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

Applicant/Program: Jefferson County Public Education Foundation for Shelby Tradition School Applicant Requested Amount: \$9000 Appropriation Request Amount:
Executive Summers of Dequest
Executive Summary of Request  Shelby Traditional Academy has 745 students enrolled in Kindergarten through 5th grade with a very diverse population. Shelby has implemented a program known as Health Promotion Schools of Excellence which integrates healthy attitudes, skills and behaviors for everyone a part of the Shelby community. Shelby's Family Resource Center helps students and parents obtain assistance with health needs, counseling services
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
I have reviewed the attached Neighborhood Development Fund Application and have found it complete and within Metro Council guidelines and request approval of funding in the following amount(s). I have read the organization's statement of public purpose to be furthered by the funds requested and I agree that the public purpose is legitimate. I have also completed the disclosure section below, if required.
District # Primary Sponsor/Signature Amount 42,000 4/21/17
Primary Sponsor Disclosure List below any personal or business relationship you, your family or your legislative assistant have with this organization, its volunteers, its employees or members of its board of directors.
Approved by:
Appropriations Committee Chairman  Date  Final Appropriations Amount:

Applicant/Program:			
Ad	Iditional Disclosu	re and Signatures	S
Additional Council Office Di List below any personal or busine organization, its volunteers, its en	ess relationship you, y		ative assistant have with this
Council Member Signature a	and Amount		
District 1		<u> </u>	
District 2		\$	
District 3		\$	
District 4		\$	
District 5		\$	
District 6		\$	

District 7 \_\_\_\_\_\_ \$\_\_\_\_\_

District 8 \_\_\_\_\_\_ \$\_\_\_\_\_

District 9 \_\_\_\_\_\_ \$\_\_\_\_\_

District 10 \_\_\_\_\_\_\$\_\_\_\_

District 11 \_\_\_\_\_\_\$\_\_\_\_

District 12 \_\_\_\_\_\_ \$\_\_\_\_\_

District 13 \_\_\_\_\_\_ \$\_\_\_\_\_

District 14 \_\_\_\_\_\_ \$\_\_\_\_\_

District 15 \_\_\_\_\_\_ \$\_\_\_\_\_

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Applicant/Program:		
Additional Disclosure and Signatures		
Additional Council Office Disclosure List below any personal or business relation organization, its volunteers, its employees	onship you, your family or your legisl	ative assistant have with this
	MNO (gob)	
District 16	\$	_
District 17	\$	
District 18	\$\$	
District 19	\$\$	_
District 20	\$	_
District 21	\$\$	_
District 22	\$	
District 23	\$	_
District 24	\$	_
District 25	\$	_

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District 26

	SECTION 1 - APPLICA	INT INFORMATION			
Legal Name of Applica	nt Organization:	nty Public Education I	Soundation		
(as listed on: http://www.so	os.ky.gov/business/records	my I done Eddedion I	Culturell		
Main Office Street & N	Mailing Address: Vanhoose Education	on Center, 3332 Newl	ourg Road		
Website: https://www.	jefferson.kyschools.us/about/suppor	t/foundation/about	1		
Applicant Contact:	Kristin Wingfeld	Title:	Coord Bus School Partnerships		
Phone:	508.485.2791	Email:	kristin.wingfeld@jefferson.kysch		
Financial Contact:	Denise Dewitt	Title:	Coordinator Grants & Awards		
Phone:	502.485.3734	Email:	denise.dewitt@jefferson.kyschool		
Organization's Represe	entative who attended NDF Training	g:			
GEOGI	RAPHICAL AREA(S) WHERE PROGRA	M ACTIVITIES ARE (W	/ILL BE) PROVIDED		
Program Facility Locati	ion(s): Shelby Traditional Acaden	ıy	,		
Council District(s):	4	Zip Code(s):	40217		
	SECTION 2 – PROGRAM REQUES	T & FINANCIAL INFOR	MATION		
PROGRAM/PROJECT N	AME: Shelby Elementary School Pla	yground			
Total Request: (\$)	9,000 Total Metro Awa	ard (this program) in p	orevious year: (\$) 0		
Purpose of Request (ch	neck all that apply):				
Operating Fu	nds (generally cannot exceed 33% o	f agency's total opera	ting budget)		
Programming	g/services/events for direct benefit t	o community or quali	fied individuals		
Capital Project	ct of the organization (equipment, fu	ırnishing, building, etc	c)		
The Following are Requ	uired Attachments:				
■ IRS Exempt Status Dete	ermination Letter	Signed lease if rent co	osts are being requested		
Current year projected	budget	IRS Form W9			
■ Current financial states	ment	Evaluation forms if us	ed in the proposed program		
■ Most recent IRS Form S	990 or 1120-H	r 1120-H Annual audit (if required by organization)			
■ Articles of Incorporation	on (current & signed)	Faith Based Organizat	ion Certification Form, if applicable		
■ Cost estimates from pr capital expense	oposed vendor if request is for				
Government for this or	ear ending June 30, list all funds app any other program or expense, include or Metro Council Appropriation (Neig	uding funds received t	hrough Metro Federal Grants,		
Source:	A	mount: (\$)			
Source:	A	mount: (\$)			
Source:	A	mount: (\$)	AND THE PARTY OF T		
Has the applicant conta	icted the BBB Charity Review for par	ticipation?	■ No		
Has the applicant met t	he BBB Charity Review Standards?	Yes ■ No			

Page 1 Effective May 2016 Applicant's Initials

### 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 Shelby Traditional Academy, one of 90 elementary schools in Jefferson County Public Schools. Shelby Traditional Academy has 745 students enrolled in Kindergarten through the 5th grade with a 78% free/reduced lunch rate. Shelby is located on Ziegler Street next to Lincoln Park east of Interstate 65. Our population is very diverse with 60% Black, 10% Hispanic, and 8% other races. Our white population is 23%. Shelby has two certified English as a Second Language (ESL) teachers as well as an ESL Bilingual Associate Instructor to better serve the needs of our diverse population. Shelby has implemented a program known as Health Promotion Schools of Excellence which integrates healthy attitudes, skills, and behavior for everyone apart of the Shelby community. Shelby's Family Resource Center helps students and parents obtain assistance with health needs, counseling services, and additional resources through various human-services agencies in Jefferson County. Shelby offers Extended School Services, and is a School-Based Decision Making school.



SECTION 4 - BOARD OF DIRECTORS AND PAID STAFF

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

Describe the Board term limit policy:		
there are no term limits		
	•	

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



# 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 suitable playground equpment for our kindergarten students. The location will include an existing fence with size limitations for students and neighborhood children.

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, 2018

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:

1 Gametime - PrimeTime Play Structure	\$12,768
27 Gametime - Playground Border @ \$48 each	\$1,296
1 GT Impax - 768 Sq Ft of Engineered Wood Fiber at	\$1,055
a 12" Compacted Depth	
1 Gametime - Geo-Textile 1125 Sq Ft Roll	\$308
1 Gametime - 3/4"DiaX30" Lg Galv Stake	\$24
1 Gametime - Installation on the above PrimTime Play	
Structure, EWF Surfacing, Geo-Textile Fabric Playground	\$3,785
Borders	
1 Freight	\$1,027
DISCOUNT	-\$3,145
TOTAL	\$17,119

Applicant's Initials

C: If this request is a fundraiser, please detail how the proceeds will be spent:
The request is not a fundraiser.
D: For Expenditure Reimbursement Only – The grant award period begins with the Metro Council approval date
and ends on June 30 of Metro fiscal year in which the grant is approved. If any part of this funding request is for funds to be spent before the grant award period, identify the applicable circumstances:
runus to be spent before the grant award period, facility 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
<ul> <li>identified in this application.</li> <li>✓ 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.</li> </ul>
Figure 2011 and appropriate

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Applicant's Initial

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 kindergarten 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 time spent doing physical activity on a weekly basis.
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.

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### SECTION 6 - PROGRAM/PROJECT BUDGET SUMMARY

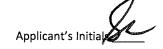
THE PROGRAM/PROJECT BUDGET SHOULD REALISTICALLY ESTIMATE WHAT AMOUNT IS NEEDED FROM METRO GOVERNMENT AND WHAT IS EXPECTED FROM OTHER SOURCES.

	Column 1 Proposed Metro Funds		Column 2 Non- Metro Funds		Column (1+2)=3
Program/Project Expenses					Total Funds
A: Personnel Costs Including Benefits					
B: Rent/Utilities					
C: Office Supplies					71.00.00
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	9,0	00	8	,119	
K: Capital Project		<del></del>			
L: Other Expenses (See Detailed List on Page 8)					
*TOTAL PROGRAM/PROJECT FUNDS					
% of Program Budget	53	%	47	%	100%

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

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

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<sup>\*</sup>Total of Column 1 MUST match "Total Request on Page 1, Section 2"

<sup>\*\*</sup>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
Total			

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**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		
		12.5	
	Total Value of In-Kind		
	(to match Program Budget Line Item. Volunteer Contribution &Other In Kind)		
PE	PONOR INFORMATION REFERS TO WHO MADE TED INDIVIDUALLY, BUT GROUPED TOGETHER (RSON PER WEEK sency Fiscal Year Start Date: $_{ m July}~1,~2017$	THE IN KIND CONTRIBUTION ON ONE LINE AS A TOTAL	ON. VOLUNTEERS NEED NOT BE NOTING HOW MANY HOURS PER
Do bu	es your Agency anticipate a significant increase dget projected for next fiscal year? NO	or decrease in your budge YES	et from the current fiscal year to the
lf Y	ES, please explain:		
or nd	2017-18 the district has over \$60M in requests fr instruction. The district is only able to fund abou	om schools and programs of these requests.	outside of normal allocations for staff
he	re is no funding source at the district for playgrou	ınds.	

### SECTION 7 - CERTIFICATIONS & ASSURANCES

By signing Section 7 of the Grant Application, the authorized official signing for the applicant organization certifies and assures to the best of his or her knowledge and/or belief the following Assurances and Certifications. If there is any reason why one or more of the assurances or certifications listed cannot be certified or assured, please explain in writing and attach to this application.

#### Standard Assurances

- 1. Applicant understands this application and its attachments as well as any resulting grant agreement, reports and proof of expenditure is subject to Kentucky's open records law.
- 2. Applicant will establish safeguards to prohibit employees or any person that receives compensation from awarded funds from using their position for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.
- 3. Applicant and any sub grantee will give Louisville Metro Government access to and the right to examine all paper or electronic records related to the awarded grant for up to five years of the grant agreement date.
- 4. Applicant assures compliance with the grant requirements and will monitor the performance of any third party (sub-grantee).
- 5. The Agency is in good standing with the Kentucky Secretary of State, Louisville Metro Government, the Jefferson County Revenue Commission, the Internal Revenue Service, and the Louisville Metro Human Relations Commission.
- 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.
- 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

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Effective May 2016

Applicant's Initials

### Shelby Traditional Academy

735 Ziegler Street Louisville, Kentucky 40217 (502) 485-8327 Fax: (502) 485-8507



May 8, 2017

Council Member Barbara Sexton Smith Louisville Metro Council District 4 601 W. Jefferson Street Louisville, KY 40202

Dear Council Member Sexton Smith,

Thank you for considering our request for financial support for a playground in Lincoln Park at Shelby Traditional Academy.

As you know, Shelby sits on the edge of Preston Park. This small park provides outdoor space for our students and local residents to explore and enjoy. At the time the school was built, a very small playground area was added to the Rawlings/Ziegler side and the district added a small scale playground suitable for pre-K through 1<sup>st</sup> grade which included an unlocked fence. Both playgrounds are accessible to the public and often host children and families outside of school hours. While we have provided general maintenance, the wear and tear of extended use required us to remove the playground equipment last fall.

Our plans for a new playground, while primarily for our students during school hours, will remain accessible to the residents of the surrounding neighborhood.

I look forward to working with you on this initiative, as well as future efforts to support and build our shared community. If you or your staff has any questions, please do not hesitate to call me. I can be reached either at work, 485-8327, or on my cell phone, 502-445-9742.

Sincerely,

Shelby Traditional Academy

735 Ziegler Street Louisville, KY 40217

h Goff, Principa



c/o David Williams & Associates, Inc. P.O. Box 208 Harrison, OH 45030 800-762-7936 Toll Free 330-821-4505 Fax www. davidwilliamsassociates.com

**QUOTE** #45361

11/29/2016

### Option 1 - Revision 1 - Shelby Traditional Academy

Jefferson County Public Schools Attn: Shelby Traditional Academy

735 Ziegler Street Louisville, KY 40217 Phone: 502-485-8327 harlan0219@gmail.com Project #: P21152 Ship To Zip: 40217

Quantity	Part#	Description	Unit Price	Amount
1	, RDU	Gametime - PrimeTime Play Strucuture (GLOUSHELBYTRAD-1-R1) - Ages 2 - 5; Aluminum Uprights	\$12,768.00	\$12,768.00
27	4862	Gametime - Playground Border	\$48.00	\$1,296.00
1	EWF-12	GT Impax - 768 Sq Ft (38 CY) of Engineered Wood Fiber at a 12" Compacted Depth	\$1,055.00	\$1,055.00
1	161291	Gametime - Geo-Textile 1125 Sq Ft Roll	\$308.00	\$308.00
1	152340	Gametime - 3/4"Dia X30"Lg Galv Stake -	\$24.00	\$24.00
1	RDU	Gametime - Installation on the Above PrimeTime Play Structure, EWF Surfacing, Geo-Textile Fabric, Playground Borders - By Certified GameTime Installer	\$3,785.00	\$3,785.00
made payal	ole to GameTime u may DEDUCT	H ORDER (CWO) DISCOUNT: Check e must be received at time order is an additional \$337.54 from your Total	SubTotal: Discount: Freight: <b>Total Amount:</b>	\$19,236.00 (\$3,144.52) \$1,027.36 <b>\$17,118.84</b>

# OPTIONAL RECIEVE AND STORE EQUIPMENT: Receiving and storage of equipment prior to installation ADD . . . . . \$1,000.

Contract: Kentucky Purchasing Cooperatives Vendor: 1740

Pricing valid for 30 days. Please request a new price after that time. Our quotation is based on shipment of all items at one time to a single destination, unless otherwise noted, and changes are subject to price adjustment.

**Payment terms:** Payment in full, net 30 days <u>subject to credit approval</u>. A 1.5% per month finance charge will be imposed on all past due accounts. Equipment will be invoiced separately from other services and shall be payable in advance of those services and project completion.

To order: Please complete the acceptance portion of this quotation and provide color selections, purchase order copy and other key information requested.

This quote does not include any state or local sales taxes. Sales tax will be added to the order if required, unless otherwise noted.

Acceptance of this proposal indicates your agreement to the terms and conditions stated herein.

Please issue one purchase order for the equipment and a separate purchase order for surfacing and/or equipment installation services.

GameTime Shipping Time: Standard shipping time for GameTime is 21-28 days. Allow an additional 4-7 days for transit.

Short Ship Claims: Purchaser has 14 days from receipt of equipment to file a short ship report in writing to our office. Company reserves right to not honor claims made after this time.





c/o David Williams & Associates, Inc. P.O. Box 208 Harrison, OH 45030 800-762-7936 Toll Free 330-821-4505 Fax www. davidwilliamsassociates.com

OUOTE #45361

11/29/2016

### Option 1 - Revision 1 - Shelby Traditional Academy

GTImpax Engineered Wood Fiber Delivery Time: Typical lead time for delivery is minimum 2 weeks. Delivery is based on a single delivery to one location per truck, additional drops not included unless specifically noted above. Please confirm current delivery time when placing order. Note: Delayed shipping permitted up to 4 months, at which time surfacing needs to be delivered or paid in full.

Bulk material ships via semi-truck/trailer with a live floor system in trailer which allows driver to deposit EWF directly onto a specific area provided proper access is available. Driver has final say whether the site has proper access. Site restoration is not included and will be the responsibility of the owner/owner's representative.

### **Installation Terms:**

- -- The above pricing is based on installation over natural earth and does not include any site work, unless otherwise noted on this quote.
- -- This pricing does not include receiving and storage of the equipment prior to installation.
- -- Any existing wood chips, asphalt, or playground equipment, in the area where the new structure will be located, must be removed by the owner unless otherwise noted on this quote.
- -- The play area site would need to be level prior to installation.
- -- An area will need to be provided for the disposal of excess dirt created when augering holes.
- -- Access to a dumpster will need to be provided for the disposal of packaging materials.
- -- The above pricing is based on non-prevailing wage rates.

Please note you are required by Kentucky State law to contact "Kentucky Underground Protection Service" at 1-800-752-6007 before any excavation or installation takes place. Because their questions will relate to the location of the site, we ask you to please contact them personally. This should be done within a two-week period but not less than four days prior to installation, as they will need 48 hours to mark off the site.

### **GameTime Standard Colors**

- -- Metal Colors: Yellow, Butterscotch, Orange, Red, Burgundy, Purple, Blue, Sky Blue, Spring Green, Green, Dark Green, Brown, Beige, Bronze, Black, Starlight, Metallic, White
- -- Deck Colors: Red, Gray, Blue, Brown
- -- Plastic Colors: Yellow, Orange, Red, Purple, Blue, Sky Blue, Spring Green, Green, Brown, Beige, Stone -- HDPE Colors: Yellow, Orange, Red, Purple, Blue, Sky Blue, Spring Green, Green, Beige, Black, Grey

You may view Additional Color options and pre-designed play palettes on http://www.gametime.com/resources/color-options/

### **Order Information:** Bill To: Ship To: Contact: Contact: Address: Address: City, State, Zip: City, State, Zip: Fax: \_\_\_\_\_ eMail: eMail:





Sales Representative: Gigi Kopas Gibson

c/o David Williams & Associates, Inc. P.O. Box 208 Harrison, OH 45030 800-762-7936 Toll Free 330-821-4505 Fax www. davidwilliamsassociates.com

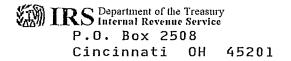
QUOTE #45361

11/29/2016

# Option 1 - Revision 1 - Shelby Traditional Academy

Acceptance of quotation:		
Accepted By (printed):	Date:	
Title:	P.O. No:	
Telephone:	Fax:	
Purchase Amount: \$17,118.84		
SALES TAX EXEMPTION CERTIFICATE #:		
(PLEASE PROVIDE A COPY OF CERTIFICATE)		
Customer Signature		
Quote prepared by: Debra Maue		





In reply refer to: 0248164841 June 14, 2011 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: 1-877-829-5500-

Dear TAXPAYER:

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

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

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

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	FY17 Budget
Revenue	2050 000
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
Jeff Uligian	2017

There are no term Junits for board members

### Jefferson County Public Education Foundation

Balance Sheet 1/31/17

			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 \$12,800	\$0 \$0	\$0 · \$0
PNC-Checking PNC-Investment Sweep Total	\$0 \$1,346,172 \$1,358,972	\$0 \$1,202,254 <b>\$1,215,0</b> 54	\$0 \$3,408,320 \$3,421,120	\$365,503 \$3,403,147 \$3,781,450	\$0 \$3,732,840 <b>\$3,745</b> ,640	\$14,900 \$3,745,048 <b>\$3,772,7</b> 48	\$0 \$2,473,121 <b>\$2,485,92</b> 1	\$0 \$2,086,014 <b>\$2,086,</b> 014	\$0 \$2,126,093 <b>\$2,126,093</b>
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		į	\$0.00 \$0.00						
PNC Checking Sweep									
Checking Account Sweep-Repurchase Agreeement Outstanding Checks			\$0.00 \$2,213,177.00		•				
Tressurer JCPS ESL Newcomer Academy Assumption High Olmstead Academy Tressurer JCPS Waggener High	16 19 65 118 162		\$1,000.00 \$1,000.00 \$84,00 \$1,000.00 \$1,000.00					·	
vaagener righ Carter Traditional Learning Stewards University of Louisville	163 192 199 200		\$1,000.00 \$1,000.00 \$75,000.00 \$8,000.00						

\$87,084.00

2,126,093.00 2,126,093.00

Total Checks Outstanding

Nel DDA Position Total CASH

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

	Cash	Cash	
Balance		Disbursements	Balanc
30-Jun-16	YTD	YTD	Curre
		\$4,000.00	\$3,175.0
		•	\$7,490.0
			\$5,000.0 \$0.0
			\$0.c \$81.5
•	• •		\$221.3
			\$781,303.3
		\$0.00	\$13,335.0
		\$0.00	\$441.0
•		\$1,000.00	\$5,896.0
			\$9,031.9
			\$38,372.6
			\$385.0 \$0.0
		•	\$0.0 \$3,487.3
•			\$50,000.0
			\$117,394.2
\$17,515.22	\$13,000.00	\$4,000.00	\$26,515.2
\$2,035.64	\$0.00	\$0.00	\$2,035.6
\$15.25	\$0.00	\$15.25	\$0.00
\$20,048.36	\$0.00	\$18,046.24	\$2,002.1
•		\$825.00	\$13,177.5
			\$14,197.4
•			\$1,485.30
			\$15,024.00
			\$13,594.93
			\$1,643.40 \$24,000.00
			\$24,000,00
			\$1,337.36
\$34,226.85	\$0.00		\$32,226.85
\$20,000.00	\$0,00	\$0.00	\$20,000.00
\$17,500.23	\$29,000.00	\$33,539.95	\$12,960.28
		\$1,335,225.76	\$421,688.89
			\$2,301.06
•		·	\$28,250.00
			\$0.00
			\$24,000.00
•			\$0.00 \$100,000.00
			\$0.00
			\$3,606.00
\$2,907.12	\$0.00	\$0.00	\$2,907.12
\$8,556.46	\$0.00	\$0.00	\$8,556.46
\$198.02	\$1,047.15	\$1,000.00	\$245.17
\$0.00	\$0.00	\$0.00	\$0.00
\$828.00	\$500.00	\$0.00	\$1,328.00
			\$1,900.00
•			\$1,810.00
•		· ·	\$157.48
			\$4,035.38
•			\$1,525.00
			\$1,206.44 \$9,777.86
			\$0.00
			\$0.00
\$17,534.69	\$45,859.05		\$46,975.00
\$69,767.97	\$0.00	\$4,000.00	\$65,767.97
\$321.98	\$0.00	\$0.00	\$321.98
\$31,819.60	\$0.00	\$3,718.15	\$28,101.45
<u>\$425.61</u>	\$1,400.00	\$915.25	\$910.36
\$1,054,140.20	52,753,472.35	\$1,836,376.32	\$1,971,236.23
\$32,956.44	\$8,192.61	\$16,673.22	\$24,475.83
\$36,609.81	\$100,000.00	\$104,143.16	\$32,466.65
\$15,486.17	\$100.00	\$0.00	\$15,586.17
\$75,361.72	\$25,166.96	\$18,200.51	\$82,328.17
\$160,414.14	\$133,459.57	\$139,016.89	\$154,856.82
\$1,214,554.34 \$	2,886,931.92	\$1,975,393.21	\$2,126,093.05
	30-Jun-16 \$6,675.00 \$7,490.00 \$0.96 \$81.59 \$221.39 \$224,463.17 \$13,335.00 \$441.00 \$6,396.03 \$9,281.41 \$43,370.53 \$385.00 \$2,000.00 \$0.00 \$1,515.22 \$17,515.22 \$2,035.64 \$15,25 \$20,048.36 \$14,002.55 \$22,921.72 \$1,485.30 \$15,024.00 \$18,794.93 \$143.40 \$0.00 \$4,050.00 \$2,438.69 \$34,226.85 \$20,000.00 \$17,500.23 \$319,802.91 \$3,123.56 \$38,000.00 \$24,000.00 \$24,000.00 \$24,000.00 \$21,86 \$38,000.00 \$24,000.00 \$21,86 \$38,000.00 \$21,86 \$3,606.00 \$2,907.12 \$8,556.46 \$198.02 \$0.00 \$1,900.00 \$1,810.00 \$1,900.00 \$1,810.00 \$1,900.00	30-Jun-16         YTD           \$6,675.00         \$500.00           \$7,490.00         \$0.00           \$0.96         \$0.00           \$81.59         \$0.00           \$221.39         \$0.00           \$24,463.17         \$1,016,766.77           \$13,335.00         \$0.00           \$441.00         \$0.00           \$6,396.03         \$500.00           \$9,281.41         \$0.49           \$43,370.53         \$21.15           \$385.00         \$0.00           \$2,000.00         \$1,995.00           \$0.00         \$50,000.00           \$2,000.00         \$1,995.00           \$0.00         \$50,000.00           \$2,000.00         \$1,995.00           \$0.00         \$50,000.00           \$17,515.22         \$13,000.00           \$17,515.22         \$13,000.00           \$20,048.36         \$0.00           \$14,002.55         \$0.00           \$24,035.64         \$0.00           \$1,485.30         \$0.00           \$1,400.00         \$2,000.00           \$1,400.00         \$2,000.00           \$1,500.00         \$2,000.00           \$1,500.23         \$29,000.00     <	Balance         Receipts         Disbursements           30-Jun-16         YTD         \$4,000.00           \$5,675.00         \$500.00         \$0.00           \$0.96         \$0.00         \$0.00           \$0.96         \$0.00         \$0.00           \$221.39         \$0.00         \$0.00           \$244.63.17         \$1,016,766.77         \$259,926.55           \$13,335.00         \$0.00         \$0.00           \$441.00         \$0.00         \$0.00           \$43,370.53         \$2.15         \$5,000.00           \$335.00         \$0.00         \$0.00           \$43,370.53         \$2.15         \$5,000.00           \$2,000.00         \$1,995.00         \$50.00           \$2,000.00         \$1,995.00         \$50.66           \$0.00         \$50,000         \$0.00           \$2,000.00         \$1,995.00         \$50.766           \$0.00         \$50,000         \$0.00           \$17,515.22         \$13,000.00         \$4,000.00           \$22,921.72         \$0.00         \$16,262           \$14,400.2.55         \$0.00         \$16,262           \$14,400.2.55         \$0.00         \$18,724.30           \$1,485.30         \$

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

199 200

Everyone Reads	1/12/2017		\$75,000.00	Learning Stewards
Wilson Wyatt 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	\$250.00		Ruo
Executive Director Innovation Fund	1/30/2017	\$1,000.00		Allen
Executive Director Innovation Fund	1/30/2017	\$500.00		Selvaggi
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
Short Term Designated	1/30/2017	\$2,500.00	•	Community foundation of utah
Short Term Designated	1/30/2017	\$2,000.00		Louisville Orhcestra
Idoa Festival	1/30/2017	\$1,000.00		Glowtouch
Elaine Whelan Literacy	1/30/2017	\$25,00		Whelen Kim
Eleine Whelan Literacy	1/30/2017	\$40,00		Whelan
Elaine Whelan Literacy	1/30/2017	\$20.00		Pemberton
Imagination Library	1/30/2017	\$22,850.00		Kosair
Chris Nelligan Scholarship	1/30/2017	\$100.00		Stosberg
Operating	1/30/2017		\$259,95	DDA SVC Charge
Operating	1/30/2017	\$18.25		Interest Income
David Jones	1/30/2017	\$0.34		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:

Transfer 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

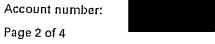
alance Summa	mary Info						·	
		Beginning balance 0.00		Deposits and other credits 169,303.70	other debits		Ending balance 0.00	
eposits and Of	ther Credits	,			Checks and Other D	ebits		***************************************
scription		items		Amount			Items	Amoun
eposits		1		121,320.00	Checks		7	48,970.33
itional Lockbox		0		0.00	Returned Items		0	0.00
CH Credits		0		0.00	ACH Debits		0	0.00
inds Transfers In		20		18.67	Funds Transfers Out		0	0.00
ade Services		0		0.00	Trade Services	•	0	0.00
vestments		4		47,965.03	Investments		16	120,073.42
ro Balance Trans	fers	0		0.00	Zero Balance Transfers		0	0.00
ljustments		0		0.00	Adjustments		0	0.00
her Credits	- ·	0		0.00	Other Debits		ì	259.95
tal		25		169,303.70	Total		24	169,303.70
dger Balance				· · · · · · · · · · · · · · · · · · ·		* ·····		
•	Ledger balance		Date		Ledger balance	Date		Ledger balance
/31 /03 /04 /05 /06 /09 /10	0.00 0.00 0.00 0.00 0.00 0.00 0.00		01/11 01/12 01/13 01/17 01/18 01/19 01/20		0.00 0.00 0.00 0.00 0.00 0.00	01/23 01/24 01/25 01/26 01/27 01/30 01/31		0.00 0.00 0.00 0.00 0.00 0.00 86,370.00 0.00

posits and Other Credits					
posits		1 transaction for a total of \$ 121,320.00			
эd '30		Transaction description	Reference number 036892081		

# Corporate Business Account Statement

JEFFERSON COUNTY PUBLIC EDUCATION **FOUNDATION INC** 

For th	e period	12/31/2016	to	01/31	/2017
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Depo	sits and	d Other	Credits	- cont	inued		<del>(Militar Siru di nastriani sanga di l</del>				
Funds Transfers In			20	20 transactions for a total of \$ 18.67							
Date posted				Tran	saction						Reference
01/03			Amoi o e		ription	<i>r</i> .					numbe
01/04			2.5		erest For Re					00	00000000000120
01/05			0.5		erest For Re					00	00000000000120
01/06			0.5 0.5		erest For Re					00	00000000000120
01/09			1.7		erest For Re					00	0000000000122
01/10			0.5		erest For Re					00	0000000000122
01/11			0.5	o me	rest For Re	po Sweep				. 00	00000000000121
01/12			0.5		rest For Re					00	0000000000121
01/13			0.5		rest For Rep					00	0000000000122
)1/17			2.33		rest For Rep		•			00	0000000000121
)1/18					rest For Rep					DO	0000000000121
)1/19			0.58	o inte	rest For Rep	oo Sweep				000	8110000000000
)1/20			0.58		rest For Rep					000	000000000119
11/23			0.58		rest For Rep	•				000	000000000119
11/24			1.75		rest For Rep					000	000000000120
11/25			0.58		rest For Rep					000	000000000121
11/26			0.58		est For Rep					000	000000000122
11/27			0.58		est For Rep					000	000000000120
1/30			0.58		est For Rep					000	000000000121
1/31			1.74		est For Rep					000	000000000121
			0.58	mer	est For Rep	o Sweep				000	000000000120
nvestn	nents			4 tra	ansactions	for a total	of \$ 47,9	65.03			
ate osted			4	Transa	ction		, -				
1/03				descrip		7					
1/06			44,123.06			estment Positi					
1/09			60.40	керо	Sweep/Inve	estment Positi	on 2,096,	886.97			
1/26			2,702.15	Repo	Sweep/Inve	estment Positi	on 2,094,	104.82			
1/10			999.42	керо	Sweep/Inve	estment Positi	on 2,093,	114.70			
hecks	s and Ot	her Deb	its								
hecks	and Subs	titute Ch	ecks	······································	7 transa	ctions for a	total of	\$ 48.9	70 33		
	neck		Reference	Date	Check		Reference	Date	. Check		0.6
osted nu ./03 18	n Imber	Amount 375.45	number	posted	number	Amount	number	posted	number	Amount	Reference number
/03 18		43,750,00	095655714 095656461	01/09 01/09	195 196	2,500,00 283,90	090349420 031451645	01/30	194	1,000.00	096000096
/06 19	8	60,98	090201109	01/26	191	1,000.00	090022116	!			
vestm	ents			16 tr	ansactions	s for a total	of \$ 120	073 /	2		
te sted	•		0.000	Transact	ion		0. <b>4</b> 120	,0,0,4	· · · · · · · · · · · · · · · · · · ·		
1/04			Amount 0.59	descripti		of any one a Director	0.0000	10 mm			
/05						stment Positic					
/10			0.58	Nepo 2	Sweep/mves	stment Positie	n 2,096,9	47.37			
/11						tment Positio					
/12						tment Positio					
/13						tment Positio					

0.58 Repo Sweep/Investment Position 2,094,107.14

2.33 Repo Sweep/Investment Position 2,094,109.47



/13/17

# 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-continue	ed	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	Repo Sweep/Investment Position 2,094,111.21						
1/23	1.75	Repo Sweep/Investment Position 2,094,112.96						
1/24	0.58	Repo Sweep/Investment Position 2,094,112.54						
1/25	0.58	Repo Sweep/Investment Position 2,094,114.12						
1/27	0.58	Repo Sweep/Investment Position 2,093,115.28						
1/30		Repo Sweep/Investment Position 2,127,067.02						
1/31	86,110.63	Repo Sweep/Investment Position 2,127,067.02  Repo Sweep/Investment Position 2,213,177.65						
ther Debits		1 transaction for a total of \$ 259.95						
e sted	Amount	Transaction description Referen						
/31	259.95	Corporate Account Analysis Charge 6000000000000000000000000000000000000						
lock and Substitute	Check Summa	rv						
Gap in check sequence								
eck	01/03 095655714 01/03 095656461	Check number         Date Amount paid number         Reference number Amount paid number         Check number Amount paid number         Date Reference number Amount paid number           194         * 1,000.00 01/30 096000096         198         * 60.98 01/06 09020110           195         2,500.00 01/09 090349420         01/09 031451645						

# **Reviewing Your Statement**

Please 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.

### **Balancing Your Account**

### Jpdate Your Account Register

Compare:

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

Sheck 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.)

Add to Your Account Register Valance:

Any deposits or additions including interest payments and ATM or electronic deposits

listed on the statement that are not already entered in your register.

lubtract From Your Account legister Balance;

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 scount register .tt not on your atement.

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

ep 3: iter the ending balance recorded on your statemed id deposits and other additions not recorded	ent Total A	\$ + \$
ibtract checks and other deductions not recorded	Subtotal: Total B -	= \$ \$
æ result should equal your account register balan	ce =	\$

erification 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 /s 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 visionally credit your account for the amount you think is in error, so that you will have use of the money during the time it as us to complete our investigation.





### BYLAWS OF THE

### JEFFERSON COUNTY PUBLIC EDUCATION FOUNDATION

December 10, 2008

### ARTICLE I

### PURPOSES

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

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

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

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

### ARTICLE II

### OFFICES

The principal office of the corporation in the State of Kentucky and its registered office under the laws of Kentucky shall be located (in care of Joe Seiler, Secretary/Treasurer) at National City Bank, 31T09B, 101 S. 5<sup>th</sup> Street, 9<sup>th</sup> Floor,

Louisville, Kentucky 40202. The corporation may have such other offices, either within or without the State of Kentucky, as the business of the corporation may require from time to time.

### ARTICLE III

### DIRECTORS

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

# SECTION 2. QUALIFICATIONS, TENURE AND NUMBER.

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

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

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

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

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

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

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

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

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

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

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

### ARTICLE IV

### OFFICERS

SECTION 1. CLASSES. The officers of the corporation shall be a chairman, a vice chairman, a treasurer, a secretary, and such other officers, whose duties may be fixed from time to time by the Board of Directors, as may be provided by the Board of Directors and elected in accordance with the provisions of this article. The Board of Directors may also create the offices of one

or more assistant treasurers and assistant secretaries, all of whom shall be elected by the Board of Directors. The same person may hold any two or more offices, except that of chairman.

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

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

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

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

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

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

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

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

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

### ARTICLE V

### CONTRACTS, LOANS, CHECKS, AND DEPOSITS

SECTION 1. CONTRACTS. The Board of Directors may authorize any officer or officers, agent or agents, to enter into any contract or execute and deliver any instruments in the name of and on behalf of the corporation, and such authority may be general or confined to specific instances.

SECTION 2. LOANS. No loans shall be contracted on behalf of the corporation, and no evidences of indebtedness shall be issued in its name unless authorized by a resolution of the Board of Directors. Such authority may be general or confined to specific instances.

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

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

### ARTICLE VI

### INVESTMENT REPORTS

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

### ARTICLE VII

### FISCAL YEAR

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

### ARTICLE VIII

# WAIVER OF NOTICE

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

### ARTICLE IX

# INDEMNIFICATION OF OFFICERS AND DIRECTORS

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

### ARTICLE X

### AMENDMENT OF BYLAWS

The Board of Directors may alter, amend or rescind the bylaws.

### CERTIFICATE

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

Chairman

## JEFFERSON COUNTY PUBLIC EDUCATION FOUNDATION, INC.

FINANCIAL STATEMENTS

YEARS ENDED JUNE 30, 2015 AND 2014

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

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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

		- 3		Kindergarten		ndergarten Vo		Vogt cholars	Ac	Youth 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:						٠				
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	22	22,445		-		69,778		75,768		
Total Net Assets, End of Year	\$ 20	08,865	\$	250,000	\$	69,778	\$	72,768		

	Other Temporarily Restricted	Temporarily Restricted Total	Board Designated Programs	Other Unrestricted		 Total
			·			
. \$	812,876 (1,274,431)	\$ 1,066,876 (1,295,011)	\$ - -	\$	<del>.</del> -	\$ 1,066,876 (1,295,011)
_	(461,555)	(228,135)	_		_	 (228,135)
	-	-	-		6,248	6,248
	4	4	-		138	142
	1,274,431	1,295,011			-	1,295,011
	1,274,435	1,295,015	-		6,386	 1,301,401
	1,274,431	1,295,011	34,730			1,329,741
	_	-			10,067	10,067
	1,274,431	1,295,011	34,730		10,067	1,339,808
	4	4	(34,730)		(3,681)	(38,407)
	(461,551)	(228,131)	(34,730)		(3,681)	(266,542)
	1,136,479	1,504,470	103,765		17,279	 1,625,514
_\$	674,928	\$ 1,276,339	\$ 69,035	\$	13,598	\$ 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

	Every One Reads		Innovation I3 Grants		Gov	Metro vernment Grants	Sch	stern High lool 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		5,987		219,554		15,988		43,536
General expenses		-		-		-		-
		5,987		219,554		15,988		43,536
Changes In Unrestricted Net Assets		-		<u>.</u>		-		
Changes In Total Net Assets	•	(2,987)	J	(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

	Other Temporarily Restricted	Temporarily Restricted Total	Board Designated Programs	Other Unrestricted	Total
\$	•	\$ 868,703	\$ -	\$ -	\$ 868,703
	(461,814)	4 (746,879)	-	-	4 (746,879)
	6,401	121,828	-		121,828
	-	-	-	1,999	1,999
	-	-	-	155	155
	100	100	-	(100)	-
	- 461,814	- 746,879	-	-	-
	461,914	746,879	-	2,054	746,879
	401,714	740,979	-	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

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# 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 	\$ 1,606,737 18,777
Total	\$ <u>1,358,972</u>	\$ 1,625,514

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

Form **990** 

Department of the Treasury

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

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

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

2014
Open to Public Inspection

Information about Form 990 and its instructions is at www.irs.gov/form990. A For the 2014 calendar year, or tax year beginning and ending JUN 30, 2015 JUL 1, 2014 Check if applicable: C Name of organization D Employer identification number JEFFERSON COUNTY PUBLIC EDUCATION Address change FOUNDATION, INC. Name Ichange Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final return/ P.O. BOX 35368 502-585-5347 termin-ated 1,073,266. City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ LOUISVILLE, KY 40202 H(a) Is this a group return Applica-tion pending F Name and address of principal officer: JOSEPH SEILER for subordinates? Yes X No 2500 EASTPOINT PARKWAY, LOUISVILLE, KY 4022 H(b) Are all subordinates included? Yes No Tax-exempt status: X 501(c)(3) 501(c) ( ) ◀ (insert no.) 4947(a)(1) or [ If "No," attach a list. (see instructions) J Website: ▶ N/A H(c) Group exemption number ▶ Form of organization: X Corporation Other > Year of formation: 1983 M State of legal domicile; KY Trust Association Part I Summary Briefly describe the organization's mission or most significant activities: SUPPORT OF JEFFERSON COUNTY Activities & Governance KENTUCKY PUBLIC SCHOOLS Check this box Fig. 1 if the organization discontinued its operations or disposed of more than 25% of its net assets. 25 Number of voting members of the governing body (Part VI, line 1a) 25 Number of independent voting members of the governing body (Part VI, line 1b) 0 Total number of individuals employed in calendar year 2014 (Part V, line 2a) 0 6 Total number of volunteers (estimate if necessary) 6 7 a Total unrelated business revenue from Part VIII, column (C), line 12 b Net unrelated business taxable income from Form 990-T, line 34 **Prior Year Current Year** 870,702. 1,073,124. Contributions and grants (Part VIII, line 1h) ..... 0. Program service revenue (Part VIII, line 2g) 0. 159. 142. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 0. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 0. 870,861. 1,073,266. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) ....... 818,114. 1,291,623. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 0. Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 0. 36,860. 16a Professional fundraising fees (Part IX, column (A), line 11e) 0. b Total fundraising expenses (Part IX, column (D), line 25) 9,584. 11,325. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 827,698. 1,339,808. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 43,163. <266,542.> Revenue less expenses. Subtract line 18 from line 12 **Beginning of Current Year** End of Year 1,625,514. 20 Total assets (Part X, line 16) 1,358,972. Total liabilities (Part X, line 26) 1,625,514. Net assets or fund balances, Subtract line 21 from line 20 Part II | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Signature of officer Date Sign JOSEPH SEILER, SECRETARY/TREASURER Here Type or print name and title Date Print/Type preparer's name Preparer's signature JEREMY M FINN, Paid self-employer Preparer Firm's name MONROE SHINE & CO., INC. CPA'S Firm's EIN Firm's address ▶ PO BOX 22039 Use Only Phone no. 502-423-0311 LOUISVILLE, KY 40252-9804 X Yes May the IRS discuss this return with the preparer shown above? (see instructions)

	JEFFERSON COUNTY PUBLIC EDUCATION
	m 990 (2014) FOUNDATION, INC. Page 2
Pa	art III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission: SUPPORT OF JEFFERSON COUNTY, KENTUCKY PUBLIC SCHOOLS
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?  Yes X No
3	If "Yes," describe these new services on Schedule O.  Did the organization cease conducting, or make significant changes in how it conducts, any program services?  Yes X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$1, 291, 623. including grants of \$1, 291, 623. ) (Revenue \$)  GRANTS AND ALLOCATIONS TO THE JEFFERSON COUNTY PUBLIC SCHOOL SYSTEM IN
	KENTUCKY AND INDIVIDUALS TO PROMOTE EDUCATIONAL IMPROVEMENTS IN
	ELEMENTARY, MIDDLE, AND HIGH SCHOOLS AND EARLY CHILDHOOD EDUCATION.
4b	(Code:) (Expenses \$ including grants of \$)   (Revenue \$)
	·
С	(Code:) (Expenses \$

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

including grants of \$ 1,291,623. (Expenses \$ 4e Total program service expenses ▶

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)?	i		
	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		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
•	during the tax year? If "Yes," complete Schedule C, Part II	4		Х
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	l	х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	<u>ا</u>		
Ü	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
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		х
0	Did the organization maintain collections of works of art, historical treasures, or other similar assets?  f "Yes," complete			
8		8		х
_	Schedule D, Part III	l-°		- 23
9				
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			Х
	If "Yes," complete Schedule D, Part IV	9		
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			v
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		<u>X</u>
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	١. ا		**
	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			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		_X_
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<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			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		<u>X</u>
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		Ì	
	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		- 1	
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		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		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
_	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000		-	
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	1	X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
.0	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	-10		
10		16	ŀ	X
47	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV  Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	10		
17		17		Х
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	-17		
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	40		Х
	1c and 8a? If "Yes," complete Schedule G, Part II	18		
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? # "Yes,"	40		v
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		<u>X</u>
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

JEFFERSON COUNTY PUBLIC EDUCATION Form 990 (2014) FOUNDATION, INC.
Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	<u> </u>	X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			İ
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			l
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			.,
	Schedule K. If "No", go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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		
	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	or-		Х
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		- 21
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	25b		Х
06	Schedule L, Part I  Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or	200		
26	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
		26		х
27	complete Schedule L, Part II  Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
_,	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
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):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	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		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	.	İ	
	contributions? If "Yes," complete Schedule M	.30		<u>X</u>
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		<u>X</u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		<u> </u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		<u>X</u> _
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		<u>X</u>
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
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		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			v
	If "Yes," complete Schedule R, Part V, line 2	36		<u>X</u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	_		v
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		<u>X</u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		~	
	Note. All Form 990 filers are required to complete Schedule O	38	X	201.4

Form 990 (2014) FOUNDATION, INC.
Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
<b>1</b> a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	)	1	100
b		7		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		]
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		140	1,4
	filed for the calendar year ending with or within the year covered by this return 2a	)		100
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		l
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	(3,)	385	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		X
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
b	If "Yes," enter the name of the foreign country:			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			l
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	,	Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a				
	any contributions that were not tax deductible as charitable contributions?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		ı
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		Х
b	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?	7c		X
d	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
, <b>f</b>	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
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12		l	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against		İ	
	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	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	- 1		
	organization is licensed to issue qualified health plans	1		
	Enter the amount of reserves on hand			
	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		

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Form 990 (2014) FOUNDATION, INC.

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 2 through 7b below 7b be 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			<u></u>		X			
Se	ection A. Governing Body and Management								
	•	1 1	,		Yes	No			
1	a Enter the number of voting members of the governing body at the end of the tax year	1a	25						
	If there are material differences in voting rights among members of the governing body, or if the governing	]	1						
,	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		l						
	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				1			
	officer, director, trustee, or key employee?	***************************************	<u>[</u>	2		X			
3	Did the organization delegate control over management duties customarily performed by or under the	direct supervision	1						
	of officers, directors, or trustees, or key employees to a management company or other person?		L	3		X			
4									
. 5	Did the organization become aware during the year of a significant diversion of the organization's ass	ets?		5		X			
6	Did the organization have members or stockholders?			6		X			
78		point one or							
	more members of the governing body?			7a		X			
ŀ	Are any governance decisions of the organization reserved to (or subject to approval by) members, st	ockholders, or							
	persons other than the governing body?		- 1	7b		X			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year		····						
a		•	- 1	8a	х				
b	Each committee with authority to act on behalf of the governing body?			8b	Х				
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read		·····						
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O		1	9		X			
Sec	ction B. Policies (This Section B requests information about policies not required by the Internal Rev	ranua Cada I			1				
	THE CONTROL OF THE INCIDENCE OF THE INCI	enue code.			Yes	No			
10a	Did the organization have local chapters, branches, or affiliates?	,	Г	10a	103	X			
b	b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,								
				10b					
11a	1a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?								
	b Describe in Schedule O the process, if any, used by the organization to review this Form 990.								
12a				12a		Х			
b	. 111 - 10 - 0								
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Ye			12b					
·	in Schedule O how this was done		١.	40-					
13	TO LANGE TO A CONTROL OF THE CONTROL			12c		X			
14	Did the assessment in the second state of the			13		X			
15	Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval		····  -	14		Λ			
10	·	by independent	- 1		- 1				
_	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		1.			37			
a	The organization's CEO, Executive Director, or top management official		1	15a		<u>X</u>			
D	Other officers or key employees of the organization		<u> </u> 1	15b		X			
16-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	,		i	ĺ				
ioa	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangements				1				
	taxable entity during the year?	·····	1	16a		X			
a	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate				- 1				
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organiz								
800	exempt status with respect to such arrangements?	••••••••	1	6b					
	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 or	ıly) avail	able					
	for public inspection. Indicate how you made these available. Check all that apply.								
	Own website Another's website X Upon request Other (explain in								
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, confl	ict of interest policy,	and fina	ancia	I				
	statements available to the public during the tax year.								
20	State the name, address, and telephone number of the person who possesses the organization's book	s and records: 🕨							
	JOE SEILER, TREASURER - 502-499-4794								
	2500 FASTPOTNT PARKWAY LOUTSVILLE 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.

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

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

(A)	(B)	(C)		(D)	(E)	(F)				
Name and Title	Average	[ (00 )		Pos	itior	l than	one	Reportable	Reportable	Estimated
	hours per week		, unle icer ar					compensation from	compensation from related	amount of other
	(list any	ctor					Π	the	organizations	compensation
	hours for	Individual trustee or director				ted		organization	(W-2/1099-MISC)	from the
	related	stee (	truste		92	bensa		(W-2/1099-MISC)		organization
	organizations below	traf tr	Institutional trustee		nploye	st com	_			and related organizations
	line)	Indivic	Institu	Officer	Key employee	Highest compensated employee	Former			organizations
(1) JAMES R ALLEN	1.00									
CHAIRMAN		X		X		L		0.	0.	0.
(2) FRANKLIN JELSMA	1.00									
VICE CHAIRMAN		X		X				0.	0.	0.
(3) JOSEPH SEILER	3.00							_		_
TREASURER		X		Х				0.	0.	0.
(4) MIKE BROWN	1.00				٠					•
MEMBER	1 00	X						0.	0.	0.
(5) AUDWIN HELTON	1.00							0		0
MEMBER	1 00	X						0.	0.	0.
(6) HENRY HEUSER JR	1.00	٦,							,	0
MEMBER (77) MARIE GATERIANES	1 00	X						0.	0.	0.
(7) MARK SHIRKNESS MEMBER	1.00	Х						0.	0.	0.
(8) KEVIN SHURN	1.00							V.	U.	· ·
MEMBER	1.00	Х						0.	0.	0.
(9) JEFF ULIGIAN	1.00	-27					-			
MEMBER	1.00	х						0.	0.	0.
(10) AL CORNISH	1.00				$\neg \dagger$	$\neg$				
MEMBER		x						0.	0.	0.
(11) LYNN HUETHER	1.00									
MEMBER .		x						0.	0.	0.
(12) KEN SELVAGGI	1.00									
MEMBER		X						0.	0.	0.
(13) BILL SIMPSON	1.00									
MEMBER		X						0.	0.	0.
(14) MALCOLM B. CHANCEY JR.	1.00			1		- 1				
MEMBER		X						0.	0.	0.
(15) DR. DONNA M. HARGENS	1.00									
MEMBER		X						0.	0.	0.
(16) ROBERT J. ARNOLD	1.00							_		_
MEMBER		X	_	_	_		_	0.	0.	0.
(17) VIK CHADHA	1.00	_						_	_	^
MEMBER		X						0.	0.	0.

•												
	ON COUNTY		PUE	3L]	EC	EI	)U(	CATION				_ 0
- 2 44 8	ION, INC				-1 1 1:			\				Page 8
Part VII   Section A. Officers, Directors, Tru (A)	ustees, Key Em (B)	pioy 	ees		<u>а ні</u> С)	gne	st C	(D)	s (continued) (E)		(F	1
Name and title	Average			Pos	sitior			Reportable	Reportable		Estim	
Name and the	hours per	box	, unle	ss pe	erson	than is bot	h an	compensation	compensation	,	amou	
	week	-	icer ar	nd a c	directo	or/trus	tee)	from	from related		oth	
•	(list any hours for	individual trustee or director	ł					the organization	organizations (W-2/1099-MIS	- 1	compen from	
	related	e or d	ste			sated		(W-2/1099-MISC)	(44-27 1099-14115)	"	organiz	
	organizations	truste	al trus		yee	omper		(** == ** ** ** ** ** ** ** ** ** ** ** *			and re	
	below	vidual	institutional trustee	Je .	Key employee	Highest compensated employee	igi				organiza	ations
	line)	j <u>e</u>	In the	Officer	<u>ş</u>	E E	휸			_	.,	
(18) DR. ALEX GERASSIMIDES, MD	1.00	3,7										^
MEMBER	1 00	X		_	-	-	ļ	0.		0.		0.
(19) JOE HARDESTY MEMBER	1.00	X						0.		0.		0.
(20) TOM HUDSON	1.00	^			-		_	0.	·	<del>"  </del>		
MEMBER	1.00	x						0.		0.		0.
(21) KEVIN JOYNT	1.00							0.				
MEMBER		Х						0.		0.		0.
(22) TANJA OQUENDO	1.00											
MEMBER		X						0.	(	0.		0.
(23) MITCH RUE	1.00								7.			
MEMBER		X						0.	l	0.		0.
(24) GWEN TILTON	1.00											_
MEMBER	1	X						0.	(	0.		0.
(25) CAROL TIMMONS	1.00	٦,										0
MEMBER (26) SAM CORBETT	40.00	X						0.		0.		0.
EXECUTIVE DIRECTOR	40.00			x				34,219.	(	0.		0.
		LI				I	<u> </u>	34,219.		<del>).</del>  -		0.
1b Sub-total  c Total from continuation sheets to Part V								0.		5.		0.
d Total (add lines 1b and 1c)								34,219.		0.		0.
2 Total number of individuals (including but							o re	<u> </u>	000 of reportable			· · · · · · · · · · · · · · · · · ·
compensation from the organization									-			0
											Yes	No
3 Did the organization list any former office	r, director, or tru	stee	, key	y em	ploy	/ee,	or h	nighest compensated em	ployee on			
line 1a? If "Yes," complete Schedule J for	such individual									.	3	<u> </u>
4 For any individual listed on line 1a, is the s												,,
and related organizations greater than \$15										··	4	X
5 Did any person listed on line 1a receive or											_	
rendered to the organization? If "Yes," cor Section B. Independent Contractors	nplete Schedule	J fo	r su	ch p	ersc	<u>n</u>					5	X
Complete this table for your five highest or	mnensated ind	ener	nden	t co	ntra	ctor	s the	at received more than \$1	00.000 of compe	nsation	from	
the organization. Report compensation for												
(A)				<i>J</i>			Ť	(B)			(C)	
Name and husiness	addroce	NTO	ATT.					Description of se	nicos	Con	noneati	on

(A) Name and business address	NONE	(B)  Description of services	(C) Compensation
-			
<u></u>			
2 Total number of independent contractors (including but	not limited to those listed	d above) who received more than	

\$100,000 of compensation from the organization

Form 990 (2014)
Part VIII 8 Statement of Revenue

		Check if Schedule O con			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
ats t	g 1 a	a Federated campaigns	1a					
irar	į t	Membership dues	1b					
S, G		Fundraising events	1c					
Sift.	3 0	d Related organizations	1d					
imi	6	Government grants (contribut	tions) 1e					
Contributions, Gifts, Grants and Other Similar Amounts	] f	All other contributions, gifts, grar						
ign H	1	similar amounts not included abo	ove 1f 1 ,	,073,124.				
ontr	g g	Noncash contributions included in lines			4 000 404			
<u>ॲ ਨ</u>	h	Total. Add lines 1a-1f		1	1,073,124.			
				Business Code	járaki.			
ice S	2 a	<u> </u>						
er v	b							
Program Service Revenue	C							
	d							
roç	е	A.I					·········	
<u>п</u>	ι.	All other program service reve						
		Total. Add lines 2a-2f		1				
	3	Investment income (including			142.	142.		,
	,	other similar amounts)			142.	147.		
	4 5	Royalties	•					
	٦	noyattes	(i) Real	(ii) Personal	50 4, 5 4 3	NAME OF STREET	AND SERVICE	1. 4. 7.7.4
	6 a	Gross rents	ii) neai	(ii) Fersonar				
	b			<del>                                     </del>				
	c	5						
	d		***************************************	<b> </b>				
	7 a	Gross amount from sales of	(i) Securities	(ii) Other	1 (2.5.4.4)	PANAGA.		
		assets other than inventory						
ĺ	b							
		and sales expenses						
	С	0 ' " \				3 (3)		
	d							
	8 a	Gross income from fundraising	g events (not		ų.			
une		including \$	of		V 200			
eve		contributions reported on line	1c). See				\ \	
Other Reven		Part IV, line 18	а				(5.3)	
Ę	b	Less: direct expenses	b					
	С	Net income or (loss) from fund	raising events	<u> </u>				
	9 a	Gross income from gaming ac				A VEN		
		Part IV, line 19						
	b	,				·		
		Net income or (loss) from gami						
	10 a	Gross sales of inventory, less r						
		and allowances		1				
		Less: cost of goods sold						
ŀ	С	Net income or (loss) from sales						
}	44	Miscellaneous Revenue		Business Code				
	11 a							,
	b		i					
	c	All other revenue						
	d	All other revenue  Total. Add lines 11a-11d						
	12	Total revenue. See instructions.			,073,266.	142.	0.	0.

Form 990 (2014) FOUNDATION, INC.
Part IX | Statement of Functional Expenses

	ction 501(c)(3) and 501(c)(4) organizations must com Check if Schedule O contains a respon	nse or note to any line ir	this Part IX	•••••	<u> </u>
	not include amounts reported on lines 6b, , 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	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				- CAN ASA NA ARBARANA
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16			SECURE SECURE	
4	Benefits paid to or for members			Alexander of the first of the second of the	111 (111) (111)
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		·		
С	· I	5,775.		5,775.	· ···
d	Lobbying				
e					
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch 0.)				
12	Advertising and promotion				1
13	Office expenses	1,337.		1,337.	
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				·····
23	Insurance	1,746.		1,746.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	MISCELLANEOUS	2,467.		2,467.	
b					
c					
d					
	All other expenses				
	Total functional expenses. Add lines 1 through 24e	1,339,808.	1,291,623.	48,185.	0.
	Joint costs. Complete this line only if the organization	,			
	reported in column (B) joint costs from a combined	•			
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

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

Form 990 (2014)
Part X | Balance Sheet

Par	t X	Balance Sheet			F-1
		Check if Schedule O contains a response or note to any line in this Part X		······	
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	18,777.	1	12,800.
	2	Savings and temporary cash investments	1,606,737.	2	1,346,172.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees. Complete		14.73	
		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under		74	
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary	1 1 1 N W W		The search resolves to the con-
"		employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		7	
As	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	_	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a			
	b	Less: accumulated depreciation 10b		10c	
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	1,625,514.	16	1,358,972.
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
s	22	Loans and other payables to current and former officers, directors, trustees,			
itie		key employees, highest compensated employees, and disqualified persons.	•		
Liabilities		Complete Part II of Schedule L		22	
Ξ.	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X of			
		Schedule D	0.	25	0.
	26	Total liabilities. Add lines 17 through 25	· ·	26	U•
		Organizations that follow SFAS 117 (ASC 958), check here 🕨 🐰 and			
S		complete lines 27 through 29, and lines 33 and 34.	. 101 044		82,633.
nce	27	Unrestricted net assets	121,044. 1,504,470.	27	1,276,339.
ala	28	Temporarily restricted net assets	1,304,470.	28	1,270,337.
Б	29	Permanently restricted net assets		29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here			
or		and complete lines 30 through 34.		20	
ets	30	Capital stock or trust principal, or current funds		30	
188	31	Paid in or capital surplus, or land, building, or equipment fund	· · · · · · · · · · · · · · · · · · ·	31	
et /	32	Retained earnings, endowment, accumulated income, or other funds	1,625,514.	32	1,358,972.
Z	33	Total net assets or fund balances	1,625,514.	33	1,358,972.
	34	Total liabilities and net assets/fund balances	T,040,014.	1 34	Form 990 (2014)

FOUNDATION, INC. Form 990 (2014) Page 12 Part XI | Reconciliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI Total revenue (must equal Part VIII, column (A), line 12) 1,073,266. 1 1,339,808. Total expenses (must equal Part IX, column (A), line 25) 2 2 <266,542.> Revenue less expenses. Subtract line 2 from line 1 3 3 1,625,514. Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4 4 Net unrealized gains (losses) on investments 5 5 Donated services and use of facilities 6 ..... 6 7 Investment expenses 7 Prior period adjustments 8 Other changes in net assets or fund balances (explain in Schedule O) 0. 9 9 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33. 1,358,972. column (B)) Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII Yes No Accounting method used to prepare the Form 990: X Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. 2a Were the organization's financial statements compiled or reviewed by an independent accountant? X 2a 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: Consolidated basis Both consolidated and separate basis \_\_\_ Separate basis b Were the organization's financial statements audited by an independent accountant? X 2b 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 Both consolidated and separate basis Consolidated basis c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, X review, or compilation of its financial statements and selection of an independent accountant? 2c If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? X За b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Form 990 (2014)

#### **SCHEDULE A**

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

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

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

▶ Attach to Form 990 or Form 990-EZ.

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

Open to Public

OMB No. 1545-0047

Inspection

Name of the organization

JEFFERSON COUNTY PUBLIC EDUCATION

Employer identification number

Da	rt I	FOUN Reason for Public	NDATION, IN		amplete t	hio nart ) C	aa inatruatiana		-	
				·			ee instructions			_
	organ	ization is not a private found					41/41/P1			
1	님	A church, convention of ch	•		a in secti	on 170(b)(	1)(A)(I).			
2	$\vdash$	A school described in sec								
3		A hospital or a cooperative					•			
4		A medical research organiz	zation operated in co	njunction with a hospita	il describe	d in section	on 170(b)(1)(A)	(iii). Ente	r the hospital's name,	
		city, and state:								_
5	Ш	An organization operated f	or the benefit of a co	llege or university owne	d or opera	ted by a go	overnmental ur	nit describ	ped in	
		section 170(b)(1)(A)(iv). (	Complete Part II.)							
6	Щ	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).								
7	X	An organization that norma	ally receives a substa	intial part of its support t	from a gov	ernmental	unit or from th	e general	public described in	
		section 170(b)(1)(A)(vi). (C	Complete Part II.)							
8		A community trust describe	ed in section 170(b)	(1)(A)(vi). (Complete Par	rt II.)					
9		An organization that norma	ally receives: (1) more	than 33 1/3% of its sup	port from	contributio	ns, membersh	ip fees, a	nd gross receipts from	
		activities related to its exer	npt functions - subje	ct to certain exceptions,	and (2) no	more than	n 33 1/3% of its	s support	from gross investment	
		income and unrelated busi	ness taxable income	(less section 511 tax) from	om busine	sses acqui	red by the orga	anization	after June 30, 1975.	
		See section 509(a)(2). (Co	mplete Part III.)							
10		An organization organized	and operated exclus	ively to test for public sa	ıfety. See	section 50	09(a)(4).			
11		An organization organized	and operated exclusi	ively for the benefit of, to	perform t	the function	ns of, or to car	ry out the	purposes of one or	
		more publicly supported or	ganizations describe	d in section 509(a)(1)	or <b>section</b>	509(a)(2).	See section 5	09(a)(3).	Check the box in	
	lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g.									
а		Type I. A supporting orga	anization operated, s	upervised, or controlled	by its sup	ported org	anization(s), ty	pically by	giving	
		the supported organization	on(s) the power to re	gularly appoint or elect a	a majority o	of the direc	tors or trustee	s of the s	upporting	
		organization. You must o	complete Part IV, Se	ections A and B.						
b		Type II. A supporting org	anization supervised	or controlled in connec	tion with it	s supporte	ed organization	(s), by ha	ving	
		control or management of	of the supporting orga	anization vested in the s	ame perso	ns that co	ntrol or manag	e the sup	ported	
		organization(s). You mus	t complete Part IV,	Sections A and C.						
С		Type III functionally inte	grated. A supportin	g organization operated	in connec	tion with, a	and functionally	y integrate	ed with,	
		its supported organizatio	n(s) (see instructions	). You must complete	Part IV, Se	ections A,	D, and E.			
d		Type III non-functionally	integrated. A supp	orting organization oper	rated in co	nnection w	ith its support	ed organi	zation(s)	
		that is not functionally int	egrated. The organiz	ation generally must sat	isfy a distr	ibution req	uirement and	an attenti	veness	
		requirement (see instruct	ions). You must con	nplete Part IV, Sections	s A and D,	and Part	V.			
е		Check this box if the orga	anization received a v	written determination fro	m the IRS	that it is a	Type I, Type II	, Type III		
		functionally integrated, or	r Type III non-function	nally integrated supporti	ng organiz	ation.				_
f	Ente	the number of supported of	organizations							
g	Provi	de the following information	n about the supporte	d organization(s).						
	(i)		(ii) EIN	(iii) Type of organization (described on lines 1-9	(iv) Is the o	rganization in your				
		organization		above or IRC section		document?	support ( Instruction		other support (see Instructions)	
				(see instructions))	Yes	No	motractic		instructions)	_
										_
										_
										-
						, ,				

Schedule A (Form 990 or 990-EZ) 2014 FOUNDATION, INC.

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								
Cal	endar year (or fiscal year beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total		
1	Gifts, grants, contributions, and	-					37		
	membership fees received. (Do not								
	include any "unusual grants.")	1368251.	1572683.	586,986.	870,698.	1073124.	5471742		
2	Tax revenues levied for the organ-								
	ization's benefit and either paid to								
	or expended on its behalf				1		Ì		
3	The value of services or facilities								
	furnished by a governmental unit to								
	the organization without charge								
4	Total. Add lines 1 through 3	1368251.	1572683.	586,986.	870,698.	1073124.	5471742.		
5	The portion of total contributions	STATA		AND A VIAC	.40040400000000000000000000000000000000	24/40/244	34/1/42		
	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,								
	1 (0				1771		1 (07077		
6	***************************************						1687877.		
	Public support. Subtract line 5 from line 4.						3783865.		
		4 > 0040	# 1 0044 I						
	ndar year (or fiscal year beginning in)	(a) 2010 1368251.	(b) 2011 1572683.	(c) 2012	(d) 2013	(e) 2014	(f) Total		
	Amounts from line 4	1300231.	13/4003.	586,986.	870,698.	1073124.	5471742.		
	Gross income from interest,								
	dividends, payments received on								
	securities loans, rents, royalties	0 605	0 044	1 000					
	and income from similar sources	2,635.	2,244.	1,029.	163.	142.	6,213.		
	Net income from unrelated business			ĺ					
	activities, whether or not the								
	business is regularly carried on								
	Other income. Do not include gain								
	or loss from the sale of capital								
	assets (Explain in Part VI.)								
	Total support. Add lines 7 through 10						5477955.		
12	Gross receipts from related activities, e	tc. (see instruction	ns)			12			
13	First five years. If the Form 990 is for t	he organization's	first, second, third,	fourth, or fifth tax	year as a section	501(c)(3)			
	organization, check this box and stop I	here			·····				
Sec	tion C. Computation of Public	Support Perc	entage						
14	Public support percentage for 2014 (line	e 6, column (f) divi	ded by line 11, col	umn (f))		14	69.07 %		
	Public support percentage from 2013 S					15	64.75 %		
	33 1/3% support test - 2014. If the org					re, check this box			
	stop here. The organization qualifies as				***************************************		. [77]		
	33 1/3% support test - 2013. If the org								
	and stop here. The organization qualifie								
and stop here. The organization qualifies as a publicly supported organization									
and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization									
mosts the "facts and sireumstances" took. The surveix time well in the sireumstances in the sireumstance in the sireum sireumstances in the sireumstance in the sireum									
	b 10% -facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or								
more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the									
	organization meets the "facts-and-circur						<b>L</b>		
	Private foundation. If the organization								
		U	J. m. 10, 10a,	, 1 r u, Ul 17 D, l	CINCON HINS DON ALLO	SOC MONUCIONS			

## Schedule A (Form 990 or 990-EZ) 2014 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.)

Se	ction A. Public Support					· · · · · · · · · · · · · · · · · · ·			
Cal	endar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total		
1	Gifts, grants, contributions, and			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	(4) = 0.10	(0) 2011	(1) 1010,		
	membership fees received. (Do not		1						
	include any "unusual grants.")								
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose								
3	Gross receipts from activities that								
	are not an unrelated trade or business under section 513								
4	Tax revenues levied for the organ-			<u> </u>					
	ization's benefit and either paid to								
	or expended on its behalf								
5	The value of services or facilities								
3	furnished by a governmental unit to						,		
	the organization without charge								
6	Total. Add lines 1 through 5								
7a	Amounts included on lines 1, 2, and								
	3 received from disqualified persons								
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year								
С	Add lines 7a and 7b								
	Public support (Subtract line 7c from line 6.)								
Sec	tion B. Total Support								
Caler	idar year (or fiscal year beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total		
9	Amounts from line 6				X37 = 3.5		(1) 10(4)		
	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								
	Add lines 10a and 10b						***************************************		
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on								
	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)								
	Total support. (Add lines 9, 10c, 11, and 12.)			<u> </u>	<u> </u>				
	First five years. If the Form 990 is for t						·		
	check this box and stop here		·····			·····	<b>&gt;</b>		
	ion C. Computation of Public								
	Public support percentage for 2014 (lin			lumn (f))		15	%		
	Public support percentage from 2013 S					16	%		
	ion D. Computation of Invest								
	nvestment income percentage for 201			13, column (f))		17	%		
	nvestment income percentage from 20		• • • • • • • • • • • • • • • • • • • •	•••••		18	%		
	33 1/3% support tests - 2014. If the o						is not		
r	nore than 33 1/3%, check this box and	stop here. The	organization qualif	ies as a publicly su	ipported organizat	ion	▶□		
	b 33 1/3% support tests - 2013. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and								
	ne 18 is not more than 33 1/3%, check								
20 F	Private foundation. If the organization	did not check a b	ox on line 14, 19a,	or 19b, check this	s box and see instr	uctions			

Schedule A (Form 990 or 990-EZ) 2014 FOUNDATION, INC.

#### 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

- 1 Are all of the organization's supported organizations listed by name in the organization's governing 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.
- 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).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- 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.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)
  (B) purposes? If "Yes." explain in Part VI what controls the organization put in place to ensure such use.
- 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.
- 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.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in 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.
- 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).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 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
- 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).
- 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).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- 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 organizations)? If "Yes," answer (b) below.
  - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
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9a		
9b		
9c		
30		
10a		
10b		

Schedule A (Form 990 or 990-EZ) 2014 FOUNDATION, INC. Page 5 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 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 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 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 2 the organization maintained a close and continuous working relationship with the supported organization(s). 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 3 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). C 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 2b activities but for the organization's involvement. 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 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. Page 6 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 2 Recoveries of prior-year distributions 2 Other gross income (see instructions) 3 3 Add lines 1 through 3 4 4 Depreciation and depletion 5 5 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) 6 Other expenses (see instructions) 7 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) 8 8 (B) Current Year Section B - Minimum Asset Amount (A) Prior Year (optional) Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): a Average monthly value of securities 1a b Average monthly cash balances 1b c Fair market value of other non-exempt-use assets 1c d Total (add lines 1a, 1b, and 1c) 1d e Discount claimed for blockage or other factors (explain in detail in Part VI): Acquisition indebtedness applicable to non-exempt-use assets 2 Subtract line 2 from line 1d 3 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions). 4 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 5 6 Multiply line 5 by .035 6 Recoveries of prior-year distributions 7 Minimum Asset Amount (add line 7 to line 6) 8 Section C - Distributable Amount Current Year Adjusted net income for prior year (from Section A, line 8, Column A) 1

2

3

4

5

6

\_ 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

Enter 85% of line 1

Enter greater of line 2 or line 3

instructions).

Income tax imposed in prior year

Minimum asset amount for prior year (from Section B, line 8, Column A)

Distributable Amount. Subtract line 5 from line 4, unless subject to

emergency temporary reduction (see instructions)

2

3

4

7

Schedule A (Form 990 or 990-EZ) 2014 FOUNDATION, INC. Page 7 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) **Current Year** Section D - Distributions Amounts paid to supported organizations to accomplish exempt purposes 1 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity Administrative expenses paid to accomplish exempt purposes of supported organizations 3 Amounts paid to acquire exempt-use assets 4 Qualified set-aside amounts (prior IRS approval required) Other distributions (describe in Part VI). See instructions. 6 Total annual distributions. Add lines 1 through 6. Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. Distributable amount for 2014 from Section C, line 6 Line 8 amount divided by Line 9 amount (iii) (i) (ii) Underdistributions Distributable **Excess Distributions** Section E - Distribution Allocations (see instructions) Pre-2014 Amount for 2014 Distributable amount for 2014 from Section C, line 6 Underdistributions, if any, for years prior to 2014 (reasonable cause required-see instructions) Excess distributions carryover, if any, to 2014: b С d e From 2013 f Total of lines 3a through e g Applied to underdistributions of prior years h Applied to 2014 distributable amount Carryover from 2009 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from 3f. Distributions for 2014 from Section D, line 7: a Applied to underdistributions of prior years b Applied to 2014 distributable amount c Remainder. Subtract lines 4a and 4b from 4. 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). Excess distributions carryover to 2015. Add lines 3j and 4c. 8 Breakdown of line 7: а b

Schedule A (Form 990 or 990-EZ) 2014

d Excess from 2013 e Excess from 2014

# JEFFERSON COUNTY PUBLIC EDUCATION Schedule A (Form 990 or 990-EZ) 2014 FOUNDATION, INC. Page 8 Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

#### 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

Name of the organization

#### 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 <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>.

OMB No. 1545-0047

Employer identification number

2014

JEFFERSON COUNTY PUBLIC EDUCATION FOUNDATION, INC. Organization type (check one): Filers of: Section: Form 990 or 990-EZ X 501(c)( 3 ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule 🔟 For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. J For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year \_\_\_\_\_\_ \$ \_\_\_\_\_\_

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

Name of organization
JEFFERSON COUNTY PUBLIC EDUCATION
FOUNDATION, INC.

Employer identification number



Part I (	Contributors	(see instructions).	Use duplicate copies	of Part I if additional	space is needed.
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(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>1</u>	CE&S FOUNDATION  101 S FIFTH STREET STE 1650  LOUISVILLE, KY 40202	\$ 277,079.	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
2	LOUISVILLE COMMUNITY FOUNDATION  325 W MAIN STREET STE 1110  LOUISVILLE, KY 40202	\$\$	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
4	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	\$ 25,000.	Person X Payroll

Name of organization
JEFFERSON COUNTY PUBLIC EDUCATION
FOUNDATION, INC.

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ш	ninaei	iueniiii	Gallon	Hamber

Part I	Contributors	(see instructions). Use duplicate copies of Part I if additional space is needed.
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(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
	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
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9	TIMIR & ELAINE BANERJEE  PO BOX 22067  LOUISVILLE, KY 40252	\$ 25,000.	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
		\$	Person Payroll Moncash (Complete Part II 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.)
(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

Employer identification number

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

	SON COUNTY PUBLIC EDUCA	ATION	Employer Identification number			
OUNDA Part III	TION, INC.	ihutians to organizations described in se	ction 501(c)(7), (8), or (10) that total more than \$1,000 for			
art III	the year from any one contributor. Complete of	columns (a) through (e) and the following	line entry. For organizations			
	completing Part III, enter the total of exclusively religious Use duplicate copies of Part III if additiona	, charitable, etc., contributions of \$1,000 or less fall space is needed.	or the year. (Enter this info. once.)			
a) No. from						
Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
.			-			
-						
-		(e) Transfer of gift				
		(e) Transier or girt				
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee			
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-						
a) No. from						
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
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-						
-						
<u> </u>		(a) Transfer of gift				
		(e) Transfer of gift				
	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee					
_						
-						
-						
a) No. from			T .			
rom Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
_		,				
-						
		(e) Transfer of gift				
		(e, manere, et gint				
	Transferee's name, address, and	i ZIP + 4	Relationship of transferor to transferee			
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a) No.						
) No. rom Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
1						
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_						
		(e) Transfer of gift				
		(e) Transfer of gift				
	Transferee's name, address, and		Relationship of transferor to transferee			
	Transferee's name, address, and		Relationship of transferor to transferee			
	Transferee's name, address, and		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.

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

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

JEFFERSON COUNTY PUBLIC EDUCATION FOUNDATION, INC.

**Employ** 

nber

Pa	rt I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds	or Accounts. Complete in the				
	organization answered "Yes" to Form 990, Part IV, line	6.					
		(a) Donor advised funds	(b) Funds and other accounts				
1	Total number at end of year						
2	Aggregate value of contributions to (during year)						
3	Aggregate value of grants from (during year)						
4	Aggregate value at end of year						
5	Did the organization inform all donors and donor advisors in v	vriting that the assets held in donor advis	sed funds				
	are the organization's property, subject to the organization's						
6	Did the organization inform all grantees, donors, and donor ad						
	for charitable purposes and not for the benefit of the donor or						
	impermissible private benefit?						
Pa							
1	Purpose(s) of conservation easements held by the organization	n (check all that apply).					
	Preservation of land for public use (e.g., recreation or ed		torically important land area				
	Protection of natural habitat Preservation of a certified 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.						
	,		Held at the End of the Tax Year				
а	Total number of conservation easements						
b							
C	Number of conservation easements on a certified historic stru						
d	Number of conservation easements included in (c) acquired a						
	listed in the National Register		2d				
3	Number of conservation easements modified, transferred, rele		organization during the tax				
	year >	- · · · · · ·					
4	Number of states where property subject to conservation ease	ement is located >					
5	Does the organization have a written policy regarding the peri						
	violations, and enforcement of the conservation easements it		Yes No				
6	Staff and volunteer hours devoted to monitoring, inspecting, a	und enforcing conservation easements du	uring the year 🕨				
7	Amount of expenses incurred in monitoring, inspecting, and e						
8	Does each conservation easement reported on line 2(d) above						
9	In Part XIII, describe how the organization reports conservatio						
	include, if applicable, the text of the footnote to the organizati						
	conservation easements.						
Par	t III Organizations Maintaining Collections of	Art, Historical Treasures, or Ot	her Similar Assets.				
	Complete if the organization answered "Yes" to Form 9		·				
1a	If the organization elected, as permitted under SFAS 116 (ASC	0 958), not to report in its revenue statem	nent and balance sheet works of art,				
	historical treasures, or other similar assets held for public exhi						
	the text of the footnote to its financial statements that describ		•				
b	If the organization elected, as permitted under SFAS 116 (ASC		and balance sheet works of art, historical				
-	treasures, or other similar assets held for public exhibition, ed						
	relating to these items:	,					
	(i) Revenue included in Form 990, Part VIII, line 1		<b>&gt;</b> \$				
2	If the organization received or held works of art, historical trea		I gain, provide				
_	the following amounts required to be reported under SFAS 11		•				
а	Revenue included in Form 990, Part VIII, line 1		<b>&gt;</b> \$				
h			• •				
-	· · · · · · · · · · · · · · · · · ·						

	edule D (Form 990) 2014 FOUNDAT	SON COUNTY									Page
L	1 0. gainzadono mantaning	Collections of A	rt, Hi	storical Tr	easures,	or Othe	r Simila	ar Asse	ts <sub>(cont</sub>	tinuec	()
3	Using the organization's acquisition, access	sion, and other recor	ds, che	eck any of the	following t	hat are a si	gnificant	use of its	collectio	n iten	าร
	(check all that apply):										
а			d _	Loan or ex	change pro	grams					
b			е 🗌	Other							
С	Preservation for future generations										
4	the organization's exempt purpose in Part Air.										
5	During the year, did the organization solicit of	or receive donations	of art,	historical trea	asures, or o	her similar	assets				
	to be sold to raise funds rather than to be maintained as part of the organization's collection?										
Pa	rt IV Escrow and Custodial Arran reported an amount on Form 990, Pa	gements. Comp	lete if t	he organization	on answere	d "Yes" to	Form 990	), Part IV	line 9, or		
1a	Is the organization an agent, trustee, custod		liary fo	r contribution	s or other s	esets not i	ncluded				
	on Form 990, Part X?							Г	Yes	Г	
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing	table:		• • • • • • • • • • • • • • • • • • • •	••••••	L	res	L	No
_	in the supraint and arrangement in the Alle	and complete the lo	iiOwii iç	table.			l	1	A		
C	Reginning balance								Amour	11	····
d	Additions during the year		• • • • • • • • • • • • • • • • • • • •	••••••	• • • • • • • • • • • • • • • • • • • •		1c	<u> </u>			
e	Additions during the year	••••••	••••••	•••••	•••••		1d				
	Distributions during the year	•••••••••••	••••••	•••••	• • • • • • • • • • • • • • • • • • • •	••••••	1e				
f O-	Ending balance			•••••			1f				
	Did the organization include an amount on Fe						y?	L	Yes		_  No
Par	If "Yes," explain the arrangement in Part XIII.	Check here if the ex	planat	ion has been	provided in	Part XIII		<u></u>			<u> </u>
ı aı	t V Endowment Funds. Complete i						).		<del></del>		
		(a) Current year	(b)	Prior year	(c) Two ye	ars back (	<b>d)</b> Three y	ears back	(e) Fou	r years	back
1a	Beginning of year balance										
b	Contributions										
С	Net investment earnings, gains, and losses										
d	Grants or scholarships										
е	Other expenditures for facilities										
	and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the curre	ent year end balance	(line 1	g, column (a)	) held as:						
а	Board designated or quasi-endowment		%								
	Permanent endowment	%									
С	Temporarily restricted endowment	<del></del>									
	The percentages in lines 2a, 2b, and 2c shoul	d equal 100%.									
	Are there endowment funds not in the posses		tion tha	at are held an	d administe	red for the	organiza	tion			
	by:				- uaiiiiiioto		organiza		Γ	Yes	No
	(i) unrelated organizations					1				163	NO
	(ii) related organizations	***************************************			••••••				3a(i)		
	• • • • • • • • • • • • • • • • • • • •	listed as required on	Soboo						3a(ii)		
	b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIII the intended uses of the organization's endowment funds.										
Parl	VI Land, Buildings, and Equipme	organization's endov ent	ment i	iuilas.							
			David B	t Booden O.	F 000	<b>5</b> ( ) ( )	4.0				
	Complete if the organization answered			1		1		. 1			
	Description of property	(a) Cost or ot		(b) Cost			umulated	d	(d) Book	value	<del>)</del>
		basis (investm	ent)	basis (d	otner)	depr	eciation		-		
	Land										
b	Buildings			l							

e Other ..

c Leasehold improvements d Equipment

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

### JEFFERSON COUNTY PUBLIC EDUCATION

edule D	(Form 990) 2014	FOUNDATION,	INC.	Page	э (

Complete if the organization answered "Yes"	· · · · · · · · · · · · · · · · · · ·		
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of	valuation: Cost or end-of-year market value
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ► Part VIII Investments - Program Related.	,		
Complete if the organization answered "Yes" t  (a) Description of investment			Part X, line 13. valuation: Cost or end-of-year market value
	(b) Book value	(c) Method of	valuation. Cost of enu-of-year market value
(1)			
(2)			
(3)			·
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶ Part IX Other Assets.			
Complete if the organization answered "Yes" to	o Form OOA Port IV	line 11d See Form 990 I	Part Y line 15
	Description	ine Tra. See Form 550, 1	(b) Book value
(1)			
(2)			
(3)			
(4)	<del></del>		
(5)			
(6) (7)		<del></del>	
(8)			
(9)			
otal. (Column (b) must equal Form 990, Part X, col. (B) line  Part X Other Liabilities.	15.)		<b>&gt;</b>
Complete if the organization answered "Yes" to	o Form 000 Dart IV	ling 11g or 11f Con Form	2000 Part V line 25
(a) Description of liability	5 Form 990, Part IV,	(b) Book value	1990, Part A, Ilile 25.
		(b) Book value	
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
otal. (Column (b) must equal Form 990. Part X. col. (B) line	25.)		

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 FOUNDATION, INC.

Part XI Reconciliation of Revenue per Audited Financial Stater	ments With Revenue per R	eturn.				
Complete if the organization answered "Yes" to Form 990, Part IV, line 1:	2a.					
Total revenue, gains, and other support per audited financial statements		1	1,073,266.			
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		.33				
a Net unrealized gains (losses) on investments	2a					
b Donated services and use of facilities	2b					
c Recoveries of prior year grants						
d Other (Describe in Part XIII.)		_				
e Add lines 2a through 2d		2e	0.			
3 Subtract line 2e from line 1		3	1,073,266.			
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:						
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	_				
b Other (Describe in Part XIII.)	4b					
c Add lines 4a and 4b		4c	. 0.			
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	1,073,266.			
Part XII Reconciliation of Expenses per Audited Financial State	ments With Expenses per	Returr	<b>1.</b>			
Complete if the organization answered "Yes" to Form 990, Part IV, line 12	2a.					
1 Total expenses and losses per audited financial statements		1	1,339,808.			
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:						
a Donated services and use of facilities	2a	_				
b Prior year adjustments	2b	_				
c Other losses		_				
d Other (Describe in Part XIII.)	j t	_				
e Add lines 2a through 2d		2e	0.			
3 Subtract line 2e from line 1		3	1,339,808.			
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:						
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	_				
b Other (Describe in Part XIII.)	4b					
c Add lines 4a and 4b		4c	0.			
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I. line 18.)		5	1,339,808.			
Part XIII Supplemental Information.						
Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Pa	art IV, lines 1b and 2b; Part V, line	4; Part X	, line 2; Part XI,			
ines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any ac	dditional information.					
PART X, LINE 2:						
THE FOUNDATION HAS IMPLEMENTED THE ACCOUNTIN	NG GUIDANCE FOR U	ICERT	'AINTY IN			
INCOME TAXES. UNDER THAT GUIDANCE, TAX POS	ITIONS NEED TO BE	RECO	GNIZED IN			
THE FINANCIAL STATEMENTS WHEN IT IS MORE-LIF	KELY-THAN-NOT THE	POST	TION MITT			
BE SUSTAINED UPON EXAMINATION BY THE TAX AUT	THORITIES. AS OF	JUNE	30,			
2015, THE FOUNDATION HAS NO UNCERTAIN TAX POSITIONS THAT QUALIFY FOR						
TITHER RECOGNITION OR DISCLOSURE IN THE FINANCIAL STATEMENTS. THE						
OUNDATION FILES FEDERAL INCOME TAX RETURNS.	. RETURNS FILED I	OR T	HE TAX			
YEARS ENDED ON OR AFTER JUNE 30, 2012 ARE SU	JBJECT TO EXAMINAT	·ION.	THE			
OUNDATION IS NOT CURRENTLY BEING EXAMINED A	AND MANAGEMENT BEI	LEVE	S ITS			

TAX-EXEMPT STATUS WOULD BE UPHELD UNDER EXAMINATION.

Schedule D (Form 990) 2014	JEFFERSON FOUNDATION	COUNTY				Dogo
Schedule D (Form 990) 2014 Part XIII   Supplemental Infor	mation (continued)	/ 22101				Page 5
	(commuea)				·	
		***				
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	,					
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				<u>.</u>		
					•	
•						
						<del></del>
						<del></del>
					***************************************	
		*****				

#### 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.

Attach to Form 990.

7,323

0.BOOK

Department of the Treasury Internal Revenue Service

▶ 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.

Part II 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. (f) Method of 1 (a) Name and address of organization (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 61-6001316 1,049,184. 0. воок JCTC FOUNDATION 109 EAST BROADWAY 37,704. LOUISVILLE, KY 40202 23-7035648 0. BOOK MIDDLE COLLEGE HIGH SCHOOL NATIONAL CONSORTIUM - 27-28 THOMSON AVE - LONG ISLAND, NY 11101 04-3608107 22,331. 0. BOOK UNIVERSITY OF LOUISVILLE CONTROLLERS OFFICE- UNIVERSITY OF L LOUISVILLE, KY 40292 23-7078461 0. Воок 18,666. KENTUCKY YMCA YOUTH ASSOCIATION #91 C. MICHAEL DAVENPORT BLVD FRANKFORT, KY 40601 61-0444841 12,087 0. BOOK RALPH B KNOLLENBERG III FOUNDATION 601 BRECKENRIDGE LANE

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

27-1545165

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

LOUISVILLE, KY 40207

## JEFFERSON COUNTY PUBLIC EDUCATION

Schedule I (Form 990) (2014)

FOUNDATION, INC.

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.  Part III can be duplicated if additional space is needed.						
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)		
	·					
· · · · · · · · · · · · · · · · · · ·						
Part IV Supplemental Information. Provide the information requ	lired in Part I, line	le 2, Part III, column (	b), and any other add	ditional information.		
PART I, LINE 2:				***************************************		
THE BOARD APPROVES THE DISBURSEMENT	OF FUND	S TO VARIO	US PROGRAMS	S THE		
ORGANIZATION SUPPORTS.		WW.P i				
PART II, LINE 1, COLUMN (H):						
NAME OF ORGANIZATION OR GOVERNMENT: JEFFERSON COUNTY PUBLIC SCHOOLS						
(H) PURPOSE OF GRANT OR ASSISTANCE: TO FUND VARIOUS EDUCATIONAL PROGRAMS						
ND TO FUND TRANSPORTATION EXPENSES FOR STUDENTS TO ATTEND THE YMCA'S						
SWIM PROJECT						

432102 10-15-14

#### **SCHEDULE 0**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

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

Open to Public

OMB No. 1545-0047

Name of the organization

JEFFERSON COUNTY PUBLIC EDUCATION FOUNDATION, INC.

Inspection Employer identification number

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 :
<ul> <li>If you are filing for an Additional (Not Automatic) 3-Mo</li> </ul>	onth Extension,	complete only Part II and check t	his box		▶ X
Note. Only complete Part II if you have already been grant	ed an automatic	3-month extension on a previously	filed Forn	1 8868.	
• If you are filing for an Automatic 3-Month Extension, of	complete only P	art I (on page 1).		•	
Part II Additional (Not Automatic) 3-Mor	nth Extensio	n of Time. Only file the orig	inal (no	copies nee	ded).
		Enter filer	's identif	ying number,	see instructions
Type or Name of exempt organization or other filer, see			Emplo	yer identificati	on number (EIN) or
print JEFFERSON COUNTY PUBLIC	EDUCATION	1			
File by the due date for					
filing your port 3.53.60	box, see instruc	tions.	Social	security numb	er (SSN)
City, town or post office, state, and ZIP code. FLOUISVILLE, KY 40202	or a foreign add	ress, see instructions.			
20010121211/ 111 20202					
Enter the Return code for the return that this application is	for (file a congra	to application for each return)			0 1
and the retain body for the rotain that this application is	ioi (ilie a separai		• • • • • • • • • • • • • • • • • • • •	•••••	
Application	Return	Application			Return
Is For	Code	Is For			Code
Form 990 or Form 990-EZ	01			24.7	Code
Form 990-BL	02	Form 1041-A		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	08
Form 4720 (individual)	03	Form 4720 (other than individual)			09
Form 990-PF	04	Form 5227		<u>, , , , , , , , , , , , , , , , , , , </u>	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 gr	anted an autom	natic 3-month extension on a prev	iously file	ed Form 8868	
JOE SEILER,	TREASURE	:R			
<ul> <li>The books are in the care of ► 2500 EASTPOI</li> </ul>	NT PARKW	AY - LOUISVILLE, I	(Y 40	223	
Telephone No. ► 502-499-4794		Fax No. ▶			,
<ul> <li>If the organization does not have an office or place of but</li> </ul>	siness in the Uni	ted States, check this box			▶ 🔲
<ul> <li>If this is for a Group Return, enter the organization's four</li> </ul>	digit Group Exer	mption Number (GEN)	lf this is f	or the whole g	roup, check this
box 🕨 💹 . If it is for part of the group, check this box 🕨		ch a list with the names and EINs of	all memi	ers the exten	sion is for.
4 I request an additional 3-month extension of time until		<u>15, 2016</u> .			
5 For calendar year, or other tax year beginnin			g _ <b>JUI</b>	1 30, 20	) <u>15</u> .
6 If the tax year entered in line 5 is for less than 12 month	ths, check reaso	n: Initial return	Final	return	
Change in accounting period					
7 State in detail why you need the extension					
THE ORGANIZATION NEEDS ADDITED			ICIEN	IT INFOR	MOITAM
TO FILE A COMPLETE AND ACCU	RATE RETU	JRN.			
Do If this conflication is for Farmer 000 DL 000 DE 000 T	1700 0000			T	
8a If this application is for Forms 990-BL, 990-PF, 990-T, 4	1720, or 6069, ei	nter the tentative tax, less any			^
nonrefundable credits. See instructions.  b If this application is for Forms 990-PF 990-T 4720 or	0000 :		8a	\$	0.
1, 1, 20, 01					
tax payments made. Include any prior year overpayment previously with Form 8868.	nt allowed as a c	credit and any amount paid		1	0
c Balance due. Subtract line 8b from line 8a. Include you	ur normanat with	Alain Farma 16 na maina di Innocessia	8b	\$	0.
EFTPS (Electronic Federal Tax Payment System), See i		ans roun, ir required, by using			0
		be completed for Part II or	<u>  8c</u>	\$	0.
Inder penalties of perjury, I declare that I have examined this form, i				mu knowled	and haliaf
is true, correct, and complete, and that I am authorized to prepare t	his form.	nymy somedules and statements, and to	uic D62( 0)	my knowledge	and benen,
ionature Title	► SECRET	ARY/TREASHRER	Data		

# ···· W-9

(Rev. August 2013)
Department of the Treasury
Internal Revenue Service

# Request for Taxpayer Identification Number and Certification

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

	Name (as shown on your income tax return)	<u>.</u>						
	Jefferson County Public Education Foundation							
જાં	Durings and the state of the st	Business name/disregarded entity name, if different from above						
page (		• •	_					
Da	Check appropriate box for federal tax classification:	-						
e e	Individual/sole proprietor C Corporation S Corporation Partnership	Trust/estate	Exemptions (see instructions):					
on:	Lattiersiap L	j ilusvestate						
Print or type o Instructions	Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partner	rshin) ►	Exempt payee code (if any)					
nt o			Exemption from FATCA reporting code (if any)					
Pri	✓ Other (see instructions) ► non-profit	,	Code (ii arry)					
Print or type Specific Instructions on	Address (number, street, and apt. or suite no.)	Requester's name a	and address (optional)					
Spe	3332 Newburg Road		C. C. C. C. C. C. C. C. C. C. C. C. C. C					
See S	City, state, and zir code							
Ø	Louisville, KY 40232	•						
	List account number(s) here (optional)	*****						
		•						
Par								
Enter to avo	your TIN in the appropriate box. The TIN provided must match the name given on the "Name"	line Social sec	urity number					
reside	oid backup withholding. For individuals, this is your social security number (SSN). However, for ant alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other	1 1 1						
enune	is, it is your employer identification number (EIN). If you do not have a number, see How to get	a						
1114 OI	i page 3.	******	,					
numbe	If the account is in more than one name, see the chart on page 4 for guidelines on whose er to enter.	Employer i	dentification number					
Pari	II Certification	<del></del>						
The second named in column 2 is not a second	penalties of perjury, I certify that:							
<ol> <li>The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and</li> <li>I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue</li> </ol>								
00,	THE WIND WALL AND SUDJECT TO DECKNO MINICOLUTION AS A LOCUIT OF A FAILURA TO CONORT OF INTERCENT.	I have not been no	otified by the Internal Revenue					
	origer subject to backup withtolding, and	dividends, or (c)	me ino has notified the that I am					
3. I an	n a U.S. citizen or other U.S. person (defined below), and							
4. The	FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting	is correct.						
Centilic	Cation instructions. You must cross out item 2 above if you have been notified but he upon		subject to backup withholding					
	t paid, acquisition or abandonment of secured property, cancellation of debt, contributions to lly, payments other than interest and dividends, you are not required to sign the certification, but the property of the certification, but the contributions of the certification, but the certification of th	an individual retire	ment arrangement (IRA), and					
	tions on page 3.	i journiust provi	ue your correct fill, see the					
Sign	Signature of	- /						

#### General Instructions

U.S. person ►

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

Future developments. The IRS has created a page on IRS.gov for information about Form W-9, at www.irs.gov/w9. Information about any future developments affecting Form W-9 (such as legislation enacted after we release it) will be posted on that page.

#### Purpose of Form

Here

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

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

- 2. Certify that you are not subject to backup withholding, or
- 3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the

withholding tax on foreign partners' share of effectively connected income, and

 Certify that FATCA code(s) entered on this form (if any) indicaling that you are exempt from the FATCA reporting, is correct.

Note. If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

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

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- · An estate (other than a foreign estate), or

Date >

· A domestic trust (as defined in Regulations section 301,7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid section 1446 withholding on your share of partnership income.



3332 Newburg Road | Louisville, Kentucky 40218

(502) 485-3995 | fax: (502) 485-3634

VanHoose Education Center

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General Electric

**Kevin Shurn** Superior Maintenance Company

Bill Simpson Zeon Chemicals

Carol Timmons Business First

Jeff Uligian Genentech 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**

**Organization Number** 

0175787

Name

JEFFERSON COUNTY PUBLIC EDUCATION FOUNDATION, INC.

**Profit or Non-Profit** 

N - Non-profit

**Company Type** 

KCO - Kentucky Corporation

**Status** 

A - Active

**Standing** 

G - Good

State

KY

**File Date** 

3/14/1983

Organization Date

3/14/1983

**Last Annual Report** 

5/12/2016

**Principal Office** 

JEFFERSON COUNTY PUBLIC EDUCATION FOUNDATION

JAEGER EDUCATION CENTER- ATTN: SAM CORBETT EXEC

3332 NEWBURG RD

LOUISVILLE, KY 40218

**Registered Agent** 

WT&C CORPORATE SERVICES, INC.

500 W. JEFFERSON STREET

**SUITE 2800** 

LOUISVILLE, KY 40202

#### **Current Officers**

Chairman

James Allen

**Vice President** 

Franklin Jelsma

**Treasurer** 

Joseph Seiler

Director

Audwin Helton

**Director** 

**JEFF ULIGIAN** 

Director

Henry Heuser

**Executive** 

Samuel Corbett

#### Individuals / Entities listed at time of formation

**Director** 

MARY HELEN BYCK

Director

**JOAN RIEHM** 

Director

I W HUGHES

Director

ORSON OLIVER

Director

WOODFORD R PORTOR

Incorporator

MALCOLM B CHANCEY JR

#### Images available online

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

Principal Office Address

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<u>PDF</u>

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Annual report	7/19/2011 9:24:22 AM	7/19/2011 9:24:22 AM
Annual report	5/28/2010 9:56:56 AM	5/28/2010 9:56:56 AM
Annual report	1/13/2009 10:11:05 AM	1/13/2009 10:11:05 AM
Annual report	3/4/2008 8:28:00 AM	3/4/2008
Annual report	1/8/2007 4:01:51 PM	1/8/2007 4:01:51 PM
Annual report	3/7/2006 10:38:23 AM	3/7/2006
Annual report	3/11/2005	3/11/2005
Annual report	3/18/2004	3/18/2004

### **Microfilmed Images**

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

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