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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

Open to Public Inspection

A F	or the	2008 calendar year, or tax year beginning JUL 1, 2008 and ending	JUN 30, 2009
B	heck if applicable	Please Use IRS	D Employer identification number
	Addres change Name	s label or PROJECT LEAD THE WAY	14-1816385
누	change Initial	Dolling Business As	
	return Termin- ation	See Number and street (or P 0 box if mail is not delivered to street address) Room/suil Instructionstructure 21 CORPORATE DRIVE 105	518-877-6491
X	Amend	ed tions City or town, state or country, and ZIP + 4	G Gross receipts \$ 23,238,230.
	Applica		H(a) Is this a group return
	pending	F Name and address of principal officer:DR . VINCE BERTRAM	for affiliates? Yes X No
		SAME AS C ABOVE	H(b) Are all affiliates included? Yes No
1 1	ax-exe	mpt status: X 501(c) (3	If "No," attach a list. (see instructions)
		e: ► WWW.PLTW.ORG	H(c) Group exemption number ▶
			ar of formation 1999 M State of legal domicile NY
*****		Summary	
		Briefly describe the organization's mission or most significant activities: PROMOTE,	DEVELOP AND ENCOURAGE
Governance		SCIENCE, TECHNOLOGY, ENGINEERING, MATH AND RE	LATED COURSES OF STUDY.
Ē		Check this box Fig. if the organization discontinued its operations or disposed of mo	
Š	ł	Number of voting members of the governing body (Part VI, line 1a)	3 7
යි		Number of independent voting members of the governing body (Part VI, line 1b)	4 6
ಿ ಶ		Total number of employees (Part V, line 2a)	5 43
Activities	i	Total number of employees (Fart V, line 2a) Total number of volunteers (estimate if necessary)	6 500
Ę		Total gross unrelated business revenue from Part VIII, line 12, column (C)	7a 0.
¥	i	•	76 0.
_	0 1	Net unrelated business taxable income from Form 990-T, line 34	Prior Year Current Year
			3,353,439. 12,344,558.
e		Program service revenue (Part VIII, line 2g)	3,333,433. 12,344,330.
Revenue	1	Program service revenue (Part VIII, line 2g)	27,199.
æ	1	Program service revenue (Part VIII, line 2g) Newstment income (Part VIII, column (A), lines 3, 4 and 7d) Other revenue (Part VIII, column (A), lines 5, 6d, 8d, 10c, and 11c)	3,331,074. 6,830,247.
		Diner revenue (Part VIII, Column (A), lines 5, 6d, qc, 9c, 10c, and 11e)	6,711,712. 19,174,805.
		otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	335,992.
	1	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	333,332.
	i .	Benefits paid to or for members (Part IX, column (A), line 4)	579,705. 3,198,987.
Expenses	l	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	162,837. 201,157.
ē	ì	Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) 1,336,405.	102,037. 201,137.
Ä	1		5,318,850. 3,718,878.
_	l .	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	6,061,392. 7,455,014.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	650,320. 11,719,791.
- S	19 F	Revenue less expenses. Subtract line 18 from line 12	
Net Assets or Fund Balances			Beginning of Year
Sse	20]	Total assets (Part X, line 16)	
age d	21 7	Total liabilities (Part X, line 26)	4,917,982. 4,093,765. <104,877. 12,534,369.
		Net assets or fund balances Subtract line 21 from line 20	<104,877.> 12,534,369.
Pa	art II	Signature Block	and to the best of my lenguisely and helpf it is the account
		Under penalties of penury, I declare that I have examined this return, including accompanying schedules and statement and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.	s, and to the best of my knowledge and belief, it is true, correct,
	1	X / lii M ST +	18 /-10-12
Sig		Signature of officer	Date
Her	e	•	
]	DR. VINCE BERTRAM, CHIEF EXECUTIVE OFFICER	
		Type or print name and title	Charles of Decorate adoptions where
Paid		1/3/12	Check if Preparer's identifying number (see instructions)
		<u> </u>	employed
•	Only	Firm's name (or yours if MARVIN AND COMPANY, P.C.	EIN ►
	· 1	self-employed), address, and	
		ZIP+4 LATHAM, NY 12110-1405	Phone no ► 518-785-0134
May	the IR	S discuss this return with the preparer shown above? (see instructions)	Yes No

Form **990** (2008)

) (Revenue \$

5, 178, 256. (Must equal Part IX, Line 25, column (B).)

including grants of \$

Total program service expenses ▶\$

14-1816385

Part IV Checklist of Required Sch

1 Is the croganization described in section 5016(S) or 4947(a)(1) (other than a private foundation)? 1 If "Res." compiler Schedule or A 2 Is the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," compilete Schedule Or, Part II 3 X 4 Section 5016(S) organizations. Did the organizations late we organization subject to the section 6033(s) notice and reporting requirement and proxy tax / If "Yes," compilete Schedule Or, Part III 5 Did the organization markinal any donor divides druds or any seconitis where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II 5 Did the organization reserved in orbid a conservation easement, including easements to preserve open gaze, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part III 7 X 8 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X or provide credit courseling, debt management, credit repair, or debt negosiation services? If "Yes," complete Schedule D, Part V 10 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X or provide credit courseling, debt management, credit repair, or debt negosiation services? If "Yes," complete Schedule D, Part V 10 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X or provide credit courseling, debt management, credit repair, or debt negosiation services? If "Yes," complete Schedule D, Part V 11 X 12 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed to part X, line and Y, line 21; or yes, complete Schedule D, Part V 12 Did the organization report an am				Yes	No
If Yes," complete Schedule A Schedule B Schedule G Contributors?	1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
Did the organization engage in direct or indirect political campagin activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part II 4 X 4 X 4 X 5 5 5 5 5 5 5 5 5		If "Yes," complete Schedule A	1	X	
public office? If "Yes," complete Schedule C, Part I Section 501(c)(8), organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II Section 501(c)(4), 601(c)(5), and 601(c)(6) organizations. Is the organization subject to the section 603(d) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III Did the organization mannan any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V Did the organization necevies an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Part X, IVI, IVI, IVI, IVI, IVI, IVI, IVI, I	2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
Section 501 (c)(8) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II Section 501 (c)(8), and 601 (c)(8) organizations. Is the organization subject to the section 603 (8) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II V Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part IV V Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV V Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV V Did the organization report an amount in Part X, line 21; 3, 15, or 25? If "Yes," complete Schedule D, Part V VIII, IX, or X as applicable Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Part X VIII, IX, and XIII IX X Did the organization a school as descined in section 1700(b)(10)(b)? If "Yes," complete Schedule E Did the organization accordance with GAAP? If "Yes," complete Schedule D, Part X X, XII, and XIII IX X Did the organization have aggregate revenues or expenses of more than \$5,000 of part X X, XII, and XIII IX X Did the organization report one Part IX, column (A),	3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
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10 Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V I Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? 11 Did the organization as checkule D, Part SV, MI, VIII, III, X V X xs applicable prepared in accordance with GAAP? If "Yes," complete Schedule D, Part SV, MI, VIII, III, X V X xs applicable prepared in accordance with GAAP? If "Yes," complete Schedule D, Part XI, XII, and XIII I I X I Is the organization as chool as described in section 170(b)(1)(A)(II)* If "Yes," complete Schedule E I 33 X I A Did the organization maintain an office, employees, or agents outside of the U.S.? I I I I X I I I I I I I X I I I I I I	9				
11 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable 2 Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII 13 Is the organization a school as described in section 170(b)(1)(A)(II)* If "Yes," complete Schedule E 14 Did the organization and annation an office, employees, or agents outside of the U.S.? 15 Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part II 15 Did the organization proof on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III 17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part III 18 Did the organization preport more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part III 19 Did the organization operate one or more hospitals? If "Yes," complete Schedule H 20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H 21 Did the organization preport more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22 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," complete Schedule I, Parts I and III 23 Did the organization neart any proceeds of tax-exempt bonds beyond a temp			9		
## "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable 12 Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII 13 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 14 Did the organization maintain an an office, employees, or agents outside of the U.S.? 15 Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part II 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II 16 Did the organization report more than \$15,000 on Part XII, column (A), line 11e? If "Yes," complete Schedule G, Part II 17 Did the organization report more than \$15,000 on Part XII, column (A), line 11e? If "Yes," complete Schedule G, Part II 18 Did the organization report more than \$15,000 on Part XII, lines 1 cand 8a? If "Yes," complete Schedule G, Part II 19 Did the organization operate one or more hospitals? If "Yes," complete Schedule H 20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H 21 Did the organization appeared to the spondance of the last day of the year, that was issued after December 31, 2002? If "Yes," complete Schedule I, Parts I and III 21 Did the organization and the secondary of the year of the year of the year, that was issued after December 31, 2002? If "Yes," complete Schedule I, Parts I and III 22 Did the organization and the activation of the last day of the year, that was issued after December 31, 2002? If "Yes," complete Schedule I, Part II 23 Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified per			10	-	X
Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII is the organization as chool as described in section 170(b)(1)(A)(I)? If "Yes," complete Schedule E 13	11			.,	
prepared in accordance with GARP? If "Yes," complete Schedule D, Parts XI, XII, and XIII 13 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 14 Did the organization maintain an office, employees, or agents outside of the U.S.? 15 Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of garres or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III 17 Did the organization report more than \$15,000 on Part IX, column (A), line 11° If "Yes," complete Schedule G, Part II 18 Did the organization report more than \$15,000 on Part IX, column (A), line 11° If "Yes," complete Schedule G, Part II 19 Did the organization report more than \$15,000 on Part IX, column (A), line 11° If "Yes," complete Schedule G, Part II 19 Did the organization report more than \$5,000 on Part IX, column (A), line 11° If "Yes," complete Schedule I, Parts I and II 20 Did the organization report more than \$5,000 on Part IX, column (A), line 11° If "Yes," complete Schedule I, Parts I and III 21 Did the organization naver "Yes" to Part VIII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule I, Parts I and III 22 Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$10,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K If "No", go to question 25 24b Did the organization maintain an escrow account other than a refunding escrow at any time during the year to de			11	_X_	
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any tax-exempt bonds? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a X b Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I 25b X 26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III 28 X	Ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a X b Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I 25b X 26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? 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, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III 27 X	C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I b Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I 25b X 26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III 28 X		any tax-exempt bonds?	24c		
disqualified person during the year? If "Yes," complete Schedule L, Part I b Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I 25b X 26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III 28 X 29 X	d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
b Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I 25b X Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 26 X Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III 27 X	25a	• • • • • • • • • • • • • • • • • • • •			
prior year? If "Yes," complete Schedule L, Part I Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III 25b X Z6 X			25a		X
Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 26 X Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III 27 X	b				
person outstanding as of the end of the organization's tax year? 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, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III 27 X			25b		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III 27 X	26		_		v
contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III			26		X
	21		ο-		v
		contributor, or to a person related to such an individual / if "res," complete Schedule L, Part III		000 /	

Part W Checklist of Required Schedules (continued)

			Yes	NO
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an			
	indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other			
	person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	28a		X
b	Have a family member who had a direct or indirect business relationship with the organization?			
	If "Yes," complete Schedule L, Part IV	28b		X
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional	['		
	corporation) doing business with the organization? 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			
	contributions? If "Yes," complete Schedule M	30		_X_
31	Did the organization liquidate, terminate, or dissolve and cease operations?	•		
	If "Yes," complete Schedule N, Part I	31		<u>X</u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		<u>_x</u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	ł		
	sections 301.7701-2 and 301.7701-37 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, Parts II, III, IV, and V, line 1	34	X	
35	is any related organization a controlled entity within the meaning of section 512(b)(13)?			}
	If "Yes," complete Schedule R, Part V, line 2	35		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			}
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X

Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	1 1		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns. Enter -0- if not applicable	07		
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0		
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X	ļ
2a	Enter the number of employees reported on Form W·3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return	43		}
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a_		<u> </u>
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	İ		
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	. 4a	ļ	X
	If "Yes," enter the name of the foreign country:	_		
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and			
	Financial Accounts.			,,
		_5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		<u> </u>
	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited	_		
	Tax Shelter Transaction?	<u>5c</u>		X
	Did the organization solicit any contributions that were not tax deductible?	6a		
Ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	6.		
_	were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).	70	1	х
	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	7a 7b		^
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	76	 	
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	7c		х
	to file Form 8282? If "Yes." indicate the number of Forms 8282 filed during the year 7d	70		
	If "Yes," indicate the number of Forms 8282 filed during the year Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	\dashv		
е	benefit contract?	7e]	X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
g h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3)			
•	supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have		1	
	excess business holdings at any time during the year?	8		
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a	<u> </u>	
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b_	<u> </u>	ļ
10	Section 501(c)(7) organizations. Enter: N/A			
а	Initiation fees and capital contributions included on Part VIII, line 12			
ь	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	_		
11	Section 501(c)(12) organizations. Enter: N/A			
а	Gross income from members or shareholders . 11a	_		
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)	\dashv		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	 	
<u>b</u>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b		1	1

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

<u>Sec</u>	ction A. Governing Body and Management			
			Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances,			
	processes, or changes in Schedule O. See instructions.			
1a		7		
b	Enter the number of voting members that are independent	5		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2	X	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors or trustees, or key employees to a management company or other person?	3		_X_
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4	X	
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5_		X
6	Does the organization have members or stockholders?	6_		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the			
	governing body?	7a	X	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			
	by the following:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	_
9a	Does the organization have local chapters, branches, or affiliates?	9a		_X_
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,	Ì		
	and branches to ensure their operations are consistent with those of the organization?	9ь		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must	1		
	describe in Schedule O the process, if any, the organization uses to review the Form 990	10	X	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	1		
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11	<u></u>	<u>X</u>
Sec	tion B. Policies			
			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise	1		
	to conflicts?	12b		<u>X</u>
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	1		
	in Schedule O how this is done	12c	X	
13	Does the organization have a written whistleblower policy?	13	_	<u>X</u>
14	Does the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision:		v	
	The organization's CEO, Executive Director, or top management official?	15a	X	
D	Other officers or key employees of the organization?	15b	Х	
40.	Describe the process in Schedule O. (see instructions)			
ıoa	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	1	!	v
_	taxable entity during the year?	16a		X
0	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation			
	to total condition among a condition with a mile of a developed by the condition of a condition of the condition to			
	In joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's	40.		
800	exempt status with respect to such arrangements?	16b		
	exempt status with respect to such arrangements? tion C. Disclosure		TT	K C
17	exempt status with respect to such arrangements? tion C. Disclosure List the states with which a copy of this Form 990 is required to be filed NY, DC, AK, AZ, AR, CA, CO, CT, GA	A,HI	, IL	,KS
Sec 17 18	exempt status with respect to such arrangements? Ition C. Disclosure List the states with which a copy of this Form 990 is required to be filed NY, DC, AK, AZ, AR, CA, CO, CT, G. Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available	A,HI	, IL	,KS
17	exempt status with respect to such arrangements? Ition C. Disclosure List the states with which a copy of this Form 990 is required to be filed NY, DC, AK, AZ, AR, CA, CO, CT, G. Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available public inspection. Indicate how you make these available. Check all that apply.	A,HI	, IL	,KS
17 18	exempt status with respect to such arrangements? Ition C. Disclosure List the states with which a copy of this Form 990 is required to be filed NY, DC, AK, AZ, AR, CA, CO, CT, G. Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available public inspection. Indicate how you make these available. Check all that apply. Own website Another's website X Upon request	A, HI		,KS
17	exempt status with respect to such arrangements? Ition C. Disclosure List the states with which a copy of this Form 990 is required to be filed NY, DC, AK, AZ, AR, CA, CO, CT, G. Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available public inspection. Indicate how you make these available. Check all that apply. Own website Another's website X Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, a	A, HI		,KS
17 18 19	exempt status with respect to such arrangements? Ition C. Disclosure List the states with which a copy of this Form 990 is required to be filed NY, DC, AK, AZ, AR, CA, CO, CT, G. Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available public inspection. Indicate how you make these available. Check all that apply. Own website Another's website X Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, a statements available to the public.	A, HI e for	ıncıal	, KS
17 18	exempt status with respect to such arrangements? Ition C. Disclosure List the states with which a copy of this Form 990 is required to be filed NY, DC, AK, AZ, AR, CA, CO, CT, G. Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available public inspection. Indicate how you make these available. Check all that apply. Own website Another's website X Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, a statements available to the public. State the name, physical address, and telephone number of the person who possesses the books and records of the organization.	A, HI e for	ıncıal	,KS
17 18 19	exempt status with respect to such arrangements? Ition C. Disclosure List the states with which a copy of this Form 990 is required to be filed NY, DC, AK, AZ, AR, CA, CO, CT, G. Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available public inspection. Indicate how you make these available. Check all that apply. Own website Another's website X Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, a statements available to the public.	A, HI e for	ıncıal	, KS

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

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

- 1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- 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.

(A)	(B)			(0				(D)	(E)	(F)
Name and Title	Average	ours (check all that apply)		Reportable	Reportable	Estimated				
	hours per week				compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations			
HERMANN VIETS										
DIRECTOR	5.00	X	ļ .					0.	0.	0.
MARCIA PETERSON										
DIRECTOR	5.00	X				L		0.	0.	0.
JAMES RAHN										
DIRECTOR	5.00	X						0.	0.	0
KURT LIEBICH					ŀ				-	
DIRECTOR	5.00	X	<u> </u>					0.	0.	0
FRANK ZAFFINO										
DIRECTOR	5.00	X			<u> </u>	<u> </u>		0.	0.	0
GENE BOTTOMS						}]	}		
DIRECTOR	5.00	X				<u> </u>		0.	0.	0.
SUELLEN REED						ŀ				
DIRECTOR	5.00	X		<u> </u>		<u> </u>		0.	0.	0 .
CECIL SCHNEIDER				-						
DIRECTOR	5.00	X		ļ		ļ	<u> </u>	0.	0.	0 .
JOHN LOCK		ļ		l					_	
CHIEF EXECUTIVE OFFICER	40.00	<u> </u>	<u> </u>	X		<u> </u>		0.	0.	0
RICHARD LIEBICH				l						- 0
CHAIR	5.00	ļ	<u> </u>	Х	_	<u> </u>	<u> </u>	0.	130,000.	5 , 267
JAMES SULLIVAN	1 00					ĺ				•
EXECUTIVE VICE PRESIDENT	1.00	<u> </u>	↓ _	X	_	<u> </u>	<u> </u>	0.	0.	0
RICHARD BLAIS	40.00	ŀ					1	162 600		20 500
VICE PRESIDENT	40.00	\vdash	 —	X				163,680.	0.	20,500
NIEL TEBBANO	40 00							164 720		10 000
VP & SECRETARY	40.00			X			⊢	164,738.	0.	19,992
RICHARD GRIMSLEY VP PROGRAMS	40.00	ſ		[x		[140,662.	0.	15 700
JOY GARTON KRUEGER	40.00	\vdash	\vdash	\vdash	^	├-	\vdash	140,002.		15,788
DIR.ASSESSMENT & EVALUAT	40.00					X		111,824.	0.	_
DIR.ASSESSMENT & EVALUAT	40.00	\vdash	\vdash	┢╌		^	-	111,024.		0.
				<u> </u>		<u> </u>				
						}	{			
						<u> </u>		<u> </u>		Ĺ

1- ¢1	Section A. Officers, Directors, To	1	npic	yee			ngn	est	(D)	ees (continuea) (E)	· [(F)	
	(A) Name and title	(B) Average hours per	⊢∸	l heck	Posi			ly)	Reportable compensation from	Reportable compensation from related	n	am	imate ount other	
		week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MIS		compensation from the organization and related organizations		e on ed
		-	<u> </u>											
							_							
			-											
							!							
				_			-							
			-						-					
	Total .		<u> </u>			<u> </u>			580,904.	130,00	00.	6:	1,5	47.
2	Total number of individuals (including the	se in 1a) who re	ceiv	ed r	nore	tha	ın \$1	00,	,000 in reportable		•			4
	compensation from the organization	*											Yes	No
3	Did the organization list any former office line 1a? If "Yes," complete Schedule J for	such individua	ı									3		х
4	For any individual listed on line 1a, is the and related organizations greater than \$1									the organization		4	Х	
5	Did any person listed on line 1a receive of the organization? If "Yes," complete Sche				fron	n an	y un	rela	ted organization for sen	rices rendered to		5		х
Sec 1	tion B. Independent Contractors Complete this table for your five highest of	compensated in		ende	ent d	cont	ract	ors	that received more than	\$100,000 of com	noensa	tion f	rom	
_	the organization.								T	· · · · · · · · · · · · · · · · · · ·				
	(A) Name and busine	ss address	_						(B) Description of	services	Co	(Comper	nsatio	n
35	MINGTON GROUP 1 EAST CONESTOGA ROAD ICENTER TECHNOLOGIES	, WAYNE,	P	<u>A_</u>	19	08	7	•	FUNDRAISING	COUNSEL		20	1,1	57.
	E. 31ST ST, FLR 6, N	EW YORK,	N	Υ	10	01	6		CONSULTING			17	2,2	57.
													_	
2	Total number of independent contractors	(including thos	se in	1) w	ho ı	ece	ived	mo	ore than \$100,000 in con	npensation				

PROJECT LEAD THE WAY

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Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	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 governments and				
	organizations in the U.S. See Part IV, line 21	297,166.	297,166.		·····
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22	38,826.	38,826.		***************************************
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
`	trustees, and key employees	584,645.	584,645.		
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and		ļ		
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	1,903,347.	1,330,260.	217,977.	355,110.
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)	157,988.	53,161.	88,820.	16,007.
9	Other employee benefits	210,270.	141,387.	26,310.	16,007. 42,573. 37,498.
10	Payroll taxes	342,737.	144,534.	160,705.	37,498.
11	Fees for services (non-employees):				
а	Management				
b	Legal	46,646.	544.	46,102.	
C	Accounting .	15,112.		15,112.	
d	Lobbying	66,057.	66,057.		
е	Professional fundraising services See Part IV, line 17	201,157.			201,157.
f	Investment management fees				
9	Other	158,442.	158,442.		
12	Advertising and promotion	218,805.	14,743.	1,000.	203,062.
13	Office expenses	249,449.	181,757.	67,692.	
14	Information technology	128,296.	1,956.	52,917.	73,423.
15	Royalties				
16	Occupancy	190,296.	31,458.	157,840.	998.
17	Travel .	490,084.	302,711.	5,632.	181,741.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	159,526.	105,682.		53,844.
20	Interest .	46,300.		46,300.	
21	Payments to affiliates .	005 000	205 225		
22	Depreciation, depletion, and amortization	205,983.	205,983.		
23	Insurance	65,525.	26,504.	39,021.	
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
а	ALL OTHER PROGRAM EXPEN	780,034.	594,117.	14,925.	170,992.
b	STI & ASSESSMENT	345,940.	345,940.		
c	HSTW/SREB EXPENSE	222,989.	222,989.		
d	CURRICULUM & EVALUATION	194,504.	194,504.		
е	BIOMEDICAL	134,890.	134,890.		
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	7,455,014.	5,178,256.	940,353.	1,336,405.
26	Joint Costs. Check here ▶ ☐ If following				
	SOP 98-2 Complete this line only if the organization		ł		
	reported in column (B) joint costs from a combined	İ			
	educational campaign and fundraising solicitation		ļ	j	

			(A) Beginning of year		(B) End of year
		O-sh and independent of the company	196,261	1	1,623,043.
	1	Cash - non-interest-bearing	73,202		1,023,043.
ĺ	2	Savings and temporary cash investments .	228,204		9,700,694.
	3	Pledges and grants receivable, net	1,335,665		1,437,031.
1	4	Accounts receivable, net	1,333,003	-	1/13//0310
1	5	Receivables from current and former officers, directors, trustees, key		5	
	_	employees, or other related parties. Complete Part II of Schedule L			
	6	Receivables from other disqualified persons (as defined under section			
[4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete			
	_	Part II of Schedule L		7	765,000.
ets	7	Notes and loans receivable, net	2,191,851		2,413,980.
Assets	8	Inventories for sale or use	125,208	8 9	105,012.
`	9	Prepaid expenses and deferred charges		9	103,012.
	10a	Land, buildings, and equipment: cost basis 10a 1,125,7	703.		
	b	Less: accumulated depreciation. Complete	391. 447,628	1.0	583,374.
		Part VI of Schedule D 10b 542,3	391. 447,020		303,374.
	11	Investments - publicly traded securities	1	11	
Ì	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments · program-related. See Part IV, line 11		13	
	14	Intangible assets	215,086	14	0.
	15	Other assets. See Part IV, line 11	4,813,105	· 15 · 16	16,628,134.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	1,446,927		2,078,765.
	17	Accounts payable and accrued expenses	1,440,527	18	2,010,103.
	18	Grants payable	192,176		515,000.
	19	Deferred revenue .	132,170	20	313,000.
	20	Tax-exempt bond liabilities			
ies	21	Escrow account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employee	•		
Ē		highest compensated employees, and disqualified persons. Complete Pa	ut II	22	}
_		of Schedule L	3,278,879		1,500,000.
	23	Secured mortgages and notes payable to unrelated third parties	3,210,013	24	1/300/0001
	24	Unsecured notes and loans payable		25	
	25	Other liabilities. Complete Part X of Schedule D	4,917,982		4,093,765.
	26	Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here X and comp		20	1/030//031
		,	iete		
ces	0.7	lines 27 through 29, and lines 33 and 34.	<104,877	. >27	2,276,095.
lan	27	Unrestricted net assets	- 1201/01/	28	10,258,274.
i Ba	28 29	Temporanily restricted net assets Permanently restricted net assets		29	
Net Assets or Fund Balan	29	Organizations that do not follow SFAS 117, check here	d	1	
Ē		complete lines 30 through 34.			
tso	30	Capital stock or trust principal, or current funds		30	
SSe	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
ţ	32	Retained earnings, endowment, accumulated income, or other funds		32	
Š	33	Total net assets or fund balances	<104,877	•>33	12,534,369.
	34	Total liabilities and net assets/fund balances	4,813,105		16,628,134.
Pa		Financial Statements and Reporting			
					Yes No
1	Acco	ounting method used to prepare the Form 990: Cash X Accrus	al Other		
		e the organization's financial statements compiled or reviewed by an indep			2a X
b		e the organization's financial statements audited by an independent accou			2b X
		es" to lines 2a or 2b, does the organization have a committee that assume		ne audi	
•		ew, or compilation of its financial statements and selection of an independe			2c X
3a		result of a federal award, was the organization required to undergo an aud		ngle Au	dit
		and OMB Circular A-133?			3a X
ь		es," did the organization undergo the required audit or audits?			3b
	1 12-1				Form 990 (2008)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

Inspection

Department of the Treasury Internal Revenue Service Employer identification number Name of the organization 14-1816385 PROJECT LEAD THE WAY Reason for Public Charity Status (All organizations must complete this part.) (see instructions)

he o <u>rga</u> nı			ecause it is: (Please che									
1 📙			, or association of churc		ibed in sec	ction 170(b)(1)(A)(i).					
2 🖳) (b)(1)(A)(ii). (Attach Sch									
з 🖳	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H) A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's na											
4 📖	A medical rese	earch organization o	perated in conjunction v	with a hosp	oital descri	bed in sec	ction 170(b)(1)(A)(iii)	. Enter ti	he hospital	s nam	e,
	city, and state									 		
5 📖			enefit of a college or un	iversity ov	vned or op	erated by	a governn	nental unit	describe	ed in		
		b)(1)(A)(iv). (Comple										
6			ent or governmental unit							ممماء مالطنية	ahad u	_
7 📖	_		eives a substantial part o	of its supp	ort from a	governme	ntal unit o	r trom the	generai p	oublic desc	nbea ii	n
		o)(1)(A)(vi). (Complet										
8 🖳			ection 170(b)(1)(A)(vi). (4	·
9 <u>X</u>			eives: (1) more than 33 1									
			ctions - subject to certa									
			xable income (less sect	ion 511 ta	x) from bus	sinesses a	cquired b	y the orgar	nization a	arter June 3	U, 197	э.
		509(a)(2). (Complete					=00/ \/	N /				
'•			erated exclusively to tes								f ana	~-
1			erated exclusively for th									OI .
			tions described in section). See sec	ayeuc nous	ij(S). Cile	SCK THE DOX	llial	
	_		organization and comple				aratad		d 🗔	Type III - 0)thar	
	a Type 1		Type II c	• •	e III • Funct	-	_	more disc				n
e	By checking t	this box, I certify that	t the organization is not	controlled	d organiza	tions does	by one or	ection 500	(a)(1) or (persons ou section 500	(a)/2)	
			nan one or more publicly						(a)(1) U1 :	Section 303	(4)(2).	
f	_		ten determination from t	ne ino ina	ıı ıı ıs a ıyı	pe i, Type	ii, or Type	; III				
		ganization, check th			+	from only	of the follo	nwing nom	one?			
g			rganization accepted an								Yes	No
			rectly controls, either al	one or tog	ettler with	persons o	escribed i	ir (ii) airo (i	ii) DelO**,	11g(i)	1.03	
			ipported organization?							11g(ii)		
			n described in (i) above? person described in (i) o		2	•				11g(iii)		
L			about the organizations			norts						
h	Provide the id	Silowing information	about the organizations	tilo organ	,zation oop	эролю.						
		(II) FIN	(iii) Type of	(iv) Is the o	rganization	(v) Did you	notify the	(vi) Is	the	(vii) An	nount o	of .
` '	of supported anization	(ii) EIN	organization	in col (I) lis	sted in your	organizat	ion in col	lorganizatio	n in col		port	,,
org	amzation		(described on lines 1-9 above or IRC section	governing	document?	(i) of your	support?	(i) organize U S	2	·	•	
			(see instructions))	Yes	No	Yes	No	Yes	No			
		<u></u>		ļ								
	-											
Total		I	1	{	1	L	1	1				

Page 2
(f) Total
· · · · · · · · · · · · · · · · · · ·
(f) Total

>
<u>%</u> %
and

Schedule A (Form 990 or 990-EZ) 2008 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.) Section A. Public Support (e) 2008 Calendar year (or fiscal year beginning in) (a) 2004 **(b)** 2005 (c) 2006 (d) 2007 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 4 Total. Add lines 1 · 3 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 6 Public Support. Subtract line 5 from line 4 Section B. Total Support (e) 2008 (d) 2007 Calendar year (or fiscal year beginning in)▶ (a) 2004 **(b)** 2005 (c) 2006 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 14 14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f)) 15 15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f 16a 33 1/3% support test - 2008. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2007. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the 'facts and circumstances' test. The organization qualifies as a publicly supported organization b 10% -facts-and-circumstances test - 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

	tion A Public Support	rganizations L	Jeschbed III 3	ection 505(a)	(2) (Complete only I	T you checked the bo	x on line 9 of Part I
	etion A. Public Support	(a) 2004	(b) 200E	(a) 2006	(d) 2007	(a) 2008	(f) Total
	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(4) 2007	(e) 2008	uj iotai
'	Gifts, grants, contributions, and						
	membership fees received. (Do not include any "unusual grants.")	1,166,005.	3 299 888	4,244,293.	6,797,329.	3,629,212.	19,136,727.
2	· · · · · · · · · · · · · · · · · · ·	1,100,003.	3,299,000.	4,244,255.	0,737,323.	3,023,212.	13,130,127.
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	3,337,469.	6,447,980.	4,991,572.	6,923,872.	10,810,923.	32,511,816.
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 · 5	4,503,474.	9,747,868.	9,235,865.	13,721,201.	14,440,135.	51,648,543.
7a	Amounts included on lines 1, 2, and		}	1			
	3 received from disqualified persons		1,680,582.	1,724,768.	2,326,930.	500,000.	6,232,280.
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
c	: Add lines 7a and 7b		1,680,582.	1,724,768.	2,326,930.	500,000.	6,232,280.
8	Public support (Subtract line 7c from line 6)						45,416,263.
	ction B. Total Support						
Cale	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	Amounts from line 6	4,503,474.	9,747,868.	9,235,865.	13,721,201.	14,440,135.	51,648,543.
10 <i>a</i>	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources				29,309.		29,309.
t	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b				29,309.		29,309.
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
	Total support (Add lines 9, 10c, 11, and 12)						51,677,852.
14	First five years. If the Form 990 is for	the organization's	first, second, third	l, fourth, or fifth ta	x year as a sectio	n 501(c)(3) organız	ation,
	check this box and stop here						<u> </u>
<u>Se</u>	ction C. Computation of Publi	<u>ic Support Per</u>	centage				
15	Public support percentage for 2008 (I	ine 8, column (f) dr	vided by line 13, c	olumn (f))		15	87.88 <u>%</u>
16	Public support percentage from 2007	Schedule A, Part I	IV-A, line 27g	<u> </u>		16	92.04 %
Se	ction D. Computation of Inves	stment Income	e Percentage			· · · · · · · · · · · · · · · · · · ·	
17	Investment income percentage for 20	08 (line 10c, colum	nn (f) divided by lin	e 13, column (f))		17	.06_%
18	Investment income percentage from 2	2007 Schedule A, F	Part IV-A, line 27h			18	%
198	a 33 1/3% support tests - 2008. If the	organization did no	ot check the box o	n line 14, and line	15 is more than 3	33 1/3%, and line 1	
	more than 33 1/3%, check this box as	nd stop here. The	organization qualif	ies as a publicly s	upported organiza	ation .	$\triangleright X$
t	33 1/3% support tests - 2007. If the	organization did no	ot check a box on	line 14 or line 19a	, and line 16 is mo	ore than 33 1/3%, a	and
	line 18 is not more than 33 1/3%, che						. ▶∐
20	Private foundation. If the organizatio	n did not check a t	box on line 14, 19a	, or 19b, check th	is box and see in	structions	_

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

To be completed by organizations described below.

Attach to Form 990 or Form 990-EZ.

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)). Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then

•	Section 50	1(c)(4), (5), or (6) organiza	ions: Complete Part III.			
Nan	ne of orgar				Emple	oyer identification number
			LEAD THE WAY			<u>14-1816385</u>
Pa	art I-A		y all organizations exem	pt under section	501(c) and section 52	?7 organizations.
		See the instructions for S				
1	Provide a	description of the organiz	ation's direct and indirect politic	al campaign activities		
2		expenditures			▶\$	
3	Volunteer	hours				
P:	art I-B	To be completed by	y all organizations exem	nt under section	501(c)(3).	
t	::	See the instructions for S	•	p. 1	001(0)(0).	
1	Enter the		incurred by the organization und	der section 4955	▶ \$	
2	Enter the	amount of any excise tax	incurred by organization manag	ers under section 495	5 , , ▶\$	
3	If the orga	anization incurred a sectio	n 4955 tax, did it file Form 4720	for this year?		Yes No
48	Was a co	rrection made?	<u>.</u>			Yes No
		describe in Part IV.				
P	art I-C	To be completed by	y all organizations exem	pt under section	501(c), except section	n 501(c)(3).
		See the instructions for S				
1		• •	d by the filing organization for se			
2			ization's funds contributed to ot	her organizations for s		
_	•	unction activities		4	•	
3		·	function expenditures. Add lines	1 and 2 and enter he		
		0-POL, tine 17b ing organization file Form	1100 DOL for this year?		. 🏲 🕏	Yes No
5		. .	nployer identification number (El	N) of all section 527 o	olitical organizations to which	
•			If the amount was paid from the	•	-	• •
		•	separate political organization,		•	
	If addition	nal space is needed, provi	de information in Part IV.			
		(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
					filing organization's	contributions received and
					funds. If none, enter -0	promptly and directly delivered to a separate
						political organization.
						If none, enter -0
				,		
_						
		_ <u></u>				
	_			 		
		_ ,				

Schedule C (Form 990 or 990-EZ) 2008	PROJI	ECT LE	AD THE WAY		14-1	816385 Page 2
Part II-A To be completed by					t filed Form 5768	
(election under sect	tion 501	(h)). See th	ne instructions for Sche	edule C for details.	·•·•	
A Check 🕨 🔲 if the filing organizat	ion belong	gs to an affil	ated group.			
B Check 🕨 🔲 if the filing organizat	ion check	ed box A an	d "limited control" prov	visions apply.		-
		oying Exper eans amou	nditures nts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influ	ence pub	lic opinion (d	grassroots lobbying)			
b Total lobbying expenditures to influ					66,057.	
c Total lobbying expenditures (add lin	-	-	, , , , , , , , , , , , , , , , , , , ,		66,057.	
d Other exempt purpose expenditure		- · · · •			7,388,957.	
e Total exempt purpose expenditures		s 1c and 1d)		7,455,014.	
f Lobbying nontaxable amount. Ente	-			n columns.	522,751.	
If the amount on line 1e, column (a) of			bying nontaxable amo	L I		
Not over \$500,000			the amount on line 1e.			
Over \$500,000 but not over \$1,000	0.000		0 plus 15% of the exce	ess over \$500,000.		
Over \$1,000,000 but not over \$1,5			0 plus 10% of the exce			
Over \$1,500,000 but not over \$17,			0 plus 5% of the exces			
Over \$17,000,000		\$1,000,0				
070, 417,000,000		V .,,,-				
g Grassroots nontaxable amount (en	ter 25% o	f line 1f)	1 ,,,,,,,	•	130,688.	
h Subtract line 1g from line 1a. Enter			an line a		0.	
i Subtract line 1f from line 1c. Enter					0.	
j If there is an amount other than zei				ation file Form 4720		
reporting section 4911 tax for this			,			Yes No
(Some organiz	ations tha	at made a s	eraging Period Under ection 501(h) election structions for lines 2a	do not have to com		
			nditures During 4-Yea		·	
Calendar year (or fiscal year beginning in)	(a)	2005	(b) 2006	(c) 2007	(d) 2008	(e) Total
2a Lobbying non-taxable amount	-		356,102.	404,217.	522,751.	1,283,070.
b Lobbying ceiling amount						
(150% of line 2a, column(e))						1,924,605.
Total lab base a second discuss			1,625.	100.	66,057.	67,782.
c Total lobbying expenditures			1,023.	100.		,,
d Grassroots non-taxable amount			89,026.	101,054.	130,688.	320,768.
e Grassroots ceiling amount (150% of line 2d, column (e))						481,152.
f Grassroots lobbying expenditures						

Schedule C (Form 990 or 990-EZ) 2008 PROJECT LEAD THE WAY 14-1816385 PROJECT LEAD THE WAY 14-1 (election under section 501(h)). See the instructions for Schedule C for details.

		(á	1)	(b)
		Yes	No	Amo	unt
1 E	Ouring the year, did the filing organization attempt to influence foreign, national, state or				
le	ocal legislation, including any attempt to influence public opinion on a legislative matter				
c	or referendum, through the use of:				
a١	olunteers? .		X		
b F	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		X		
c N	Media advertisements?	<u> </u>	X		
	Mailings to members, legislators, or the public?		X		
	Publications, or published or broadcast statements?		X		
	Grants to other organizations for lobbying purposes?		X		
	Direct contact with legislators, their staffs, government officials, or a legislative body?		X		
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?		X		
i (Other activities? If "Yes," describe in Part IV		X		
-	Total lines 1c through 1i			······································	
	Old the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	f "Yes," enter the amount of any tax incurred under section 4912				
	f "Yes," enter the amount of any tax incurred by organization managers under section 4912				
<u>d</u>	f the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		F04/-\/F		
art	III-A To be completed by all organizations exempt under section 501(c)(4)	, section	501(0)(5	, or sect	ion
	501(c)(6). See the instructions for Schedule C for details.			Yes	N
				165	
	Vere substantially all (90% or more) dues received nondeductible by members?		1		
: [Old the organization make only in-house lobbying expenditures of \$2,000 or less?		3		
2 [3 [Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year?	, section	2	, or sect	ion
2 [3 [Old the organization make only in-house lobbying expenditures of \$2,000 or less?		2 3 501(c)(5		ion
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Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

2008 Open to Public Inspection

Name of the organization

PROJECT LEAD THE WAY

Employer identification number

D-	PROJECT LEAD THE W				14-1010	
Pa			is or Ac	counts	. Complete it	tne
	organization answered "Yes" to Form 990, Part IV, lin	e b. (a) Donor advised funds	1	\ Eundo o	nd other acco	unto
		(a) Bottor advised failes	(0	, runus a	ind other acco	
1	Total number at end of year .		<u> </u>			
2	Aggregate contributions to (during year)					
3	Aggregate grants from (during year)					
4	Aggregate value at end of year				<u></u>	
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor adv	used fund	s		
	are the organization's property, subject to the organization's	_			L Yes	L No
6	Did the organization inform all grantees, donors, and donor a					
	for chantable purposes and not for the benefit of the donor of				Yes_	No
Pai	till Conservation Easements. Complete if the or	ganization answered "Yes" to Form 990,	Part IV, II	ne 7.		
1	Purpose(s) of conservation easements held by the organizat	ion (check all that apply).				
	Preservation of land for public use (e.g., recreation or p	oleasure) Preservation of an h	nstorically	ımportan	nt land area	
	Protection of natural habitat	Preservation of cert	ified histo	ric structi	ure	
	Preservation of open space					
2	Complete lines 2a-2d if the organization held a qualified cons	servation contribution in the form of a co	nservatio	n easeme	ent on the last	day
	of the tax year.		_			
			L	Hel	d at the End	of the Year
а	Total number of conservation easements		. L	2a		
b	Total acreage restricted by conservation easements		Ĺ	2b		
С	Number of conservation easements on a certified historic str	ructure included in (a)		2c		
d	Number of conservation easements included in (c) acquired	after 8/17/06		2d		
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by ti	he organiz	zation dui	ing the taxabl	e
	year ▶		_		•	
4	Number of states where property subject to conservation ea	sement is located >				
5	Does the organization have a written policy regarding the pe		and			
	enforcement of the conservation easements it holds?				Yes	☐ No
6	Staff or volunteer hours devoted to monitoring, inspecting, a	and enforcing easements during the year	>			
7	Amount of expenses incurred in monitoring, inspecting, and				_ _	
8	Does each conservation easement reported on line 2(d) abor			0		
	and section 170(h)(4)(B)(ii)?		, ,, ,, ,	``	Yes	☐ No
9	In Part XIV, describe how the organization reports conservat	ion easements in its revenue and expen-	se statem	ent, and	balance sheet	and
•	include, if applicable, the text of the footnote to the organiza	·				
	conservation easements.		g.			
Pa	rt III Organizations Maintaining Collections o	of Art. Historical Treasures, or	Other S	imilar /	Assets.	
	Complete if the organization answered "Yes" to Form	•				
						·
1a	If the organization elected, as permitted under SFAS 116, no	ot to report in its revenue statement and	balance s	sheet wor	ks of art. histo	rical
-	treasures, or other similar assets held for public exhibition, e	·				
	the footnote to its financial statements that describes these	·		,, p		,
h	If the organization elected, as permitted under SFAS 116, to		ance shee	t works o	fart historica	l treasures
	or other similar assets held for public exhibition, education,	•			-	
	these items:	or research in fortherance of public servi	ce, provio	ie tile loik	owing amount	S relating to
				•		
	(i) Revenues included in Form 990, Part VIII, line 1	•	-	~ _		
_	(ii) Assets included in Form 990, Part X		ial ac-	- \$_		
2	If the organization received or held works of art, historical tre		iai gain, p	rovide		
	the following amounts required to be reported under SFAS 1	1 to relating to these items:				
a	Revenues included in Form 990, Part VIII, line 1		••	\$_		
b	Assets included in Form 990, Part X	• • • • • • • • • • • • • • • • • • • •		- \$_		

		LEAD THE								Page 2
Par	t 脚 Organizations Maintaining (Collections of A	<u>rt, His</u>	torical Tr	easures,	or Othe	r Simila	<u>r Asse</u>	ts (conti	nued)
3	Using the organization's accession and other	er records, check an	y of the f	following tha	t are a signif	icant use	of its collection	ction ite	ms (chec	k all
	that apply):									
а	Public exhibition	•	d	Loan or exc	hange progr	ams				
ь	Scholarly research	•	e 🔲	Other						
С	Preservation for future generations									
4	Provide a description of the organization's of	ollections and expla	in how th	ney further t	he organizat	ion's exer	npt purpos	e in Par	t XIV.	
5	During the year, did the organization solicit of	or receive donations	of art, hi	storical trea	sures, or oth	er sımılar	assets			
	to be sold to raise funds rather than to be m	aintained as part of	the orga	nization's co	ollection?				Yes	☐ No
Par	Trust, Escrow and Custodia reported an amount on Form 990, Pa		S. Comp	lete if organi	zation answ	ered "Yes	to Form 9	990, Par	t IV, line 9), or
1a	Is the organization an agent, trustee, custoo	lian or other interme	diary for	contribution	s or other as	sets not	ıncluded			
	on Form 990, Part X?	•					••		Yes	No
b	If "Yes," explain the arrangement in Part XIV	and complete the f	ollowing	table:						
									Amount	
c	Beginning balance	•					1c			
d	Additions during the year				-		1d			
е	Distributions during the year	••					1e			
f	Ending balance						1f			
2a	Did the organization include an amount on F	Form 990, Part X, line	e 21?						Yes	☐ No
b	If "Yes," explain the arrangement in Part XIV	<u>. </u>								
Par	† V Endowment Funds. Complete	ıf organizatıon answ	ered 'Ye	s" to Form 9	990, Part IV,	line 10.				
		(a) Current year	(b) F	nor year	(c) Two yea	rs back	d) Three yea	rs back	(e) Four	years back
1a	Beginning of year balance	<u></u>								
ь	Contributions .									
С	Investment earnings or losses									
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs	[
f	Administrative expenses			***************************************			***************************************			***************************************
g	End of year balance									
2	Provide the estimated percentage of the year	ar end balance held	as:							
а	Board designated or quasi-endowment		%							
ь	Permanent endowment	<u></u>								
c	Term endowment ▶	<u>~</u>								
	Are there endowment funds not in the poss	- ession of the organiz	zation the	at are held a	nd administe	ered for th	ne organiza	tion		
	by:						•		Γ	Yes No
	(i) unrelated organizations			_					3a(i)	
	(ii) related organizations		-	•					3a(ii)	
ь	If "Yes" to 3a(ii), are the related organization	s listed as required	on Sche	dule R?				_	3b	
4	Describe in Part XIV the intended uses of th	•				-	•	-		
Pat					, Part X, line	10.				
<u> </u>	Description of investment	(a) Cost or obasis (invest			or other (other)	(c) De	epreciation		(d) Book	value
1a	Land									
b	Buildings			12	0,298.		7,87	3.	112	2,425.
c	Leasehold improvements				<u> </u>					
đ	Equipment			78	9,419.	4	24,18	4.	365	5,235.
	Other				6,048.		10,33			714.
	l. Add lines 1a-1e. (Column (d) should equal F	orm 990, Part X, col	 lumn (B),							3,374.

Schedule D (Form 990) 2008

PROJECT LEAD THE WAY

Sche	dule D (Form 990) 2008 PROJECT LEAD THE WAY			14-	1816385	Page 4
Par	TXI Reconciliation of Change in Net Assets from Form 990 to	Financial Stat	tements			
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1		19, 174,	805.
2	Total expenses (Form 990, Part IX, column (A), line 25)		2	·	7,455,	014.
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3		11,719,	
4	Net unrealized gains (losses) on investments		4			
5	Donated services and use of facilities		5			
6	Investment expenses		6			
7	Prior period adjustments	•	7		919,	455.
8	Other (Describe in Part XIV)		8		·	
9	Total adjustments (net). Add lines 4-8		9		919,	455.
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9		10		12,639,	
	t XII Reconciliation of Revenue per Audited Financial Stateme	nts With Reve	nue per R	eturr		
1	Total revenue, gains, and other support per audited financial statements			1	15,353,	626.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		•			
-	Net unrealized gains on investments	2a				
b	Donated services and use of facilities	2b				
	Recoveries of prior year grants	2c				
C	· · ·		34,891.			
d	Other (Describe in Part XIV)	20 7770	74/071.		4,984,	291
e	Add lines 2a through 2d			2e	10,368,	735
3	Subtract line 2e from line 1			3	10,300,	, , , , , ,
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1.1				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a 0 00	070			
b	Other (Describe in Part XIV)	4b 8,80	06,070.	1 1	0 006	070
C	Add lines 4a and 4b , ,			4c	8,806,	
5	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	- 1 MGN F		5	19,174,	805.
Par	t XIII Reconciliation of Expenses per Audited Financial Statem	ents with Expe	enses per			475
1	Total expenses and losses per audited financial statements	•		1	11,512,	4/5.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1				
а	Donated services and use of facilities	2a				
b	Prior year adjustments	2b				
C	Losses reported on Form 990, Part IX, line 25	2c				
ď	Other (Describe in Part XIV)	2d 4,06	65,436.			
е	Add lines 2a through 2d	•		2e	4,065,	436.
3	Subtract line 2e from line 1			3	7,447,	039.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:					-
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			!	
ь	Other (Describe in Part XIV)	4b	7,975.			
c	Add lines 4a and 4b			4c	7,	975.
5	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)			5	7,455,	
	t XIV Supplemental Information					
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part II	II, lines 1a and 4; P	art IV, lines 1	b and	2b; Part V, line	4; Part
	rt XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.	,	,			·
,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
PAF	RT XII, LINE 2D - OTHER ADJUSTMENTS:					
						
COS	ST OF GOOD SOLD: 4065436.					
PR]	OR PERIOD ADJUSTMENT: 919455.					
					· 	
						
PAF	RT XII, LINE 4B - OTHER ADJUSTMENTS:					
<u>C</u> UF	RRENCY EXCHANGE LOSS RECLASSIFIED TO EXPEN	SE: 7975.				
			- 		_ 	
SEI	E SCHEDULE D SUPPLEMENTAL INFORMATION: 879	8095.		<u>-</u>		
				Sched	dule D (Form 9	90) 2008

Schedule D (Form 990) 2008 PROJECT LEAD THE WAY	14-1816385 Page 5
Part XIV Supplemental Information (continued)	
PART XIII, LINE 2D - OTHER ADJUSTMENTS:	
COST OF GOODS SOLD: 4065436.	
COS1 OF GOODS SOLD: 4003430.	
PART XIII, LINE 4B - OTHER ADJUSTMENTS:	
CURRENCY EXCHANGE LOSS RECLASSIFIED TO EXPENSE: 7975.	.,
AS IT RELATES TO SCHEDULE D, PART XII, LINE 4B (OTHER ADJUS	STMENTS):
THE ORGANIZATION IS AMENDING THE RETURN BECAUSE IT WAS I	DETERMINED THAT
CONTRIBUTIONS (PLEDGE RECEIVABLE) AND ROYALTIES WERE NOT PR	ROPERLY INCLUDED
BUT ALSO, SOME SERVICE FEE REVENUE SHOULD NOT HAVE BEEN REC	
THE FISCAL YEAR ENDED JUNE 30, 2009.	
	.

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

► Attach to Form 990 or Form 990-EZ. Must be completed by organizations that answer "Yes" to Form 990. Department of the Treasury Part IV, lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a. Internal Revenue Service

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

OMB No 1545-0047

Inspection

Schedule G (Form 990 or 990-EZ) 2008

Name of the organization

Employer identification number 14-1816385 PROJECT LEAD THE WAY Fundraising Activities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 17. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. a X Mail solicitations e X Solicitation of non-government grants X Email solicitations f X Solicitation of government grants X Phone solicitations g X Special fundraising events d X In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or X Yes ☐ No key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. Form 990-EZ filers are not required to complete this table. (iii) Did (v) Amount paid (vi) Amount paid (i) Name of individual fundraiser have custody or control of contributions? (iv) Gross receipts to (or retained by) (ii) Activity to (or retained by) or entity (fundraiser) from activity fundraiser organization listed in col. (i) Yes FUNDRAISING 922,000 201,157. 720,843. REMINGTON GROUP 922,000. 201,157. 3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing. NY,OH,MN,MI

Direct Expenses Revenue	1 2		(a) Event #1	(b) Event #	2 (c) Other Events	}	(d) Tota	l Even	te
						(4	Add col.		
			(event type)	(event type	e) (total number)	1		(c))	
		Cuana manalata							
oenses	2	Gross receipts				+			
sesuec		Less: Chantable contributions				-	-	-	
sesuec	3	Gross revenue (line 1 minus line 2)							
sesses									
sesuec	4	Cash prizes .		<u> </u>		-			
ğ	5	Non-cash prizes				_			
ΧI	6	Rent/facility costs							
lirect E	7	Other direct expenses							
	8	Direct expense summary. Add lines 4 through	th 7 to column (d)	<u> </u>	•				
				•					
Pa	9 rt l	Net income summary. Combine lines 3 and 8 Gaming. Complete if the organization		990, Part IV, line	19, or reported more than				
		\$15,000 on Form 990-EZ, line 6a.		T = 1.5					
Revenue			(a) Bingo	(b) Pull tabs/Ins bingo/progressive	i ici Omeroamino) Total g		
8	1	Gross revenue							
ses	2	Cash prizes							
Spen	3	Non-cash prizes				_			
Direct Expenses	4	Rent/facility costs				_			
_	5	Other direct expenses			ŀ	-			
			Yes %	Yes	%	%			
- [6	Volunteer labor	No	NoNo	No				<u></u>
	7	Direct expense summary. Add lines 2 throug	nh 5 in column (d)			• <u>L</u>		,	
	8_	Net gaming income summary. Combine lines	s 1 and 7 in column (d)			_			
				- " · •			ļ	Yes	No
		er the state(s) in which the organization opera he organization licensed to operate gaming a		states?		-	9a		
		No," Explain:							
	_					-			
		re any of the organization's gaming licenses r	revoked, suspended or te	erminated during t	the tax year?		10a		
		· · · · · · · · · · · · · · · · · · ·				_			
11		es the organization operate gaming activities	with nonmembers?			-	11		
	ls ti	he organization a grantor, beneficiary or trust		of a partnership	or other entity formed to				

Schedule G (Form 990 or 990-EZ) 2008 PROJECT LEAD THE WAY	14-181	<u>638.</u>	5 Pa	ige 3
			Yes	No
13 Indicate the percentage of gaming activity operated in:				
a The organization's facility	%			
b An outside facility	%			
14 Provide the name and address of the person who prepares the organization's gaming/special events books and reco	ords:			
Name				
Address	<u>_</u>			
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?		15a		
b If "Yes," enter the amount of gaming revenue received by the organization ▶\$ and the amount	ınt			
of gaming revenue retained by the third party > \$				
c If "Yes," enter name and address:			;	
Name ▶				
Address				
16 Gaming manager information:				
Name				
Gaming manager compensation ▶ \$				
Description of services provided ▶				
Director/officer Employee Independent contractor				
17 Mandatory distributions:				
a is the organization required under state law to make charitable distributions from the gaming proceeds to				
retain the state gaming license?		17a	ļ	ļ
b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the				
organization's own exempt activities during the tax year > \$		t	3	E

Schedule G (Form 990 or 990-EZ) 2008

SCHEDULE								OMB No 1545-0047
(Form 990)			Grants and Governn	Grants and Other Assistance to Organizations, Governments, and Individuals in the U.S.	to Organizations uals in the U.S.			2008
Department of the Treasury Internal Revenue Service		▼ Comp	Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22. ▶ Attach to Form 990.	n answered "Yes," on F ▶ Attach to Form 990.	' on Form 990, Pa n 990.	rt IV, lines 21 or 22.		Open to Public Inspection
Name of the organization	tion PROJECT LEAD THE WAY	3AD THE W	AY			: :		Employer identification number 14-1816385
Part i General Ir	General Information on Grants and Assistance	d Assistance						
1 Does the organi:	Does the organization maintain records to substantiate the amount of th	substantiate the	amount of the grants	or assistance, the	grantees' eligibility	for the grants or assi	le grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	
criteria used to	criteria used to award the grants or assistance?	tance?						X Yes No
ŝ	Describe in Part IV the organization's procedures for monitoring the use	cedures for monit	toring the use of grant	of grant funds in the United States.	States.			
Part II Grants an	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any	iovernments and	d Organizations in the	United States. Co	omplete if the orga	nization answered "Y	es" on Form 990, Part	IV, line 21, for any
recipient t	recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1	5,000 Check this	box if no one recipien	it received more that	an \$5,000. Use Pa	rt IV and Schedule I-1	(Form 990) if additional space is needed	al space is needed
1 (a) Name and a	1 (a) Name and address of organization or government	(p)	(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
	2001100							
410 ROCKET RIDGE	DOBE SCHOOL							TO HELP SUPPORT PLTW
PANDORA, OH 45817	7		501(C)(3)	30,000.	0			PROGRAM IN THE SCHOOL
NEW LEXINGTON HIGH SCHOOL	доноз не							אושיום המסממווס מימוו כח
234/ PANTHER DRIVE	10. 10. 10. 10. 10. 10. 10. 10. 10. 10.		501(0)(3)	000 01	c			
NEW LEALINGTON, OR	#0/C# U		20112131	200				
MARIETTA HIGH SCHOOL 208 DAVIS AVENUE	HOOL							SUPPORT
MARIETTA, OH 45750	.50		501(C)(3)	10,000.	0			PROGRAM IN THE SCHOOL
CAPITAIN SHREVE HIGH SCHOOL 6115 E. KINGS HIGHWAY	HIGH SCHOOL GHWAY							TO HELP SUPPORT PLTW
SHREVEPORT, LA 71105	1105		501(C)(3)	20,000.	0			PROGRAM IN THE SCHOOL
YOUKEE DRIVE MIDDLE SCHOOL 6008 YOUKKEE DRIVE	DLE SCHOOL VE		501(0)(3)	000	o			TO HELP SUPPORT PLTW PROGRAM IN THE SCHOOL
J 5	HOAD 9 GARAYO							
CENTER - 215 MIL	215 MILAM ADDITION ROAD -							TO HELP SUPPORT PLTW
CRAIGSVILLE, WV	WV 26205		501(C)(3)	20,000.	0			PROGRAM IN THE SCHOOL
	Enter total number of section 501(c)(3) and government organizations	od government or	ganizations					
_	Enter total number of other organizations							2000
LHA For Privacy Ac	For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	tion Act Notice,	see the Instructions	for Form 990.				Schedule I (Form 990) 2008

Schedule I (Form 990) 2008 PROJECT LEAD THE WAY

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

Use Schedule I-1 (Form 990) if additional space is needed PROJECT LEAD THE WAY

Page 2

14-1816385

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
SCHOLARSHIPS	11	38,820.	0		
			ı		
Part IV Supplemental Information. Complete this part to provide the	de the information	in required in Part I,	lne 2, and any other	information required in Part I, line 2, and any other additional information	
SCHEDULE 1, PART I, LINE 2: ONCE T	THE RECIP	RECIPIENTS HAVE BEEN	BEEN SELE	SELECTED, WE	
THE UNIVERSITY/COLLEGE TE	🛱	PLAN TO ATT	ATTEND IN THE	FALL TO	
ည	2		SCHOLARSHIPS. M	MOST	
IRE JUST A LETTER AND SOME	REQUIRE A F	FORM TO BE	COMPLETED.	WHEN THE	
CHECK IS SENT, WE SEND ALONG WITH	IT A LETTER	TER DESCRIBING	WHO	THE	
SCHOLARSHIP IS FOR, AND THAT THE C	CHECK SHO	SHOULD BE DIVIDED	IDED BETWEEN	EN THE	
SPRING AND FALL SEMESTERS UNLESS O	OTHERWISE	STATED BY	THE STUDENT.	NT. IN	
JANUARY OF EACH YEAR, WE SEND THE REC	RECIPIENTS	⋖	RENEWAL FORM THAT	AT NEEDS	
TO BE RETURNED AND COMPLETED ALONG	WITH A	LETTER STA	STATING THAT	IN	
12-18-08					Schedule I (Form 990) 2008

Department of the Treasury Internal Revenue Service
Name of the organization SCHEDULE 1-1 (Form 990)

▲ Attach to Form 990 to list additional information for Part II and Part III, Schedule I (Form 990). Continuation Sheet for Schedule I (Form 990)

OMB No 1545-0047 2008

Open to Public Inspection

Employer identification number 14-1816385

Name of the organization PROJECT LEAD	THE	WAY				1	14-1816385
Part Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.)	Assistance to Go	vernments and Organ	nizations in the U.	S. (Schedule I (For	m 990), Part II.)		
] -	(b) EIN	(c) IRC Code 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
SUMMERSVILLE MIDDLE SCHOOL ONE GRIZZLY LANE			c c	c			TO HELP SUPPORT PLTW PROGRAM IN THE SCHOOL
SUMMERSVILLE, WV 26651		501(C)(3)	,000,01				
TULSA MEMORIAL HIGH SCHOOL 3027 SOUTH NEWHAVEN AVENUE THESA OF 74114		501(C)(3)	20,000.	0			TO HELP SUPPORT PLTW PROGRAM IN THE SCHOOL
NIMITZ MIDDLE SCHOOL							TO HELP SUPPORT PLTW
TULSA OK 74114		501(C)(3)	10,000.	0.			PROGRAM IN THE SCHOOL
1							
ANTHONY MIDDLE SCHOOL							
5757 IRVING AVENUE SOUTH				1			SUPPORT
MINNEAPOLIS, MN 55419		501(C)(3)	33,966.	0			PROGRAM IN THE SCHOOL
OLSON MIDDLE SCHOOL 1607 51ST AVE NORTH							TO HELP SUPPORT PLTW
MINNEAPOLIS, MN 55430		501(C)(3)	33,966.	0.			PROGRAM IN THE SCHOOL
SANFORD MIDDLE SCHOOL 3524 42ND AVE, SOUTH		501(0)(3)	9 9 6 8	o			TO HELP SUPPORT PLTW PROGRAM IN THE SCHOOL
							TO HELP SUPPORT PLTW
BROOKLYN PARK, MN 55443		501(C)(3)	27,634.	0.			PROGRAM IN THE SCHOOL
NORTH VIEW JUNIOR HIGH SCHOOL							TO HELP SUPPORT PLTW
BROOKLYN PARK, MN 55429		501(C)(3)	27,634.	0.			PROGRAM IN THE SCHOOL
5 Estat total pumber of Section 501(c)(3) and povernment propertions	nd government or	ganizations					A

² Enter total number of Section 501(c)(3) and government organizations

SCHEDULE J

Department of the Treasury

Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

► Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

OMB No 1545-0047

2008

Open to Public Inspection

Employer identification number

Name of the organization

PROJECT LEAD THE WAY 14-1816385 **Questions Regarding Compensation** Yes No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. Housing allowance or residence for personal use First-class or charter travel Payments for business use of personal residence Travel for companions Tax indemnification and gross-up payments Health or social club dues or initiation fees Personal services (e.g., maid, chauffeur, chef) Discretionary spending account b If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? 2 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply. X Written employment contract Compensation committee Compensation survey or study Independent compensation consultant X Approval by the board or compensation committee Form 990 of other organizations During the year, did any person listed in Form 990, Part VII, Section A, line 1a: a Receive a severance payment or change of control payment? 4b b Participate in, or receive payment from, a supplemental nonqualified retirement plan? c Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only 501(c)(3) and 501(c)(4) organizations must complete lines 5-8. 5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: a The organization? 5a \mathbf{X}^{-} 5b **b** Any related organization? If "Yes," to line 5a or 5b, describe in Part III. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: X a The organization? 6a X 6ь b Any related organization? If "Yes" to line 6a or 6b, describe in Part III. 7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments X not described in lines 5 and 67 lf "Yes," describe in Part III Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the

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

initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III

Schedule J (Form 990) 2008

X

PROJECT LEAD THE WAY Schedule J (Form 990) 2008

Part if Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

		(B) Breakdown of V	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(C)	(O)	(E)	(F)
(A) Name	'	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	Deferred compensation	Nontaxable benefits	lotal of columns (B)(l)-(D)	Compensation reported in prior Form 990 or Form 990-EZ
	Ξ	163,680.	0	0	0	20,500.	184,180.	82,700.
RICHARD BLAIS	Ξ	0	0	0	0	0	0	0
i	(1)	164,738.	0.	0	0	19,992.	184,730.	83,504.
NIEL TEBBANO	(E)	0	0				0	0
	(0)	140,66	0.			15,788.	156,450.	68,178.
RICHARD GRIMSLEY	⊞	0	0	0	0	0	0	0
	8							
	3 5							
	3 8							
	15							
	8							
	: 3							
	€							
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	(9)							
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	l (iii)							
							Schedul	Schedule J (Form 990) 2008

SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

PROJECT LEAD THE WAY

Employer identification number 14-1816385

FORM 990, PART VI, SECTION A, LINE 2: RICHARD C. LIEBICH AND KURT LIEBICH
ARE FAMILY MEMBERS AND BOTH ARE MEMBERS OF THE ORGANIZATION'S BOARD.
Att Third Thirdho The Both The Inhabite of The exemplation of Solds
FORM 990, PART VI, SECTION A, LINE 4: AMENDMENTS TO THE BYLAWS WERE
APPROVED ON 1/8/2009. THE SIGNIFICANT CHANGE WAS IN THE BOARD CONSTRUCTION.
PREVIOUSLY, ALL MEMBERS OF THE BOARD WERE APPOINTED BY CHARITABLE VENTURE
FOUNDATION. (CVF). UNDER THE REVISED BYLAWS, CVF APPOINTS THREE DIRECTOS,
KERN FAMILY FOUNDATION APPOINTS THREE DIRECTORS. THE REMAINING DIRECTOR IS
ELECTED BY THOSES SIX MEMBERS.
FORM 990, PART VI, SECTION A, LINE 7A: CHARITABLE VENTURE FOUNDATION AND
THE KERN FAMILY FOUNDATION EACH APPOINT 3 PERSONS TO THE BOARD OF
DIRECTORS.
FORM 990, PART VI, SECTION A, LINE 10: THE FORM 990 IS REVIEWED BY THE
CHIEF FINANCIAL OFFICER & CEO & OUTSIDE COUNSEL. AFTER THAT, IT IS PROVIDED
TO THE FULL VOTING BOARD PRIOR TO SIGNATURE BY THE CEO AND FILING WITH THE
IRS.
FORM 990, PART VI, SECTION B, LINE 12C: COMPLIANCE WITH THE CONFLICT OF
INTEREST POLICY WAS MONITORED THROUGH ANNUAL STATEMENTS BEING DISTRIBUTED

FORM 990, PART VI, SECTION B, LINE 15: COMPARABILITY DATA AND INFORMATION

TO AND SIGNED BY MEMBERS OF THE BOARD OF DIRECTORS. THIS PROCESS DOES NOT

REGARDING DUTIES, QUALIFICATIONS AND EXPERIENCE WAS PRESENTED TO THE BOARD

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Schedule O (Form 990) 2008

EXTEND TO KEY EMPLOYEES.

SCHEDULE O

(Form 990)

Department of the Treasury

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

➤ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008
Open to Public Inspection

Name of the organization **Employer identification number** PROJECT LEAD THE WAY 14-1816385 FOR SETTING CEO COMPENSATION. THE COMPENSATION WAS APPROVED BY INDEPENDENT MEMBERS OF THE BOARD, (THE CEO ABSTAINED FROM DISCUSSIONS AND VOTING). IN THE PAST, A SIMILAR PROCESS WAS FOLLOWED WITH RESPECT TO COMPENSATED OFFICERS. THE BOARD APPROVED A SALARY RANGE FOR THE EXECUTIVE VICE PRESIDENT POSITION AND AUTHORIZED THE CEO TO FILL THIS POSITION ACCORDINGLY; COMPARABILITY DATA WAS OBTAINED. ALL OF THESE POSITIONS HAVE CONTEMPORANEOUS DOCUMENTATION IN THE BOARD MINUTES AND/OR PERSONNEL FILES. THE CEO PERFORMED THE SAME PROCESS FOR ALL OTHER KEY EMPLOYEES, AND THE COMPENSATION IS APPROVED BY THE BOARD AND COMPENSATION COMMITTEE. FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990: NY, DC, AK, AZ, AR, CA, CO, CT, GA, HI, IL, KS, KY, ME, MD, MA, MI, MN, MO, MS, NJ, NM, NC, ND, OK OH, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI, IN FORM 990, PART VI, SECTION C, LINE 19: ALL OF THESE DOCUMENTS ARE AVAILABLE UPON REQUEST, THROUGH PUBLIC WEBSITES, AND THROUGH PUBLIC DOCUMENTS. FORM 990, PART XII, LINE 2C AUDIT COMMITTEE AND OVERSIGHT

FORM 990, AMENDED RETURN:

THE ORGANIZATION IS AMENDING THE RETURN BECAUSE IT WAS DETERMINED THAT

CONTRIBUTIONS (PLEDGE RECEIVABLE) AND ROYALTIES WERE NOT PROPERLY

THIS PROCESS HAS NOT CHANGED FROM PRIOR YEAR.

SCHEDULE O (Form 990)

Supplemental Information to Form 990

Department of the Treasury Internal Revenue Service ▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008 Open to Public Inspection

Name of the organization PROJECT LEAD THE WAY	Employer identification number 14-1816385
INCLUDED BUT ALSO, SOME SERVICE FEE REVENUE SHOULD NOT HA	VE BEEN
RECOGNIZED DURING THE FISCAL YEAR ENDED JUNE 30, 2009.	

End-of-year assets Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, lines 33, 34, 35, 36, or 37.
 See separate instructions. Œ Total Income ê Related Organizations and Unrelated Partnerships Legal domicile (state or foreign country) Q Primary activity <u>@</u> PROJECT LEAD THE WAY Identification of Disregarded Entities Name, address, and EIN of disregarded entity Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990) Part

2008 Open to Public Inspection

OMB No 1545-0047

Employer identification number 14-1816385

(F)
Direct controlling
entity

Œ Œ <u>0</u> <u>©</u> <u>@</u> Identification of Related Tax-Exempt Organizations 3 Part II

Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Exempt Code section	Public charity status (if section 501(c)(3))	Direct controlling entity
CHARITABLE VENTURE FOUNDATION - 14-1751211					
747 PIERCE ROAD	GRANTMAKING PRIVATE				
CLIFTON PARK NY 12065	FOUNDATION	NEW YORK	501(C) (3)	N/A	N/A
CHARITABLE LEADERSHIP FOUNDATION -					
16-1514887, 747 PIERCE ROAD, CLIFTON PARK,	GRANTMAKING PRIVATE				
NY 12065	FOUNDATION	NEW YORK	501(C) (3)	N/A	N/A
	Γ			-	
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LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

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(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Direct controlling entity	(E) Predominant income (related, investment, unrelated)		Share of total Shr Income end	(G) (H Share of end-of-year are alloc assets Yes	1) bortion- cations?	(I) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(J) General or managing partner? Yes No
Part IV Identification of Related Org	Identification of Related Organizations Taxable as a Corporation		or Trust							
i i	N. c		(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Direct controlling entity	(E) Type of entity (C corp, S corp, or trust)	(F) Share of total Income	-	(G) Share of Per end-of-year ow assets	(H) Percentage ownership
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Part V Transactions With Related Organizations

Note. Complete line 1 if any entity is listed in Parts II, III, or IV.		>	Yes	٥
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?				
a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity		1a	×	ال
b Gift, grant, or capital contribution to other organization(s)		16	×	
c Gift, grant, or capital contribution from other organization(s)		2	×	
A Loans or loan distraction of for other organization(s)		14	×	ì
		╄	>	1.
e Loans or loan guarantees by other organization(s)		8	۲	1
		1	*	1.
f Sale of assets to other organization(s)		=	4	اړ
g Purchase of assets from other organization(s)		19	×	ا۔
h Exchange of assets		ŧ	×	اہ
i Lease of facilities, equipment, or other assets to other organization(s)		÷	×	
				1
j Lease of facilities, equipment, or other assets from other organization(s)		; <u>-</u>	×	1
k Performance of services or membership or fundraising solicitations for other organization(s)		¥	×	ال
l Performance of services or membership or fundraising solicitations by other organization(s)		=	×	ا۔
m Sharing of facilities, equipment, mailing lists, or other assets		T E	×	ا۔
n Sharing of paid employees		1n	×	
				-
o Reimbursement paid to other organization for expenses		10	×	1
p Reimbursement paid by other organization for expenses		40	×	ا۔
 Qther transfer of cash or property to other organization(s) 		19	×	ات
r Other transfer of cash or property from other organization(s)		-	×	ا۔
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	tion thresholds.			1
₹		<u>©</u>		
Name of other organization(s) Training	Transaction Art	Amount Involved	olved	
				1
				1
(2)				1
				1
(4)				}
(9)				1
(9)				
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Part Vi Unrelated Organizations Taxable as a Partnership

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

General or managing partner? Yes $\widehat{\Xi}$ Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) g Olsproportonate allocations? Share of end-ofyear assets Œ Are all partners section 501(c)(3) organizations? Yes 0 Legal domicile (state or foreign country) <u>0</u> Primary activity Name, address, and EIN of entity

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