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EXTENSION HAS BEEN GRANTED TO 5/17/10

Form 990

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

2008

Open to Public
Inspection

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

A For the 2008 calendar year, or tax year beginning JUL 1, 2008 and ending JUN 30, 2009

B Check if applicable <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization EDUCATION FOUNDATION OF SARASOTA COUNTY, INC.	D Employer identification number 59-2320858
Doing Business As Number and street (or P O box if mail is not delivered to street address) 1960 LANDINGS BLVD.		E Telephone number 941-927-0965
City or town, state or country, and ZIP + 4 SARASOTA, FL 34231		G Gross receipts \$ 1,045,756.
F Name and address of principal officer: CINDY KAISER 1960 LANDINGS BLVD., SARASOTA, FL 34231		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c) (3) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions)
J Website: ► N/A		H(c) Group exemption number ►
K Type of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ►		L Year of formation 1979 M State of legal domicile FL

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: THE MISSION OF THE EDUCATION FOUNDATION OF SARASOTA COUNTY IS TO INVEST IN EVERY CHILD'S SUCCESS		
	2 Check this box ► <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its assets.	3	27
	3 Number of voting members of the governing body (Part VI, line 1a)	4	27
	4 Number of independent voting members of the governing body (Part VI, line 1b)	5	6
	5 Total number of employees (Part V, line 2a)	6	265
	6 Total number of volunteers (estimate if necessary)	7a	0.
	7a Total gross unrelated business revenue from Part VIII, line 12, column (C)	7b	0.
	b Net unrelated business taxable income from Form 990-T, line 34		
		Prior Year	Current Year
	8 Contributions and grants (Part VIII, line 1h)	1,007,631.	984,167.
9 Program service revenue (Part VIII, line 2g)			
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	27,043.	14,076.	
11 Other revenue (Part VIII, column (A), lines 5, 6d, 9c, 10c, and 11e)	204,942.	931.	
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,239,616.	999,174.	
	392,161.	597,105.	
	247,164.	247,021.	
Revenue Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	372,883.	83,688.
	14 Benefits paid to or for members (Part IX, column (A), lines 4-6)	1,012,208.	927,814.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	227,408.	71,360.
	16a Professional fundraising fees (Part IX, column (A), line 11e)		
	b Total fundraising expenses (Part IX, column (D), line 25) ► 59,022.		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		
	19 Revenue less expenses. Subtract line 18 from line 12		
		Beginning of Year	End of Year
	20 Total assets (Part X, line 16)	1,131,399.	1,281,163.
21 Total liabilities (Part X, line 26)	484.	2,845.	
22 Net assets or fund balances. Subtract line 21 from line 20	1,130,915.	1,278,318.	

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge			
Sign Here	Signature of officer CINDY KAISER, EXECUTIVE DIRECTOR Type or print name and title		
	Date 5/13/2010		
Paid Preparer's Use Only	Preparer's signature ► 	Date 5/13/10	Check if self-employed ► <input type="checkbox"/>
	Firm's name (or yours if self-employed), address, and ZIP + 4 SUPLEE & SHEA, P.A. 800 SOUTH OSPREY AVENUE SARASOTA, FL 34236-7834		Preparer's identifying number (see instructions) EIN ►
			Phone no ► 941-366-3600

May the IRS discuss this return with the preparer shown above? (see instructions)

 Yes No

832001 12-18-08 LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2008)

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

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Part III Statement of Program Service Accomplishments (see instructions)

1 Briefly describe the organization's mission:

THE MISSION OF THE EDUCATION FOUNDATION OF SARASOTA COUNTY IS TO INVEST IN EVERY CHILD'S SUCCESS THROUGH THE GENEROSITY OF OUR COMMUNITY.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

Yes No

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

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?

Yes No

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

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.

Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 239,927. including grants of \$ 228,214.) (Revenue \$)
TEACHER CLASSROOM GRANTS: GRANTS RANGING FROM \$500 OR \$1,200 WERE AWARDED TO TEACHERS DURING TWO GRANT CYCLES. TEACHERS SUBMIT PROPOSALS, WHICH ARE THEN REVIEWED AND SCORED BY VOLUNTEER GRANT READERS. GRANT REQUESTS REPRESENT INNOVATIVE CLASSROOM INITIATIVES THAT INSPIRE LEARNING WHILE ALSO BEING DIRECTLY CONNECTED TO CURRICULUM.

4b (Code:) (Expenses \$ 129,190. including grants of \$ 25,025.) (Revenue \$)
TEXCELLENCE: DONATED AND REFURBISHED HOME COMPUTERS ARE PROVIDED AT NO-COST TO STUDENTS WHO QUALIFY FOR THE FEDERAL FREE/REDUCED LUNCH PROGRAM. IN ADDITION, QUALIFIED STUDENTS AND THEIR FAMILIES RECEIVE TRAINING, TECH SUPPORT, EDUCATIONAL SOFTWARE AND INTERNET SERVICE.

4c (Code:) (Expenses \$ 69,788. including grants of \$ 69,788.) (Revenue \$)
PROJECT LEAD THE WAY: DONOR FUNDS WERE SECURED TO FUND A COMPUTER-INTEGRATED ENGINEERING CLASSROOM AT RIVERVIEW HIGH SCHOOL. FUNDING SUPPORTED THE PURCHASE OF HIGH-TECH EQUIPMENT INCLUDING ROBOTIC MANUFACTURING ARMS, AS WELL AS PROFESSIONAL DEVELOPMENT FOR TEACHERS. AS A RESULT OF ADDING THIS CLASSROOM, THE SCHOOL'S PROJECT LEAD THE WAY PROGRAM BECAME NATIONALLY CERTIFIED, ALLOWING HIGH SCHOOL STUDENTS TO EARN COLLEGE CREDITS.

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

(Expenses \$ 306,413. including grants of \$ 274,078.) (Revenue \$)

4e Total program service expenses ► \$ 745,318. (Must equal Part IX, Line 25, column (B).)

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Part IV Checklist of Required Schedules

- 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?
If "Yes," complete Schedule A
- 2 Is the organization required to complete Schedule B, Schedule of Contributors?
- 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*
- 4 **Section 501(c)(3) organizations.** Did the organization engage in lobbying activities? *If "Yes," complete Schedule C, Part II*
- 5 **Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations.** Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? *If "Yes," complete Schedule C, Part III*
- 6 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 I*
- 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*
- 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*
- 9 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*
- 10 Did the organization hold assets in term, permanent, or quasi-endowments? *If "Yes," complete Schedule D, Part V*
- 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
- 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*
- 14a Did the organization maintain an office, employees, or agents outside of the U.S.?
 - b 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 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 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 I*
- 18 Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*
- 19 Did the organization report more than \$15,000 on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*
- 20 Did the organization operate one or more hospitals? *If "Yes," complete Schedule H*
- 21 Did the organization report more than \$5,000 on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*
- 22 Did the organization report more than \$5,000 on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*
- 23 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? *If "Yes," complete Schedule J*
- 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer questions 24b-24d and complete Schedule K*
If "No," go to question 25
 - b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?
 - c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?
 - 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*
 - 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*
- 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*

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Part IV 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:		
a 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)? <i>If "Yes," complete Schedule L, Part IV</i>	28a	X
b Have a family member who had a direct or indirect business relationship with the organization? <i>If "Yes," complete Schedule L, Part IV</i>	28b	X
c 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? <i>If "Yes," complete Schedule L, Part IV</i>	28c	X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31	X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32	X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33	X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	34	X
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35	X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36	X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37	X

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Part V Statements Regarding Other IRS Filings and Tax Compliance

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 1a 1b

1b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b

c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c X

2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a

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 X

b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 3b

4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a X

b 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 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a X

b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b X

c If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 5c

6a Did the organization solicit any contributions that were not tax deductible? 6a X

b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b

7 **Organizations that may receive deductible contributions under section 170(c).**

a Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75? 7a X

b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b X

c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7c X

d If "Yes," indicate the number of Forms 8282 filed during the year 7d

e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e X

f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f X

g For all contributions of qualified intellectual property, did the organization file Form 8899 as required? 7g X

h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? 7h X

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 excess business holdings at any time during the year? 8 X

9 **Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.**

a Did the organization make any taxable distributions under section 4966? 9a X

b Did the organization make a distribution to a donor, donor advisor, or related person? 9b X

10 **Section 501(c)(7) organizations.** Enter: N/A 10a
10b

a Initiation fees and capital contributions included on Part VIII, line 12 10a

b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b

11 **Section 501(c)(12) organizations.** Enter: N/A 11a
11b

a Gross income from members or shareholders 11a

b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b

12a **Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041? 12a

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b

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

Section 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	27	
1b	27	
2	X	
3		X
4		X
5		X
6		X
7a		X
7b		X
8a	X	
8b	X	
9a		X
9b		
10	X	
11		X

1a Enter the number of voting members of the governing body
1b Enter the number of voting members that are independent
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?
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?
4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?
5 Did the organization become aware during the year of a material diversion of the organization's assets?
6 Does the organization have members or stockholders?
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?
b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:
a The governing body?
b Each committee with authority to act on behalf of the governing body?
9a Does the organization have local chapters, branches, or affiliates?
b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?
10 Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990
11 Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O

Section B. Policies

	Yes	No
12a	X	
b		
c		
13		
14		
15		
a		
b		
15a	X	
15b	X	
16a		X
16b		

12a Does the organization have a written conflict of interest policy? If "No," go to line 13
b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?
c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done
13 Does the organization have a written whistleblower policy?
14 Does the organization have a written document retention and destruction policy?
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision
a The organization's CEO, Executive Director, or top management official?
b Other officers or key employees of the organization?
Describe the process in Schedule O. (see instructions)
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?
b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

17	List the states with which a copy of this Form 990 is required to be filed ►FL
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
	<input checked="" type="checkbox"/> Own website <input checked="" type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ► CINDY KAISER - 941-927-0965 1960 LANDINGS BLVD., SARASOTA, FL 34231

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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.

Check this box if the organization did not compensate any officer, director, trustee, or key employee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)					(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee			
CINDY KAISER EXECUTIVE DIRECTOR	40.00	X					73,500.	0.	0.
TIMOTHY D. HENSEY DIRECTOR	2.00	X					0.	0.	0.
CHRISTINA PFAHLER CHAIRMAN	2.00	X		X			0.	0.	0.
GEORGE MCGONAGILL 1ST VICE CHAIRMAN	2.00	X		X			0.	0.	0.
CARLOTTA COOLEY SECRETARY	2.00	X		X			0.	0.	0.
SUSAN MORRIS DIRECTOR	2.00	X					0.	0.	0.
STEVE BAILEY DIRECTOR	2.00	X					0.	0.	0.
BRUCE BECKSTEIN DIRECTOR	2.00	X					0.	0.	0.
SHERRY BURD DIRECTOR	2.00	X					0.	0.	0.
DOROTHEA CALVERT DIRECTOR	2.00	X					0.	0.	0.
ALLEN CARLSON DIRECTOR	2.00	X					0.	0.	0.
SENATOR LISA CARLTON DIRECTOR	2.00	X					0.	0.	0.
R. SCOTT COLLINS IMMEDIATE PAST CHAIRMAN	2.00	X		X			0.	0.	0.
DAVID DETTMAN DIRECTOR	2.00	X					0.	0.	0.
LIBBY EARLY DIRECTOR	2.00	X					0.	0.	0.
BRIAN HALL TREASURER	2.00	X		X			0.	0.	0.
ANN W. HARDY DIRECTOR	2.00	X					0.	0.	0.

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

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)					(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee			
JERRY KAPLAN DIRECTOR	2.00	X					0.	0.	0.
RONALD KARP DIRECTOR	2.00	X					0.	0.	0.
KATHY KLEINLEIN EX-OFFICIO MEMBER	2.00	X					0.	0.	0.
HELEN C. MARTIN DIRECTOR	2.00	X					0.	0.	0.
SCOTT MERRITT DIRECTOR	2.00	X					0.	0.	0.
STEPHEN MIXSON DIRECTOR	2.00	X					0.	0.	0.
SAM NORTON DIRECTOR	2.00	X					0.	0.	0.
KELLY QUIGLEY DIRECTOR	2.00	X					0.	0.	0.
DAVID SESSIONS DIRECTOR	2.00	X					0.	0.	0.
JON F. SWIFT BOARD EMERITUS	2.00	X					0.	0.	0.
1b Total						►	73,500.	0.	0.

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization ► 0

3 Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person

	Yes	No
3		X
4		X
5		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. **NONE**

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation from the organization ► 0

SEE SCHEDULE J-2 FOR PART VII, SECTION A CONTINUATION

Form 990 (2008)

EDUCATION FOUNDATION OF SARASOTA
COUNTY, INC.

Form 990 (2008)

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Part VIII Statement of Revenue

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1 a Federated campaigns b Membership dues c Fundraising events d Related organizations e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above g Noncash contributions included in lines 1a-1f \$ h Total. Add lines 1a-1f ►	1a 1b 1c 147,494. 1d 1e 1f 836,673. 21,118. 984,167.			
Program Service Revenue	2 a b c d e f All other program service revenue g Total. Add lines 2a-2f ►	Business Code			
Other Revenue	3 Investment Income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties 6 a Gross Rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not including \$ 147,494. of contributions reported on line 1c). See Part IV, line 18 b Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory 11 a MISCELLANEOUS REVENUE b c d All other revenue e Total. Add lines 11a-11d ►	(i) Real (ii) Personal (i) Securities (ii) Other a 46,582. b 46,582. a b a b a b 900099 931. 931. 999,174. 15,007. 0. 0.	14,076. 14,076.		
	12 Total Revenue Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e ►				

EDUCATION FOUNDATION OF SARASOTA
COUNTY, INC.

Form 990 (2008)

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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).

Do not include amounts reported on lines 6b, 7b, 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	319,926.	319,926.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	277,179.	277,179.		
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	77,000.	46,200.	15,400.	15,400.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	150,246.	90,148.	30,049.	30,049.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes	19,775.	11,865.	3,955.	3,955.
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	21,441.		21,441.	
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees				
g Other				
12 Advertising and promotion				
13 Office expenses	11,098.		9,351.	1,747.
14 Information technology				
15 Royalties				
16 Occupancy	3,132.		2,349.	783.
17 Travel	883.		883.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	13,657.		13,503.	154.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	1,989.		1,989.	
23 Insurance	5,752.		5,752.	
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)				
a PRINTING & PUBLICATIONS	9,513.		4,863.	4,650.
b PUBLIC RELATIONS	4,404.		4,336.	68.
c COPIER EXPENSE	3,598.		2,699.	899.
d EQUIPMENT RENTAL	3,000.		2,250.	750.
e DUES AND SUBSCRIPTIONS	2,496.		2,496.	
f All other expenses	2,725.		2,158.	567.
25 Total functional expenses. Add lines 1 through 24f	927,814.	745,318.	123,474.	59,022.
26 Joint Costs. Check here ► <input type="checkbox"/> if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

EDUCATION FOUNDATION OF SARASOTA
COUNTY, INC.

Form 990 (2008)

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Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	32,450.	1	61,961.
	2 Savings and temporary cash investments	998,135.	2	1,041,910.
	3 Pledges and grants receivable, net	93,547.	3	171,951.
	4 Accounts receivable, net		4	
	5 Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L		5	
	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		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	
	10a Land, buildings, and equipment: cost basis	10a 17,671.		
	b Less: accumulated depreciation. Complete Part VI of Schedule D	10b 12,394.	7,267.	10c 5,277.
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets See Part IV, line 11		15	64.
	16 Total assets. Add lines 1 through 15 (must equal line 34)	1,131,399.	16	1,281,163.
Liabilities	17 Accounts payable and accrued expenses	484.	17	2,845.
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow account liability Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable		24	
	25 Other liabilities. Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	484.	26	2,845.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ► <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	297,809.	27	250,014.
	28 Temporarily restricted net assets	685,106.	28	861,436.
	29 Permanently restricted net assets	148,000.	29	166,868.
	Organizations that do not follow SFAS 117, check here ► <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	1,130,915.	33	1,278,318.
	34 Total liabilities and net assets/fund balances	1,131,399.	34	1,281,163.

Part XI Financial Statements and Reporting

1 Accounting method used to prepare the Form 990: Cash Accrual Other

2a Were the organization's financial statements compiled or reviewed by an independent accountant?
b Were the organization's financial statements audited by an independent accountant?
c If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
b If "Yes," did the organization undergo the required audit or audits?

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

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.

2008
Open to Public
Inspection

Name of the organization **EDUCATION FOUNDATION OF SARASOTA COUNTY, INC.** Employer identification number **59-2320858**

Part I Reason for Public Charity Status (All organizations must complete this part) (see instructions)

The organization is not a private foundation because it is: (Please check only one organization)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**. (Attach Schedule H.)
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete the Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**. (see instructions)
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.

<input type="checkbox"/> a	Type I	<input type="checkbox"/> b	Type II	<input type="checkbox"/> c	Type III - Functionally integrated	<input type="checkbox"/> d	Type III - Other
----------------------------	--------	----------------------------	---------	----------------------------	------------------------------------	----------------------------	------------------
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

<input type="checkbox"/> (i)	A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<input type="checkbox"/> (ii)	A family member of a person described in (i) above?						
<input type="checkbox"/> (iii)	A 35% controlled entity of a person described in (i) or (ii) above?						
- h Provide the following information about the organizations the organization supports.

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?	(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S?	(vii) Amount of support
				Yes	No		
Total							

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

Schedule A (Form 990 or 990-EZ) 2008

EDUCATION FOUNDATION OF SARASOTA

Schedule A (Form 990 or 990-EZ) 2008 COUNTY, INC.

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►

	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	571,294.	857,538.	822,008.	1007631.	984,167.	4242638.
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	571,294.	857,538.	822,008.	1007631.	984,167.	4242638.
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						4242638.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►

	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4	571,294.	857,538.	822,008.	1007631.	984,167.	4242638.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	7,899.	18,568.	29,606.	27,043.	15,007.	98,123.
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.)	274.	115.	1,665.			2,054.
11 Total support. Add lines 7 through 10						4342815.
12 Gross receipts from related activities, etc. (see instructions)					12	901,482.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input checked="" type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f))	14	97.69	%
15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f	15	97.77	%
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 and stop here. The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>	
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		<input type="checkbox"/>	
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		<input type="checkbox"/>	
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		<input type="checkbox"/>	
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>	

Schedule A (Form 990 or 990-EZ) 2008

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I)**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 - 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 Total support (Add lines 9, 10c, 11, and 12)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						► <input type="checkbox"/>

Section C. Computation of Public Support Percentage

15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h	18	%

19a 33 1/3% support tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization



b 33 1/3% support tests - 2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization



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



Schedule A (Form 990 or 990-EZ) 2008

M4

EDUCATION FOUNDATION OF SARASOTA
COUNTY, INC.

Schedule C (Form 990 or 990-EZ) 2008

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Part II-A To be completed by organizations exempt under section 501(c)(3) that filed Form 5768 (election under section 501(h)). See the instructions for Schedule C for details.

A Check if the filing organization belongs to an affiliated group.

B Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures
(The term "expenditures" means amounts paid or incurred.)

(a) Filing organization's totals	(b) Affiliated group totals
----------------------------------	-----------------------------

1a Total lobbying expenditures to influence public opinion (grassroots lobbying)

b Total lobbying expenditures to influence a legislative body (direct lobbying)

c Total lobbying expenditures (add lines 1a and 1b)

d Other exempt purpose expenditures

e Total exempt purpose expenditures (add lines 1c and 1d)

f Lobbying nontaxable amount. Enter the amount from the following table in both columns.

If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:
Not over \$500,000	20% of the amount on line 1e.
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.
Over \$17,000,000	\$1,000,000.

g Grassroots nontaxable amount (enter 25% of line 1f)

h Subtract line 1g from line 1a. Enter -0- if line g is more than line a

i Subtract line 1f from line 1c. Enter -0- if line f is more than line c

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? Yes No

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f of the instructions.)

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) Total
2a Lobbying non-taxable amount		176,446.			176,446.
b Lobbying ceiling amount (150% of line 2a, column(e))					264,669.
c Total lobbying expenditures		1,000.			1,000.
d Grassroots non-taxable amount		44,112.			44,112.
e Grassroots ceiling amount (150% of line 2d, column (e))					66,168.
f Grassroots lobbying expenditures		1,000.			1,000.

Schedule C (Form 990 or 990-EZ) 2008

EDUCATION FOUNDATION OF SARASOTA
COUNTY, INC.

Schedule C (Form 990 or 990-EZ) 2008

59-2320858 Page 3

Part II-B To be completed by organizations exempt under section 501(c)(3) that have NOT filed Form 5768 (election under section 501(h)). See the instructions for Schedule C for details.

	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?			
i Other activities? If "Yes," describe in Part IV			
j Total lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). See the instructions for Schedule C for details.

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 Did the organization agree to carryover lobbying and political expenditures from the prior year?	3	

Part III-B To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" OR if Part III-A, question 3 is answered "Yes." See Schedule C instructions for details.

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (line 2c total minus 3 and 4)	5	

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and Part II-B, line 1i. Also, complete this part for any additional information.

Schedule D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

OMB No. 1545-0047

2008
Open to Public
Inspection

Name of the organization **EDUCATION FOUNDATION OF SARASOTA COUNTY, INC.** Employer identification number **59-2320858**

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		9
2 Aggregate contributions to (during year)	35,804.	
3 Aggregate grants from (during year)	29,818.	
4 Aggregate value at end of year	48,038.	

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? Yes No

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

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

Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area

Protection of natural habitat Preservation of certified historic structure

Preservation of open space

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

	Held at the End of the Year
2a	
2b	
2c	
2d	

a Total number of conservation easements

b Total acreage restricted by conservation easements

c Number of conservation easements on a certified historic structure included in (a)

d Number of conservation easements included in (c) acquired after 8/17/06

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

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

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

6 Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year ► _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year ► \$ _____

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

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

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

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

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

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

(i) Revenues included in Form 990, Part VIII, line 1 ► \$ _____

(ii) Assets included in Form 990, Part X ► \$ _____

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

a Revenues included in Form 990, Part VIII, line 1 ► \$ _____

b Assets included in Form 990, Part X ► \$ _____

EDUCATION FOUNDATION OF SARASOTA
COUNTY, INC.

Schedule D (Form 990) 2008

59-2320858 Page 2

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

3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply):

a <input type="checkbox"/> Public exhibition	d <input type="checkbox"/> Loan or exchange programs
b <input type="checkbox"/> Scholarly research	e <input type="checkbox"/> Other _____
c <input type="checkbox"/> Preservation for future generations	

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

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets

to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

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

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

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

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21? Yes No

b If "Yes," explain the arrangement in Part XIV.

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	523,101.				
b Contributions	26,393.				
c Investment earnings or losses	6,635.				
d Grants or scholarships	1,469.				
e Other expenditures for facilities and programs	1,584.				
f Administrative expenses	213.				
g End of year balance	552,863.				

2 Provide the estimated percentage of the year end balance held as:

a Board designated or quasi-endowment ► %

b Permanent endowment ► 30.00 %

c Term endowment ► 70.00 %

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

by:

(i) unrelated organizations

(ii) related organizations

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

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

Yes	No
3a(i)	X
3a(ii)	X
3b	

Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		17,671.	12,394.	5,277.
e Other				

Total. Add lines 1a-1e. (Column (d) should equal Form 990, Part X, column (B), line 10(c).) ► 5,277.

Schedule D (Form 990) 2008

EDUCATION FOUNDATION OF SARASOTA
COUNTY, INC.

Schedule D (Form 990) 2008

59-2320858 Page 3

Part VII Investments - Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
Financial derivatives and other financial products		
Closely-held equity interests		
Other _____		
</		

Part VIII Investments - Program Related. See Form 990, Part X, line 13.

Total (Col (b) should equal Form 990, Part X, col (B) line 13) ►

Part IX **Other Assets.** See Form 990, Part X, line 15.

Total. (Column (b) should equal Form 990, Part X, col (B) line 15.)

Part X **Other Liabilities.** See Form 990, Part X, line 25.

(a) Description of liability	(b) Amount
Federal income taxes	

Total. (Column (b) should equal Form 990, Part X, col (B) line 25.)

In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48.

EDUCATION FOUNDATION OF SARASOTA
COUNTY, INC.

Schedule D (Form 990) 2008

59-2320858 Page 4

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	999,174.
2	927,814.
3	71,360.
4	
5	
6	
7	
8	76,043.
9	76,043.
10	147,403.

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	1,086,829.
2	
2a	
2b	9,251.
2c	
2d	78,404.
2e	87,655.
3	999,174.
4	
4a	
4b	
4c	0.
5	999,174.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	939,426.
2	
2a	9,251.
2b	
2c	
2d	2,361.
2e	11,612.
3	927,814.
4	
4a	
4b	
4c	0.
5	927,814.

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X; Part XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.

PART V, LINE 4: THE INTENDED USES OF THE FOUNDATION'S FIVE ENDOWMENT

FUND ARE AS FOLLOWS: 1) THE MICHAEL J. ARCHER MEMORIAL FUND AWARDS A \$1,000 SCHOLARSHIP TO AN OUTSTANDING GRADUATING SENIOR, 2) THE SHIRLEY A. RITCHIE ENDOWMENT FUND IS TO BE HELD AND GROWN UNTIL SUCH A TIME THAT INCOME FROM THE FUND MAY BE USED FOR GENERAL OPERATING FUNDS FOR THE FOUNDATION, 3) THE DOROTHY BASS STUART TRIBUTE FUND ANNUALLY FUNDS ONE TEACHER GRANT, 4) THE ESTHER FREEMAN FUND ANNUALLY AWARDS A \$100 ART AWARD TO A DESERVING STUDENT, AND 5) THE JULIUS BRANDENBURG LEGACY FUND ANNUALLY

EDUCATION FOUNDATION OF SARASOTA
COUNTY, INC.

Schedule D (Form 990) 2008

59-2320858 Page 5

Part XIV Supplemental Information (continued)

FUNDS 2 TO 4 TEACHER CLASSROOM GRANTS WITH A FOCUS ON BUSINESS/FINANCIAL
EDUCATION.

PART XI, LINE 8 - OTHER ADJUSTMENTS:

ACCRUAL TO CASH ADJUSTMENT

PART XII, LINE 2D - OTHER ADJUSTMENTS:

ACCRUAL TO CASH ADJUSTMENT

PART XIII, LINE 2D - OTHER ADJUSTMENTS:

ACCRUAL TO CASH ADJUSTMENT

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No 1545-0047

2008
Open To Public
Inspection

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

Name of the organization **EDUCATION FOUNDATION OF SARASOTA COUNTY, INC.** Employer identification number **59-2320858**

Part I 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 Mail solicitations
- b Email solicitations
- c Phone solicitations
- d In-person solicitations
- e Solicitation of non-government grants
- f Solicitation of government grants
- g Special fundraising events

2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No

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.

Total

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.

**EDUCATION FOUNDATION OF SARASOTA
COUNTY, INC.**

Schedule G (Form 990 or 990-EZ) 2008

59-2320858 Page 2

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events (Add col. (a) through col. (c))
		EVENING OF EXCELLENCE (event type)	(event type)	(total number)	
Revenue	1 Gross receipts	194,076.			194,076.
	2 Less: Charitable contributions	147,494.			147,494.
	3 Gross revenue (line 1 minus line 2)	46,582.			46,582.
Direct Expenses	4 Cash prizes				
	5 Non-cash prizes				
	6 Rent/facility costs				
	7 Other direct expenses	46,582.			46,582.
	8 Direct expense summary. Add lines 4 through 7 in column (d)			►	(46,582 .)
	9 Net income summary. Combine lines 3 and 8 in column (d)			►	0.

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col. (a) through col. (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Non-cash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No _____	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No _____	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No _____	
	7 Direct expense summary. Add lines 2 through 5 in column (d)			►	()
	8 Net gaming income summary. Combine lines 1 and 7 in column (d)			►	

9 Enter the state(s) in which the organization operates gaming activities: _____

a Is the organization licensed to operate gaming activities in each of these states?

b If "No," Explain:

	Yes	No
9a		
10a		
11		
12		

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?

b If "Yes," Explain:

11 Does the organization operate gaming activities with nonmembers?

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?

EDUCATION FOUNDATION OF SARASOTA
COUNTY, INC.

Schedule G (Form 990 or 990-EZ) 2008

59-2320858 Page 3

13 Indicate the percentage of gaming activity operated in:

	Yes	No
13a	%	
13b	%	

14 Provide the name and address of the person who prepares the organization's gaming/special events books and records:

Name ► _____

Address ► _____

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?

b If "Yes," enter the amount of gaming revenue received by the organization ► \$ _____ and the amount 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?

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 ► \$ _____

15a

17a

Schedule G (Form 990 or 990-EZ) 2008

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations,
Governments, and Individuals in the U.S.

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

► Attach to Form 990.

OMB No 1545-0047
2008
 Open to Public
 Inspection

Name of the organization

EDUCATION FOUNDATION OF SARASOTA
COUNTY, INC.

Part I **General Information on Grants and Assistance**

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

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

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed ►					
1 (a) Name and address of organization or government		(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Method of valuation (book, FMV, appraisal, other)
				(f) Amount of non-cash assistance	(g) Description of non-cash assistance
PALS COMMUNITY ADVISORY BOARD 1960 LANDINGS BLVD SARASOTA, FL 34231	59-2354722	501(C)(3)		20,850.	
PHILLIPPI SHORE ELEMENTARY SCHOOL 4747 TAMANI TRAIL SARASOTA, FL 34231	59-6000847			11,250.	
FRUITVILLE ELEMENTARY SCHOOL 601 HONORE AVENUE SARASOTA, FL 34232	59-6000847			10,000.	
COMPUTERS FOR YOUTH 322 8TH AVENUE, FLOOR 12A NEW YORK, NY 10001	13-1935309	501(C)(3)		5,945.	
SARASOTA MIDDLE SCHOOL 4826 ASHTON ROAD SARASOTA, FL 34233	59-6000847			5,000.	
SCHOOL BOARD OF SARASOTA COUNTY 1960 LANDINGS BLVD SARASOTA, FL 34231	59-6000847			155,074.	

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

3 Enter total number of other organizations

Yes No
► _____ 6.

Schedule I (Form 990) 2008

EDUCATION FOUNDATION OF SARASOTA
COUNTY, INC.

Schedule I (Form 990) 2008

59-2320858 Page 2

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.

(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
"ACADEMIC OLYMPICS" EDUCATIONAL PROGRAM SUPPLIES	2	199.	0.		
"ACADEMIC OLYMPICS" MEALS FOR STUDENTS	2	100.	0.		
"ACADEMIC OLYMPICS" TRANSPORTATION	1	15.	0.		
"BUD CARSON LEGACY" STUDENT EDUCATIONAL SCHOLARSHIPS	3	9,000.	0.		
"BUILDING BLOCKS" EDUCATIONAL TEACHER CLASSROOM GRANTS	121	135,979.	0.		

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information

SCHEDULE I, PART I, LINE 2: THE PROCEDURES FOR MONITORING GRANT FUNDS VARY DEPENDING UPON THE TYPE AND SIZE OF THE GRANT AWARDED. ALL GRANTS AWARDED TO INDIVIDUAL TEACHERS REQUIRE FINAL WRITTEN REPORTS DOCUMENTING PROGRAM RESULTS, STUDENT IMPACT, AND AN ITEMIZED BUDGET OF EXPENSES INCLUDING COPIES OF RECEIPTS. LARGER GRANTS TO INDIVIDUAL SCHOOLS AND FOR DISTRICT-WIDE INITIATIVES REQUIRE PERIODIC UPDATES ON PROGRAM PROGRESS, IN ADDITION TO A FINAL WRITTEN REPORT WHICH ALSO INCLUDES A BREAKDOWN OF EXPENDITURES.

EDUCATION FOUNDATION OF SARASOTA
COUNTY, INC.

Schedule I-1 (Form 990) 2008

59-2320858 Page 2

Part II Continuation of Grants and Other Assistance to Individuals in the U.S. (Schedule I (Form 990), Part III)

(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
"EDGE OF EXCELLENCE" EDUCATIONAL TEACHER CLASSROOM GRANTS	196.	92,235.	0.		
"EDUCATION CHANNEL 20" STUDENT EDUCATIONAL SCHOLARSHIPS	2.	1,500.	0.		
"EDUCATION CHANNEL 20" EDUCATIONAL PROGRAM SUPPLIES	1.	30.	0.		
"EDUCATION CHANNEL 20" MEALS FOR STUDENTS	1.	200.	0.		
"EDUCATION CHANNEL 20" STUDENT PRODUCTION AWARD	2.	600.	0.		
"ESTHER FREEMAN" EDUCATIONAL STUDENT ART AWARD	1.	100.	0.		
"EVENING OF EXCELLENCE" RECOGNITION AWARD	1.	50.	0.		
"EVENING OF EXCELLENCE" EDUCATIONAL STUDENT ART AWARDS	20.	11,000.	0.		
"MICHAEL ARCHER MEMORIAL" STUDENT EDUCATIONAL SCHOLARSHIP	1.	1,000.	0.		

EDUCATION FOUNDATION OF SARASOTA
COUNTY, INC.

Schedule I-1 (Form 990) 2008

Part # Continuation of Grants and Other Assistance to Individuals in the U.S. (Schedule I (Form 990), Part III)

(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
"OMAR COOPER" MENTOR STIPEND	3.	3,000.	0.		
"OMAR COOPER" STUDENT ACHIEVEMENT CASH AWARD	4.	8,000.	0.		
"SCIENCE FAIR" EDUCATIONAL SCIENCE FAIR AWARDS	17.	1,250.	0.		
"TEACHER OF THE YEAR" RECOGNITION AWARD	13.	5,228.	300.FAIR MARKET VALUE		WATCHES FOR OUTSTANDING TEACHERS
"TEACHER OF THE YEAR" TEACHER EDUCATIONAL SCHOLARSHIPS	2.	2,500.	0.		
"TEACHER OF THE YEAR" EDUCATIONAL PROGRAM SUPPLIES	7.	214.	0.		
"TEXCELLENCE" DONATED COMPUTER EQUIPMENT	20.	0.	4,625.FAIR MARKET VALUE		DONATED COMPUTER EQUIPMENT
"WILMA HAMILTON LEADERSHIP" EDUCATIONAL PROGRAM SUPPLIES	2.	53.	0.		

SCHEDULE J-2
(Form 990)

Continuation Sheet for Form 990

OMB No 1545-0047

2008

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

► Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

Name of the Organization

EDUCATION FOUNDATION OF SARASOTA
COUNTY, INC.

Employer Identification number
59-2320858

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

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

Schedule J-2 (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

2008
Open to Public
Inspection

Name of the organization

EDUCATION FOUNDATION OF SARASOTA
COUNTY, INC.

Employer identification number
59-2320858

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

THROUGH THE GENEROSITY OF OUR COMMUNITY. THIS IS DONE BY SECURING
DONATIONS FROM THE PRIVATE SECTOR -- INDIVIDUALS, FAMILIES, BUSINESSES,
AND OTHER FOUNDATIONS -- AND INVESTING IN A BROAD RANGE OF EDUCATION
ENHANCEMENTS THAT FOCUS ON HELPING CHILDREN BE ACADEMICALLY SUCCESSFUL
AND PREPARED FOR TOMORROW'S WORLD.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

THE REMAINING PROGRAM SERVICES WERE USED TO FUND A VARIETY OF
EDUCATIONAL ENHANCEMENTS SUCH AS THE DISTRICT SCIENCE, ENGINEERING AND
TECHNOLOGY FAIR; VOLUNTEER/TUTOR TRAINING; ACADEMIC OLYMPIC STUDENT
COMPETITION; TEACHER OF THE YEAR RECOGNITION PROGRAM; SCHOOL-WIDE
GRANTS THAT PURCHASED LITERACY MATERIALS FOR MEDIA CENTERS AND
CLASSROOM LIBRARIES; STUDENT AWARDS IN SCIENCE, ART, MATH AND COMMUNITY
SERVICE; HIGH SCHOOL ART DEPARTMENT GRANTS; AND BASIC SCHOOL SUPPLIES
FOR STUDENTS-IN-NEED.

EXPENSES \$ 306413. INCLUDING GRANTS OF \$ 274078. REVENUE \$ 0.

**FORM 990, PART VI, SECTION A, LINE 2: IN THREE SEPARATE INSTANCES, TWO
MEMBERS OF THE BOARD WERE EMPLOYED BY THE SAME ORGANIZATION.**

**FORM 990, PART VI, SECTION A, LINE 10: BASIC REPORTING INFORMATION IS
REVIEWED BY STAFF, THEN FORWARDED TO THE BOARD TREASURER AND FINANCE
COMMITTEE. THE 990 IS THEN FORWARDED TO THE ENTIRE BOARD OF DIRECTORS FOR
REVIEW, COMMENTS, QUESTIONS.**

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

2008
Open to Public
Inspection

Name of the organization

EDUCATION FOUNDATION OF SARASOTA
COUNTY, INC.

Employer identification number
59-2320858

FORM 990, PART VI, SECTION B, LINE 12C: BOARD MEMBERS ARE REQUIRED TO MAKE KNOWN THEIR AFFILIATION WITH ANY ORGANIZATIONS INVOLVED IN ANY BOARD ACTIONS.

FORM 990, PART VI, SECTION B, LINE 15: THE EXECUTIVE DIRECTOR IS REVIEWED ANNUALLY BY THE CHAIRMAN OF THE BOARD, BASED UPON WRITTEN FEEDBACK FROM THE ENTIRE BOARD OF DIRECTORS, WHICH ALSO APPROVES ANNUAL COMPENSATION. EXECUTIVE SALARIES OF OTHER AREA NONPROFITS ARE USED FOR COMPARISON VIA A LOCAL STUDY, "NONPROFIT COMPENSATION & BENEFITS REPORT".

FORM 990, PART VI, SECTION C, LINE 19: THESE DOCUMENTS ARE ALL AVAILABLE BY REQUEST. IN ADDITION THE ANNUAL FINANCIAL AUDIT IS ALSO AVAILABLE FOR VIEW ON OUR WEBSITE AND ON GUIDESTAR.

Form 8868

(Rev. April 2009)

Department of the Treasury
Internal Revenue ServiceApplication for Extension of Time To File an
Exempt Organization Return

OMB No 1545-1709

► File a separate application for each return.

- If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box
- If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form)

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed)

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only

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

Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits

Type or print	Name of Exempt Organization EDUCATION FOUNDATION OF SARASOTA COUNTY, INC.	Employer identification number 59-2320858
File by the due date for filing your return. See instructions	Number, street, and room or suite no. If a P O box, see instructions 1960 LANDINGS BLVD.	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions SARASOTA, FL 34231	

Check type of return to be filed (file a separate application for each return)

<input checked="" type="checkbox"/> Form 990	<input type="checkbox"/> Form 990-T (corporation)	<input type="checkbox"/> Form 4720
<input type="checkbox"/> Form 990-BL	<input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust)	<input type="checkbox"/> Form 5227
<input type="checkbox"/> Form 990-EZ	<input type="checkbox"/> Form 990-T (trust other than above)	<input type="checkbox"/> Form 6069
<input type="checkbox"/> Form 990-PF	<input type="checkbox"/> Form 1041-A	<input type="checkbox"/> Form 8870

CINDY KAISER

- The books are in the care of ► **1960 LANDINGS BLVD. - SARASOTA, FL 34231**

Telephone No ► **941-927-0965**FAX No. ►

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box ► If it is for part of the group, check this box ► and attach a list with the names and EINs of all members the extension will cover.

1 I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until **FEBRUARY 15, 2010**, to file the exempt organization return for the organization named above. The extension

is for the organization's return for

► calendar year or
► tax year beginning **JUL 1, 2008**, and ending **JUN 30, 2009**

2 If this tax year is for less than 12 months, check reason Initial return Final return Change in accounting period

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

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions

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

Form 8868 (Rev. 4-2009)

• S0297

JER/ARR

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1).

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed)

Type or print	Name of Exempt Organization EDUCATION FOUNDATION OF SARASOTA COUNTY, INC.	Employer identification number 59-2320858
File by the extended due date for filing the return. See instructions	Number, street, and room or suite no. If a P O box, see instructions. 1960 LANDINGS BLVD.	For IRS use only
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. SARASOTA, FL 34231	

Check type of return to be filed (File a separate application for each return):

<input checked="" type="checkbox"/> Form 990	<input type="checkbox"/> Form 990-EZ	<input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust)	<input type="checkbox"/> Form 1041-A	<input type="checkbox"/> Form 5227	<input type="checkbox"/> Form 8870
<input type="checkbox"/> Form 990-BL	<input type="checkbox"/> Form 990-PF	<input type="checkbox"/> Form 990-T (trust other than above)	<input type="checkbox"/> Form 4720	<input type="checkbox"/> Form 6069	

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

CINDY KAISER

- The books are in the care of ► **1960 LANDINGS BLVD. - SARASOTA, FL 34231**

Telephone No. ► **941-927-0965** FAX No. ► _____

- If the organization does not have an office or place of business in the United States, check this box

- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box ► . If it is for part of the group, check this box ► and attach a list with the names and EINs of all members the extension is for.

4 I request an additional 3-month extension of time until **MAY 15, 2010**

5 For calendar year _____, or other tax year beginning **JUL 1, 2008**, and ending **JUN 30, 2009**

6 If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period

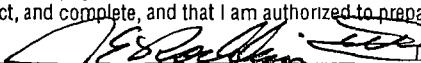
7 State in detail why you need the extension _____

SEE STATEMENT 1

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a \$
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b \$
c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c \$ N/A

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form

Signature ►  Title ► **CPA**

Date ► **2/12/10**

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