instructions. City, town or post office, state, and ZIP code. For a LOUISVILLE, KY 40202	toreign add	ress, see instructions.			
ECOLOVILLE, ILL 10202					
Entantha Datum and forth and on the third and in the	··· .				011
Enter the Return code for the return that this application is for (	rile a separat	e application for each return)			0 1
A					
Application	Return	Application			Return
Is For	Code	Is For			Code
Form 990 or Form 990-EZ	01				
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
STOP! Do not complete Part II if you were not already grante	ed an autom	natic 3-month extension on a previo	ously file	d Form 8868.	
JOE SEILER, TH	REASURE	ER.			
<ul> <li>The books are in the care of ► 2500 EASTPOINT</li> </ul>	r Parkw	MAY - LOUISVILLE, K	Y 402	223	
Telephone No. ► 502-499-4794		Fax No.			
If the organization does not have an office or place of busine	ss in the Uni	ted States, check this box			<b>•</b>
• If this is for a Group Return, enter the organization's four digital					
box ▶ . If it is for part of the group, check this box ▶				_	
4 I request an additional 3-month extension of time until					
5 For calendar year, or other tax year beginning			JUN	30.20	15
6 If the tax year entered in line 5 is for less than 12 months,			Final		•
Change in accounting period				otani.	
7 State in detail why you need the extension					
THE ORGANIZATION NEEDS ADDITI	ONAT, T	IME TO GATHER SUFF:	TCTEN	T TNFOE	МОТТОМ
TO FILE A COMPLETE AND ACCURA				T TIVE OF	dilli TOI
10 1 111 11 COLL HILL 1HO HOCOICE		OTELY.			
****		<u> </u>			
		· · · · · · · · · · · · · · · · · · ·			
8a If this application is for Forms 990-BL, 990-PF, 990-T, 472	0, or 6069, e	enter the tentative tax, less any			0
nonrefundable credits. See instructions.			8a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 606	-				
tax payments made. Include any prior year overpayment a	allowed as a	credit and any amount paid	14.44.11.11		_
previously with Form 8868.			8b	\$	0.
c Balance due. Subtract line 8b from line 8a. Include your p	oayment with	n this form, if required, by using			
EFTPS (Electronic Federal Tax Payment System). See inst			8c	\$	0.
Signature and Verifica	ation mus	t be completed for Part II or	ıly.		
Under penalties of perjury, I declare that I have examined this form, incli	uding accompa	anying schedules and statements, and to	the best of	my knowledge	and belief,
it is true, correct, and complete, and that I am authorized to prepare this	form.			·	
Signature ► Title ►	SECRET	TARY/TREASURER	Date		

(Rev. August 2013)

### Request for Taxpayer Identification Number and Certification

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

Departi ntema	nent of the Treasury Revenue Service	
	Name (as shown on your income tax return)	•
	Jefferson County Public Education Foundation	
લં	Business name/disregarded entity name, if different from above	
page		Exemptions (see instructions):
ŭ.	Check appropriate box for federal tax classification:	· ·
0 0	Individual/sole proprietor C Corporation S Corporation Partnership Individual	Exempt payee code (if any)
ype	Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ►	Exemption from FATCA reporting
마	Limited liability company. Effect the tax diabshibation (2	code (if any)
Print or type	✓ Other (see instructions) ► non-profit	Taran '
면 의	Address (number, street, and apt. or suite no.)  Requester's name and apt. or suite no.)	and address (optional) .
Print or type. Specific Instructions on	3332 Newburg Road	
e Sp	City, state, and ZIP, code	
Sec	Louisville, KY 40232	
	List account number(s) here (optional)	
•		
Pa	rt I: Taxpayer Identification Number (TIN)	curity number
Ente	r your TIN in the appropriate box. The TIN provided must match the name given on the "Name" line your TIN in the appropriate box. The TIN provided must match the name given on the "Name" line your TIN in the appropriate box. The TIN provided must match the name given on the "Name" line you the Part I instructions on page 3. For other	
to a	roid backup withholding. For individuals, this is your socially instructions on page 3. For other lent alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other lent alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other lent alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other lent alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other lent alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other lent alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other lent alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other lent alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other lent alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other lent alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other lent alien, sole proprietor, or disregarded entity, see the part I instructions on page 3. For other lent alien, sole proprietor, or disregarded entity, see the part I instructions on page 3. For other lent alien, sole proprietor, or disregarded entity, see the part I instruction alien ali	
entit	ies, it is your employer identification fulfiber (EIN). If you do not have a second	
TIRI	n nage 3	r identification number
Not	If the account is in more than one name, see the chart on page 4 for guidelines on whose ber to enter.	
Hun	Del to enter.	
TPE	rt II Certification	
	DC CO S	esued to me), and
	the farm is my correct toyogyer identification fluffibel for fair waiting for a fluffiber	notified by the int-
	The number shown on this form is this contect taxpayer localisations and backup withholding, or (b) I have not been am not subject to backup withholding because: (a) I am exempt from backup withholding as a result of a failure to report all interest or dividends, or service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or	
	Service (IRS) that I am subject to backup withholding as a result of a failure to report an interest of the properties o	
- 1	am a U.S. citizen or other U.S. person (defined below), and	
3.	he FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA	
0-	##Geetien instructions. You must cross out item 2 above if you have been	/
h-~	source you have failed to report all interest and dividends on you.	
inte	erest paid, acquisition or abandonment of secured proper nerally, payments other than interest and dividends, you an	
gei	ructions on page 3.	_
Si		. /
	ere U.S. person Wy C. Chr. V	
_	eneral Instructions	
G	effect at the Internal Revenue Code unless otherwise note	
_	A distribution of the IRS has created a page on IRS gov for informati	
	The Man of the contract of the	
	out Form W-9 (such as legislation enacted after we release it) will be posething Form W-9 (such as legislation enacted after we release it) will be posething Form W-9 (such as legislation enacted after we release it) will be posething Form W-9 (such as legislation enacted after we release it) will be posething Form W-9 (such as legislation enacted after we release it) will be posething Form W-9 (such as legislation enacted after we release it) will be posething Form W-9 (such as legislation enacted after we release it) will be posething Form W-9 (such as legislation enacted after we release it) will be posething Form W-9 (such as legislation enacted after we release it) will be posething Form W-9 (such as legislation enacted after we release it) will be posething Form W-9 (such as legislation enacted after we release it) will be posething Form W-9 (such as legislation enacted after we release it) will be posething Form W-9 (such as legislation enacted after we release it) will be posething Form W-9 (such as legislation enacted after we release it) will be posething Form W-9 (such as legislation enacted after we release it) will be posething Form W-9 (such as legislation enacted after we release it) will be posething Form W-9 (such as legislation enacted after we release it) will be posething Form W-9 (such as legislation enacted after we release it) will be posething Form W-9 (such as legislation enacted after we release it) will be posething Form W-9 (such as legislation enacted after we release it) will be posething Form W-9 (such as legislation enacted after we release it) will be posething Form W-9 (such as legislation enacted after we release it) will be posething Form W-9 (such as legislation enacted after we release it) will be posething Form W-9 (such as legislation enacted after we release it) will be posething Form W-9 (such as legislation enacted after we release it) will be posething Form W-9 (such as legislation enacted after we release it) will be posething Form W-9 (such as legislation enacted af	
	irpose of Form	
	is required to file an information return with the IRS must obtain yo	
	person who is required to like an information member (TiN) to report, for example, income paid to recent example, and third party network and the party network and party network ne	/
ab	nsactions, real estate transactions, intergage interests and on many many made an IRA.  an IRA.	
	We saw W.O. calvif you are a U.S. person (including a resident alien), to	
pr	Use Form W-5 mly in you are a cooperating it (the requester) and, when plicable, to:	
dļ.	1. Certify that the TIN you are giving is correct (or you are waiting for a number	
to	be issued),	

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



3332 Newburg Road | Louisville, Kentucky 40218

VanHoose Education Center

### **BOARD OF DIRECTORS**

Chairman James Allen Hilliard Lyons

Vice-Chairman

Franklin Jelsma

Wyatt Tarrant & Combs

Secretary-Treasurer Joe Seiler PBI Bank

Robert J. Arnold Republic Bank & Trust Company

Mike Brown Barrister Commercial Group

GlowTouch Technologies

Malcolm B. Chancey Jr.

Emeritus

Al Cornish

Norton Healthcare

Vik Chadha

**Alex Gerassimides, M.D.** CPA Lab

**Joe Hardesty** Stites & Harbison

Audwin Helton Spatial Data Integrations

Henry Heuser Jr. Henry Vogt/Unistar

Tom Hudson nth/works

Lynn Huether Class Act Federal Credit Union

Kevin Joynt
Deloitte

Tanja Oquendo KentuckyOne Health

Mitch Rue WMR Consulting Ken Selvaggi

Mark Shirkness General Electric

WAVE 3 TV

Kevin Shurn

Superior Maintenance Company
Bill Simpson

Zeon Chemicals

Carol Timmons

Business First **Jeff Uligian** Genentech (502) 485-3995 | fax: (502) 485-3634

TO:

Louisville Metro Council Neighborhood Development Fund

FROM:

Kristin Wingfeld

**Business Partnerships** 

SUBJECT:

Jefferson County Public Education Foundation NDF Application

DATE:

January 27, 2016

The only paid staff member for the Jefferson County Public Education Foundation is the Executive Director, Sam Corbett.

If you have any questions, please call me at 485-3995.

Thank you.

KW:tm

# JEFFERSON COUNTY PUBLIC EDUCATION FOUNDATION, INC.

## General Information

0175787 Organization Number EFFERSON COUNTY PUBLIC EDUCATION FOUNDATION, INC. Name

N - Non-profit **Profit or Non-Profit** 

KCO - Kentucky Corporation **Company Type** 

A - Active

G-Good Standing Status

 $K_{\lambda}$ State

3/14/1983

3/14/1983 Organization Date File Date

5/12/2016 Last Annual Report

EFFERSON COUNTY PUBLIC EDUCATION FOUNDATION Principal Office

AEGER EDUCATION CENTER- ATTN: SAM CORBETT EXEC

3332 NEWBURG RD

COUISVILLE, KY 40218

WT&C CORPORATE SERVICES, INC.

Registered Agent

500 W. JEFFERSON STREET

SUITE 2800

LOUISVILLE, KY 40202

### **Current Officers**

ames Allen Chairman Franklin Jelsma Vice President

Treasurer

Director Director

**loseph Seiler** 

Audwin Helton IEFF ULIGIAN

Director

Executive

Samuel Corbett Henry Heuser

## Individuals / Entities listed at time of formation

1/4

MARY HELEN BYCK	IOAN RIEHM	I W HUGHES	ORSON OLIVER	WOODFORD R PORTOR	MALCOLM B CHANCEY JR
Director	Director	Director	Director	Director	Incorporator

## 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.

nts. Documents filed prior to September 15, 2004 will become available as the images are created.	III become available as the images are	created.		
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	<u>tiff</u>	PDF

24