Print Form

0-346-19

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

Applicant/Program: Jefferson County Public Education Foundation/Moore HS Theatre Lighting Upgrade Applicant Requested Amount: \$9,912.00 Appropriation Request Amount: \$9,912.00				
Executive Summary of Request				
Replace the lighting system in the theater at Marion C. Moore School. The theater is used by students, district staff, other schools, community orginzations and holds public meetings.				
Is this program/project a fundraiser? Is this applicant a faith based organization? Does this application include funding for sub-grantee(s)? Yes No 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.				
23 District # Pamary Sponsor Signature 9,912 Amount Date				
Primary Sponsor Disclosure List below any personal or business relationship you, your family or your legislative assistant have with this organization, its volunteers, its employees or members of its board of directors. Councilman Peden and his wife are both teachers with JCPS. Their daughter also currently attends school in JCPS.				
Approved by:				
Appropriations Committee Chairman Date Final Appropriations Amount:				

Applicant/Program:			

Additional Disclosure and Signatures

Additional Council Office Disclosure

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

Council Member Signature and Amount

District 1	\$
District 2	\$
District 3	<u> </u>
District 4	<u> </u>
District 5	\$
District 6	\$
District 7	\$
District 8	\$
District 9	\$
District 10	\$
District 11	\$\$
District 12	\$
District 13	\$
District 14	\$
District 15	\$

Applicant/Program:				
Additional Disclosure and Signatures				
Additional Council Office Dis List below any personal or busines	**************************************	egislative assistant have with this		
District 16	\$\$	industrial comme		
District 17	\$			
District 18	<u>\$</u>			
District 19	\$			
District 20	\$			
District 21	\$			
District 22	\$	manan shifted districts		
District 23	\$\$	·		
District 24	\$	<u></u>		
District 25	\$			

District 26 _______ \$_

Legal Name of Applicant Organization Jefferson County Public Education Foundation

Program Name and Request Amount Marion C. Moore School Theater Lighting Upgrade/\$9,912

	Yes/No/NA
Is the NDF Transmittal Sheet Signed by all Council Member(s) Appropriating Funding?	Yeŧ▼
Is the funding proposed by Council Member(s) less than or equal to the request amount?	Yes▼
Is the proposed public purpose of the program viable and well-documented?	Yeŧ▼
Will all of the funding go to programs specific to Louisville/Jefferson County?	Yes▼
Has Council or Staff relationship to the Agency been adequately disclosed on the cover sheet?	Yes▼
Has prior Metro Funds committed/granted been disclosed?	Ye ₹
Is the application properly signed and dated by authorized signatory?	Yes▼
Is proof of Tax Exempt status of 501(c) 3, 4, 6, 19, 1120-H included?	Yes▼
If Metro funding is for a separate taxing district is the funding appropriated for a program outside the legal responsibility of that taxing district?	No 🔻
Is the entity in good standing with: • Kentucky Secretary of State? • Louisville Metro Revenue Commission? • Louisville Metro Government? • Internal Revenue Service? • Louisville Metro Human Relations Commission?	Ye∢▼
Is the current Fiscal Year Budget included?	Yes▼
Is the entity's board member list (with term length/term limits) included?	Yes▼
Is recommended funding less than 33% of total agency operating budget?	No 🖼
Does the application budget reflect only the revenue and expenses of the project/program?	Yeŧ▼
Is the cost estimate(s) from proposed vendor (if request is for capital expense) included?	Ye€▼
Is the most recent annual audit (if required by organization) included?	Ye₅▼
Is a copy of Signed Lease (if rent costs are requested) included?	N/A
Is the Supplemental Questionnaire for churches/religious organizations (if requesting organization is faith-based) included?	N/A
Are the Articles of Incorporation of the Agency included?	Yes▼
Is the IRS Form W-9 included?	Yeŧ▼
Is the IRS Form 990 included?	Yes▼
Are the evaluation forms (if program participants are given evaluation forms) included?	N/A ▽
Affirmative Action/Equal Employment Opportunity plan and/or policy statement included (if required to do so)?	N/A=
Has the Agency agreed to participate in the BBB Charity review program? If so, has the applicant met the BBB Charity Review Standards?	N/A=
Prepared by: John Torsky Date: 10-2-19	

SECTION 1 – APPLICANT INFORMATION						
Legal Name of Applicant Organization: Jefferson County Public Education Foundation						
(as listed on: http://www.sos.ky.gov/business/records						
Main Office Street & Mailing Address: VanHoose Education Center, 3332 Newburg Road, Louisville, KY 40218						
Website: https://www	Website: https://www.jefferson.kyschools.us/about/support/foundation					
Applicant Contact:	Abby Piper Title: Executive Administrator					
Phone:	502.485.6501	Email:	abby.piper@jefferson.kyschools.us			
Financial Contact:	Linda Miller	Title:	Supervisor, Grants & Awards			
Phone:	502.485.6313	Email:	linda.miller2@jefferson.kyschool			
Organization's Repres	sentative who attended NDF Train	ing: Abby Piper				
GEOG	GRAPHICAL AREA(S) WHERE PROG	RAM ACTIVITIES AR	E (WILL BE) PROVIDED			
Program Facility Loca	tion(s): Marion C. Moore Schoo	l, 6415 Outer Loop,	Louisville, KY 40228			
Council District(s):	23	Zip Code(s):	40228			
	SECTION 2 – PROGRAM REQU	EST & FINANCIAL IN	FORMATION			
PROGRAM/PROJECT	NAME: Theater Lighting Upgrade					
Total Request: (\$)	9,912 Total Metro A	ward (this program) in previous year: (\$) 0			
Purpose of Request (check all that apply):					
Operating F	unds (generally cannot exceed 33%	of agency's total o	perating budget)			
Programmir	g/services/events for direct benefi	t to community or o	qualified individuals			
Capital Proje	ect of the organization (equipment	, furnishing, building	g, etc)			
The Following are Rec	quired Attachments:					
■ IRS Exempt Status De	termination Letter	Signed lease if re	nt costs are being requested			
■ Current year projecte	d budget	■ IRS Form W9				
■ Current financial state	ement	Evaluation forms	if used in the proposed program			
■ Most recent IRS Form	990 or 1120-H	Annual audit (if r	equired by organization)			
Articles of Incorporation	on (current & signed)	Faith Based Orga	nization Certification Form, if applicable			
■ Cost estimates from proposed vendor if request is for capital expense						
For the current fiscal year ending June 30, list all funds appropriated and/or received from Louisville Metro Government for this or any other program or expense, including funds received through Metro Federal Grants, from any department or Metro Council Appropriation (Neighborhood Development Funds). Attach additional sheet if necessary.						
Source:	Source: NDF (Conway Middle School) Amount: (\$) 5,000					
Source: L	ouisville Metro Government*	Amount: (\$)	10,000			
Source: (*suffrage curriculum and website)	Amount: (\$)				
Has the applicant contacted the BBB Charity Review for participation?						
Has the applicant met the BBB Charity Review Standards? Yes No						

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SECTION 3 – AGENCY DETAILS

Describe Agency's Vision, Mission and Services:

The Jefferson County Public Education Foundation (JCPEF) works to advance the education of the county's citizens by providing financial support for Jefferson County Public Schools (JCPS) and its initiatives. JCPEF focuses on a range of initiatives that support the JCPS vision of all students graduating prepared, empowered, and inspired to reach their full potential and contribute as thoughtful, responsible citizens of our diverse shared world. The foundation was incorporated in 1983 as a nonprofit organization under IRS 501(c)(3). JCPEF is making this request on behalf of Marion C. Moore school, which is one of JCPS' 169 schools.

Marion C. Moore Vision Statement: Marion C. Moore will be the school where students want to be, adults want to work, and the community is proud to have their children attend. Moore is the largest school in the city of Louisville and proudly serves grades six through 12. A child can be with the school for seven years. This is a unique benefit of Moore's combined school model. Moore is leading the way in the Academies of Louisville initiative as one of the original 11 JCPS high schools that opened as a wall-to-wall Academy school for the 2018-19 school year. Academies include: Freshman Academy, Health Sciences Academy, Science, Technology, Engineering, and Math (STEM) Academy, and Community Academy as well as Air Force Junior Reserve Officers Training Corps (JROTC).

Moore enrolls 2,312 students in grades six through 12 with the following demographics:

Grades 6-8 (1,082 students):

Black: 34% White: 37% Hispanic: 22% Other: 7%

Grades 9-12 (1,230 students):

Black: 37% White: 34% Hispanic: 23% Other: 5%

Free/Reduced Lunch Rate--Grades 6-8: 76.1%; Grades 9-12: 71% Students with learning disability--Grades 6-8: 136; Grades 9-12: 142

SECTION 4 - BOARD OF DIRECTORS AND PAID STAFF

Term End Date
December 31, 2021
December 31, 2021
December 31, 2021
December 31, 2019
December 31, 2019
December 31, 2021
December 31, 2019
December 31, 2019
December 31, 2021
December 31, 2019
December 31, 2020
December 31, 2021
December 31, 2019
December 31, 2020
December 31, 2020
December 31, 2019

Describe the Board term limit policy:		
No term limits.		

Three Highest Paid Staff Names	Annual Salary		
No paid staff			

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.):

Marion C. Moore is requesting Neighborhood Development Fund support to replace the antiquated lighting system in its theater, which is used by students, district staff, other schools, and community organizations. The school recently replaced the carpet and risers in the theater, but the lighting system is original to the space and dates back to 1968.

Moore's theater seats approximately 550 people and is one of the larger spaces of its kind in Jefferson County Public Schools (JCPS). The theater serves all of Moore's 2,312 students in some capacity. For example, the school hosts several in-house productions each year, including at least two plays and 10 concerts by band, orchestra, or choir students. Parents and community members also attend these events. Moore uses the space for certain student activities. such as class meetings. The theater also serves as the host-site for multiple district meetings every year, including community meetings tied to district events, JCPS principal meetings, and elementary school counselor meetings. Finally, community organizations are able to request to use the space when school is not in session.

If approved, the project would begin as soon as funding becomes available. Our estimated timeline is as follows: October 2019: JCPEF accepts grant award and executes contract with Louisville Metro November-December 2019: JCPEF reports donation of funds to JCPS; Lighting equipment is ordered and installed

upon arrival June 2020: Complete all grant reporting requirements

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

The JCPS department that oversees the Academies of Louisville initiative recently gave Moore \$34,000 to replace the old carpet and risers in the theater. That work was completed during the summer of 2019. The school also purchased a new sound system, corded and cordless microphones, and wireless headsets for plays during the 2017-18 school year. However, the lighting remains dated and a detriment to the overall experience of using the space.

This grant would allow us to completely update the lighting system by purchasing the following equipment and installation totaling \$9,912:

- 14 Chauvet Slim Par Pro Q USB LED Lights @ \$280 each—\$3,920
- 4 ColorBand Pix-M USB Bar Lights @ \$380 each—\$1,520
- 1 Chauvet Obey 70 Controller @ \$170 each—\$170
- 1 Chauvet D-Fi USA Wireless Hub @ \$130 each—\$130
- 4 Chauvet D-Fi USB Wireless Transponders @ \$59 each—\$236
- 22 Low Mass Clamps @ \$15 each—\$330
- 22 Mounting Safety Lines @ \$8 each—\$176
- 15 5' DMX Cables @ \$12 each—\$180
- 1 Chauvet 120st follow spot @ \$700—\$700

Installation, Fabrication, Wiring—\$2,550

+

: If this request is a fundraiser, please detail how the proceeds will be spent: ot applicable.
: 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 ends to be spent before the grant award period, identify the applicable circumstances:
The funding request is a reimbursement of the following expenditures that will probably be incurred after the application date, but prior to the execution of the grant agreement:
 If selecting this option, the invoice, receipt and payment documentation should not be available as of the date of this application.
The Grantee will be required to submit financial reporting in accordance with the reporting schedule provided in the grant agreement.
Reimbursements should not be made before application date unless an emergency can be demonstrated by the primary council sponsor. The funding request is a reimbursement of the following expenditures (attach invoices or proof of payment):
 Attach a copy of invoices and/or receipts to provide proof of purchase of activities associated with the work plan identified in this application. Attach a copy of cancelled checks to provide proof of payment of the invoices or receipts associated with the work
plan identified in this application.

E: Describe the program's benefits to those being served (measurable outcomes). Include the program's

process for collecting data and the indicators that will be tracked to measure the benefits to those being served:
The program will benefit students, school faculty and staff, other district employees, other JCPS schools, and community organizations by providing a high-capacity, updated space for events and meetings. The measurable outcomes are as follows:
Moore will host at least one theater production, six concerts (band, orchestra or choir), and three elementary school promotions in the space during the 2019-20 school year once the lighting has been installed.
School and district staff use an electronic system to reserve the theater. All community requests to use the space will be documented through a permitting process as outlined in the district's facility use procedure guidelines. Moore maintains a living calendar that tracks the space's use. Records are kept electronically, and the school will review the theater's usage on this living calendar and through permit requests to track progress on meeting the measurable outcomes listed above.
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.
Moore strives to be a good community partner and will continue to let community organizations use the theater space during non-school hours. For example, the Highview Business Group and Kentucky High School Softball Umpire Association have utilized the theater space for events and meetings. We also partner with JCPS elementary schools who hold Christmas programming and promotion ceremonies in the theater. These partnerships build goodwill among other JCPS schools and community organizations.
JCPS makes school facilities available for use by school-related groups such as Parent Teacher Associations and other non-profit and governmental agencies for public assemblies as long as the use does not interfere with school functions and operations. Any organization, governmental agency or individual using the school facilities must first get approval by following JCPS facility use procedures.
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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	Column 2	Column (1+2)=3
Program/Project Expenses	Proposed Metro Funds	Non- Metro Funds	Total Funds
A: Personnel Costs Including Benefits			
B: Rent/Utilities			
C: Office Supplies			
D: Telephone			
E: In-town Travel			
F: Client Assistance (See Detailed List on Page 8)			
G: Professional Service Contracts			
H: Program Materials			
I: Community Events & Festivals (See Detailed List on Page 8)			
J: Machinery & Equipment	\$7,362	0	7.362
K: Capital Project			17200
L: Other Expenses (See Detailed List on Page 8)	\$2,550	0	2,550
*TOTAL PROGRAM/PROJECT FUNDS	9,912		12/
% of Program Budget	100 %	0 %	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 **	0

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

^{**}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
Installation, fabrication, and wiring	2,550	0	2,550
Total	2,550	0	2,550

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
Ì			
ŀ			
	Total Value of In-Kind		
	(to match Program Budget Line Item.		
	Volunteer Contribution &Other In Kind)		
PE	TED INDIVIDUALLY, BUT GROUPED TOGETHER RSON PER WEEK ency Fiscal Year Start Date: $J_{uly\ 1,\ 2019}$	ON ONE LINE AS A TOTAL NOT	ING HOW MANY HOURS PER
	es your Agency anticipate a significant increas dget projected for next fiscal year? NO	e or decrease in your budget fr YES	om the current fiscal year to the
If Y	'ES, please explain:		

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 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.
- Applicant and any sub grantee will give Louisville Metro Government access to and the right to examine all paper or electronic records related to the awarded grant for up to five years of the grant agreement date.
- 4. Applicant assures compliance with the grant requirements and will monitor the performance of any third party (sub-grantee).
- 5. The Agency is in good standing with the Kentucky Secretary of State, Louisville Metro Government, the Jefferson County Revenue Commission, the Internal Revenue Service, and the Louisville Metro Human Relations Commission.
- **6.** Applicant understands failure to provide the services, programs, or projects included in the agreement will result in funds being withheld or requested to be returned if previously disbursed.
- Applicant understands they must return to Louisville Metro any unexpended funds by July 31 following the Metro Louisville's fiscal year end.
- 8. Applicant understands they must provide proof of all expenditures (canceled checks, receipts, paid invoices). The Applicant understands the failure to provide proof of expenditures as required in the grant agreement could result in funding being withheld or request to be returned if previously disbursed.
- 9. Applicant understands if this application is approved, the grant agreement will identify an award period that begins with the Metro Council approval date, and will end with June 30 of the fiscal year in which the grant is approved. Expenditures associated with this award expected to occur prior to the award period (approval date) must be disclosed in this application in order to be considered compliant with the grant agreement.
- **10.** Applicant understands if we choose to incur expenditures prior to the approval of the application by the Metro Council, there is no guarantee that funding will be reimbursed, as the Council may choose not to award the application.
- 11. Applicant 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.

Standard Certifications

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

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

Board Member Dr. Alex Gerassimides is the spouse of Mayor Greg Fischer.

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:		AKK					Date:	9/23/19
Legal Signatory: (please print):		Franklin Jelsma				7	Title:	Chair, JCPEF
Phone: 502.485.6501			Extension:	NA	Email:	abby.p	oiper@je	efferson.kyschools.us

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Applicant's Initials FRJ

IRS Determination Letter

Internal Revenue Service District Director

Department of the Treasury

Date:

CANADAM MANAGAMANA CANADAMANA CANADA

JUL 19 1983

Jefferson County Public Education Foundation, Inc. 416 West Jefferson Louisville, KY 40202 Employer Identification Number:
61-1021128
Accounting Period Ending:
June 30
Form 990 Required: K Yes No

Person to Contact:

Marilyn Miller

Contact Telephone Number:

(513) 684-3578

Dear Applicant:

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

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

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

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

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

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

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

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

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

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

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

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

Sincered yours

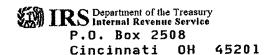
James J. Ryan V District Director

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

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

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

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



In reply refer to: 0248164841 June 14, 2011 LTR 4168C E0 61-1021128 000000 00

00015796

BODC: TE

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



034020

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

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.

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

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

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

kerapiya ...

Sincerely yours,

S A Mantin Openation

S. A. Martin, Operations Manager Accounts Management Operations

Current Year Projected Budget

Jefferson County Public Education Foundation FY 2020 Tentative Operating Budget

Revenue

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

\$679,000

Expenses

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

\$679,000

Current Financial Statement*

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

Most Recent IRS Form 990

Form 8879-EO

IRS e-file Signature Authorization for an Exempt Organization

Do not send to the IRS. Keep for your records.

For calendar year 2017, or fiscal year beginning JUL 1 , 2017, and ending JUN 30 , 20 18

OMB No. 1545-1878

Department of the Treasury Internal Revenue Service

Name of exempt organization

➤ Go to www.irs.gov/Form8879EO for the latest information.

Employer Identification number

JEFFERSON COUNTY PUBLIC EDUCATION FOUNDATION, INC.

_**

Name and title of officer

LYNN HUETHER

SECRETARY/TREASURER

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

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

1a Form 990 check here X b Total reve	nue, if any (Form 990, Part VIII, column (A), line 12)	1b	990,433.
	evenue, if any (Form 990-EZ, line 9)	2b	
3a Form 1120-POL check here b D b To	tal tax (Form 1120-POL, line 22)	3b	
4a Form 990-PF check here b Tax ba	ased on investment income (Form 990-PF, Part VI, line 5)	4b	
5a Form 8868 check here b Balance D	iue (Form 8868, line 3c)	5b	

Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2017 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1.888.353.4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

X I authorize	MONROE	SHINE	&	co.,	INC.	CPA	S	 to enter my PIN	21128	
					ERO firm n	ame			Enter five numbers, bu do not enter all zeros	it
								his return that a co		

is being filed with a state agency(les) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

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

Officer's signature 🕨

Certification and Authentication

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

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

35590152311

Date 📂

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

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

EXTENDED TO MAY 15, 2019

Form **990**

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.

2017 Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

		GO to WWW.ii 3:gov/: Officeo for filed detaile die tie			
A	For th	e 2017 calendar year, or tax year beginning $$ JUL $1,$ 2017 $$ and ending	g JUN	<u>30, 2018</u>	
B (Check if	C Name of organization	D Er	nployer identifi	cation number
	pplicab	JEFFERSON COUNTY PUBLIC EDUCATION			
_	Addre	SS HOUNDARION INC			
-	Name			**_*	****
_	ichano initial	Doom!	cuite E To	lephone numbe	·····
<u>_</u>	return _Final		2016 - 16		212-3112
L_	return termir				1,047,744.
	ated	City or town, state or province, country, and ZIP or foreign postal code		oss receipts \$	
<u></u>	_Amen	HOOISVIHHE, RI 40202		s this a group r	
L	Application pendi	F Name and address of principal officer. LITAR TOLITIES			s? Yes X No
		3020 FERN VALLEY ROAD, LOUISVILLE, KI 402.	` '		ncluded? Yes No
	ах-ех	empt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or	527	f "No," attach a	list. (see instructions)
		te: N/A		Group exemptic	
K F	orm o	organization: X Corporation	Year of forma	ation: 1983 1	VI State of legal domicile: KY
	irt I	Summary			
	1	Briefly describe the organization's mission or most significant activities: SUPPORT	OF JEE	FERSON (COUNTY,
ë	-	KENTUCKY PUBLIC SCHOOLS			
Governance	2	Check this box if the organization discontinued its operations or disposed of r	nore than 2	5% of its net as:	sets.
Je.	1	Number of voting members of the governing body (Part VI, line 1a)			25
ő	1	Number of independent voting members of the governing body (Part VI, line 1b)			25
8					0
ies		Total number of individuals employed in calendar year 2017 (Part V, line 2a)			Ö
Σį		Total number of volunteers (estimate if necessary)			0.
Activities &		Total unrelated business revenue from Part VIII, column (C), line 12			0.
	b	Net unrelated business taxable income from Form 990-T, line 34	1		
				or Year	Current Year
ø	8	Contributions and grants (Part VIII, line 1h)	3,4	461,275.	969,691.
ž		Program service revenue (Part VIII, line 2g)		0.	0.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		275.	20,742.
۳	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	0.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		161,550.	990,433.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	1,	317,235.	1,771,688.
ı	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
,,	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	0.
Se		Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
Expenses		Total fundraising expenses (Part IX, column (D), line 25) 45,396.			
피		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		L90,033.	135,895.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		507,268.	1,907,583.
		Revenue less expenses. Subtract line 18 from line 12	1,9	54,282.	-917,150.
_ v		nevertuo 1035 experioos, Gabriade iirio 10 Nom iirio 12		of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)		L68,836.	2,284,936.
SSE	20	Total liabilities (Part X, line 16)		0.	0.
늘	21	Net assets or fund balances. Subtract line 21 from line 20	3.1	68,836.	2,284,936.
諨	22 rt II	Signature Block	1 3/-		
		Ities of perjury, I declare that I have examined this return, including accompanying schedules and sta	temente and	to the best of my	knowledge and helief it is
					kitowiougo and bollol, it is
rue,	correc	t, and complete. Declaration of preparer (other than officer) is based on all information of which prep	Jai Gi Has ally	T T	
		Signature of officer		Date	
Sign)			Duto	
Here	•	LYNN HUETHER, SECRETARY/TREASURER			
		Type or print name and title	I Data	Tosas F	PTIN
		Print/Type preparer's name Preparer's signature	Date	Check	
Paid		JEREMY M FINN, CPA		self-employ	ed P00814819
rep:	arer	Firm's name ► MONROE SHINE & CO., INC. CPA'S		Firm's EIN	
Use (Only	Firm's address PO BOX 22039			0 400 0000
		LOUISVILLE, KY 40252-9804		Phone no. 50	2-423-0311
May	the IF	S discuss this return with the preparer shown above? (see instructions)			X Yes No

JEFFERSON COUNTY PUBLIC EDUCATION FOUNDATION. INC.

Porn	n 990 (2017) FOUNDATION , INC. Int III Statement of Program Service Accomplishments	age ∠
1 4	Check if Schedule O contains a response or note to any line in this Part III	
1	Briefly describe the organization's mission:	learnered.
	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?	T No.
	prior Form 990 or 990·EZ? LX If "Yes," describe these new services on Schedule O.	7 140
2	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	No.
3	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.	
•	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and	
	revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$ 1,817,084 • Including grants of \$ 1,771,688 •) (Revenue \$)
	GRANTS AND ALLOCATIONS TO THE JEFFERSON COUNTY PUBLIC SCHOOL SYSTEM IN	
	KENTUCKY AND INDIVIDUALS TO PROMOTE EDUCATIONAL IMPROVEMENTS IN	
	ELEMENTARY, MIDDLE, AND HIGH SCHOOLS AND EARLY CHILDHOOD EDUCATION.	
4b	(Code:) (Expenses \$ Including grants of \$) (Revenue \$)
4-	(Code:) (Expanses \$ including grants of \$) (Revenue \$	
4c	(Code:) (Expenses \$) (Revenue \$)	/
4d	Other program services (Describe in Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$) Total program service expenses ▶ 1,817,084.	
<u>4e</u>	Total program service expenses 1,817,084.	2017)

FOUNDATION, INC.

Part IV | Checklist of Required Schedules

Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? X If "Yes," complete Schedule A 2 X Is the organization required to complete Schedule B, Schedule of Contributors? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for X 3 public office? If "Yes," complete Schedule C, Part I Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect X during the tax year? If "Yes," complete Schedule C, Part II Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or X 5 similar amounts as defined in Revenue Procedure 98-197 | f "Yes," complete Schedule C, Part III Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to 6 Х provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, X the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Х 8 Schedule D, Part III Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? Х 9 If "Yes," complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent X 10 endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes." complete Schedule D. X 11a Part VI b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total Х 11b assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total X assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 11c 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 X Part X, line 16? /f "Yes," complete Schedule D, Part IX X 11e e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses X 11f the organization's llability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete 12a Schedule D, Parts XI and XII Was the organization included in consolidated, independent audited financial statements for the tax year? X 12b If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional Х 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 14a 14a Did the organization maintain an office, employees, or agents outside of the United States? b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 Х 14b or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any X foreign organization? |f "Yes," complete Schedule F, Parts II and IV 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to X 16 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, Х 17 column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 18 X 1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

complete Schedule G. Part III

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FOUNDATION, INC.

Form 990 (2017) FOUNDATION, INC.

Part IV Checklist of Required Schedules (continued)

			Yes	
2 0a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u> </u>
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		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete	1		
	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			7.7
	Schedule K. If "No", go to line 25a	24a		X
b		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	05-		х
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
a	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
26	Schedule L, Part I Did the organization report any amount on Part X, Ilne 5, 6, or 22 for receivables from or payables to any current or	255		
26	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27	l	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		Х
	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	1 1	1	
	contributions? If "Yes," complete Schedule M	30		<u> </u>
31	Did the organization liquidate, terminate, or dissolve and cease operations?		ĺ	
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			7.7
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	1		37
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and		- 1	v
	Part V, line 1	34	-+	$\frac{x}{x}$
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	-+	-77
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	35b	1	
26	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	300		
36	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	If "Yes," complete Schedule H, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization	 	一十	
01	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note, All Form 990 filers are required to complete Schedule O	38	х	
		Form 9	990 /	20171

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Page 5

	Check if Schedule O contains a response or note to any line in this Part V										
				Yes	No						
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	0									
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0									
C	The state of the s	ming	İ		ĺ						
-	(gambling) winnings to prize winners?		1c								
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			31							
	filed for the calendar year ending with or within the year covered by this return2a	0	1		1						
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b		Ĺ						
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)				1						
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?		За		X						
	b If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O										
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a										
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?										
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 (FB	AR).									
5a	the contract of the contract o		5a		X						
b	and the state of t										
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		5c								
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization	on solicit		. [
	any contributions that were not tax deductible as charitable contributions?		6a		X						
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			. 1							
	were not tax deductible?		6b		ļ						
7	Organizations that may receive deductible contributions under section 170(c).	1	I	.							
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provide	d to the payor?	7a		X						
	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b								
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			.	**						
	to file Form 8282?		7c		X						
	If "Yes," indicate the number of Forms 8282 filed during the year		[
е	Did the organization record and property of the property of th		7e								
f	Dia 110 oliganization, amin's 11-1, p-1, p-1, p-1, p-1, p-1, p-1, p-1	······	7f								
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as		7g	-+							
		3rm 1098-C7	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.		.								
	Did the sponsoring organization make any taxable distributions under section 4966?	·····	9a 9b	\dashv							
		·····	90								
0	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12			1							
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b		1	- 1							
_b ∣1	Section 501(c)(12) organizations. Enter:		- 1	-							
	Gross income from members or shareholders			- 1							
	Gross income from other sources (Do not net amounts due or paid to other sources against										
D	amounts due or received from them.)		1								
22	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filling Form 990 in lieu of Form 1041?		12a								
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year										
	Section 501(c)(29) qualified nonprofit health insurance issuers.										
	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.	Ţ									
b	Enter the amount of reserves the organization is required to maintain by the states in which the										
	organization is licensed to issue qualified health plans		Ą.								
С	Enter the amount of reserves on hand										
	Did the organization receive any payments for indoor tanning services during the tax year?		14a	\longrightarrow	<u> </u>						
	If "Yes," has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O		14b								
			Form	990 (2017)						

JEFFERSON COUNTY PUBLIC EDUCATION

orm 990 (2	2017)	FOUNDATION,			Page 6
Part VI	Governance,	Management, and	Disclosure	For each "Yes" response to lines 2 through 7b below, and for a "No" response	onse

	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.		•								
	Check if Schedule O contains a response or note to any line in this Part VI			X							
Sec	ction A. Governing Body and Management										
			Yes	No							
1a	Enter the number of voting members of the governing body at the end of the tax year	5									
	If there are material differences in voting rights among members of the governing body, or if the governing										
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.										
b	Enter the number of voting members included in line 1a, above, who are independent	5									
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	İ									
	officer, director, trustee, or key employee?	2		X							
3											
	of officers, directors, or trustees, or key employees to a management company or other person?	. 3	ļ	X							
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	. 4	ļ	X							
5	5 Did the organization become aware during the year of a significant diversion of the organization's assets?										
6	Did the organization have members or stockholders?	6	<u> </u>	Х							
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or										
	more members of the governing body?	7a		X							
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or										
	persons other than the governing body?	7b	ļ	X							
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:										
а	The governing body?	8a	X								
b	Each committee with authority to act on behalf of the governing body?	8b	X								
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the										
	organization's mailing address? If "Yes." provide the names and addresses in Schedule O	. 9		X							
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)										
			Yes	No							
10a	Did the organization have local chapters, branches, or affiliates?	10a	ļ	<u> </u>							
þ	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,										
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b 11a		Х							
11a 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.										
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		<u> </u>							
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b									
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	1									
	in Schedule O how this was done	12c		37							
13	Did the organization have a written whistleblower policy?	13		X							
14	Did the organization have a written document retention and destruction policy?	14		<u> </u>							
15	Did the process for determining compensation of the following persons include a review and approval by independent										
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			v							
	The organization's CEO, Executive Director, or top management official	15a		$\frac{x}{x}$							
b	Other officers or key employees of the organization	15b	+								
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	1									
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	10-		X							
	taxable entity during the year?	16a		<u> </u>							
D	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation										
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's	16b									
206	exempt status with respect to such arrangements?	1 100									
	List the states with which a copy of this Form 990 is required to be filed NONE										
17	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	available	·								
18		سبطااطهاك	•								
	for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website X Upon request Other (explain in Schedule O)										
10	Own website Another's website Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, an	d financi	al								
19		u manci	us								
	statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records:										
20											
	LYNN HUETHER, TREASURER - 502-212-3112 3620 FERN VALLEY ROAD, LOUISVILLE, KY 40219										
	OURO FRIZZA ATTENTE TOTTEN FOOTEN ATTENTAL TOT FOOTEN										

JEFFERSON COUNTY PUBLIC EDUCATION

Employees, and Independent Contractors

Form 990 (2017)	FOUNDATION,		**_***
Part VII Compensation	n of Officers, Direc	tors, Trustees, Key Employees,	Highest Compensated

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

X Check this box if neither the organization (A)	(B)	(C)					(D)	(E)	(F)	
Name and Title	Average			Pos	itior) Abon		Reportable	Reportable	Estimated
	hours per	box	(do not check more than one box, unless person is both an officer and a director/trustee)					compensation	compensation	amount of
	week		cer an	o a o	irecto	rector/trustee)		from	from related	other
	(list any hours for	director				L		the organization	organizations (W-2/1099-MISC)	compensation from the
	related	1 5	ige			sate		(W-2/1099-MISC)	(***2) 1033 (**100)	organization
	organizations	trustee	Institutional trustee		yee	Highest compensated employee		(and related
	below	Individual 1	ğ	5 5	Key employee	loyee	<u> </u>			organizations
	line)	ğ	135	Officer	Re,	至島	Бот			
(1) JAMES R ALLEN	1.00	1								•
CHAIRMAN		X	<u> </u>	X			<u> </u>	0.	0.	0.
(2) FRANKLIN JELSMA	1.00									_
VICE CHAIRMAN		X	<u> </u>	X				0.	0.	0.
(3) JOSEPH SEILER	1.00	l								_
MEMBER		X	<u> </u>			<u> </u>	<u> </u>	0.	0.	0.
(4) AUDWIN HELTON	1.00								•	•
MEMBER	1 2 2 2	X	_					0.	0.	0.
(5) HENRY HEUSER JR	1.00]							0	^
MEMBER	1 00	X						0.	0.	0.
(6) MARK SHIRKNESS	1.00							0.	0.	0.
MEMBER	1 00	X	_					U •	U •	V .
(7) KEVIN SHURN	1.00	х						0.	0.	0.
MEMBER	1.00	^				-	_	0.	0.	<u></u>
(8) JEFF ULIGIAN	1.00	х						0.	0.	0.
MEMBER (9) AL CORNISH	1.00	<u>^</u>				_		<u> </u>		
MEMBER	1.00	х						0.	0.	0.
(10) LYNN HUETHER	3.00	-								
TREASURER	3.00	х		x				0.	0.	0.
(11) KEN SELVAGGI	1.00									
MEMBER		х						0.	0.	0.
(12) MALCOLM B. CHANCEY JR.	1.00									
MEMBER		х						0.	0.	0.
(13) ROBERT J. ARNOLD	1.00									
MEMBER		X						0.	0.	0.
(14) VIK CHADHA	1.00									
MEMBER		X						0.	0.	0.
(15) DR. ALEX GERASSIMIDES, MD	1.00									_
MEMBER		X						0.	0.	0.
(16) KEVIN JOYNT	1.00							_		_
MEMBER		X						0.	0.	0.
(17) MITCH RUE	1.00								ا ۾ ا	•
MEMBER		X						0.	0.	0.

Form 990 (2017)

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Page 8

Part VII Section A. Officers, Directors, Trus		<u>yolq</u>	/ees			ghe	st (Compensated Employee					
(A)	(B)	(C) Position						(D)	(E)			(F)	
Name and title	Average hours per			heck	more	than		Reportable	Reportable	_	Estimated amount of		
	week					is bot or/trus			compensatio		a	other	
	(list any	į	T					the	organization		con	pens	
	hours for	or director				Eg	1	organization	(W-2/1099-MIS	C)	f	rom th	10
	related	trustee or	ruste		١	Beusa		(W-2/1099-MISC)				janiza	
	organizations below		onalt		ployee	E 8						d rela	
	line)	Individual	nstitutional trustee	Officer	Key employee	Highest compensated employee	E E				org	anizat	IONS
(18) CAROL TIMMONS	1.00	┢	1=	<u>-</u> -	¥	= =	1 "						
MEMBER		x					١.	0.		0.			0.
(19) JANNIE BROUSSARD	1.00						Ī						
MEMBER		X	_	_	L_	<u> </u>	ļ	0.		0.			0.
(20) MEREDITH ERICKSON	1.00	١.,								_			0
MEMBER (21) CARL THOMAS	1.00	X	┝	-	├-	┼	├-	0.		0.			0.
(21) CARL THOMAS MEMBER	1.00	x					İ	0.		0.			0.
(22) ELIZABETH MAYS	1.00	1	╁	\vdash	╁	╁	\vdash	<u> </u>		•			
MEMBER		\mathbf{x}						0.		0.			0.
(23) SAM CORBETT	40.00					T	Π						
EXECUTIVE DIRECTOR		<u> </u>		X	<u> </u>			0.		0.			0.
		-			<u> </u>	<u> </u>	_						
		-			-	 	-						
1b Sub-total		Li	L	L	L	·		0.		0.			0.
c Total from continuation sheets to Part VI							•	0.		0.			0.
d Total (add lines 1b and 1c)	******							0.		0.			0.
2 Total number of individuals (including but n	ot limited to th	ose	liste	d ab	ove) wh	o re	eceived more than \$100,	000 of reportable				_
compensation from the organization													0
										Г		Yes	No
3 Did the organization list any former officer,											3		х
line 1a? If "Yes," complete Schedule J for so 4 For any individual listed on line 1a, is the su										··· ⊦	3		
and related organizations greater than \$150	•		•					•			4		х
5 Did any person listed on line 1a receive or a													
rendered to the organization? f "Yes." com	olete Schedule	J fc	or su	ch r	ers:	on .					5		X
Section B. Independent Contractors													
Complete this table for your five highest con										ensat	ion fro	m	
the organization. Report compensation for t	he calendar ye	ar e	ndin	g wi	th o	r wit	thin	the organization's tax ye	ear.		(C		
(A) Name and business	address	NC	NE	;				Description of s	ervices	C		r) nsatio	n
							1						
							\dashv					·	
							\dashv						

2 Total number of independent contractors (in		t lim	ited	to t	hos	e list	ted	above) who received mo	re than				
\$100,000 of compensation from the organiz	ation 🕨				U						(agn "	2017)
											-orm :	(¿	2017)

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20,742.

Form 990 (2017)

FOUNDATION, INC. Statement of Revenue Part VIII Check if Schedule O contains a response or note to any line in this Part VIII (C) Unrelated (D)
Revenue excluded from tax under sections
512 - 514 (B) Related or Total revenue exempt function business revenue revenue 1 a Federated campaigns 1a b Membership dues 1b c Fundraising events _____ 10 d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and 969,691 similar amounts not included above Noncash contributions included in lines 1a-1f: \$ 969,691 h Total. Add lines 1a-1f Business Code f All other program service revenue g Total. Add lines 2a-2f Investment Income (including dividends, interest, and 19,227. 19,227. other similar amounts) Income from investment of tax-exempt bond proceeds Royalties (ii) Personal 6 a Gross rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (ii) Other 58,826. assets other than inventory b Less: cost or other basis and sales expenses $1,\overline{515}.$ c Gain or (loss) <u>1,515.</u> 1,515. d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ ____ contributions reported on line 1c). See Part IV, line 18 a b Less: direct expenses _____ b c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances _____a b Less: cost of goods sold _____ b c Net income or (loss) from sales of inventory ... Miscellaneous Revenue **Business Code** 11 a

990,433.

e Total. Add lines 11a-11d

Total revenue. See instructions.

-*** Page 10

Form 990 (2017) FOUNDATION, INC.

Part IX | Statement of Functional Expenses

Sec	tion 501(c)(3) and 501(c)(4) organizations must comp Check if Schedule O contains a respons			mpiete columin (A).	
	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	1,771,688.	1,771,688.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroli taxes				
11	Fees for services (non-employees):	113,490.	45,396.	22,698.	45,396.
a		113,430.	43,3700	22,000.	13,330.
b	Legal	6,685.		6,685.	
	Accounting	0,003.		0,000.	
d	5 4 4 4 4 4 4 4 4 4 4 5 4 5 4 5 4 5 4 5		gaster of comme		
e f	Investment management fees	9,548.		9,548.	
g					
y	column (A) amount, list line 11g expenses on Sch O.)				
12	Advertising and promotion				
13	Office expenses	4,250.		4,250.	
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				·····
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization			- 1 000 	
23	Insurance	1,922.		1,922.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а		<u> </u>			
b					
C					
d	All other expenses				
	All other expenses Total functional expenses. Add lines 1 through 24e	1,907,583.	1,817,084.	45,103.	45,396.
2 <u>5</u>	Joint costs. Complete this line only if the organization				
26	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here If following SOP 98-2 (ASC 958-720)				
					000

FOUNDATION, INC.

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

JEFFERSON COUNTY PUBLIC EDUCATION FOUNDATION, INC.

Forr	n 990 (2017) FOUNDATION, INC.	**	*****	Pa	ige 12
Pa	art XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1			33.
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,90	7,5	83.
3	Revenue less expenses. Subtract line 2 from line 1	3	-91'	7,1	50.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3,16	3,8	36.
5	Net unrealized gains (losses) on investments	5	3:	3,2	50.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,	1 1			
	column (B))	10	2,284	<u>1,9</u>	<u>36.</u>
Pa	rt XII Financial Statements and Reporting				,
	Check if Schedule O contains a response or note to any line in this Part XII	· · · · · · · · · · · · · · · · · · ·			X
				Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other			A.S.	
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Э.			
2a			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				l
	Separate basis Consolidated basis Both consolidated and separate basis				ĺ
þ	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	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				İ
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the				
	review, or compilation of its financial statements and selection of an Independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche				ĺ
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sing	jle Audi	1 1		
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required			ļ	
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	l	

Form 990 (2017)

SCHEDULE A

ernal Revenue Service

(Form 990 or 990-EZ)

Department of the Treasury

Name of the organization

Public Charity Status and Public Support

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

➤ Attach to Form 990 or Form 990-EZ.

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

JEFFERSON COUNTY PUBLIC EDUCATION

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

_*** FOUNDATION, INC. Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990 EZ).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 ____ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s) (iv) is the organization listed (v) Amount of monetary (Iii) Type of organization (vi) Amount of other (i) Name of supported (described on lines 1-10 support (see instructions) support (see instructions) organization Yes above (see instructions))

_*** Page 2

Schedule A (Form 990 or 990-EZ) 2017 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						
Cale	endar year (or fiscal year beginning in) 🕨	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	870,698.	1073124.	847,608.	3461275.	969,691.	7222396.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
·	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	870,698.	1073124.	847,608.	3461275.	969,691.	7222396.
	The portion of total contributions						
•	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11.					4 434 3 4 5 5 6 6 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	a a busan (f)					44.5	3664400.
_	***************************************		N. P. Strait,	The company			3557996.
	Public support. Subtract line 5 from line 4. ction B. Total Support					<u> </u>	3337330.
		(a) 2013	(F) 0014	(c) 2015	(d) 2016	(e) 2017	(f) Total
	ndar year (or fiscal year beginning in)	870,698.	(b) 2014 1073124.	847,608.	3461275.	969,691.	7222396.
	Amounts from line 4	870,030.	10/3124.	047,000	Jaor 273.	303,032.	7222330.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,	163.	142.	136.	275.	20,742.	21,458.
	and income from similar sources	103.	144.	130.	4/3.	20,742.	21,430.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain	ĺ					
	or loss from the sale of capital						
	assets (Explain in Part VI.)	ļ			group services		7243854.
	Total support. Add lines 7 through 10						/243034.
	Gross receipts from related activities,					12	
13	First five years. If the Form 990 is for						
e	organization, check this box and stop ction C. Computation of Public						
				-1 (6)		14	49.12 %
	Public support percentage for 2017 (li					15	51.47 %
	Public support percentage from 2016						
16a	33 1/3% support test - 2017. If the o						
	stop here. The organization qualifies a						
b	33 1/3% support test - 2016. If the o						. [
	and stop here. The organization quali						
17a	10% -facts-and-circumstances test						
	and if the organization meets the "fact						
	meets the "facts-and-circumstances" t						
b	10% -facts-and-circumstances test	- 2016. If the orga	anization did not c	heck a box on line	13, 16a, 16b, or 1	/a, and line 15 is 1	U% Or
	more, and if the organization meets th						<u> </u>
	organization meets the "facts-and-circ						
18	Private foundation. If the organization	n did not check a b	oox on line 13, 16a	, 16b, 17a, or 17b		nd see instructions	

_* Page 3

Schedule A (Form 990 or 990-EZ) 2017 FOUNDATION, INC. Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

Se	ction A. Public Support	olom, prodec com,	5,5,5,7 d. t m)				
Cale	endar year (or fiscal year beginning in) 🕨	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
	Gifts, grants, contributions, and						
	membership fees received. (Do not	,					
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-		1				1
	formed, or facilities furnished in any activity that is related to the						1
	organization's tax-exempt purpose						
3	Gross receipts from activities that]	
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities]		
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7 a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
c	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)	n water the fi	- Anna Anna Garage			<u> </u>	
	ction B. Total Support				T		
	ndar year (or fiscal year beginning in) 🗪	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources					ļ	
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				Ì		
40	regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital	ĺ					
	assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)					F04(=)(0)	A1
14	First five years. If the Form 990 is for						uon, ►□
Sec	check this box and stop heretion C. Computation of Public	Support Per	centage				
	Public support percentage for 2017 (lir			olumn (fl)		15	%
	Public support percentage for 2017 (III		=			16	<u>%</u>
	tion D. Computation of Invest						
	Investment income percentage for 20			e 13, column (f))	,	17	%
	Investment income percentage for 23					18	%
	33 1/3% support tests - 2017. If the						
	more than 33 1/3%, check this box and						▶ □
	33 1/3% support tests - 2016. If the						nd
	line 18 is not more than 33 1/3%, chec						
	Private foundation. If the organization						

...***

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

- 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 12a or 12b 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?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? 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 section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 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 9a) 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 9a) 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 section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes." answer 10b 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
1		
2		
3a	14.5	
1.5		
3b	İ	
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4a		
4b		
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4c	- 199	
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8	772 42.3	
9a		
9b		
9c		
A.S		
10a		
	1	
10b		

Sch	edule A (Form 990 or 990-EZ) 2017 FOUNDATION, INC. **_*	****	* P	age 5
	art IV Supporting Organizations (continued)			
L			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		1 4.87	
	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	1	1	
	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		
Sec	ction B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the	1.0		
	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.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? 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.	2	<u> </u>	
Sec	ction C. Type II Supporting Organizations		,	·
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? 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).	1		
Sec	tion D. All Type III Supporting Organizations		,	
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		di.	
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	l is		
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2	100000000	
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions	}.		
a	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
C	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see ins	tructions)	Yes	No
2	Activities Test. Answer (a) and (b) below.		163	INO
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of	135		,
	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	2a		
L	that these activities constituted substantially all of its activities. Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			T. C.
D	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.			
3	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	No.		
а	trustees of each of the supported organizations? Provide details in Part VI.	3a		
h	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.	3b		

Schedule A (Form 990 or 990 EZ) 2017 FOUNDATION, INC. Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI.) 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 2 2 Recoveries of prior-year distributions 3 Other gross income (see instructions) Add lines 1 through 3 4 5 Depreciation and depletion Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) Other expenses (see instructions) 7 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 (B) Current Year Section B - Minimum Asset Amount (A) Prior Year (optional) 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): a Average monthly value of securities 1a b Average monthly cash balances 1b 1c c Fair market value of other non-exempt-use assets 1d d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI): 2 Acquisition indebtedness applicable to non-exempt-use assets 3 Subtract line 2 from line 1d Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions) 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 6 Multiply line 5 by .035 7 Recoveries of prior-year distributions 8 Minimum Asset Amount (add line 7 to line 6) Current Year Section C - Distributable Amount Adjusted net income for prior year (from Section A, line 8, Column A) 2 Enter 85% of line 1 Minimum asset amount for prior year (from Section B, line 8, Column A) 3 Enter greater of line 2 or line 3 4 5 Income tax imposed in prior year Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) 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) 2017

instructions).

JEFFERSON COUNTY PUBLIC EDUCATION **_**** Schedule A (Form 990 or 990-EZ) 2017 FOUNDATION, INC. Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) **Current Year** Section D - Distributions 1 Amounts paid to supported organizations to accomplish exempt purposes 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 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 2017 from Section C, line 6 Line 8 amount divided by line 9 amount (ii) (iii) (i) Underdistributions Distributable **Excess Distributions** Section E - Distribution Allocations (see instructions) Amount for 2017 Pre-2017 1 Distributable amount for 2017 from Section C, line 6 Underdistributions, if any, for years prior to 2017 (reasonable cause required explain in Part VI). See instructions. Excess distributions carryover, if any, to 2017 3 а **b** From 2013 c From 2014 d From 2015 e From 2016 f Total of lines 3a through e g Applied to underdistributions of prior years h Applied to 2017 distributable amount i Carryover from 2012 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from 3f. 4 Distributions for 2017 from Section D, a Applied to underdistributions of prior years b Applied to 2017 distributable amount c Remainder. Subtract lines 4a and 4b from 4. Remaining underdistributions for years prior to 2017, If any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions. Remaining underdistributions for 2017. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. 7 Excess distributions carryover to 2018. Add lines 3j and 4c. 8 Breakdown of line 7:

Schedule A (Form 990 or 990-EZ) 2017

a Excess from 2013
b Excess from 2014
c Excess from 2015
d Excess from 2016
e Excess from 2017

Schedule A	Form 990 or 990-EZ) 2017 FOUNDATION, INC.	AA-AAAAA Pag	<u>e 8</u>
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any addition (See instructions.)	and 2; Part IV, Section C, ', Section B, line 1e; Part V,	
	(See Instructions.)		
			

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Schedule A

Identification of Excess Contributions Included on Part II, Line 5

2017

** Do Not File **

*** Not Open to Public Inspection ***

Contributor's Name	Total Contributions	Excess Contributions
CES FOUNDATION	1,802,391.	1,657,514.
GHEENS FOUNDATION	335,000.	190,123.
J GRAHAM BROWN FOUNDATION	565,431.	420,554.
LIFT A LIFE FOUNDATION	200,000.	55,123.
LOU COMMUNITY FOUNDATION	463,288.	318,411.
LOUISVILLE METRO GOVERNMENT	172,635.	27,758.
WHAS CRUSADE FOR CHILDREN	181,043.	36,166.
ALAN L. HUFF AND RUTH D. HUFF REVOCABLE TRUST	1,068,505.	923,628.
NATIONAL CENTER FOR FAMILIES LEARNING	180,000.	35,123.
		2014-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-
otal Excess Contributions to Schedule A, Part II, Line 5		3,664,400.

Schedule B

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No. 1545-0047

2017

Employer identification number Name of the organization JEFFERSON COUNTY PUBLIC EDUCATION **_**** FOUNDATION, INC. Organization type (check one): Filers of: Section: X 501(c)(3) (enter number) organization Form 990 or 990-EZ 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. 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) filling Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

certify that it doesn't 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.

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

Name of organization

JEFFERSON COUNTY PUBLIC EDUCATION
FOUNDATION, INC.

Employer identification number

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Part II	Noncash Property	(see instructions).	Use duplicate copies	of Part II if addition	al space is needed.
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(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
		\$	

Page 4 Schedule B (Form 990, 990-EZ, or 990-PF) (2017) Name of organization Employer identification number JEFFERSON COUNTY PUBLIC EDUCATION **_*** FOUNDATION, INC.
Part III Exclusively rel Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (d) Description of how gift is held (b) Purpose of gift (c) Use of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (d) Description of how gift is held (b) Purpose of gift (c) Use of gift Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (d) Description of how gift is held (c) Use of gift (b) Purpose of gift Part I (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (a) No. from Part I (d) Description of how gift is held (c) Use of gift (b) Purpose of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

➤ Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

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

Employer identification number **_****

Pa	Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the						
	organization answered "Yes" on Form 990, Part IV, Iir	ne 6.					
		(a) Donor advised funds	(b) Funds and other accounts				
1	Total number at end of year						
2	Aggregate value of contributions to (during year)						
3	Aggregate value of grants from (during year)						
4	Aggregate value at end of year						
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advise	ed funds				
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No				
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can be	used only				
	for charitable purposes and not for the benefit of the donor o	r donor advisor, or for any other purpose o	conferring				
	impermissible private benefit?						
Pa	t II Conservation Easements. Complete if the org	ganization answered "Yes" on Form 990, F	Part IV, line 7.				
1	Purpose(s) of conservation easements held by the organization						
	Preservation of land for public use (e.g., recreation or e	ducation) Preservation of a history	orically important land area				
	Protection of natural habitat	Preservation of a cert	ified historic structure				
	Preservation of open space						
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the form o	1 1				
	day of the tax year.		Held at the End of the Tax Year				
а	Total number of conservation easements		2a				
b	Total acreage restricted by conservation easements		2b				
C	Number of conservation easements on a certified historic stru	ucture included in (a)	2c				
d	Number of conservation easements included in (c) acquired a		1 1				
	listed in the National Register		2d				
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by the	organization during the tax				
	year -						
4	Number of states where property subject to conservation eas						
5	Does the organization have a written policy regarding the per	iodic monitoring, inspection, handling of					
	violations, and enforcement of the conservation easements it						
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing cons	ervation easements during the year				
7	Amount of expenses incurred in monitoring, inspecting, hand	ling of violations, and enforcing conservat	ion easements during the year				
	\$		A 44 (m) (f)				
8	Does each conservation easement reported on line 2(d) above						
	and section 170(h)(4)(B)(ii)?						
9	In Part XIII, describe how the organization reports conservation						
	include, if applicable, the text of the footnote to the organization.	ion's financial statements that describes ti	ne organization's accounting for				
Dai	conservation easements. t III Organizations Maintaining Collections of	Art Historical Treasures or Oth	ner Similar Assets.				
rai	Complete if the organization answered "Yes" on Form		101 011 111 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
	If the organization elected, as permitted under SFAS 116 (AS		ent and halance sheet works of art				
ıa	historical treasures, or other similar assets held for public exh						
	the text of the footnote to its financial statements that describ		os or public scritico, provido, irri arcinii,				
	If the organization elected, as permitted under SFAS 116 (AS		and halance sheet works of art historical				
b	treasures, or other similar assets held for public exhibition, ed						
		lucation, or research in furtherance of pub	ile service, provide the lonowing attrounts				
	relating to these items:		 ¢				
	(i) Revenue included on Form 990, Part VIII, line 1						
_	(ii) Assets included in Form 990, Part X If the organization received or held works of art, historical trea	pauron or other similar assets for financial					
2			gain, provide				
_	the following amounts required to be reported under SFAS 11		S				
a	Revenue included on Form 990, Part VIII, line 1						

Sob.		ION, INC.	FORLIC EDO	CATTON	**	_****	* -	age 2
	rt III Organizations Maintaining C		t Historical Tre	easures or Oth	er Similar As	ssets /		
3	Using the organization's acquisition, accession							
3	(check all that apply):	ori, aria otrier record	s, check any or the	iollowing triat are a	aigi iincarit uso c	n ita concetto	i i itosii	3
	Public exhibition	d	I Dan or ev	change programs				
a	Scholarly research	e		mange programs				
b		e	Other					
C	Preservation for future generations				ament nuvanaa in	Dort VIII		
4	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets							
5	-							٦.,.
Do	to be sold to raise funds rather than to be ma rt IV Escrow and Custodial Arrang					Yes		No
Га	reported an amount on Form 990, Par		ete ir the organizatio	n answered tes c	л голи ээо, га	at iv, mie e, o	ſ	
	Is the organization an agent, trustee, custodia		ion, for contribution	o or other seeds no	t included			
та	3 ,		•			Yes	Г	No
	on Form 990, Part X?				•••••	res	L	100
b	If "Yes," explain the arrangement in Part XIII a	and complete the foll	lowing table:					
						Amour	11.	
С	Beginning balance							
d	Additions during the year					 		
е	Distributions during the year							
f	Ending balance							
	Did the organization include an amount on Fo					Yes	<u></u>	_ No
	If "Yes," explain the arrangement in Part XIII.							
Par	t V Endowment Funds. Complete if					1		
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three years	back (e) Fou	r years	back
1a	Beginning of year balance	1,068,519.			<u> </u>			
b	Contributions	163.	1,068,505.					
C	Net investment earnings, gains, and losses	43,854.	14.					
d	Grants or scholarships				<u> </u>			
е	Other expenditures for facilities							
	and programs							
f	Administrative expenses							
g	End of year balance	1,112,536.	1,068,519.					
2	Provide the estimated percentage of the curre	ent year end balance	(line 1g, column (a)) held as:				
а	Board designated or quasi-endowment	•	%					
b	Permanent endowment > 100.00	%						
	Temporarily restricted endowment	 %						
_	The percentages on lines 2a, 2b, and 2c shou	ld equal 100%.						
За	Are there endowment funds not in the posses	•	tion that are held an	d administered for t	he organization			
-	by:	olon of the organization			J		Yes	No
	(i) unrelated organizations					3a(i)		X
								X
	If "Yes" on line 3a(ii), are the related organizations							
4	Describe in Part XIII the intended uses of the	•		***************************************				L
Par			mont fonds.					
	Complete if the organization answered		Part IV. line 11a. S	ee Form 990. Part X	. line 10.			
	Description of property	(a) Cost or ot			Accumulated	(d) Boo	k valu	
	Becompaint of property	basis (investm		1 '	epreciation	(-,		-
12	Land				ŠES PER P			
	Buildings					1		
	Leasehold improvements				······································	<u> </u>		
	Equipment	1						
	Other Add lines to through to (Column di must as		(action (B) line 10		<u> </u>	 		0.

Schedule D (Form 990) 2017

Schedule D (Form 990) 2017 FOUNDATION,	INC.		*-***** Page 3
Part VII Investments - Other Securities.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11b. See Form 990, Part X, line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or e	nd-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"			
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or e	nd-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)		<u> </u>	
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes"		11d. See Form 990, Part X, line 15.	
(a)	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
<u>「otal. (Column (b) must equal Form 990, Part X, col. (B) line</u> Part X Other Liabilities.	15.)		>
	on Form 000 Dort IV line	11a av 11f Can Farm 000 Bort V line 2	F
Complete if the organization answered "Yes"	on rorm 990, Part IV, line	THE OF THE SEE FORTH 990, Part A, IINE 2	ں,

1.	(a) Description of liability	(b) Book value	
(1)	Federal income taxes		🔲 - 불울빛을 보통하는 말리 통증됐을까요요.
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			그 프라이트 그림 다음 그 등을 가게 되었다.
(8)			
(9)			
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.)		No. 10 Personal Control of Contro

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

Page 4

Schedule D (Form 990) 2017

FOUNDATION, INC.

Schedule D (Form 990) 2017

732054 10-09-17

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 1,023,683. Total revenue, gains, and other support per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12: a Net unrealized gains (losses) on investments 2a Donated services and use of facilities 2b 2c c Recoveries of prior year grants 2d d Other (Describe in Part XIII.) 33,250. 2e e Add lines 2a through 2d 990,433. Subtract line 2e from line 1 3 Amounts included on Form 990, Part VIII, line 12, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b 4a b Other (Describe in Part XIII.) c Add lines 4a and 4b Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) 5 Part XII | Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 1,907,583. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities 2a b Prior year adjustments 2b 2c c Other losses 2d d Other (Describe in Part XIII.) 2e e Add lines 2a through 2d 1.907 3 Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII.) c Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I. line 18.) Part XIII Supplemental Information. Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information. PART V, LINE 4: TO FUND SCHOLARSHIP PROGRAMS PART X, LINE 2: THE FOUNDATION HAS IMPLEMENTED THE ACCOUNTING GUIDANCE FOR UNCERTAINTY IN INCOME TAXES. UNDER THAT GUIDANCE, TAX POSITIONS NEED TO BE RECOGNIZED IN THE FINANCIAL STATEMENTS WHEN IT IS MORE-LIKELY-THAN-NOT THE POSITION WILL BE SUSTAINED UPON EXAMINATION BY THE TAX AUTHORITIES. AS OF JUNE 30, 2017, THE FOUNDATION HAS NO UNCERTAIN TAX POSITIONS THAT QUALIFY FOR EITHER RECOGNITION OR DISCLOSURE IN THE FINANCIAL STATEMENTS. FOUNDATION FILES FEDERAL INCOME TAX RETURNS. RETURNS FILED FOR THE TAX YEARS ENDED ON OR AFTER JUNE 30, 2016 ARE SUBJECT TO EXAMINATION.

JEFFERSON COUNTY PUBLIC EDUCATION FOUNDATION, INC.

Part XIII Supplemental Information (continued) FOUNDATION IS NOT CURRENTLY BEING EXAMINED AND MANAGEMENT BELIEVES ITS FAX-EXEMPT STATUS WOULD BE UPHELD UNDER EXAMINATION.	JEFFERSON COUNTY PUBLIC EDUCATION Schedule D (Form 990) 2017 FOUNDATION, INC.	**_**	****	Page
	Part XIII Supplemental Information (continued)			1 ago
	FOUNDATION IS NOT CURRENTLY BEING EXAMINED AND MANAGEMENT	BELIEVES	ITS	
TAX-EXEMPT STATUS WOULD BE UPHELD UNDER EXAMINATION.				
	TAX-EXEMPT STATUS WOULD BE UPHELD UNDER EXAMINATION.			
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			and the second of	

SCHEDULE (Form 990)

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

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

► Attach to Form 990.

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

Open to Public Inspection

OMB No. 1545-0047

Schedule I (Form 990) (2017) ş Employer identification number ****** READING AND SCHOLARSHIP (h) Purpose of grant EDUCATIONAL PROGRAMS IMAGINATION LIBRARY or assistance METRO GOVT GRANTS X Yes TO FUND VARIOUS Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any SCHOLARSHIPS SCHOLARSHIPS ROGRAMS 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection (g) Description of noncash assistance (f) Method of valuation (book, FMV, appraisal, other) BOOK BOOK BOOK BOOK O. BOOK BOOK ٥. ٥. ٥. 0 o, (e) Amount of assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. 672. 48,901. 14,835, 53,330 12,279 (d) Amount of 1,438,186 cash grant 덛 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table JEFFERSON COUNTY PUBLIC EDUCATION (c) IRC section (if applicable) LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. ****** ******* ****** ************ ****** ************ Enter total number of other organizations listed in the line 1 table Part I General Information on Grants and Assistance (b) EIN criteria used to award the grants or assistance? FOUNDATION, 1 (a) Name and address of organization JEFFERSON COUNTY PUBLIC SCHOOLS 109 EAST BROADWAY NO 302A or government 325 W MAIN ST STE 1110 PIGEON FORGE, TN 37863 LOUISVILLE, KY 40202 LOUISVILLE, KY 40202 LOUISVILLE, KY 40229 DOLLYWOOD FOUNDATION LOUISVILLE, KY 40232 LOUISVILLE, KY 40203 COMMUNITY FOUNDATION Name of the organization SPALDING UNIVERSITY 6700 PRICE LANE RD 111 DOLLYWOOD LANE 3332 NEWBURG ROAD WILT ELEMENTARY Department of the Treasury Internal Revenue Service 845 S 3RD ST Part II N

****** JEFFERSON COUNTY PUBLIC EDUCATION FOUNDATION, INC. Schedule I (Form 990)

Schedule I (Form 990) F OUNDATTION, INC. Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States	N, INC.	vernments and Organ	izations in the Uni		(Schedule I (Form 990), Part II.)		**-***** Page 1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NEW ALBANY - FLOYD COUNTY EDU. FOUNDATION - 4108 CHARLESTOWN RD - NEW ALBANY, IN 47150	***	** ** ** * * **	9,000.	0.0	0. BOOK		IMAGINATION LIBRARY
COCHRAN ELEMENTARY 500 W GAULBERT AVE LOUISVILLE, KY 40208	**	*****	.000,2	0.0	воок		TEACHER EXCELLENCE AWARDS
ST MATTHEWS ELEMENTARY 601 BROWNS LN LOUISVILLE, KY 40207	***************************************	**	5,000.	0.	ВООК		METRO GOVT GRANTS
MOREHEAD STATE UNIVERSITY 150 UNIVERSITY BLVD MOREHEAD, KY 40351	***************************************	* * * *	5,000.	0.	BOOK		SCHOLARSHIPS
					7.441		
							Schedule I (Form 990)

Schedule | (Form 990) (2017) FOUNDATION, INC.

| Part III | Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

Page 2

(f) Description of noncash assistance									
(e) Method of valuation (book, FMV, appraisal, other)			dditional information.		IS THE				
(d) Amount of non- cash assistance			(b); and any other ac		US PROGRAMS				
(c) Amount of cash grant			ie 2; Part III, column		S TO VARIOUS				
(b) Number of recipients			 juired in Part I, lin		T OF FUNDS				
(a) Type of grant or assistance			Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.	PART I, LINE 2:	THE BOARD APPROVES THE DISBURSEMENT OF	ORGANIZATION SUPPORTS.			

Schedule I (Form 990) (2017)

732102 11-01-17

SCHEDULE 0

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

JEFFERSON COUNTY PUBLIC EDUCATION FOUNDATION. INC.

Employer identification number **_****

1 COMBILLON, LICO
FORM 990, PART VI, SECTION B, LINE 11B:
THE SECRETARY/TREASURER REVIEWS THE 990 BEFORE FILING AND THE BOARD REVIEWS
A COPY OF THE 990 AFTER IT IS FILED.
FORM 990, PART VI, SECTION C, LINE 19:
THESE DOCUMENTS ARE MADE AVAILABLE UPON REQUEST.
PART XII, LINE C
THIS PURPOSE HAS NOT CHANGED FROM THE PRIOR YEAR.

Form **8868** (Rev. January 2017)

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

Department of the Treasury Internal Revenue Service File a separate application for each return.

Information about Form 8868 and its instructions is at www.irs.gov/form8868 .

OMB No. 1545-1709

Electronic filling (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile, click on Charities & Non-Profits, and click on e-file for Charities and Non-Profits. Automatic 6-Month Extension of Time. Only submit original (no copies needed). All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Enter filer's identifying number Name of exempt organization or other filer, see instructions. Employer identification number (EIN) or Type or print JEFFERSON COUNTY PUBLIC EDUCATION **_**** FOUNDATION, INC. File by the Number, street, and room or suite no. If a P.O. box, see instructions. Social security number (SSN) due date for filing your P.O. BOX 35368 return. See Instructions City, town or post office, state, and ZIP code. For a foreign address, see instructions. LOUISVILLE, KY 40202 0 1 Enter the Return Code for the return that this application is for (file a separate application for each return) Return **Application** Return Application Is For Code Is For Code Form 990 or Form 990-EZ Form 990-T (corporation) 07 01 Form 990-BL 02 Form 1041-A 80 Form 4720 (individual) 03 Form 4720 (other than individual) 09 10 Form 990-PF 04 Form 5227 Form 6069 11 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 8870 12 Form 990-T (trust other than above) 06 LYNN HUETHER, TREASURER The books are in the care of ▶ 3620 FERN VALLEY ROAD - LOUISVILLE, KY 40219 Telephone No. ► 502-212-3112 Fax No. If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this . If it is for part of the group, check this box 🕨 🦳 and attach a list with the names and EINs of all members the extension is for. MAY 15, 2019 , to file the exempt organization return I request an automatic 6-month extension of time until

➤ X tax year beginning JUL 1, 2017 JUN 30, 2018 , and ending If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any 0. nonrefundable credits. See instructions. За If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and 0. estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.

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

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

for the organization named above. The extension is for the organization's return for:

Form 8868 (Rev. 1-2017)

calendar year

Articles of Incorporation

ORIGINAL COPY FILED SECRETARY OF STATE OF KENTUCKY

ARTICLES OF INCORPORATION OF

JEFFERSON COUNTY PUBLIC EDUCATION FOUNDATE

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

ARTICLE I

Name

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

ARTICLE II

Duration

The corporation shall have perpetual existence.

ARTICLE III

Purposes and Powers

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

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

- B. It is expressly not the purpose of the corporation to carry on propaganda or otherwise attempt to influence legislation, nor to participate or intervene in (including the publication or distributing of statements) any political campaign on behalf of any candidate for public office.
- C. Any other provision of these articles to the contrary notwithstanding, the corporation shall have no capital stock and no power to issue certificates of stock nor to declare dividends; no part of the net earnings of the corporation shall inure to the benefit of any private individual or member; and the corporation shall not carry on any activities denied to: [i] a corporation described in Section 501(c)(3) of the Internal Revenue Code of 1954, as amended, including prohibited transactions defined in Section 503 of the Code; or [ii] a corporation, contributions to which are deductible under Section 170(c)(2) of the Internal Revenue Code of 1954, as amended.

- D. Any other provisions of these articles to the contrary notwithstanding, this corporation shall, if the following provisions of law are ever applicable to it: [i] distribute its income for each fiscal year at such time and in such manner as not to be subject to the tax under Section 4942 of the Internal Revenue Code of 1954, as amended; [ii] not engage in any act of self dealing as defined in Section 4941(d) of the Internal Revenue Code, as amended; [iii] not retain any excess business holdings as defined in Section 4943(c) of the Internal Revenue Code of 1954, as amended; [iv] not make any investments in such manner as to subject the corporation to tax under Section 4944 of the Internal Revenue Code of 1954, as amended; and [v] not make any taxable expenditures as defined in Section 4945(d) of the Internal Revenue Code of 1954, as amended.
- E. In furtherance of the general purposes in Paragraph A, the particular purposes of the corporation are: the solicitation and receipt of gifts, grants and contributions from individuals, groups, corporations and other sources, public and private, to assist and support financially and otherwise the public school system of Jefferson County, Kentucky; to engage in any and all activities which advance education of the citizens of Louisville and Jefferson County, Kentucky through the support of the Jefferson County Public Schools.

ARTICLE IV

Members

The corporation shall have no members.

ARTICLE V

Directors

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

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

ARTICLE VI

Officers

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

ARTICLE VII

Bylaws

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

ARTICLE VIII

Registered Office and Registered Agent

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

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

ARTICLE IX

Exemption From Liability and Indemnification

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

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

ARTICLE X

Dissolution

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

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

ARTICLE XI

Incorporator

The name and address of the Incorporator is:

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

301 964

Signed and acknowledged by the Incorporator at
Moravelle, Kentucky, this the day of Much,
Jalen Sharangh
COMMONWEALTH OF KENTUCKY)
COUNTY OF THEISON
I, the undersigned Notary Public in and for the Commonwealth and County aforesaid, do hereby certify that personally appeared before me and, after having been duly sworn, declared, acknowledged and verified the foregoing to be the Articles of Incorporation of Wilmon County Public Education this the day of March, 1953.
My commission expires: 15/2/- 30, 1984.
Satricia SWebl Notary Public
THIS INSTRUMENT WAS PREPARED BY
G. Alexander Hamilton WYATT, TARRANT & COMBS Citizens Plaza Louisville, Kentucky 40202
A14108 A1408 A1408 A1408

301 + 964

OFFICE OF SECRETARY OF STATE

FRANCES JONES MILLS
- Secretary



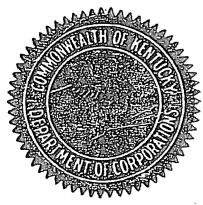
FRANKFORT, KENTUCKY

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

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

The name and	d address of the registered agent of this corporation is
	MALCOIM B. CHANCEY, JR.
NAME	416 WEST JEFFERSON
STREET ADDRESS	LOUISVILLE, KENTUCKY
CITY CTATE	

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



SECRETARY OF STATE

Issued this 14TH day of MARCH, 1983

at Frankfort, Kentucky.

Traver Jones Mills SECRETARY OF STATE

ASSISTANT SECRETARY OF STATE

Cost Estimates

Moore High School / Lighting Quote

QTY ITEM	PRICE	TOTAL
14 Chauvet Slim Par Pro Q USB LED Lights	280	3920
4 ColorBand Pix-M USB Bar Lights	380	1520
1 Chauvet Obey 70 Controller	170	170
1 Chauvet D-Fi USA Wireless Hub	130	130
4 Chauvet D-Fi USB Wireless Transponders	59	236
22 Low Mass Clamps	15	330
22 Mounting Safety Lines	8	176
15 5' DMX Cables	12	180
1 Chauvet 120st follow spot	700	700
Installation, Fabrication, Wiring	2550	2550

\$9912 Total

Mark Maxwell
www.maxwellshouseofmusic.com
www.thelouisvillecrashers.com
w812-283-3304
c502-939-8341

IRS Form W9

(Rev. October 2018) Department of the Treasury Internal Revenue Service

Request for Taxpayer Identification Number and Certification

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

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

*DATES CONTRACTOR OF THE PARTY							
	1 Name (as shown on your income tax return). Name is required on this line; Sefferson County Public	do not leave this line blank. Education Founda	tion				
	2 Business name/disregarded entity name, if different from above						
in page 3.	3 Check appropriate box for federal tax classification of the person whose national following seven boxes. Individual/sole proprietor or C Corporation S Corporation	, mana,	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):				
e.	single-member LLC	Exempt payee code (if any)					
r typ	Limited liability company. Enter the tax classification (C=C corporation,		mbouguester account de manus				
Print or type. See Specific Instructions on page	Note: Check the appropriate box in the line above for the tax classificati LLC if the LLC is classified as a single-member LLC that is disregarded another LLC that is not disregarded from the owner for U.S. federal tax is disregarded from the owner should check the appropriate box for the						
Seci	Other (see instructions) > Non- Deafit / Ac Orgation		(Applies to accounts maintained outside the U.S.)				
Se	5 Address (number, street, and apt. or suite no.) See instructions. 3332 New hura Road	Requester's name	and address (optional)				
တ္တို	3332 New hurg Road 6 City, state, and ZIP code						
	Louisville, KY 40218						
T	7 List account number(s) here (optional)						
Part							
backup	our TIN in the appropriate box. The TIN provided must match the nar withholding. For individuals, this is generally your social security nur	me given on line 1 to avoid Social sember (SSN). However, for a	curity number				
resident	t alien, sole proprietor, or disregarded entity, see the instructions for	Part I, later, For other					
TIN, late	it is your employer identification number (ÉIN). If you do not have a	number, see How to get a or					
Note: If	the account is in more than one name, see the instructions for line 1		identification number				
Number	To Give the Requester for guidelines on whose number to enter.						
		61	- 110/4/11/20				
Linder o	Certification enalties of perjury, I certify that:						
1. The n	umber shown on this form is my correct taxpayer identification numl	per (or I am waiting for a number to be iss	sued to me); and				
no lor	not subject to backup withholding because: (a) I am exempt from bace (IRS) that I am subject to backup withholding as a result of a failur nger subject to backup withholding; and	ckup withholding, or (b) I have not been n e to report all interest or dividends, or (c)	otified by the Internal Revenue the IRS has notified me that I am				
	U.S. citizen or other U.S. person (defined below); and						
	ATCA code(s) entered on this form (if any) indicating that I am exemp						
ou have acquisition other tha	ntion instructions. You must cross out item 2 above if you have been not failed to report all interest and dividends on your tax return. For real eston or abandonment of secured property, cancellation of debt, contribution interest and dividends you are not required to sign the certification, but the contribution interest and dividends you are not required to sign the certification, but the contribution is the contribution of the contribution	tate transactions, item 2 does not apply. Fo	r mortgage interest paid, (IRA), and generally, payments				
Sign Here	Signature of U.S. person ▶	Date > 6/4/1°	1				
	eral Instructions	Form 1099-DIV (dividends, including funds)	those from stocks or mutual				
ioted.	eferences are to the Internal Revenue Code unless otherwise	Form 1099-MISC (various types of inc proceeds)	come, prizes, awards, or gross				
elated to	evelopments. For the latest information about developments b Form W-9 and its instructions, such as legislation enacted were published, go to www.irs.gov/FormW9.	 Form 1099-B (stock or mutual fund satransactions by brokers) 					
•	ese of Form	• Form 1099-S (proceeds from real esta					
-		• Form 1099-K (merchant card and third					
 in individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer sentification number (TIN) which may be your social security number Form 1098 (home mortgage interest), 1098-E (student loan interest 1098-T (tuition) Form 1099-C (canceled debt) 							
SSN), ind	dividual taxpayer identification number (ITIN), adoption	Form 1099-C (canceled debt)Form 1099-A (acquisition or abandonn	ant of contrad property				
EIN), to r mount re	identification number (ATIN), or employer identification number eport on an information return the amount paid to you, or other eportable on an information return. Examples of information	Use Form W-9 only if you are a U.S. palien), to provide your correct TIN.					
eturns in	clude, but are not limited to, the following. 099-INT (interest earned or paid)	If you do not return Form W-9 to the r be subject to backup withholding. See V					

later.

• Form 1099-INT (interest earned or paid)

Annual Audit

JEFFERSON COUNTY PUBLIC EDUCATION FOUNDATION, INC.

FINANCIAL STATEMENTS

YEARS ENDED JUNE 30, 2017 AND 2016

JEFFERSON COUNTY PUBLIC EDUCATION FOUNDATION, INC.

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AND CHANGES IN NET ASSETS – CASH BASIS	5-6
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500 NORTH HURSTBOURNE PARKWAY, SUITE 150, LOUISVILLE, KENTUCKY 40222 . PHONE: 502.423.0311 . FAX: 502.339.7103

Independent Auditor's Report

Board of Directors

Jefferson County Public Education Foundation, Inc.
Louisville, Kentucky

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

Management's Responsibility for the Financial Statements

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

Auditor's Responsibility

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

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

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

Opinion

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

Basis of Accounting

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

Louisville, Kentucky October 19, 2018

Monroe Shine

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

ASSETS

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

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

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

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

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

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

Те	Other mporarily	emporarily Restricted	De	Board esignated		Other			
R	estricted	Total	P	rograms	Uı	Unrestricted		Total	
\$	553,183	\$ 704,183	\$	-	\$	143,425	\$	847,608	
	1	4		-		132		136	
	-	-		(37,727)		37,727		-	
	553,184	704,187		(37,727)		181,284		847,744	
	754.041	800.016		22.010		27.544		952 279	
	754,941	800,916		23,818		27,544		852,278	
	130,013	130,013		-		0.071		130,013	
	884,954	 930,929		23,818		9,871 37,415		9,871 992,162	
	001,551	750,727		25,010		37,113		772,102	
	(331,770)	(226,742)		(61,545)		143,869		(144,418)	
	972,338	 1,276,339		69,035		13,598		1,358,972	
\$	640,568	\$ 1,049,597	\$	7,490	\$	157,467	\$	1,214,554	

(1) SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Nature of Operations

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

Basis of Presentation

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

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

<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.

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.

(1 - continued)

Income Taxes

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

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

(2) CASH AND CASH EQUIVALENTS

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

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

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

(3) **CONTRIBUTIONS**

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

(4) BOARD DESIGNATED NET ASSETS

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

(5) OTHER TEMPORARILY RESTRICTED NET ASSETS

Other programs consisted of the following as of June 30:

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

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

(6) **CONCENTRATION**

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

(7) PERMANENTLY RESTRICTED ENDOWMENT

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

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

(7 - continued)

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

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

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

(7 - continued)

Endowment net asset composition by type of fund as of June 30, 2017 is as follows:

			Total
	orarily <u>ricted</u>	ermanently Restricted	ndowment Net Assets
Donor-restricted endowment funds	\$ 14	\$ 1,068,505	\$ 1,068,519

Changes in endowment net assets as of June 30, 2017 are as follows:

	-	oorarily tricted	rmanently Restricted	Total ndowment Net Assets
Endowment net assets, beginning of year	\$	-	\$ -	\$ -
Contributions		-	1,068,505	1,068,505
Investment income		14	_	 14
Endowment net assets, end of year	\$	14	\$ 1,068,505	\$ 1,068,519

(8) 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 October 19, 2018, the date these financial statements were available to be issued. The Foundation has determined that there are no such subsequent events.

JEFFERSON COUNTY PUBLIC EDUCATION FOUNDATION, INC.

General Information

Organization Number 0175787

Name IEFFERSON COUNTY PUBLIC EDUCATION FOUNDATION, INC.

Profit or Non-Profit N - Non-profit

Company Type KCO - Kentucky Corporation

Status A - Active Standing G - Good

State KY

File Date 3/14/1983 **Organization Date** 3/14/1983 **Last Annual Report** 4/19/2019

Principal Office IEFFERSON COUNTY PUBLIC EDUCATION FOUNDATION

JAEGER EDUCATION CENTER- ATTN: SAM CORBETT EXEC

3332 NEWBURG RD LOUISVILLE, KY 40218

Registered Agent WT&C CORPORATE SERVICES, INC.

500 W. JEFFERSON STREET

SUITE 2800

LOUISVILLE, KY 40202

Current Officers

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

Individuals / Entities listed at time of formation

MARY HELEN BYCK Director

Director **JOAN RIEHM Director** I W HUGHES **Director ORSON OLIVER**

Director WOODFORD R PORTOR MALCOLM B CHANCEY JR Incorporator

Images available online

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

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